Improvement in nutrition status among under 5 children in Karnali: evidence from linking IYCF with Child Grant (CG)

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BACK GROUND

• The Government of Nepal (GoN) introduced the Child Grant Program in its 2009/10

• Covering children under the age of five years in Karnali and nationwide poor Dalit families

• Nutritional status in the districts of the Mid-Western Region are relatively worse off as compared to the national average

• Need evidence for policy decisions and gradual expansion to the rest of the country in line with the MSNP
OBJECTIVES OF THE STUDY

Overall
To analyze the trend and the impact of CG program linked with IYCF on nutritional status in 5 Karnali districts (Jumla, Humla, Dolpa, Mugu and Kalikot)

Specific
• To conduct trend analysis of core IYCF-CCG indicators in four selected districts (Jumla, Humla, Dolpa and Mugu)

• To measure the impact of the intervention on child nutrition status (Kalikot (I) and Bajhang (C))

• To evaluate the program performance from the perspective of key selected stakeholders at the district, and VDC levels.
METHODOLOGY

- **Study districts:** Jumla, Humla, Dolpa, Mugu, Kalikot (I) and Bajhang (C)

- **Study design:** Cross sectional, multi stage cluster sampling, combination of qualitative and quantitative approaches

- **Study group:** Children below 5 years of age and their mothers (quantitative)
  - **FGD:** Grand mothers and parents of under five children
  - **IDI:** District level officials (DDC and D/PHO) and VDC level key informants (VDC secretary; S/HP in-charge, FCHV and traditional healers)
### SAMPLE SIZE

<table>
<thead>
<tr>
<th>Description</th>
<th>Baseline</th>
<th>Midline</th>
<th>Endline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dolpa</td>
<td>750</td>
<td>750</td>
<td>947</td>
</tr>
<tr>
<td>Jumla</td>
<td>750</td>
<td>750</td>
<td>575</td>
</tr>
<tr>
<td>Kalikot</td>
<td>750</td>
<td>750</td>
<td>750</td>
</tr>
<tr>
<td>Mugu</td>
<td>750</td>
<td>750</td>
<td>750</td>
</tr>
<tr>
<td>Humla</td>
<td>750</td>
<td>750</td>
<td>625</td>
</tr>
<tr>
<td>Total</td>
<td>3750</td>
<td>3750</td>
<td>2897</td>
</tr>
</tbody>
</table>

**Baseline** (Sept-Dec 2009 in Mugu and Kalikot; and June-Aug in Jumla, Humla and Dolpa)

**Midline** (April-June 2013 in all 5 districts)

**Endline** (Dec 2014 – Feb 2015 in Kalikot; and May-July 2015 in Jumla, Humla, Dolpa and Mugu)
NUTRITIONAL STATUS OF UNDER FIVE CHILDREN

Stunting (height-for-age)
- Baseline: 65.9
- Midline: 58.7
- Endline: 56.6
- NDHS 2011: 40.5

Wasting (weight-for-height)
- Baseline: 13.3
- Midline: 11.6
- Endline: 7.5
- NDHS 2011: 10.9

Underweight (weight-for-age)
- Baseline: 50.8
- Midline: 39.6
- Endline: 32.9
- NDHS 2011: 28.8

Legend:
- Blue: Baseline
- Red: Midline
- Green: Endline
- Purple: NDHS 2011
CHILDREN AGED 0-5 WHO WERE EXCLUSIVELY BREASTFED

Dolpa: Baseline 26, Midline 65, Endline 77
Jumla: Baseline 80, Midline 79, Endline 86
Kalikot: Baseline 100, Midline 89, Endline 94
Mugu: Baseline 75, Midline 79, Endline 73
Humla: Baseline 64, Midline 63, Endline 61

Legend:
- **Baseline**
- **Midline**
- **Endline**
CHILDREN BELOW 24 MONTHS OF AGE WHO RECEIVED COMPLEMENTARY FOOD BY AGE

