



Integrating Nutrition and Food Security programming For Emergency response and Resilience Building



Case Study / Sharing Good practices

International Medical Corps – Ethiopia

Creating resilience through integrated multi-sectoral approach in emergency prone areas of Wolayta zone, SNNPR region

SECTION 1: OVERVIEW.

Title of project/programme/initiative	Creating resilience through integrated multi-sectoral approach in emergency prone areas of Wolayta zone, SNNPR region.		
Implementing/responsible organisations(s)	International medical Corps		
Geographical Coverage (region, country, area)	Wolayta, Ethiopia		
Duration of project/programme/initiative:			
Start date:		End date:	Ongoing: <input checked="" type="checkbox"/>
Contact person (name, e-mail):	Alexandra Rutishauser-Perera, Arutishauser-perera@internationalmedicalcorps.org		
Humanitarian context (i.e. emergency response, post-crisis, resilience-building):	Resilience building		
Type of context (urban, rural, camps, ...):	Rural		
Phases of humanitarian project cycle. Please tick boxes in the list below (several choices possible)			
<input type="checkbox"/> Situation analysis <input type="checkbox"/> Response analysis <input type="checkbox"/> Project design		<input checked="" type="checkbox"/> Project monitoring <input checked="" type="checkbox"/> Evaluation (Mid-term) <input type="checkbox"/> Impact assessment	
Number of household beneficiaries and target groups (i.e. women, pastoralist, children under five, etc)	4,654 HHs benefited (29,791 people) from the food security activities 43,408 individuals for the nutrition activities (with an overlapping with the FS activities)		
Main topic(s). Please tick boxes in the list below (several choices possible)			
<input checked="" type="checkbox"/> Livestock and Nutrition <input type="checkbox"/> Cash Transfer Programming and Nutrition <input checked="" type="checkbox"/> Nutrition counselling / education <input checked="" type="checkbox"/> Diversifying local production <input type="checkbox"/> Supporting local livelihoods <input type="checkbox"/> Nutrition sensitive value chains (including bio/fortification) <input checked="" type="checkbox"/> Micronutrients-rich food and crops <input type="checkbox"/> Income Generating Activities and nutrition <input type="checkbox"/> Food aid and nutrition		<input type="checkbox"/> Urban settings and nutrition <input type="checkbox"/> Joint Food Security and Nutrition assessment <input type="checkbox"/> Multi-sectoral planning for nutrition <input checked="" type="checkbox"/> Joint implementation <input type="checkbox"/> Others. Please specify: _____ _____ _____ _____	

SECTION 2: PROJECT/PROGRAMME/INITIATIVE DESCRIPTION

Main objectives of the project including nutritional objectives (please specify if these objectives are included in the logical framework)	<ul style="list-style-type: none">- To improve nutritional status and resilience of vulnerable households with children 0-59 months, PLW and malnourished other categories (MOC) living in food insecure target woredas (included in log. frame)																				
Main food security and nutrition issues addressed by the project (including issues of target groups, causes of food insecurity and malnutrition)	<ul style="list-style-type: none">- SAM and MAM children managed according to the CMAM National protocol- Maintenance of GAM and SAM below baseline level- Government health workers and communities trained on IYCF- Household food diversification improved in selected CMAM households including backyard gardening of nutrient rich leafy vegetables- Increased food production through provision of major crop seeds (maize, haricot bean, sweet potato)- Enhance income sources and protein rich food for the family via poultry and sheep distributions- Increase income from off-farm activities by doing donkey and donkey cart supports																				
Implementation process and activities	<ul style="list-style-type: none">- CONCERN and PIN following the same logical framework are responsible of two neighbouring woredas and the project uses the specific expertise from each organisation.- The implementation was jointly done using the existing government structure to ensure sustainability- All the inputs were channelled through cooperatives on revolving system. Beneficiaries will repay in cash and next beneficiaries will continue to benefit from the program.																				
Actors/ coordination mechanisms involved	<ul style="list-style-type: none">- CONCERN, PIN, other local NGOs, private suppliers, department of Agriculture & rural development																				
How gender and accountability are taken into consideration?	<div><ul style="list-style-type: none">- Significant number of vulnerable women were targeted in the program<table><tr><td></td><td>Estimated % of target group</td><td>% of female (F)</td><td>% of male (M)</td></tr><tr><td>Infants and young children (0-59 months)</td><td>30%</td><td>51%</td><td>49%</td></tr><tr><td>Children (5-17 years)</td><td>15%</td><td>51%</td><td>49%</td></tr><tr><td>Adults (18-49 years)</td><td>40%</td><td>60%</td><td>40%</td></tr><tr><td>Elderly (> 50 years)</td><td>15%</td><td>70%</td><td>30%</td></tr></table></div>		Estimated % of target group	% of female (F)	% of male (M)	Infants and young children (0-59 months)	30%	51%	49%	Children (5-17 years)	15%	51%	49%	Adults (18-49 years)	40%	60%	40%	Elderly (> 50 years)	15%	70%	30%
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Specific tools/methodology (developed or used)	<ul style="list-style-type: none">- KAP Survey, Barrier Analysis, SMART survey, Care Groups, PD/Hearth, Revolving system.																				

