

USAID's Investment in IYCF: LINKAGES Achievements and Results



1996—2006



Presentation Outline



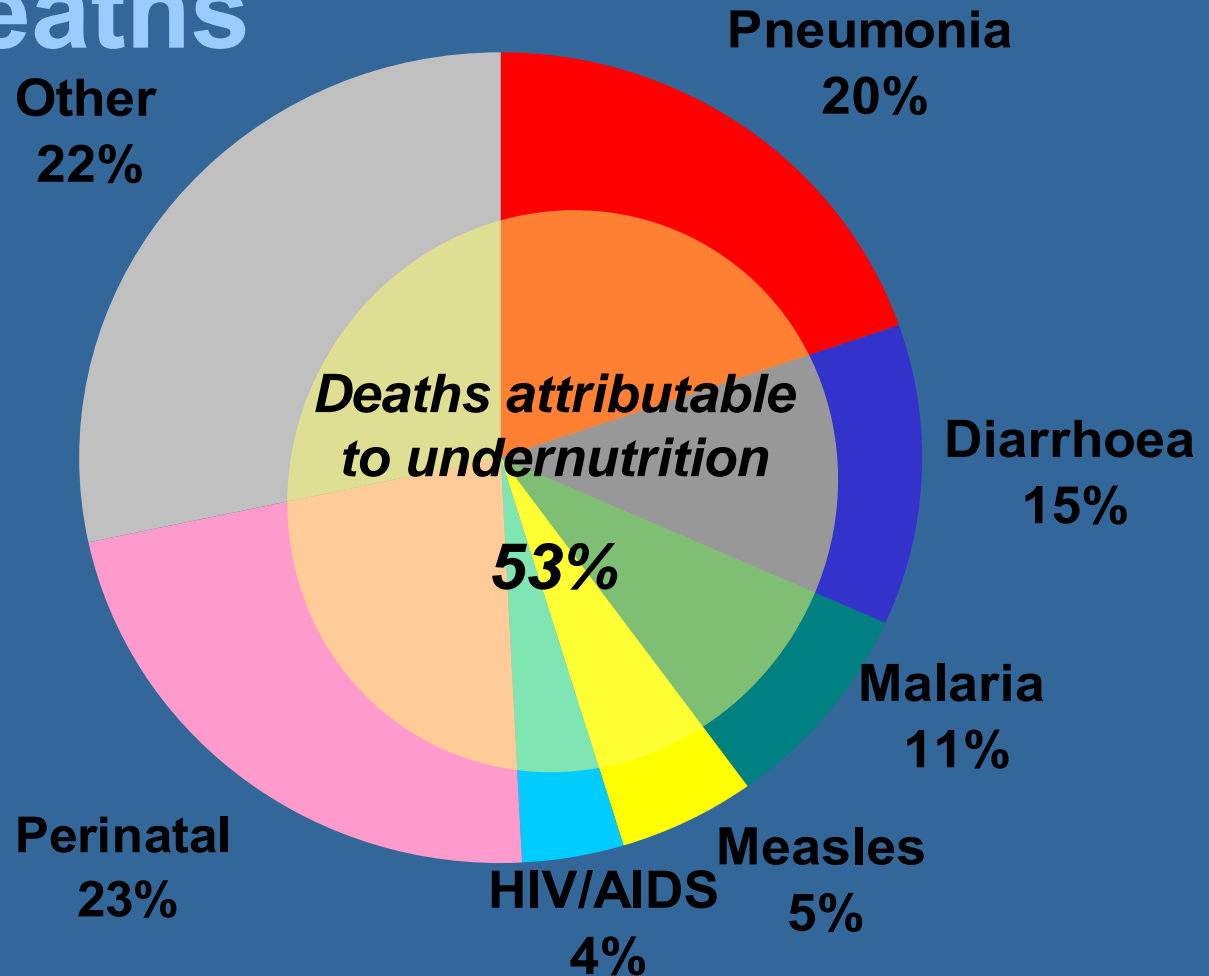
1. A review of the science...why infant and young child feeding matters?
2. LINKAGES mandate
3. Key achievements in global technical leadership and mainstreaming
4. Key country results

Why Infant and Young Child Feeding Matters



**11 million children under 5
die every year**

Malnutrition: An Underlying Cause of Child Deaths



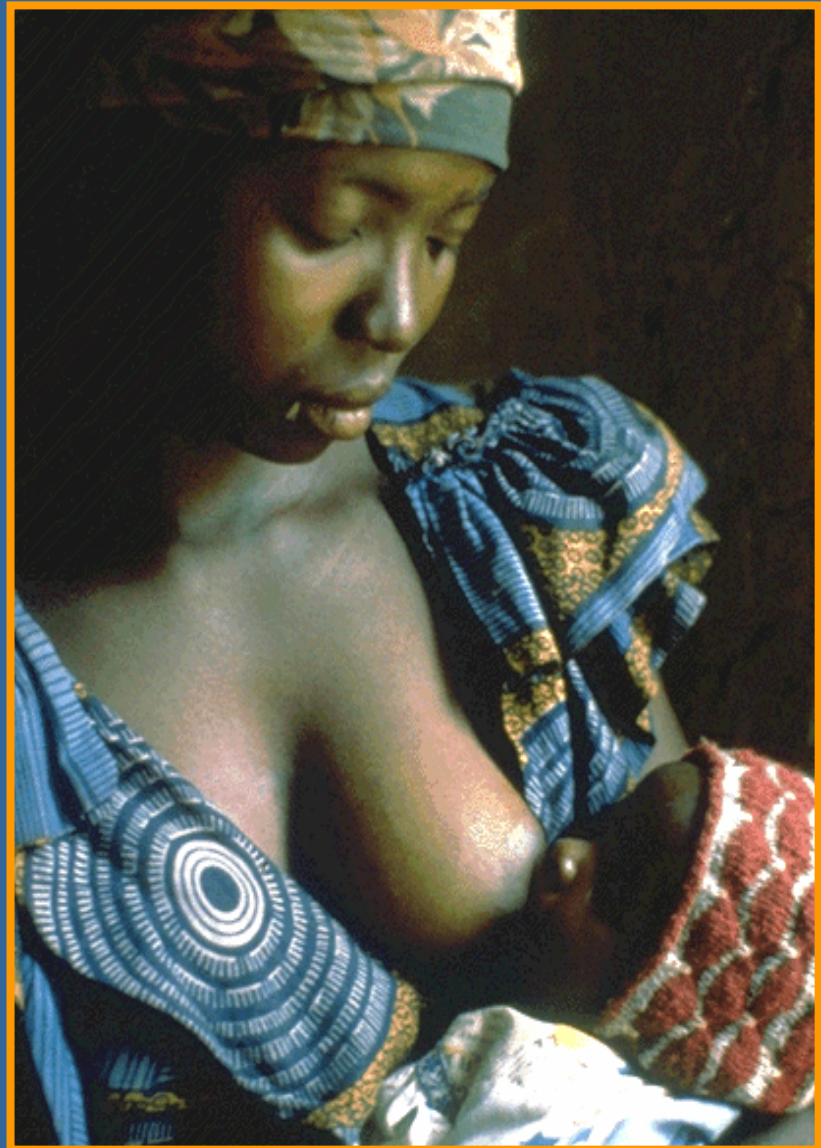
Sources:

For cause-specific mortality: World Health Report 2003.

For deaths attributable to undernutrition: Caulfield et al. Undernutrition as an underlying cause of child deaths associated with diarrhea, pneumonia, malaria, and measles. *Am J Clin Nutr* 2004;80:193-8.

"If a new vaccine became available that could prevent one million or more child deaths a year and that was moreover cheap, safe, administered orally, and required no cold chain, it would become an immediate public health imperative. **Breastfeeding** can do all this and more."

Lancet 1994



Lancet Child Survival Series Endorses Breastfeeding



"Child survival is the most pressing moral, public health, and political issue of our time ... medicine is more concerned about the fruitless technological quest for human perfection than simple low-cost preventive measures to end unnecessary death and disability."

Lancet 2003 6

Breastfeeding: Lead Prevention Intervention

Lancet articles call for urgent action to end a potential global public health disaster...

Breastfeeding is estimated to prevent 13% of all under-5 deaths.



Promising Prevention/Treatment Intervention Package

Prevention intervention	Number (thousands)	Deaths prevented (As prop. all <5 deaths)
Breastfeeding	1,301	13%
Complementary feeding	587	6%
Zinc supplementation	459	5%
Vitamin A	225	2%

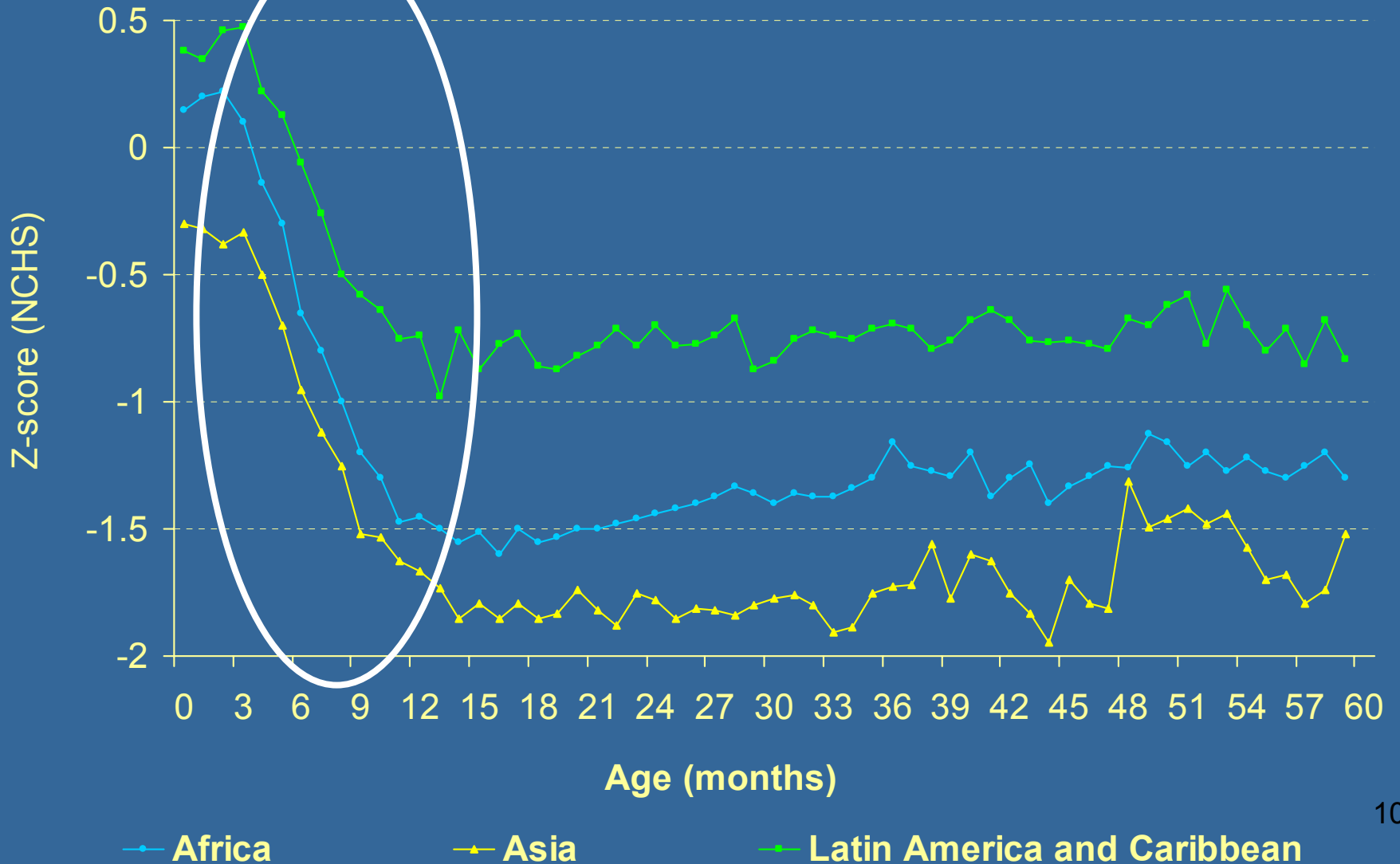
Breastfeeding Saves Newborn Lives

- **Early initiation of breastfeeding could prevent 22% of neonatal deaths**
- **Partial breastfeeding increases the risk of neonatal mortality by 4-fold compared to exclusive breastfeeding**

