



A Learning and Sharing Café:

WHO/UNICEF IYCF Indicators: challenges and opportunities in humanitarian contexts

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يمكن الاستفادة من الترجمة الفورية عن طريق النقر فوق رمز الكرة الأرضية أسفل الشاشة.





A Learning and Sharing Café: WHO/UNICEF IYCF Indicators: challenges and opportunities in humanitarian contexts

24 November 2021 2-3.30PM CET









Members of the IFE Core Group Webinar Working Group





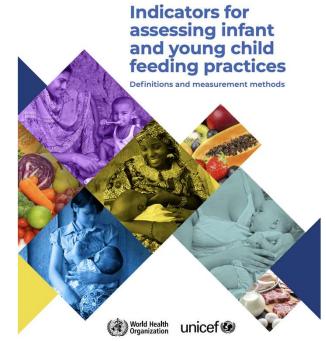
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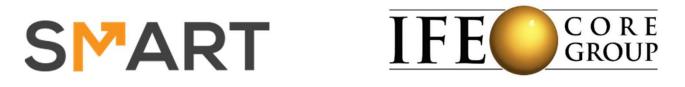
Objectives - Sharing and Learning!

- Disseminate the findings and recommendations of the IYCF-E assessment mapping exercise
- Raise awareness on the updated WHO/UNICEF IYCF indicators
- Discuss opportunities, challenges and best practices for using the IYCF indicators in emergency contexts









Joint initiative of:

- Infant Feeding in Emergencies Core Group
- Nutrition Information System Global Thematic Working Group (NIS-WG)
- With support from UNICEF, WHO and CDC











Webinar Agenda

- Introduction
- IYCF-E assessment mapping presentation
- Panel discussion
- Q&A
- Closing





Linda Shaker Berbari IFE Core Group Facilitator / Consultant Emergency Nutrition Network (ENN)

Today's Facilitators and Presenters



Hassan Ali Ahmed Associate Director of Nutrition Global Lead for SMART Initiative Action Against Hunger Canada

Jana Daher SMART Project Manager Research, Innovation and Technology Action Against Hunger Canada



Fatmata Fatima Sesay Nutrition Specialist, Infant Feeding UNICEF HQ





Alessandro lellamo Senior Emergency Adviser FHI360



Deborah Joy Wilson Maternal, Infant and Young Child Nutrition Specialist WFP HQ

Mapping of current practices related to IYCF assessment methodologies in humanitarian and fragile environments Date: February -March 2021



Objective of the mapping exercise

The overall objective :

• To map the current IYCF assessment methodologies practices in humanitarian and fragile environments.

Specific objectives of the mapping exercise were:

- To identify IYCF assessment methodologies, tools, dissemination mode, barriers /bottlenecks, and indicators used.
- To understand the "representativeness" of the IYCF assessments being conducted (i.e. sampling)

• To process, analyze and document collected information with recommendations to the Global Nutrition Information System Working Group (GNISWG) and the Infant Feeding in Emergencies Core (IFE CG) Group.

Methodology

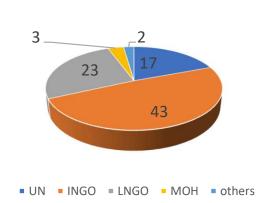
- An Excel sheet with the questions was developed in order to be filled up by the target respondents
- The final draft of the excel sheet was shared for review with the Global Nutrition Information System Working Group (GNISWG) and Infant Feeding in Emergencies Core (IFE CG) Group,
- The reviewed and updated excel sheet (mapping tool) was uploaded in survey monkey.
- The final tool was shared globally
- The information was processed progressively on a rolling basis.