SECTION 3: LESSONS LEARNED IN INTEGRATING FOOD SECURITY AND NUTRITION PROGRAMMING

How the outcomes/ impacts has been measured (process and indicators; existence of base/endline)	<ul style="list-style-type: none"> - Baseline and mid-term surveys were done (see references) - Field monitoring and visits - Joint Mid-term evaluation
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Main results/impacts achieved	<ul style="list-style-type: none"> - Mothers have been counselled on the nutrition of their children and that of themselves in 90.6% and 89.0% of the cases, and the HEWs have been the source of information in three-quarters of the cases. - Nearly all of the mothers (95.0%) reported that their children were breastfed and 90.5% of infants under six months of age were exclusively breastfed in the first 6 months of life, and 79.5% of mothers of children 0 to 23.9 months initiated breastfeeding within in the first hour following delivery, and 98.8% were still breastfeeding at the time of the survey. The other IYCF and hygiene focused indicators were satisfying as well. - Beneficiaries produce milk, butter and honey from the livestock and bees they owned. However, almost all of the milk, egg, butter and honey produced were sold out to market and not consumed at home. - Beneficiaries were able to produce food for the family and generate income from the off-farm activities in relatively short period of time
What has worked and was has NOT worked or difficulties and why?	<p><u>Worked well:</u></p> <ul style="list-style-type: none"> - Revolving system and use of locally available seed/planting materials has worked well - Care Groups and PD/hearth has shown good results but the PD/Hearth has a limitation in coverage - The provision of donkey carts for income generation was piloted by International Medical Corps and proven to be very effective. <p><u>Difficulties :</u></p> <ul style="list-style-type: none"> - Nearly a tenth of rural households do not have access to cultivable land due to land shortage and access to remunerative off-farm employment is limited - Slow start-up of the Care Group due to the need in harmonizing IEC materials and adapting the model to the MoH system.
Main enabling/success and hindering/failure factors	<p><u>Enabling</u></p> <ul style="list-style-type: none"> - Main enabling factor was the strong extension structure that stretched to the grass root level - Close collaboration of IMC with partners regarding expertise, design and evaluation and government
Key messages to communicate	<p>A multi sectoral approach to prevent malnutrition will only function if all the sectors linked to the causes of malnutrition are integrated (Health, WASH, food security and Nutrition).</p>
Recommendations for the up-scaling of successful practices	<p>Programs with input provision need to look at means of sustainably redistribute the collected loans. Strong institutionalisation is required to collect regular repayment from beneficiaries and to manage the smooth revolving of the funds in a sustainable manner. This necessitates strengthening the capacity of the Government, community institutions and the system of loan collection.</p> <p>Behaviour change model should be adapted to community systems already in place in the area of intervention.</p>

SECTION 4: REFERENCE/ILLUSTRATIONS

Please provide references for documentation (e.g. reports, surveys, etc.).	<p>(1)Scope: Boloso Sore, Damot Pullasa; Study is based on livelihoods and malnutrition framework. A three-stage stratified random sampling technique used to select respondents from the target woredas. Methods: Primary data - interviews with 240 household heads/spouses, KIIs, FGDs, household surveys; Secondary data review.</p> <p>(2)Scope: 12 HCs and 27 selected HPs. Methods: Primary data - collected from PHC supervisors, woreda health offices, head of the health centers, pharmacists and Health Extension Workers (HEWs).</p> <p>(3)Scope: Based on a two-stage cluster survey covering thirty villages of 22 kebeles of Damot Pullasa and 28 kebeles of Boloso Sore. Methods: Primary data - KAP survey with 930 households, FGDs, household surveys.</p> <p>(4)Scope: Damot Pullasa, Boloso Sore; Assessment is based on a community based cross-sectional quantitative survey supported with qualitative data collection. Methods: Primary data - KIIs, FGDs, observations; Secondary data review.</p> <p>(5)Scope: Damot Pullasa, Boloso Sore; Study employed two-stage cluster sampling technique. Methods: Primary data - interviews with 420 households, in-depth interviews, FGDs, household survey; Secondary data review.</p> <p>(6)Scope: Damot Pullasa, Boloso Sore; Methods: Primary data - interviews with 70 farm households and FGDs with farmers and relevant experts.</p> <p>(7)Scope: 52 kebeles in Damot Pullasa, Boloso Sore. Analysis performed as unmatched case-control study. Interviewers sought 45 Doers and 45 Non-Doers in both woredas. Method: Primary data - KIIs.</p> <p>(8)On going, mid-term evaluation report (final for the first year).</p>
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Sr. No	Category	Total number of beneficiaries reached	Total number of HHs supported through seed and small ruminant provision	Achievement against target
1.	Seed provision: maize	10227	1598	105.17%
	Seed provision: haricot beans	10227	1598	105.17%
	Root crop provision: sweet potatoes	2432	380	105.19%
	Subtotal Seed Provision	22886	3576	105.17%
2.	Small ruminant provision: poultry	1823	284	45.21%
	Small ruminant provision: sheep	3738	584	92.71%
	Subtotal Small Ruminant Provision	5561	868	68.96%
3.	Donkey and donkey cart provision	1344	210	116.67%
	Subtotal Donkey and Donkey Carts Provision	1344	210	116.67%
	Grant Total for the entire provision	29791	4654	96.18%



Backyard gardening



A beneficiary of the seeds provision program



A P/D Hearth group



Cooking demonstrations