Source: Edmond et al, Delayed breastfeeding initiation increases risk of neonatal mortality. Pediatrics 2006, 117:380-386

Malnutrition Happens Early

Weight for age by region

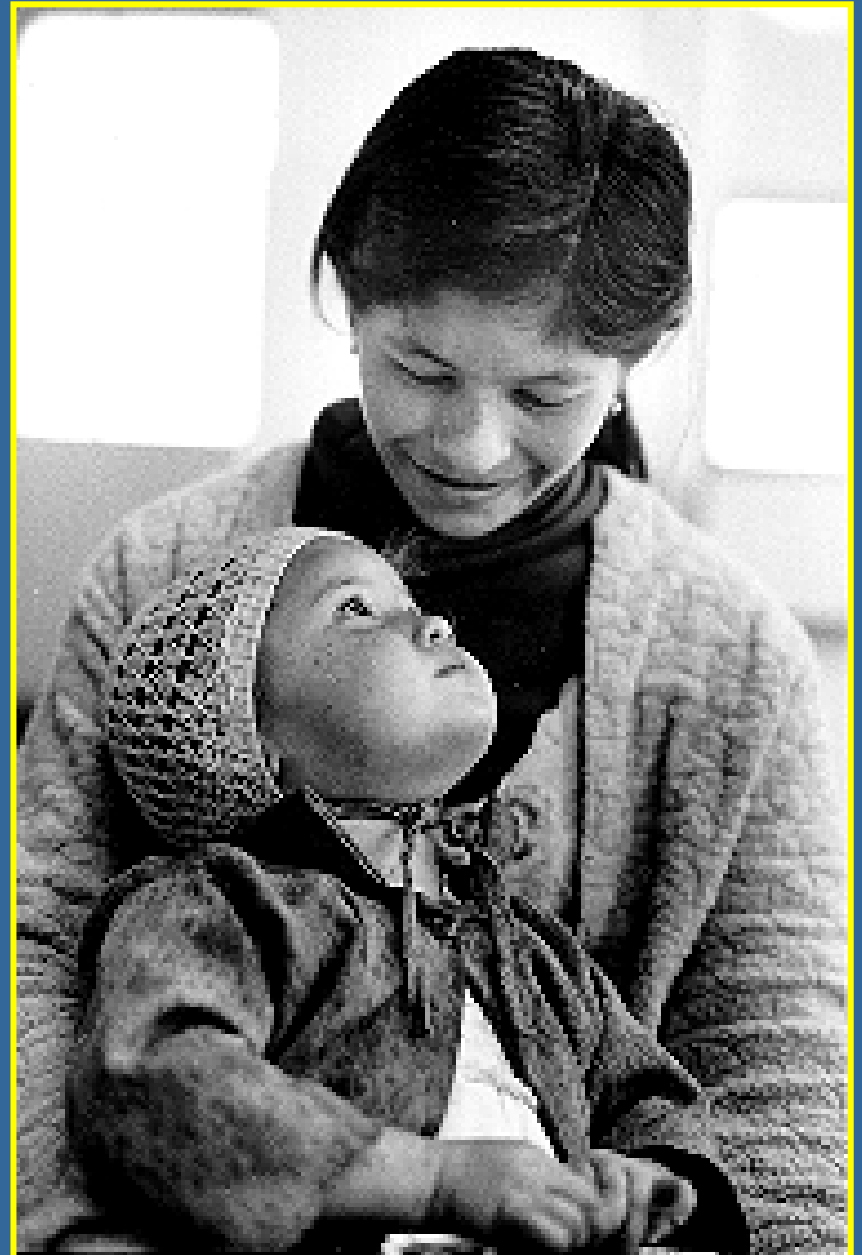
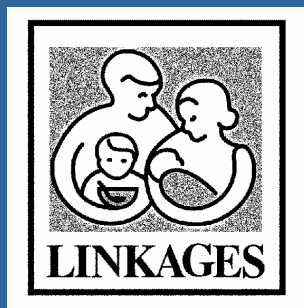


Programmatic Implications

1. Focus on early infancy and improved infant feeding behaviors
2. Focus on prevention
3. Focus on community-based interventions

The LINKAGES Project

November 1996–
December 2006



LINKAGES

Breastfeeding, LAM, and Related Complementary Feeding and Maternal Nutrition Project

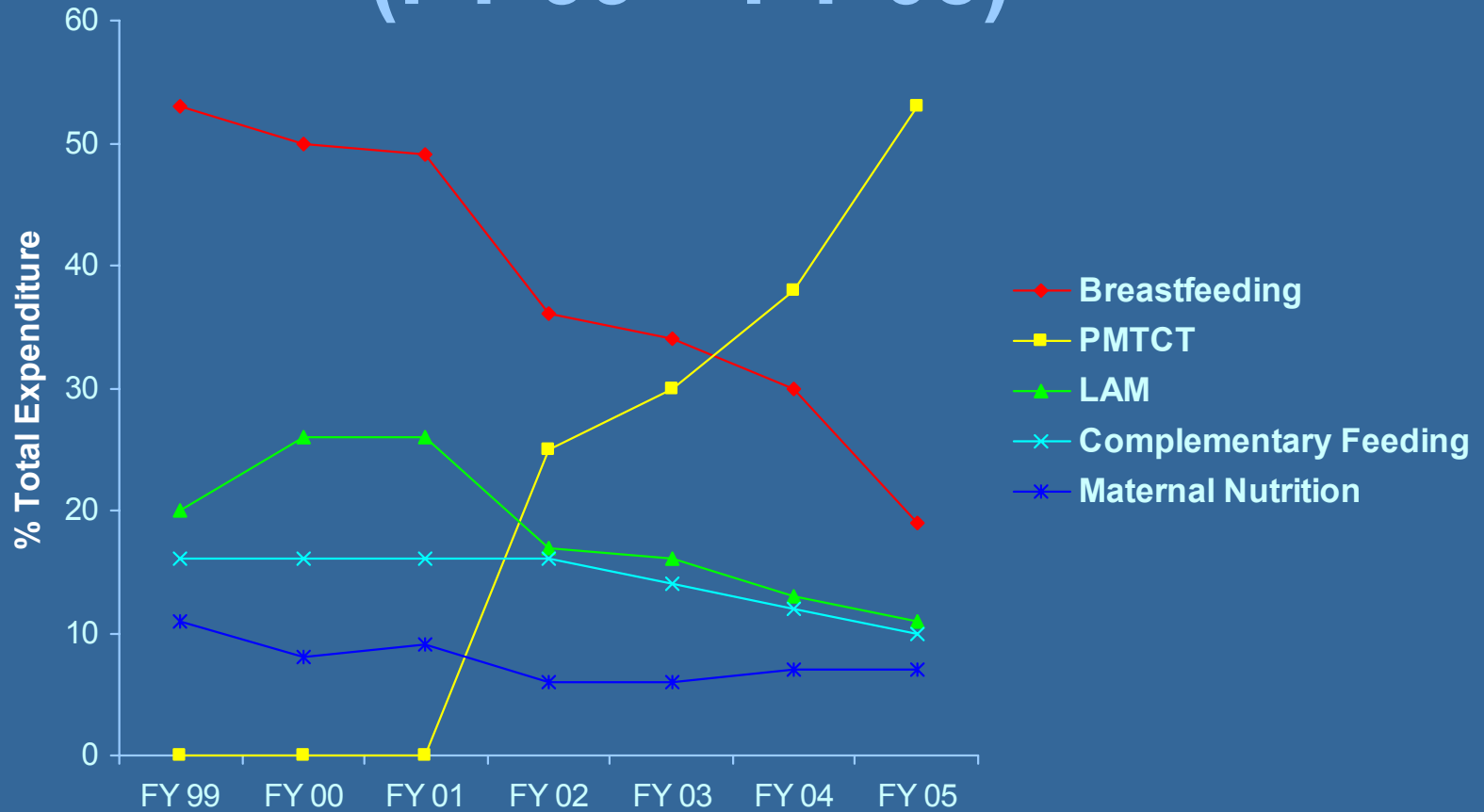
- **Builds on lessons learned** and prior work of 4 major predecessor projects in nutrition and reproductive health funded by USAID
- **Four technical foci:** Breastfeeding, LAM, related complementary feeding, maternal nutrition
- **Fifth technical focus area** added during the second 5 years: Infant feeding in the context of HIV

USAID's Mandate for LINKAGES

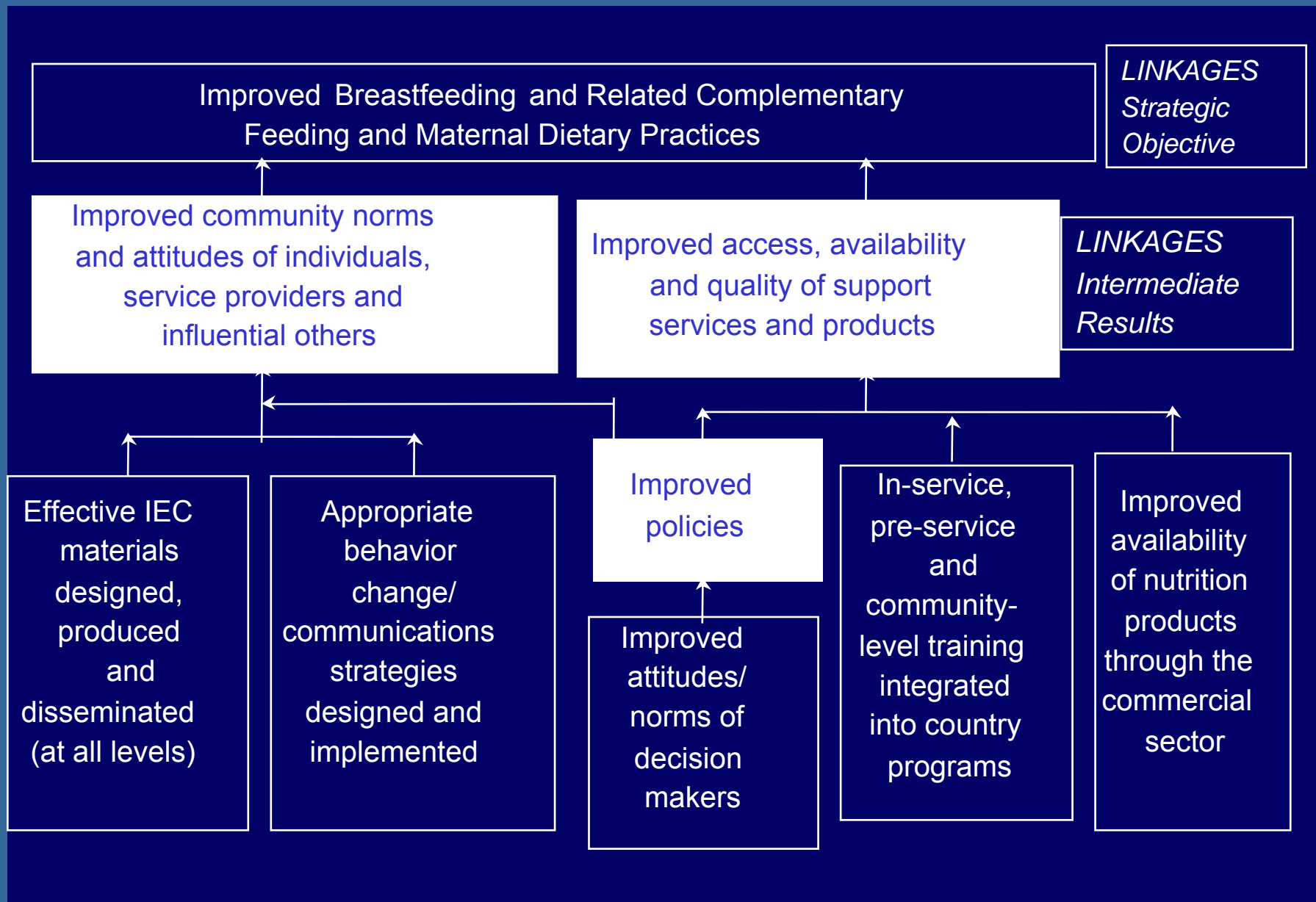


- Sustain/advance USAID's role as a global technical leader
- Extend coverage by working with partners
- Demonstrate exclusive breastfeeding as an achievable goal
- Improve breastfeeding behaviors at scale in 3-5 countries
- Demonstrate what works at the community level