Target participants of the mapping exercise

- Nutrition Clusters and sectors
 - Nutrition assessment working groups and their members
 - IYCF Technical working groups and their members
- Members of the IFE Core Group
- Members of the Global Nutrition Cluster

Q2.The names of the countries where IYCF-E assessment is conducted. Participants from 26 countries responded

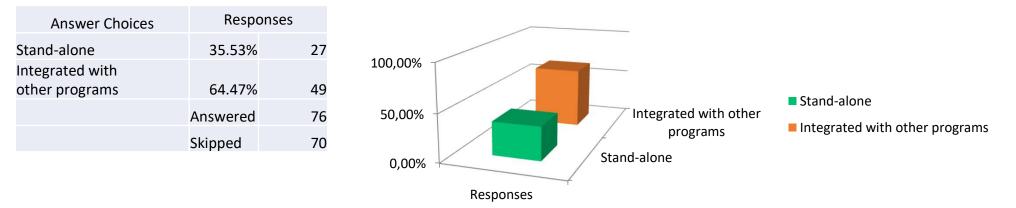
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	responded	88
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Agency	number	%
UN	17	19%
INGO	43	49%
LNGO	23	26%
МОН	3	3%
others	2	2%
Total	88	100%

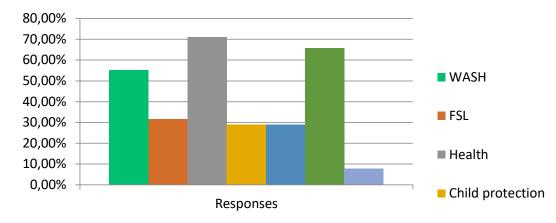
Q3. Agency Implemented IYCF assessment 88 responded, 58 skipped

Q10. Was the assessment a stand-alone assessment or integrated with other programs (such as SMART, Food Security, Multi-sectoral)? (select one)



Q11. If Integrated, with which program/sector (select all that apply)?

Answer Choices		Responses
WASH	55.26%	21
FSL	31.58%	12
Health	71.05%	27
Child protection	28.95%	11
Education	28.95%	11
Integrated nutrition assessment	65.79%	25
Other (please specify)	7.89%	3
	Answered	38
	Skipped	108

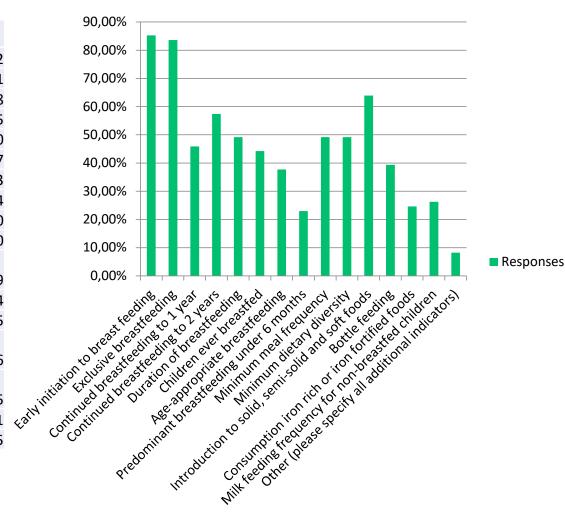


Q14. What methodology did you use? (select all that apply)

Answer Choices	Respor	nses	60%	KAP (Knowledge, Attitudes and Practice)
KAP (Knowledge, Attitudes and Practice)	54.10%	33		
SMART (Standardized Monitoring and				SMART (Standardized
Assessment of Relief and Transitions)	32.79%	20	50%	Monitoring and Assessment of Relief and Transitions)
, Coverage Assessment	11.48%	7		Coverage Assessment
Food security and livelihood	4.92%	3		
DHS (Demographic and Health Survey)	11.48%	7	40% —	Food security and livelihood
MICS (Multiple Indicator Cluster Surveys)	13.11%	8		
Qualitative methodology e.g. Focus Group				DHS (Demographic and
Discussions	36.07%	22		Health Survey)
Rapid assessments e.g. Transect walks	9.84%	6	30% —	MICS (Multiple Indicator
Multi sectoral assessments e.g. MIRA	9.84%	6		Cluster Surveys)
Valid approach	1.64%	1		
Service mapping	4.92%	3	20% —	Qualitative methodology e.g. Focus Group Discussions
SENS (Standardized expanded nutrition survey)	4.92%	3		Focus Group Discussions
Barrier Analysis	11.48%	7		Rapid assessments e.g.
Nutrition causal analysis	13.11%	8	10% —	Transect walks
Integrated survey e.g. Food security and			1070	Multi sectoral assessments
nutrition assessments	14.75%	9		e.g. MIRA
Other (please specify)	11.48%	7		Valid approach
	Answered	61	0%	
	Skipped	85		Responses

