Social and Behavior Change for Nutrition During COVID-19
Moderators and Presenters

Lynn Van Lith
Breakthrough ACTION

Jennifer Yourkavitch
USAID Advancing Nutrition

Laura Itzkowitz
USAID

Kelsey Torres
USAID Advancing Nutrition

Nazgul Abazbekova
USAID Advancing Nutrition
Kyrgyz Republic

Kenneth Mulondo
USAID ICAN Activity
Uganda
Jennifer Yourkavitch
USAID Advancing Nutrition
COVID-19 and Nutrition

- Weaker supply and less demand for nutrient-rich but perishable foods
- Disruption in the delivery of essential nutrition services
- Disruption in income and social safety net
COVID-19 and Nutrition

Reducing coverage of basic life-saving interventions in 118 low- and middle-income countries by 45% for six months could result in 1,157,000 additional child deaths (19.8 to 44.7% increase), with about 20% of those additional deaths due to wasting.

Nutrition and Gender

• Women are particularly affected by both the virus and the impact of containment measures.
• Women make up 70% of the health workforce globally, so are on the front lines of COVID-19 response.
• At home, many women face greater caregiving burdens and higher risk of interpersonal violence.
GUIDANCE ON SOCIAL AND BEHAVIOR CHANGE FOR NUTRITION DURING COVID-19

This short guide includes important considerations, messaging, and resources to support country programs in adapting nutrition SBC programming in response to the challenges presented by COVID-19.

July 20, 2020

This fact sheet was made possible by the generous support of the American people through the United States Agency for International Development (USAID) under the terms of Cooperative Agreement #AID-OAA-A-17-00010, Breakthrough ACTION, based at Johns Hopkins Center for Communication Programs (CCP) and contract #AID-OAA-A-16-00079, USAID Advancing Nutrition, awarded to JSI Research & Training Institute, Inc. (JSI). The contents are the responsibility of CCP and JSI and do not necessarily reflect the views of USAID, the United States Government, or Johns Hopkins University.

Nutrition SBC Challenges Due to COVID-19

• Access to nutrition services
• Provision of quality nutrition services
• Limitations in organizing peer groups and dialogue fora, events
• Changes in patterns of communication and trusted sources
• High levels of stress and other mental health issues resulting from loss of social support structures and disruptions
• Misinformation and rumors about food and drink
Considerations for Nutrition SBC Adaptations

- Capacity strengthening for providers and change agents
- Community mobilization and engagement
- Communications
Nutrition SBC Adaptations During COVID-19

Nutrition Services

- Train and equip providers to adjust services
- Offer counseling through non-contact means
- Remind workers to practice preventive measures and encourage same of households visited
- Increase # of commodities dispensed (i.e., micronutrient supplements for pregnant women)

PHOTO CREDIT: © UNICEF/Panjwani
Nutrition SBC Adaptations During COVID-19

Community Mobilization and Engagement

• Offer ways that communities can adjust activities according to local requirements for physical distancing.
  – Form smaller sub-groups within peer groups, of household members or neighbors
  – Organize activities outside
  – Shift to mass communication channels with options for two-way communication.

• Establish a network of mentors or champions to continue mobilization efforts through non-contact methods.

• Support community leaders to track the nutrition situation and identify households in need of referrals to food aid.
Nutrition SBC Adaptations During COVID-19

SBC Communications

- Use virtual channels to reach first 1,000 days households
- Pretest new messages, materials, and interventions using virtual channels
- Modify content and increase promotion of existing health hotlines and other digital/mobile services
- Use virtual training to strengthen hotline capacity to make referrals, including social protection services

PHOTO CREDIT: USAID/Media Inc.
Illustrative Nutrition Messaging

• Based on the local context and needs, adjust recommendations (the prioritized behavior) or how to do the behavior

• For example:
  – If supplies are disrupted for micronutrient supplements, note the importance of these and the new location
  – Encourage family members at home more to share tasks with mothers/caregivers to give her time to rest

PHOTO CREDIT: SPRING
MANAGING NUTRITION MYTHS AND MISCONCEPTIONS DURING COVID-19
July 24, 2020

This short guide covers social and behavior change (SBC) strategies for combating misinformation and supporting programs in responding to COVID-19 related misinformation that affects nutrition.