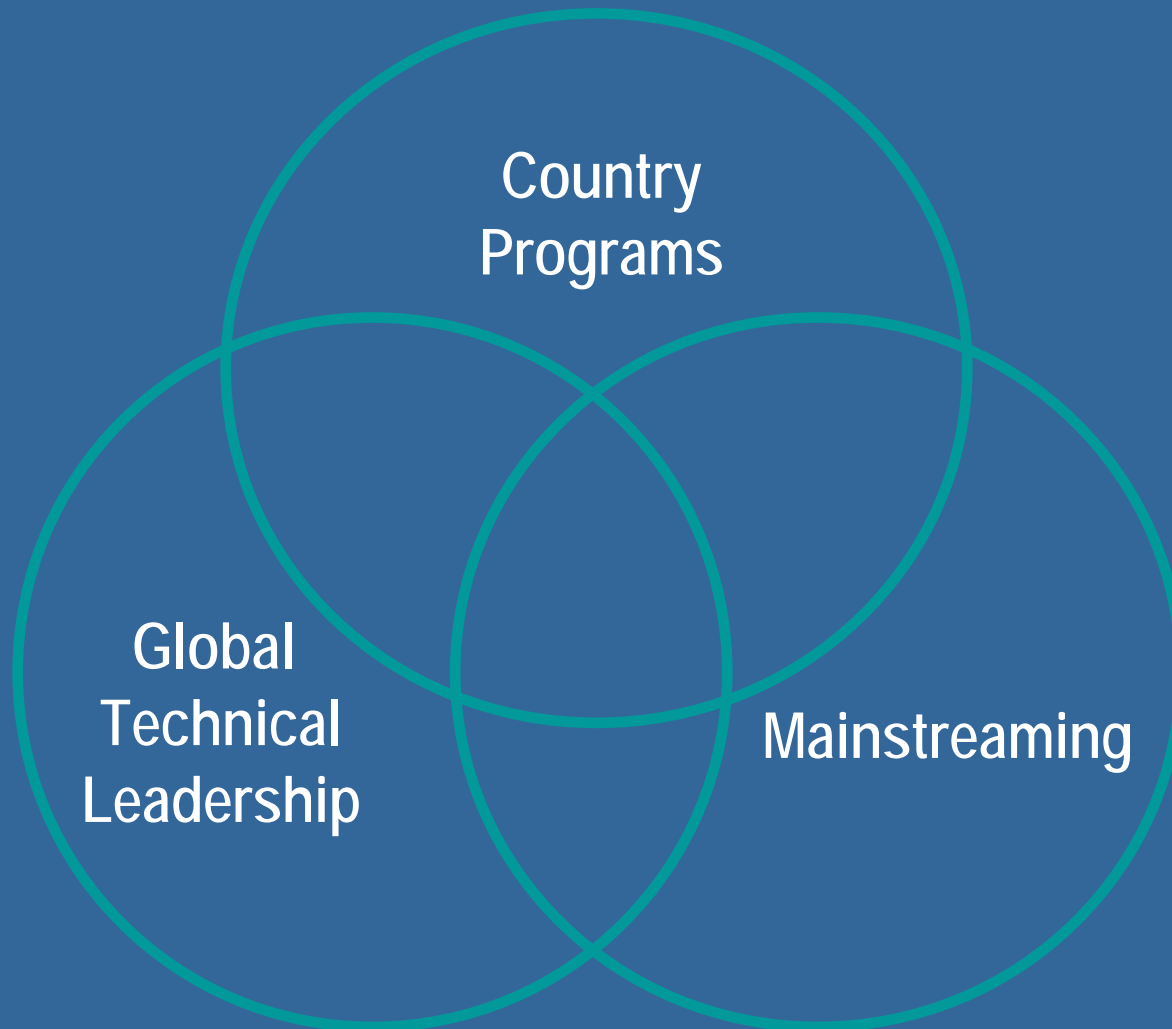
Percent of Total Project Expenditures Across Technical Foci (FY 99 – FY 05)



LINKAGES Results Framework



LINKAGES Key Approaches



Global Technical Leadership

- Worked with partners to ensure technical accuracy, consistency, and coordination
- Participated in key international and regional policy dialogue

Infant and Young Child Feeding

A tool for assessing national practices, policies and programmes

WORLD HEALTH ORGANIZATION

Infant and Young Child Feeding in Emergencies

Operational Guidelines for Emergency Relief Staff and Programme Managers

Interagency Working Group on Infant and Young Child Feeding in Emergencies

November 2001

QUANTIFYING THE BENEFITS OF BREASTFEEDING: A SUMMARY OF THE EVIDENCE

Food and Nutrition Program
 Health Promotion and Protection Division
 The American Health Organization

UNICEF/WHO
 Academy for Educational Development

SPOTLIGHT

June 2005

LAM Users

Transition to Other Modern Methods of Contraception after Six Months Postpartum

This issue of Spotlight provides reproductive health and maternal and child health programs with new information from a 2004 ENRICHES study in Jordan to advocate for the offering of the lactational amenorrhea method (LAM) as a means to increase use of effective birth spacing methods and optimal infant feeding practices.

LAM is a modern contraceptive method based on the natural ability resulting from the following three criteria: (1) full or nearly full breastfeeding; (2) the absence of menses; and (3) no use during the first six months postpartum. LAM is more than 98% effective when rigorously used, compared to 91% for ammenorrhea and 85% for combined oral contraceptives, and 84% for combined (hormonal) contraceptives (Technology 2003B:1-1105).

In spite of its highly competitive efficacy and other strengths, LAM is often underutilized because of an unmet reproductive health need for effective birth spacing programs consistently with two questions:

- If many breastfeeding women are sexually active and therefore prevented against pregnancy during the early postpartum period, what are the added benefits of offering LAM?
- With limited opportunities to attend to routine women's reproductive health planning, how can offering LAM provide women with longer term protection to reduce unwanted pregnancies?

ENRICHES assessed these questions and offers by conducting a retrospective study with the Ministry of Health of the Hashemite Kingdom of Jordan. The study was conducted in 11 child health centers in and around Amman, Jordan, during 2004. Women who had a child 12-24 months of age for whom they sought health care in 2003 were asked about their contraceptive practices during the first six months postpartum. The findings were subject to daily communication in order to plan their family size and to offer women more informed reproductive health planning if they could all them LAM options.

ENRICHES is a project of the American Health Organization, a joint effort of the United States Agency for International Development (USAID), the United Nations Children's Fund (UNICEF), the United States Agency for Global Development (USAGD), and the American Health Organization (AHO). For more information, visit www.enriches.org.

ENRICHES: Academy for Educational Development, 1825 Connecticut Avenue, NW, Washington, DC 20009 Phone: (202) 864-8222 Fax: (202) 864-8977 E-mail: enriches@aed.org Website: www.enriches.org

Infant Feeding Options

in the Context of HIV

Profiles

A Process for Nutrition Policy Analysis and Advocacy

Mainstreaming

Integrate infant and young child feeding into programs of other organizations:

- Results-oriented behavior change interventions
- Technical information
- Supportive policies
- Other innovations

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World Vision

Trainee's Handouts
Using the Essential Nutrition Actions
to Improve the Nutrition of
Women and Children in Ghana
May 2005



A Four Day Training of Trainers Course for
Managers and Planners of Health and Nutrition Programs

USAID unicef AED

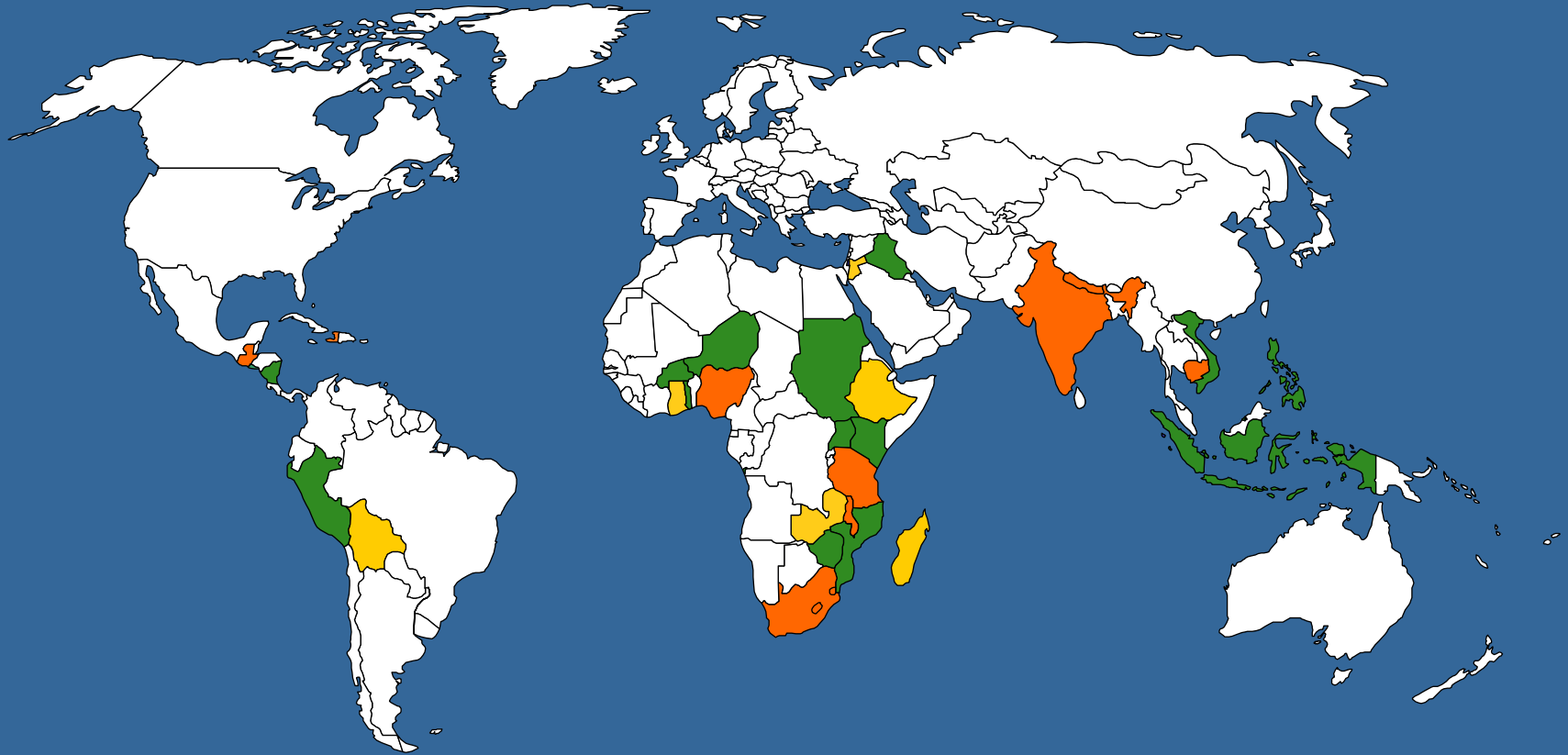


PROCOSI



لرصاعه لطبيعيه
و
طريقة قطع لطمب بالارصاع كوسيلة للمساعده بين الاحمال

Country Programs



Large-scale program

Leading intervention

Short-term TA

A photograph showing a group of African women and children sitting together. The women are wearing headwraps and patterned clothing. Some are holding infants. The text "Country Results" is overlaid in white on the image.