Q15. What IYCF-E indicators did you include in your survey? (select all that apply)

Answer Choices	Respon	ses
Early initiation to breast feeding	85.25%	52
Exclusive breastfeeding	83.61%	51
Continued breastfeeding to 1 year	45.90%	28
Continued breastfeeding to 2 years	57.38%	35
Duration of breastfeeding	49.18%	30
Children ever breastfed	44.26%	27
Age-appropriate breastfeeding	37.70%	23
Predominant breastfeeding under 6 months	22.95%	14
Minimum meal frequency	49.18%	30
Minimum dietary diversity	49.18%	30
Introduction to solid, semi-solid and soft		
<mark>foods</mark>	63.93%	39
Bottle feeding	39.34%	24
Consumption iron rich or iron fortified foods	24.59%	15
Milk feeding frequency for non-breastfed		
<mark>children</mark>	26.23%	16
Other (please specify all additional		
indicators)	8.20%	5
Green: Core Indicators	Answered	61
Yellow: Optional Indicators	Skipped	85

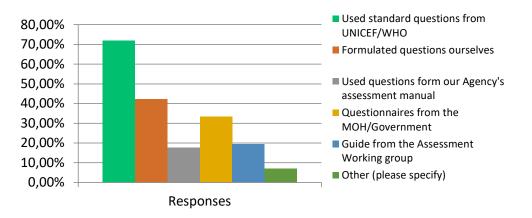


Q16. What was the source/reference for the indicators you used? (select all that apply)

				80,0070	
Answer Choices		Responses		70,00%	
UNICEF	68.85%		42	·	
CARE International	11.48%		7	60,00% —	
WHO	40.98%		25	50,00%	
Internal with your agency	13.11%		8	30,00%	
Donor	9.84%		6	40,00% —	
UNHCR	1.64%		1	·	
Cluster/Sector	32.79%		20	30,00% —	
MOH/Government	27.87%		17	20,00%	
NIWG/IYCF-E working group	11.48%		7	20,00%	
GNC Indicator Registry	4.92%		3	10,00% —	
Other (please specify any other sources)	8.20%		5		
	Answered		61	0,00%	
	Skipped		85		Responses

Q23. How did you develop your assessment questions? (select all that apply)

Answer Choices	R	esponses	
Used standard questions from			
UNICEF/WHO	71.93%	41	
Formulated questions ourselves	42.11%	24	
Used questions form our Agency's			
assessment manual	17.54%	10	
Questionnaires from the MOH/Government	33.33%	19	
Guide from the Assessment Working group	19.30%	11	
Other (please specify)	7.02%	4	
	Answered	57	
	Skipped	89	



CARE International

Internal with your

WHO

agency Donor

UNHCR

Cluster/Sector

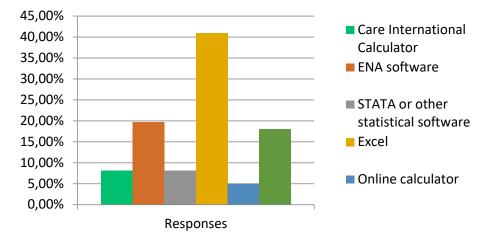
MOH/Government

Q17. What tool was used for sample size calculation? (select one)

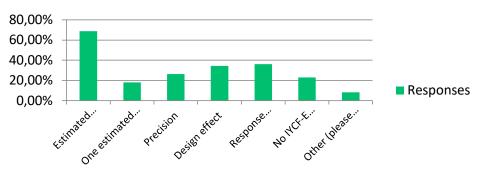
Answer Choices		Responses	
Care International Calculator	8.20%	5	
ENA software	19.67%	12	
STATA or other statistical			
software	8.20%	5	
Excel	40.98%	25	
Online calculator	4.92%	3	
Other (please specify any additional tools)	18.03%	11	
	Answered	61	
	Skipped	85	

Q18. What parameters were included in the sample size calculation?