<table>
<thead>
<tr>
<th></th>
<th>Baseline</th>
<th>Midline</th>
<th>Endline</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;6 months</td>
<td>57.4</td>
<td>37.1</td>
<td>48.9</td>
</tr>
<tr>
<td>6 months or more</td>
<td>37.1</td>
<td>24.3</td>
<td>35.7</td>
</tr>
<tr>
<td>have not received</td>
<td>18.3</td>
<td>19.6</td>
<td>15.4</td>
</tr>
</tbody>
</table>

Baseline, Midline, Endline
(2 times for breastfed infants aged 6-8 months; 3 times for breastfed children aged 9-23 months; 4 times for non-breastfed children aged 6-23 months)
Seven food groups include: dairy products; grains, roots & tubers; legumes & nuts; dairy products; flesh foods (meat, poultry, fish); eggs; vitamin A-rich fruits & vegetables; and other fruits & vegetables.
Receiving 4 or more food groups (minimum dietary diversity) and who received solid, semi-solid or soft foods the minimum number of times or more are considered as having minimal acceptable diet. (2 times for breastfed infants aged 6-8 months; 3 times for breastfed children aged 9-23 months; 4 times for non-breastfed children aged 6-23 months)
RESPONDENTS WHO HAD HEARD OF CG PROGRAMS

<table>
<thead>
<tr>
<th>Region</th>
<th>Midline</th>
<th>Endline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dolpa</td>
<td>99.61</td>
<td>98.7</td>
</tr>
<tr>
<td>Jumla</td>
<td>99.95</td>
<td>100</td>
</tr>
<tr>
<td>Kalikot</td>
<td>98.1</td>
<td>100</td>
</tr>
<tr>
<td>Mugu</td>
<td>95.0</td>
<td>100</td>
</tr>
<tr>
<td>Humla</td>
<td>98.6</td>
<td>98.7</td>
</tr>
<tr>
<td>Total</td>
<td>99.0</td>
<td>100</td>
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</tbody>
</table>
UTILIZATION OF LAST INSTALLMENTS OF CG FUNDS

<table>
<thead>
<tr>
<th></th>
<th>Nutritious</th>
<th>Clothing</th>
<th>HH items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dolpa</td>
<td>75</td>
<td>46</td>
<td>52</td>
</tr>
<tr>
<td>Jumla</td>
<td>93</td>
<td>70</td>
<td>59</td>
</tr>
<tr>
<td>Kalikot</td>
<td>58</td>
<td>51</td>
<td>53</td>
</tr>
<tr>
<td>Mugu</td>
<td>52</td>
<td>58</td>
<td>33</td>
</tr>
<tr>
<td>Humla</td>
<td>66</td>
<td>37</td>
<td>35</td>
</tr>
<tr>
<td>Total</td>
<td>66</td>
<td>59</td>
<td>49</td>
</tr>
</tbody>
</table>
NUTRITIONAL STATUS BY CHILD GRANT

- **Control (Bajhang):**
  - Received CG: 30.0 (Under weight), 57.0 (Stunting), 6.0 (Wasting)
  - Did Not receive CG: 28.8 (Under weight), 53.4 (Stunting), 6.6 (Wasting)

- **Intervention (Kalikot):**
  - Received CG: 33.0 (Under weight), 62.7 (Stunting), 5.1 (Wasting)
  - Did Not receive CG: 35.4 (Under weight), 9.4 (Stunting), 6.6 (Wasting)
CONCLUSION

• The IYCF-CG program had contributed to several aspects of child nutrition and related IYCF indicators

• The contribution was distinctly noticeable on increasing the proportion of birth registration, awareness on program itself, purchasing of nutritious food for children, improvement in breastfeeding, sanitation and hygiene

• Linking IYCF with CG can impact on IYCF indicators, however there is fairly low improvement in Nutritional status suggesting other factors associated with it (WASH, infectious disease etc.)

• Recommends to continue the IYCF-CG program in Karnali zone and to replicate it across the country in the future
THANK YOU  !!