Country Results

Results Outline



1. Results and costs for 4 core indicators in 5 country programs
2. Replication and scale-up outcomes in 2 countries
3. PMTCT results within an infant feeding and HIV program

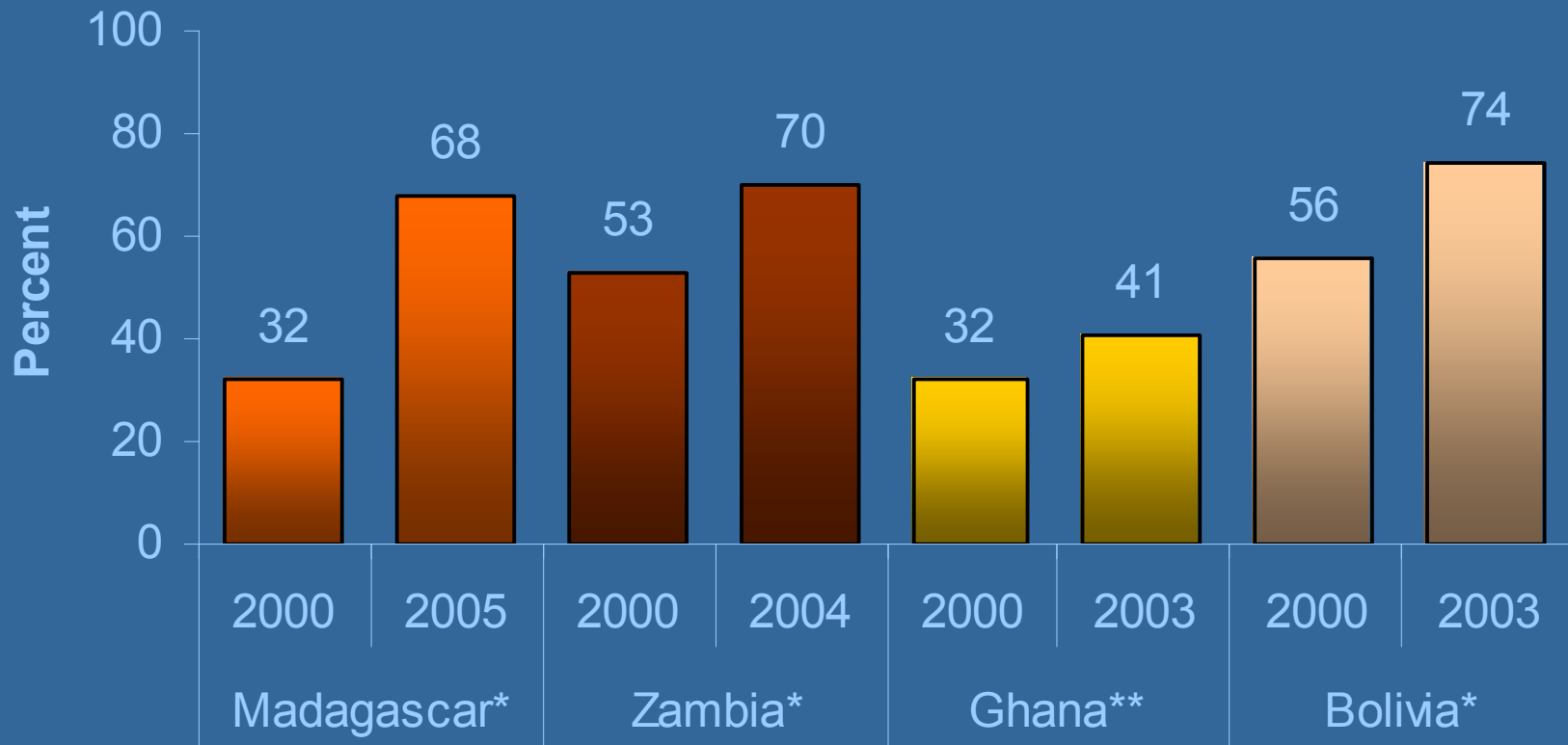
LINKAGES Core Indicators

- Timely initiation of BF within 1 hour of birth
- Exclusive breastfeeding among infants
0-<6 months
- Timely complementary feeding of infants
6-<10 months
- LAM rate

LINKAGES Program Scale

Country (population)	Project catchment population	Catchment area
Madagascar (18 million)	6.3 million	23 districts in 2 of 6 provinces
Zambia (11 million)	1 million	54 sites in 6 districts
Ghana (21 million)	3.5 million	Communities in 31 districts in 7 of 10 regions
Bolivia (9 million)	1 million	153 districts throughout the country
Jordan (5.3 million)	1 million	All (351) MCH centers throughout the country

Timely Initiation of Breastfeeding (within 1 hour of delivery)



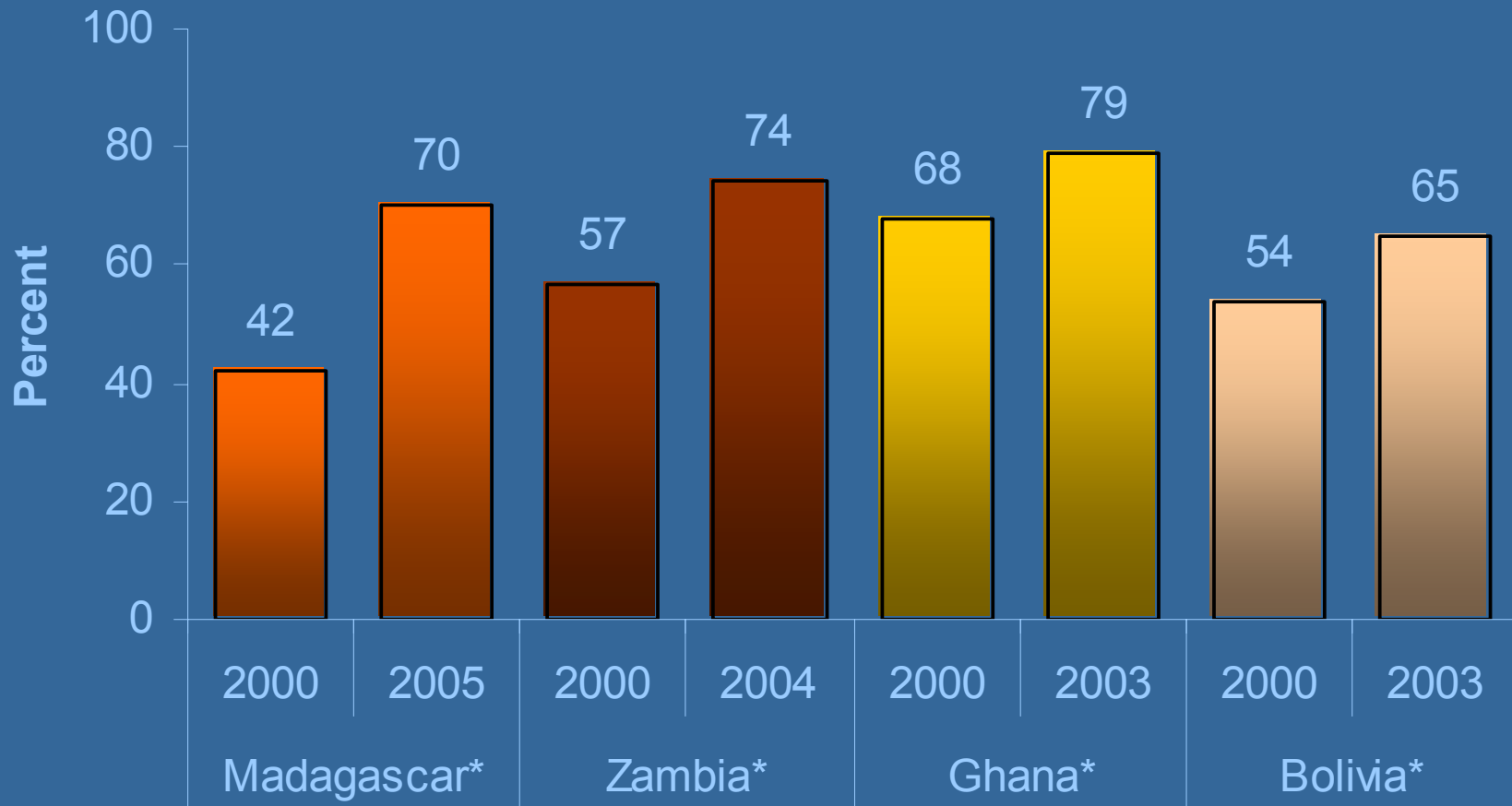
*p<0.001

**p<0.05

Exclusive Breastfeeding Rate

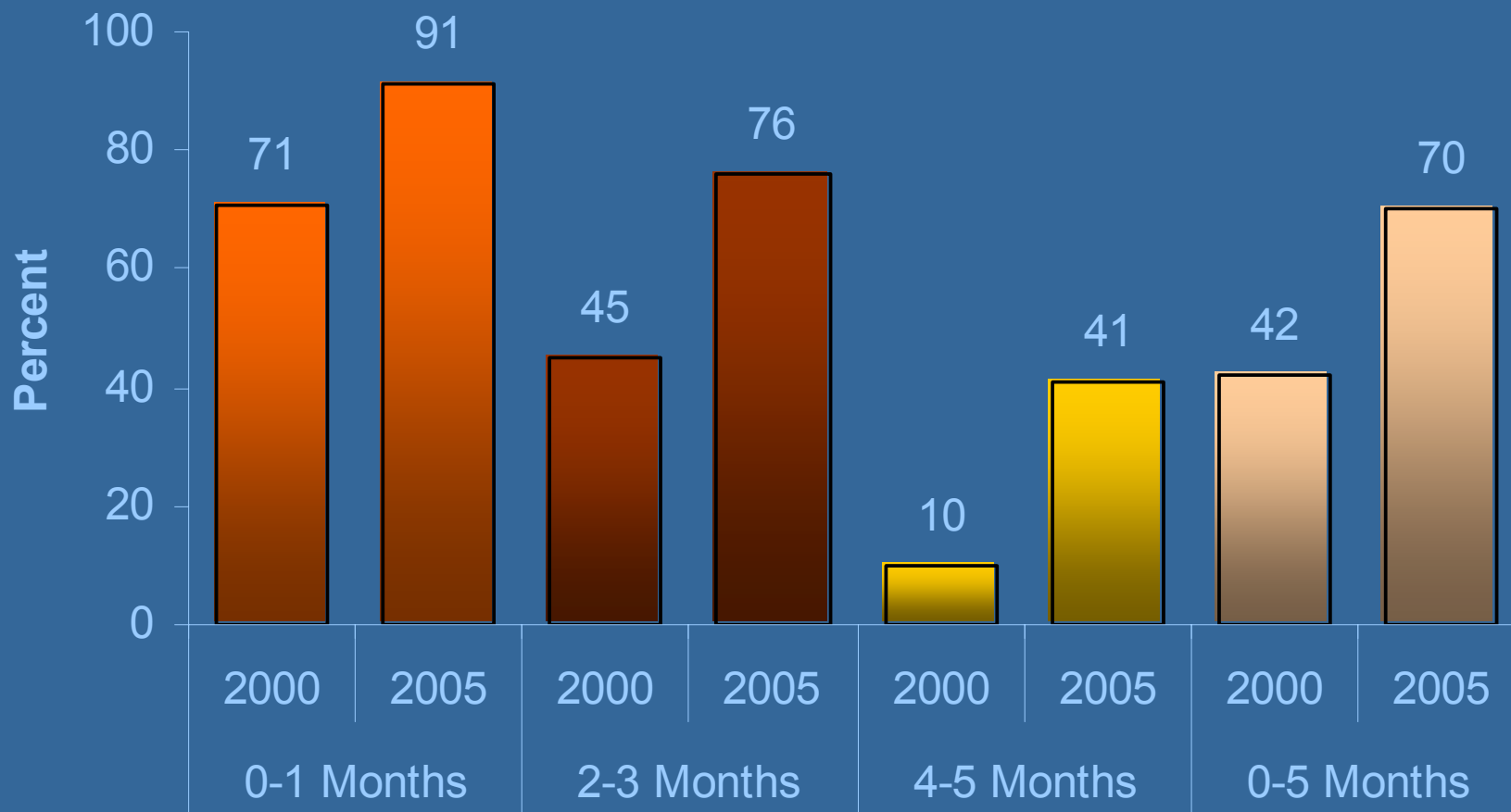
- $\frac{\text{\# of infants 0-<6 months exclusively bf}}{\text{total \# of infants 0-<6 months}} \times 100$
- WHO 1991
- DHS and Multiple Indicator Cluster Survey (MICS)
- 24-hour food feeding recall question
 - Current status
 - Cross-sectional surveys
 - Not subject to recall error

Exclusive breastfeeding (infants 0–<6 months)