This fact sheet was made possible by the generous support of the American people through the United States Agency for International Development (USAID) under the terms of Cooperative Agreement No. 127-GA-A-00-0238-00, Breakthrough ACTION, based at Johns Hopkins Center for Communication Programs (CCP) and contract 7200AL12C00007, USAID Advancing Nutrition, managed by Jhpiego & Partners Institute (Inc., JGI).

The contents are the responsibility of CCP and USAID and do not necessarily reflect the views of USAID, the United States Government, or Johns Hopkins University.
Managing Nutrition Misinformation

1. Maintain consistent communication with up-to-date information, tailored to people’s values

PHOTO CREDIT: USAID
Managing Nutrition Misinformation

2. Carefully craft responses, if needed

• Common confusion around nutrition and the immune system
  – For example, there is often an over-reliance on one “super” food or herb (garlic, ginger, lemon juice)
  – In such cases, state the fact. Explain why it is not true. Then fill that “gap” with the correct information.
  – But do not put the misinformation in the headline or main topic. This is what people may remember, instead of the facts.
Managing Nutrition Misinformation

3. Promote media literacy

PHOTO CREDIT: Kizazi Kipya/USAID
Country Experiences Q&A

Kenneth Mulondo
USAID ICAN Activity
Uganda

Nazgul Abazbekova
USAID Advancing Nutrition
Kyrgyz Republic

Kelsey Torres
USAID Advancing Nutrition
Kyrgyz Republic
USAID Advancing Nutrition Project Approach

• Goal: Improve the nutritional status of women of reproductive age and children under 5

• Objectives:
  1. Improve nutrition-related behaviors through enhanced social behavior change at individual, household, and population level
  2. Improve the quality of nutrition services within the health system

• Population: **6.4 million**
• **12%** of children under 5 are stunted
• Anemia among women of reproductive age – **36%**
• Anemia in pregnant women – **40%**
• Anemia in children under five – **38%**
COVID-19 in the Kyrgyz Republic

Daily cases

Ежедневные новые случаи
**SBC approach**
Change in SBC approach and nutrition training

- Online recruitment of activists
- Virtual training of activists
- Video materials
- Virtual household visits via WhatsApp
- Virtual nutrition trainings and supportive supervision for remote participation of health workers
- Adapted counseling
USAID’s Resilience flagship project, to reach 185,000 households with women of reproductive age in 8 districts. Three main purpose areas:

- Livelihoods
- Food security and nutrition
- Governance

Using “value added” partnerships with implementing partners and District Local Governments

Kotido, Kaabong, Lamwo, Gulu, Nwoya, Kanungu, Kisoro, and Rukungiri Districts
USAID ICAN Partners

Abt Associates

Caritas

Children of the World Foundation

Making Cents International

The Manoff Group

Mango Tree

SoukTel
ICAN Process: Community Resilience
Community Engagement Amidst COVID-19

SBCC interventions before COVID-19

- Collective engagement through Mother Care Groups, Farmer Groups, and other Community Groups with 15–20 members, school children
- Demonstration farms
- Community dialogues with 10–20 Leaders
- Barazas with 100–200 people
- Targeted/tactical campaigns
- Radio programming

Key considerations for adaptations

- Radio is still king in Uganda—89% listen; Mobile phone (60% own)
- COVID-19 Government Guidelines accepted gathering of 5 people with social distancing
- Nutrition and food security prioritized agriculture production
Community Engagement Amidst COVID-19

- Interventions during COVID-19
  - **SMS broadcasting** to key champions: Business Service Providers, Village Health Team Members, and Community Leaders
    - The SMS messages focused on driving actions aimed at encouraging the champions to promote key messages to the community members
  - Radio-based **community dialogues**
    - 5 leaders who discuss key issues and agree on priorities recorded and aired on radio for the larger community. With call-in opportunities
  - Use of **megaphones** to replace community meeting and relying on **home/garden visits** instead of **group meetings**
  - Community **SMS and Radio Tracker** capture immediate feedback from community members
Nutrition Behaviors Promoted