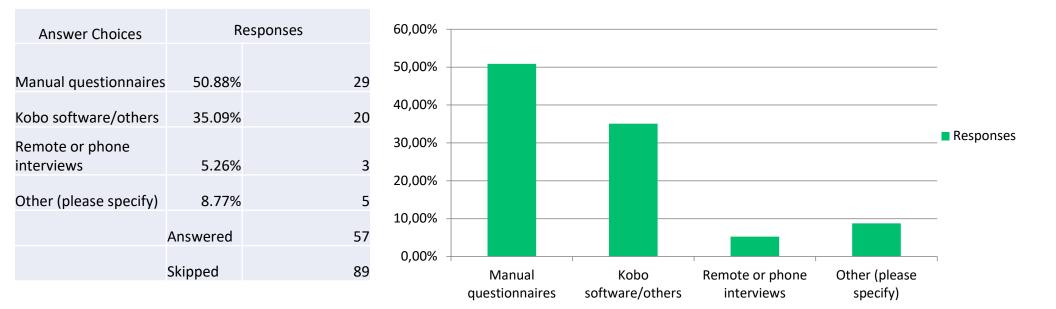
Answer Choices	Resp	onses
Estimated prevalence for each indicator	68.85%	42
One estimated prevalence for all indicators	18.03%	11
Precision	26.23%	16
Design effect	34.43%	21
Response rate/Non-response rate	36.07%	22
No IYCF-E parameter considered, but parameters from other indicators (e.g. GAM)	22.95%	14
Other (please specify)	8.20%	5
	Answered	61
	Skipped	85



What parameters were included in the sample size calculation? (select all that apply)

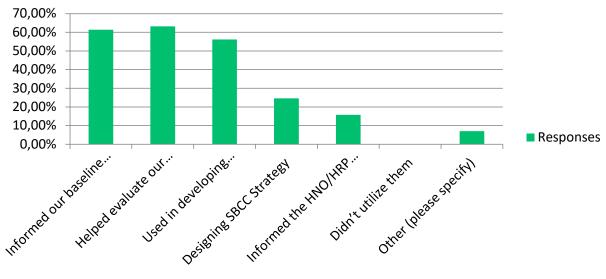


Q22. What tool did you use for data collection? (select one)

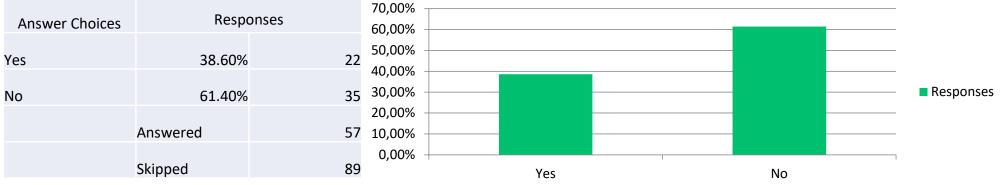


Q28. How did you utilize the results? (select all that apply)

Answer Choices	Responses		7
Informed our baseline			6
situation	61.40%	35	
Helped evaluate our project	63.16%	36	
Used in developing			3
proposals	56.14%	32	2
Designing SBCC Strategy	24.56%	14	1
Informed the HNO/HRP			
development	15.79%	9	
Didn't utilize them	0.00%	0	
Other (please specify)	7.02%	4	
	Answered	57	ç
	Skipped	89	10)



Q29. Did you use any thresholds to interpret your results? (select one)



Challenges

- 1. The lack of globally recognized thresholds for IYCF indicators
- 2. No harmonized sampling methodology for IYCF –E assessments.
- 3. No standard methodology of IYCF-E assessment such SMART, SQUEAC, etc. that can be followed easily.
- 4. The inclusion of IYCF in integrated assessments continues to be a challenge in terms of representativeness of data.
- 5. Population movement, increased insecurity and the on-going COVID-19 pandemic are limiting implementation of assessments in the field.

Recommendations

1. Methodology and sample size calculation

 It would be important for WHO/UNICEF and other global stakeholders to review and recommend a limited number of methodologies that could be used for subnational/local type IYCF-E assessments (standalone/integrated) as preferred methodologies for emergencies and humanitarian contexts.