*p<0.001

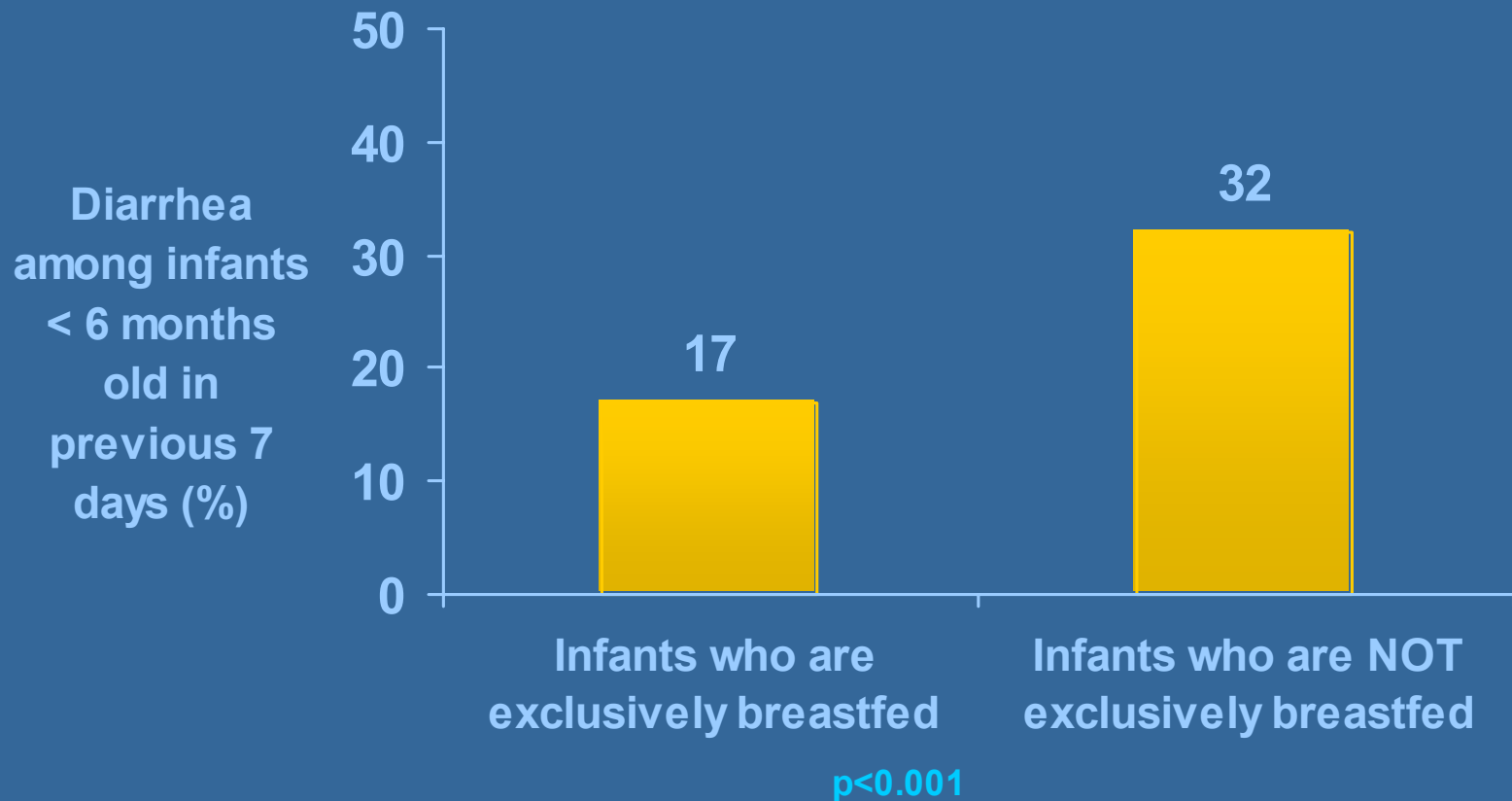
Madagascar: Exclusive Breastfeeding Rate by month intervals (infants 0-<6 months)



*p<0.001

Bolivia

Exclusive breastfeeding and diarrhea



Costs of Breastfeeding Promotion: Madagascar, 2001

Estimated reduction in infant deaths due to an
increase in exclusive breastfeeding:

Increase in EBF rate: 50% to 86%

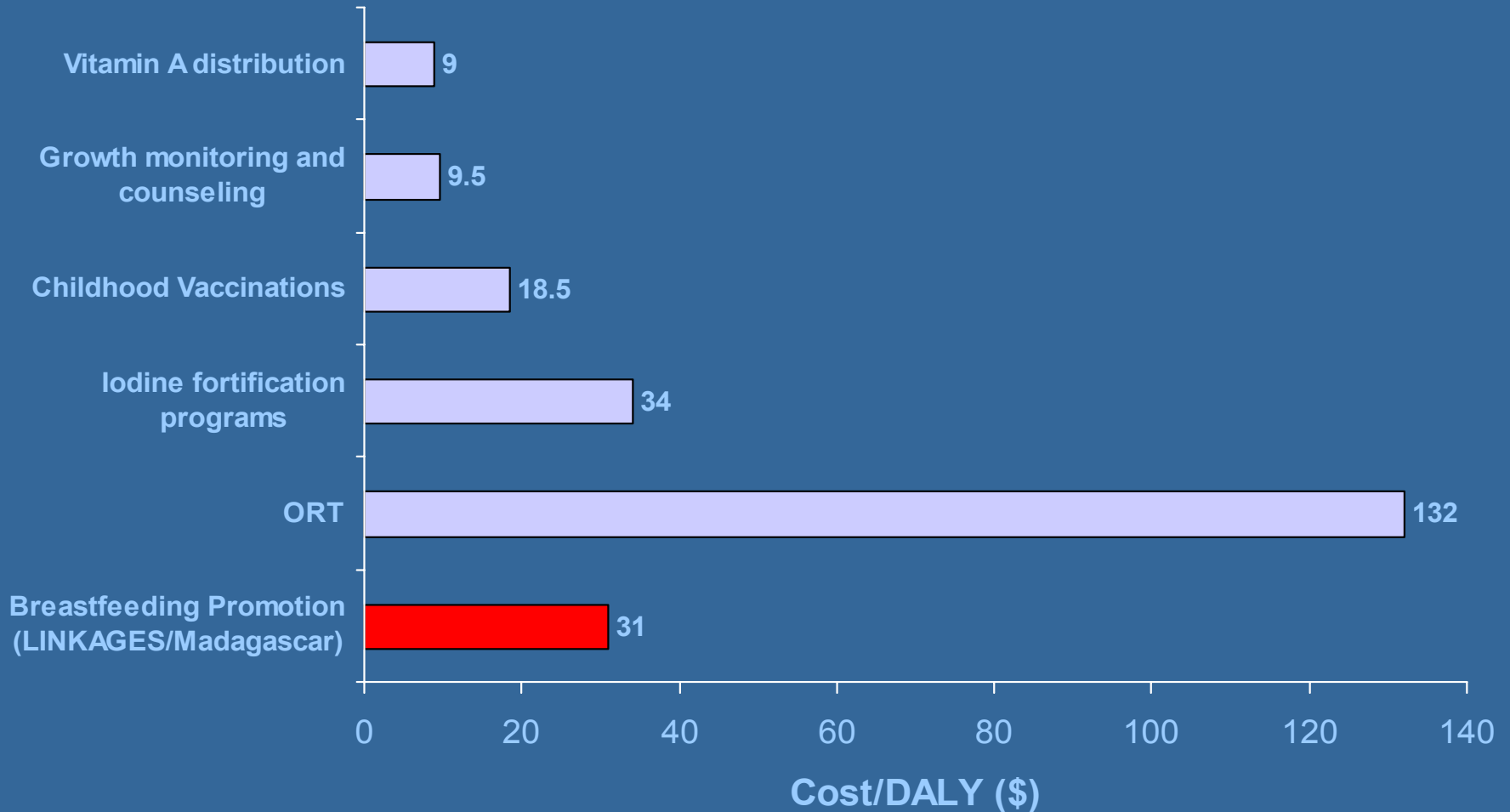


Cost per new breastfeeding acceptor: \$10

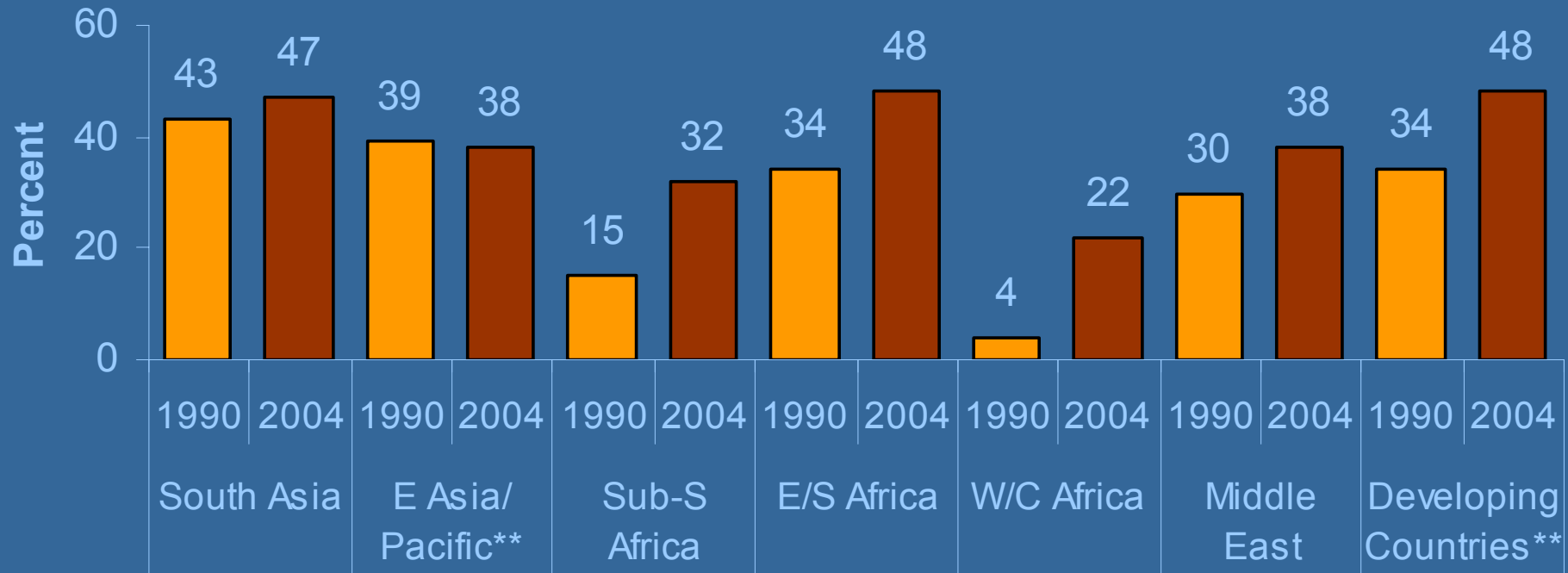
Infants deaths averted: 5%

At a cost of \$31/DALY

Costs of Child Survival and Nutrition Interventions



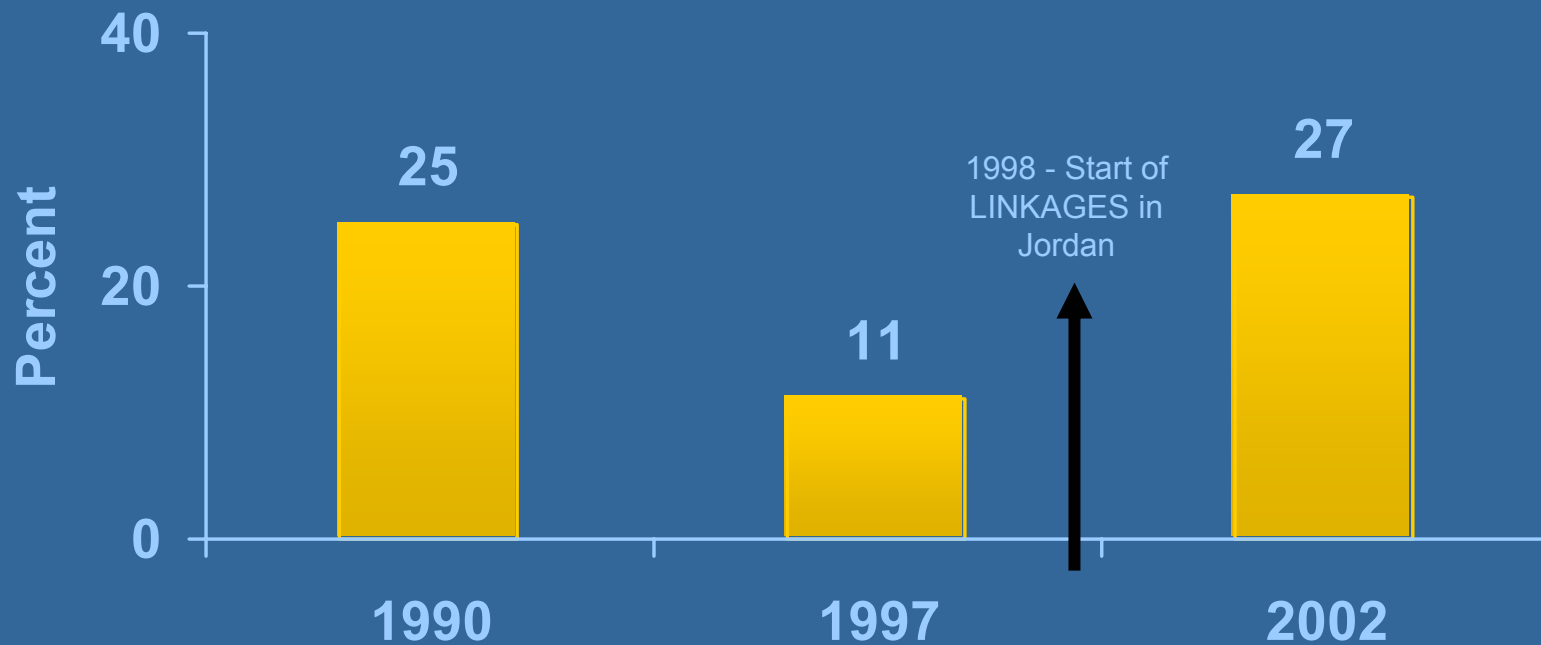
Global Trends in Exclusive Breastfeeding, 1990 - 2004