- COVID-19 is a shock so the key responses: What should I do? How do I do it?
- Nutrition behaviors (response to the shock)
  - Timed, how to address challenges in:
    - Continuing to cultivate hunger crops (while observing guidelines)
    - Access improved inputs (motorcycle system)
    - Safely store food
    - Responsibly use savings
    - Put up and use WASH facilities
    - Feed the sick child of children 6–23 months
  - Continue other prioritized livelihood and nutrition behaviors while observing pandemic specific guidelines
  - Strengthen the resilience required social change through accountability processes of the community resilience plans
Lynn Van Lith
Breakthrough ACTION
Questions

Laura Itzkowitz  
USAID

Jennifer Yourkavitch  
USAID Advancing Nutrition

Nazgul Abazbekova  
USAID Advancing Nutrition  
Kyrgyz Republic

Kenneth Mulondo  
USAID ICAN Activity  
Uganda
Nutrition Technical Brief on the CCN

Other Online Resources

- Infant and Young Child Feeding Recommendations When COVID-19 is Suspected or Confirmed: Recommended Practices Booklet
- Infant and Young Child Feeding Recommendations When COVID-19 is Suspected or Confirmed- Counseling Cards
- Infant and Young Child Feeding in the Context of COVID-19
- Tips for Engaging Communities During COVID-19 in Low-Resource Settings, Remotely and In-Person
- Springboard for SBC
- Food and Nutrition Tips During Self-Quarantine
- Technical Brief: COVID-19 Rumor Tracking Guidance for Field Teams
- Technical Brief: Maternal, Newborn and Child Health During COVID-19
- Technical Brief: Virtual Pretesting During COVID-19
Springboard Conversation
SBC for Nutrition During COVID-19

August 6, 2020
9:00–11:00 a.m. Washington / 1:00–3:00 p.m. (GMT) Accra

https://springboardforsbc.org/forum/t/763412
Springboard Membership

- Almost **3,000** members from more than **90** countries
- Over **600** French-speaking members
- Donors, researchers, students, program managers, creative professionals, academics, and more!
Springboard Values
According to Members

- Space to share experiences and knowledge
- Able to connect with SBC professionals—have a community
- Exposure to new ideas, approaches, and innovations
- Access to:
  - Resources
  - Expert advice
  - Job listings
  - Improved partnerships

“Springboard enables its members to learn from each other, share expertise and use existing resources, discovering and contributing to discussions and innovative solutions.”
- Sharmila Neogi, USAID
Joining Springboard

Thank you for your interest in Springboard, a community for Social and Behavior Change professionals who are passionate about making a difference in the world. Please fill out the fields below and we will review your application.

Merci de votre intérêt pour Springboard, une communauté de professionnels du changement social et de comportement qui passionnés de faire une différence dans le monde. Veuillez remplir les champs ci-dessous et nous examinerons votre candidature.

Title/Titre

First name *

Last name *

Email *

Current Country/Pays Actuel *

Start typing your country name and we
Completing Your Application

Hi Laura,

Welcome! You have been accepted into the Springboard community.

Click on the link below to activate your account.

Best Regards,

Heather Hancock, Community Manager

You are receiving this email notification because you’ve registered for Springboard. To adjust your notification settings, click here. If you need assistance, please contact our community management team.
Thank You!

www.breakthroughactionandresearch.org

@BreakthroughAR  @Breakthrough_AR

This presentation is made possible by the support of the American people through the United States Agency for International Development (USAID). Breakthrough ACTION is supported by USAID’s Office of Population and Reproductive Health, Bureau for Global Health, under Cooperative Agreement #AID-OAA-A-17-00017. Breakthrough ACTION is based at Johns Hopkins Center for Communication Programs. The contents of this presentation are the sole responsibility of Breakthrough ACTION. The information provided is not official U.S. Government information and does not necessarily represent the views or positions of USAID, the United States Government, or Johns Hopkins University.