• For the SMART Team to consider facilitating integration of standardized IYCF modules in the new SMART+ software that could be used when IYCF-E assessments are conducted independently and or as part of the SMART surveys.

2. Thresholds

• IYCF and IYCF-E thresholds are generally not available. The Humanitarian Needs Analysis Tool developed by the GNC provided the opportunity to recommend consensus driven thresholds.

 It is highly recommended to review the progress and experience in the utilization of those thresholds and recommend their interim use when conducting IYCF-E assessments. Thanks to the following:

ACF Canada SMART Team
 Save the Children
 GNC TA NIS working group
 The IFE Core Group
 all the colleagues that responded to the survey



Panel Members





Laurence M. Grummer-Strawn Head of the Food and Nutrition Actions in Health Systems Unit, World Health Organisation

Learning and Sharing Café

Panel Discussion



Vrinda Mehra Statistics Specialist, Division of Data, Analytics, Planning and Monitoring UNICEF



Dr Oleg Bilukha Associate Director for Science Centers for Disease Control and Prevention







We agree the new indicators are important to assess in order to provide appropriate and effective IYCF programming. We understand the rationale for each of the indicators, and guidance for calculating the indicators is understandable. However, especially given there are no longer core and optional indicators, **it is difficult to know how to prioritize indicators** especially when scarce resources, donor requirements, or multi-sectoral projects don't allow for use of all the indicators. In emergency (or other) responses, nutrition may be a small component of a larger response. However, IYCF surveys may be more intensive and require more resources than other sectors. Therefore,

--> Which indicators would be a priority to integrate in for example SMART surveys?
 --> How can we integrate the new indicators into multi-sector surveys?
 --> What would be priority indicators for different contexts including conflict settings?
 --> Which indicators would be a priority to integrate if it is not feasible to integrate all?







SMART survey specific question

Are there ongoing efforts by the SMART Initiative or by other groups (WHO, UNICEF, UNHCR others) to pilot rapid assessment methodologies of the new indicators, that could be accepted by the international community?

> If yes, can you tell us what is the timeline? If no, would this be something to consider?



Question #3



Sampling and narrow age range

Because of the narrow age ranges required for the denominators of some indicators (ex. caregivers of children 0-5 months), the sample size needed for statistically significant results for the survey becomes quite unwieldy.
Such a large sample will tie up scarce resources including personnel, that would otherwise be put toward essential services. Donors require baseline and end line prevalence even in short term emergency projects but are typically unwilling to fund such intensive surveys. Already this challenge existed with the previous indicators.

--> How can we balance meeting needs and measuring needs? --> Could purposive sampling be considered (as suggested in the part 2, survey design A.1) - the breakdowns suggested for even narrower age ranges will have low meaning (e.g.: 2 to 3 months)







Adaptation of lists of food

The lists of typical foods and beverages/liquids consumed by IYCF needs to be adapted to each context. This may require harmonization between actors conducting such type of surveys in a given country to allow robust comparison. IYCF Working group may help in some countries, however, visual tools may also be required for field data collection (to ensure the good understanding of each food item by the responders).

--> Are there plans to develop job aids for the indicator guidance?e.g. to guide field enumerators?--> Do you think this is something useful?



Question #5



Sphere Standards and Thresholds

The sphere standards for the treatment of acute malnutrition provide for thresholds for malnutrition indicators, however, no thresholds are provided for IYCF.

--> Are there thresholds that you would recommend to use in an emergency context?

--> What indicators would the thresholds refer too?





Closing question

Are there additional actions, efforts that UNICEF, WHO, CDC and the NIS TWG is planning to support to help in the adaptation of these indicators in emergency and fragile contexts?





Q&A





Next steps and closing!





Please fill out the brief webinar evaluation it will take less than 5 minutes (*it will pop up when you close the webinar*)



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	Type of supported needed	Provider
1	l want remote or in-country technical support	GNC Technical Alliance
2	I want to hire a consultant directly	GNC Technical Alliance Consultant Rosters
3	I want quick technical advice	GNC HelpDesk
4	I want peer support	www.en-net.org

Visit: https://ta.nutritioncluster.net/ and click "Request Support"