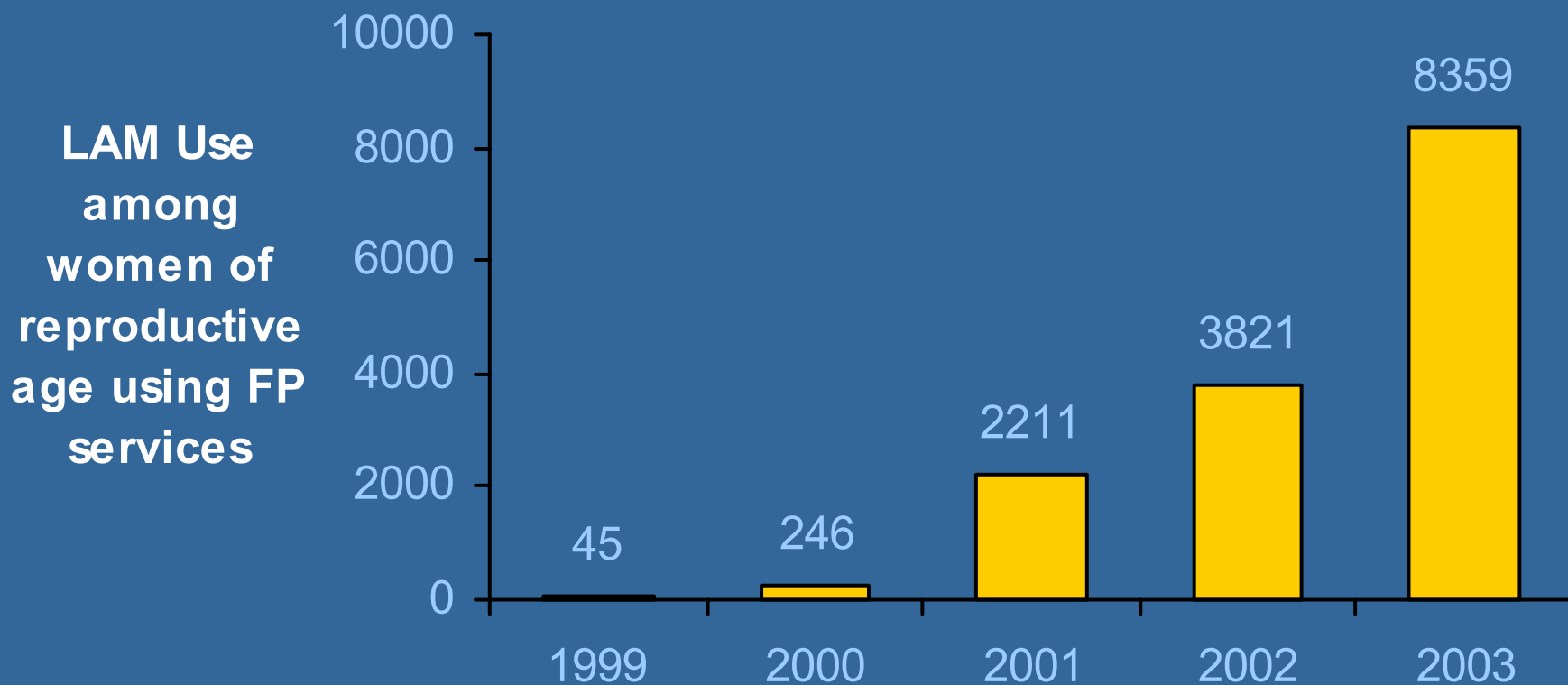
** Excludes China

Source: UNICEF 2005

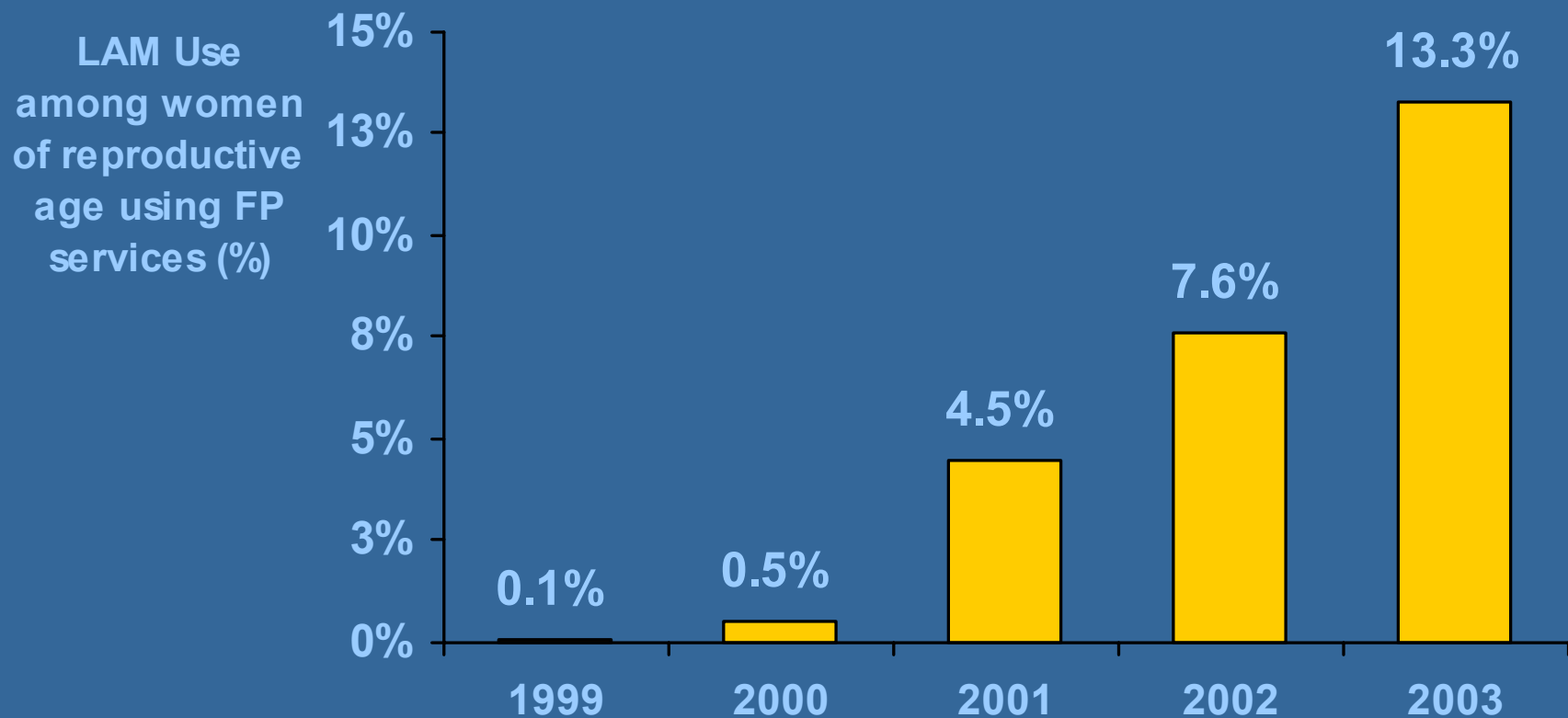
Jordan DHS: National-level exclusive breastfeeding rate of infants 0–<6 months



Jordan, LAM Use 1999–2003: Ministry of Health, Maternal Child Health Centers



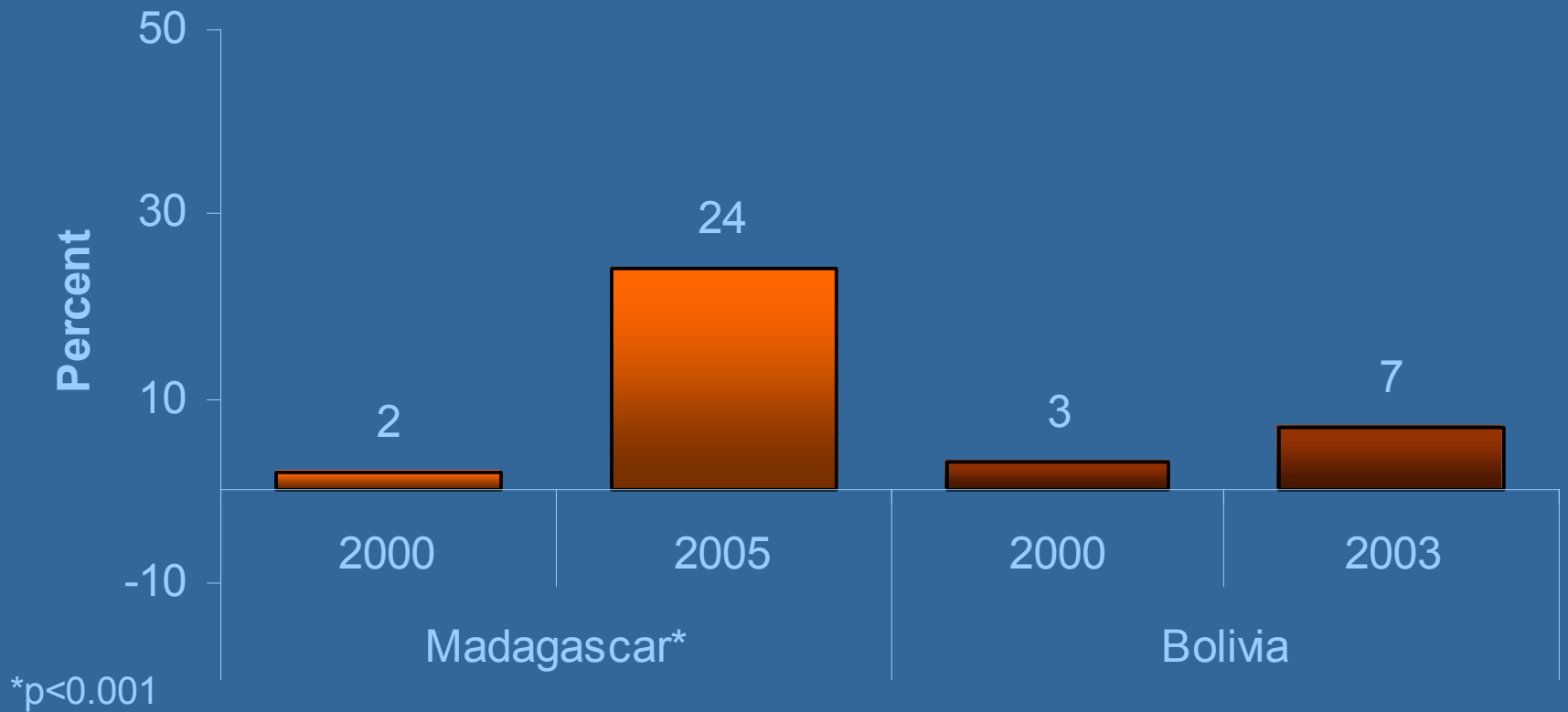
Jordan, LAM User Rate 1999 - 2003: Ministry of Health, Maternal Child Health Centers



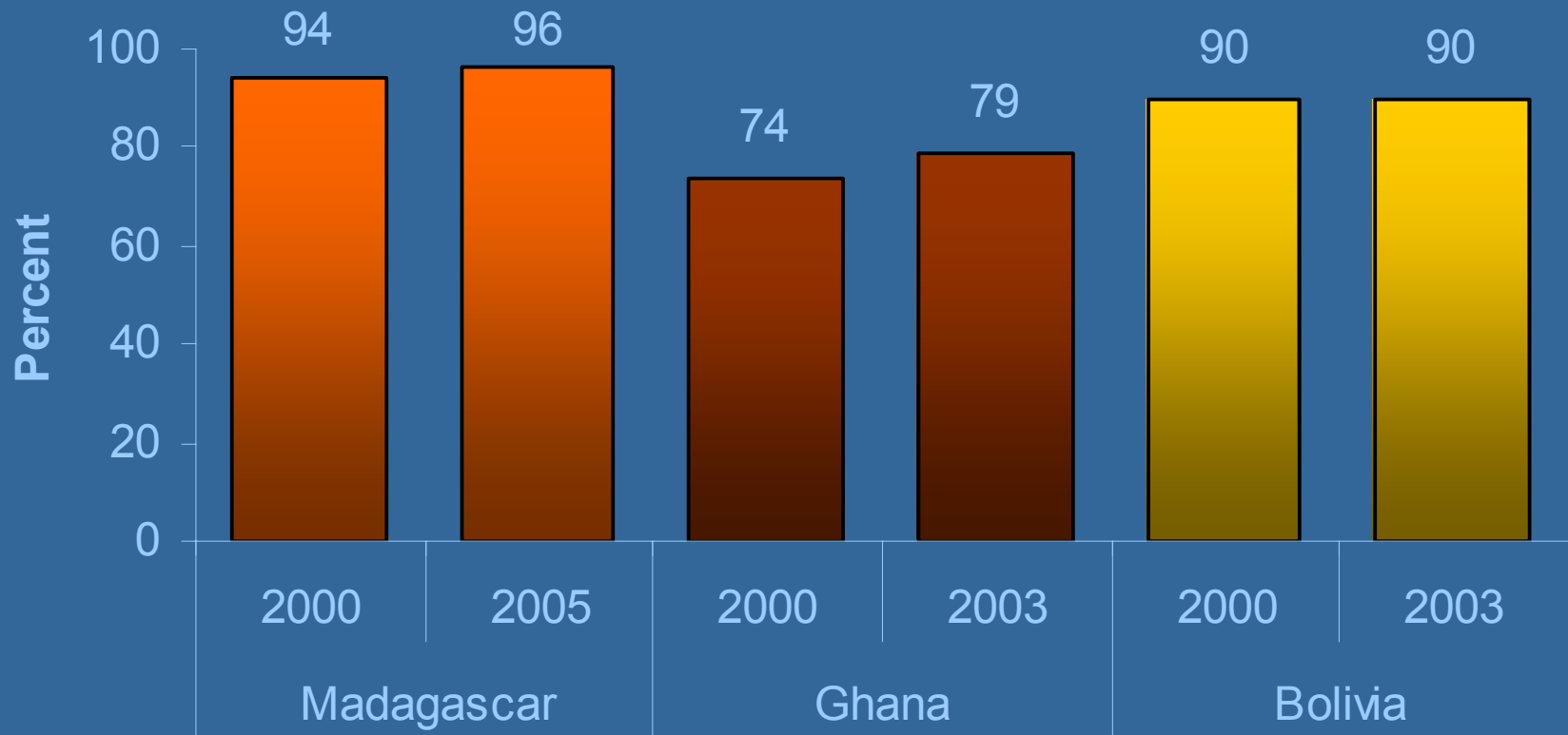
Source: Ministry of Health Services Statistics

LAM Rate

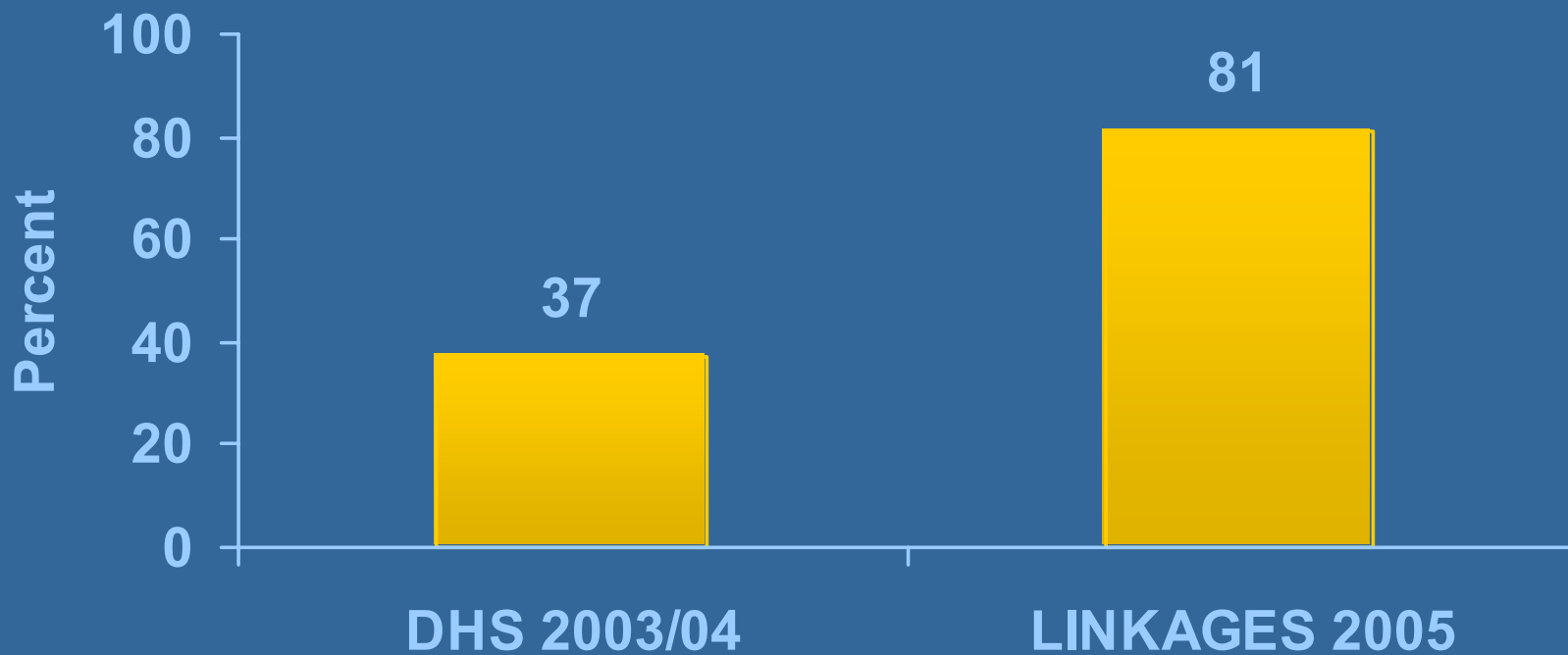
(women with infants 0–<6 months)



Timely Complementary Feeding (infants 6–<10 months)



IYCF Rate Madagascar (infants 6–<24 months)

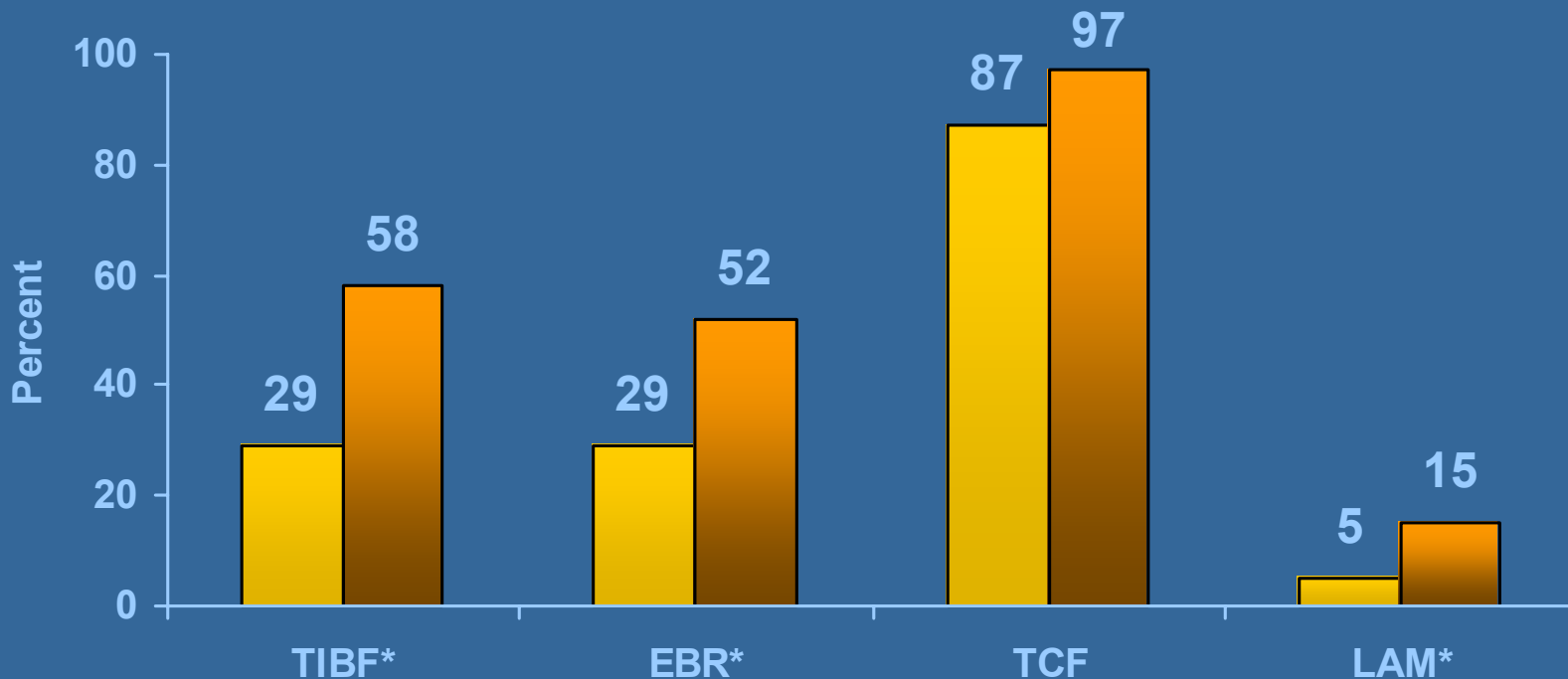


Replication for Scale up



Madagascar

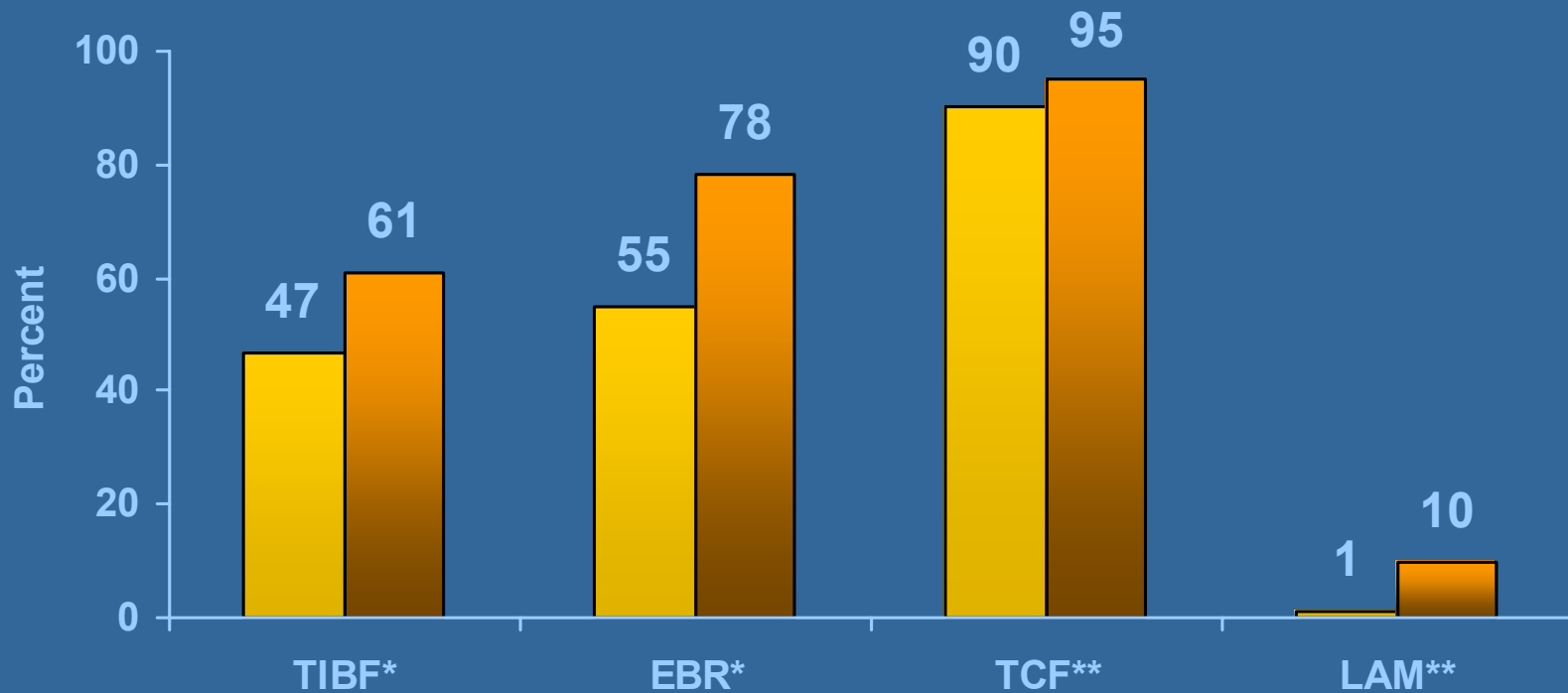
Replication for Scale up, 2003-2004



*p<0.001

■ Baseline ■ Endline

Ghana, Freedom from Hunger Replication for Scale up, 2003-2004



*p<0.001 **p<0.01

■ Baseline ■ Endline

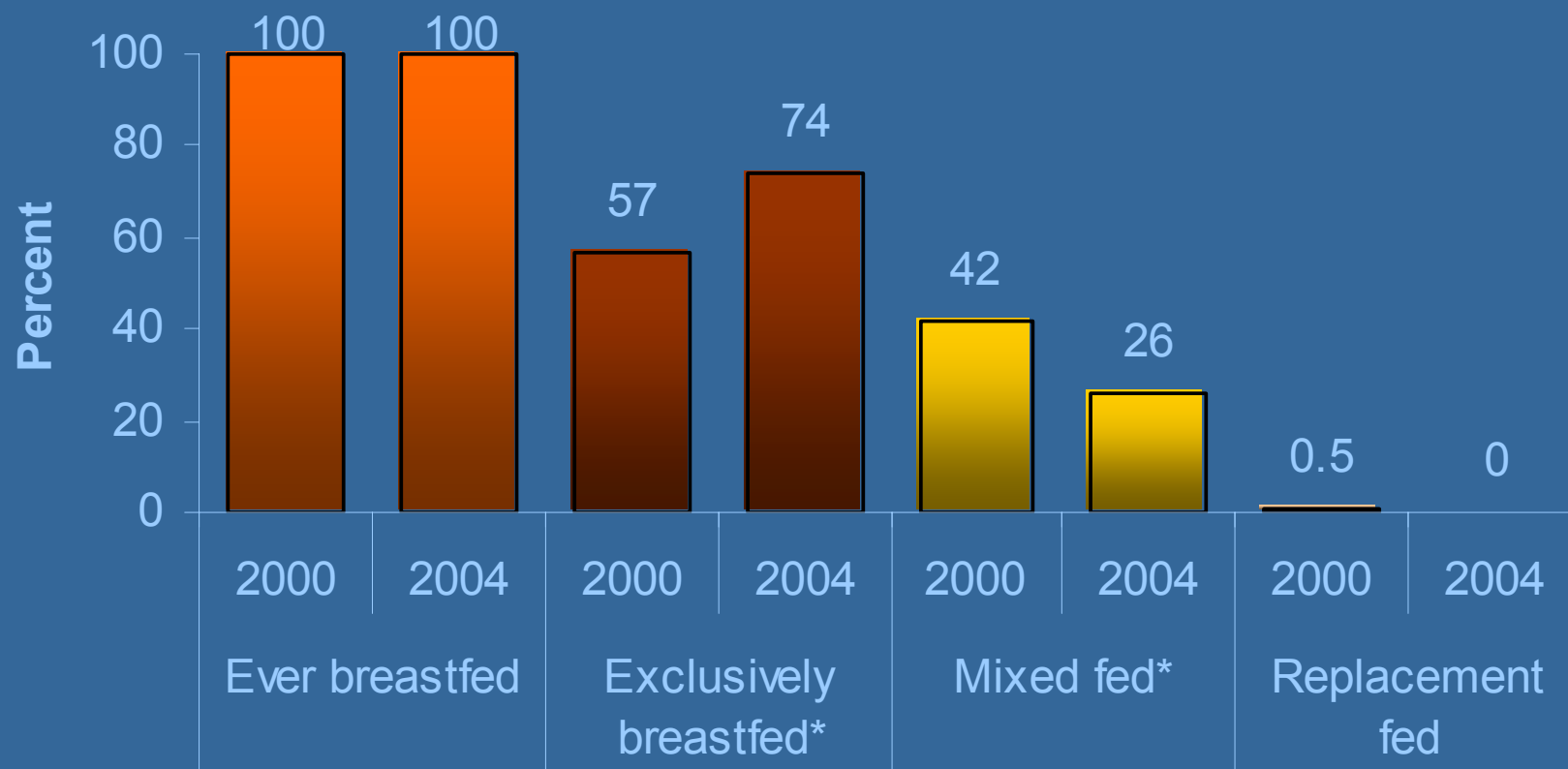
Breastfeeding and HIV



Photo: G. Pirozzi, UNICEF

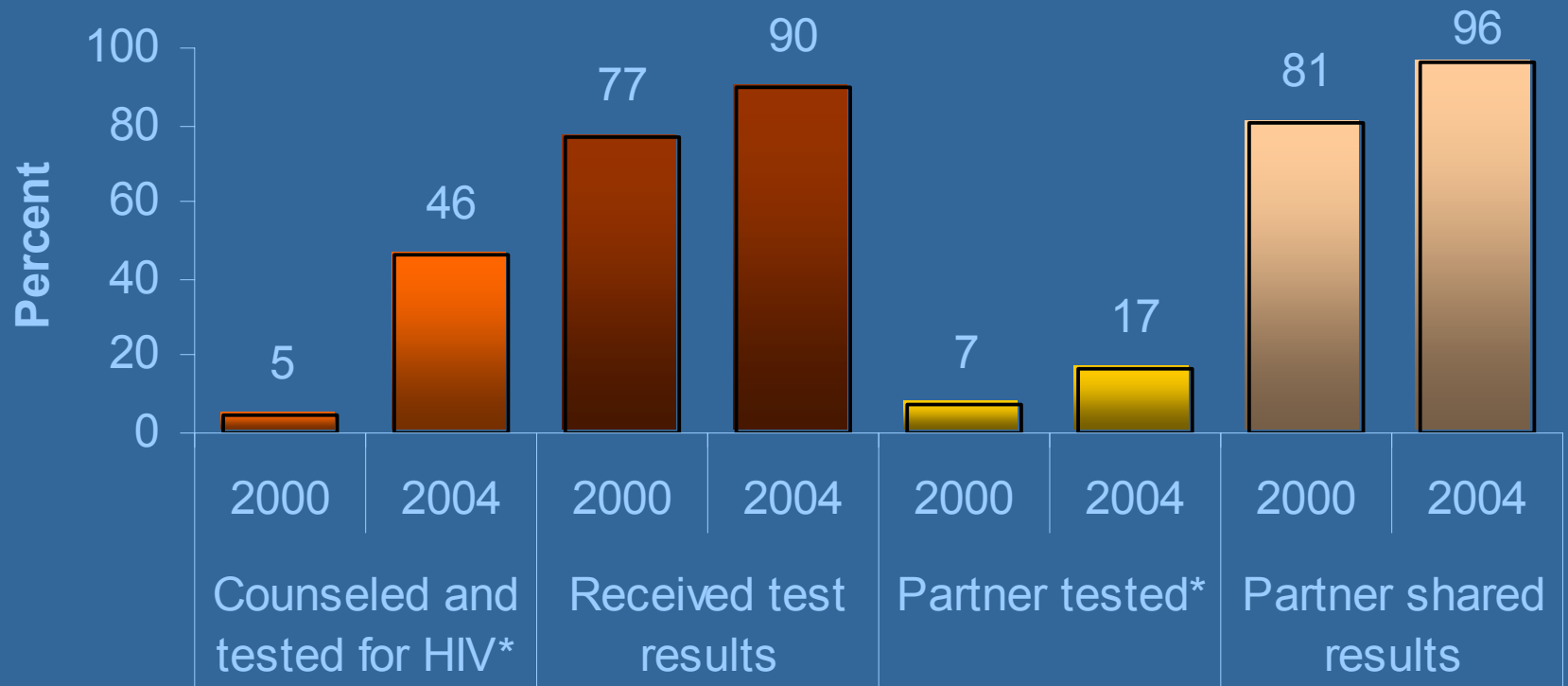
LINKAGES Zambia

Infant feeding results, infants 0-<6 months



*p<0.001

Zambia PMTCT Services



*p<0.001

Monitoring and Evaluation: Just Do It!



Monitoring and Evaluation: Implementation

- Systematic
- HQ and field-based staff
- M&E activities matched to the project's components and pathways
 - Process monitoring
 - Media evaluations

Annual reporting

- Rapid appraisal survey data
- The President's Emergency Plan For AIDS Relief (PEPFAR) indicators

A Culture of Monitoring and Evaluation

- Got data?
- Have you used your data today?

Thanks



Taking Stock



Compelling Case for Breastfeeding Promotion

Abundant evidence that breastfeeding can be improved

- Quickly
- At scale
- Cost-effectively

Experience and tools

Is There More to Do in Breastfeeding?



Photo: Joan Schubert

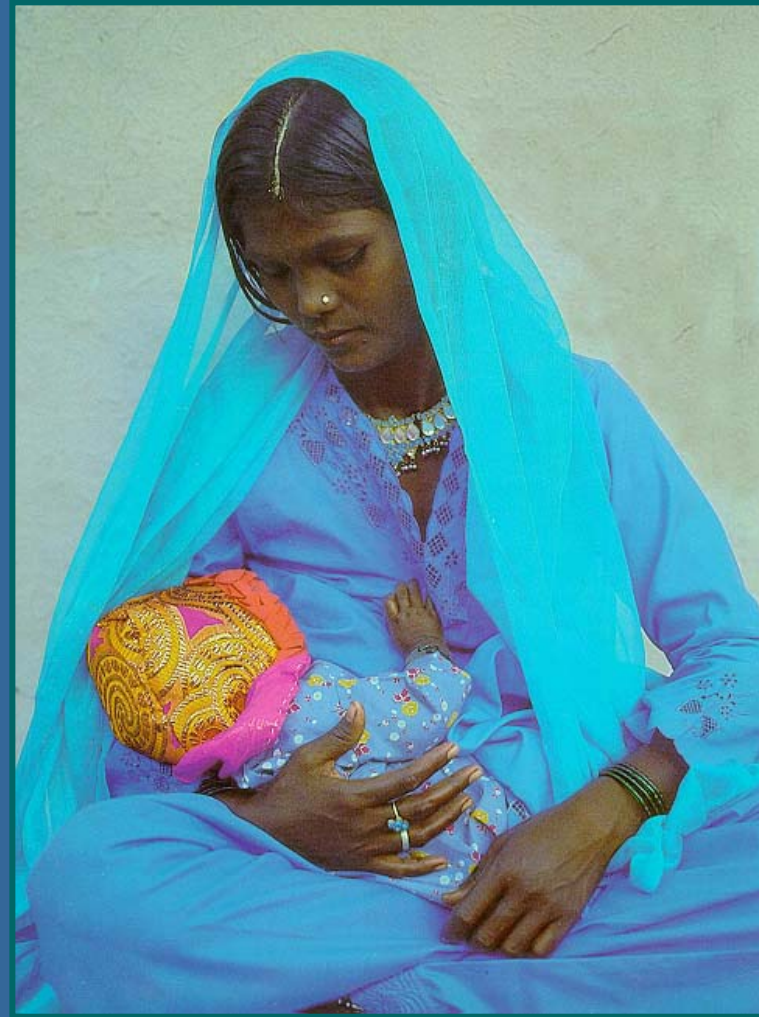
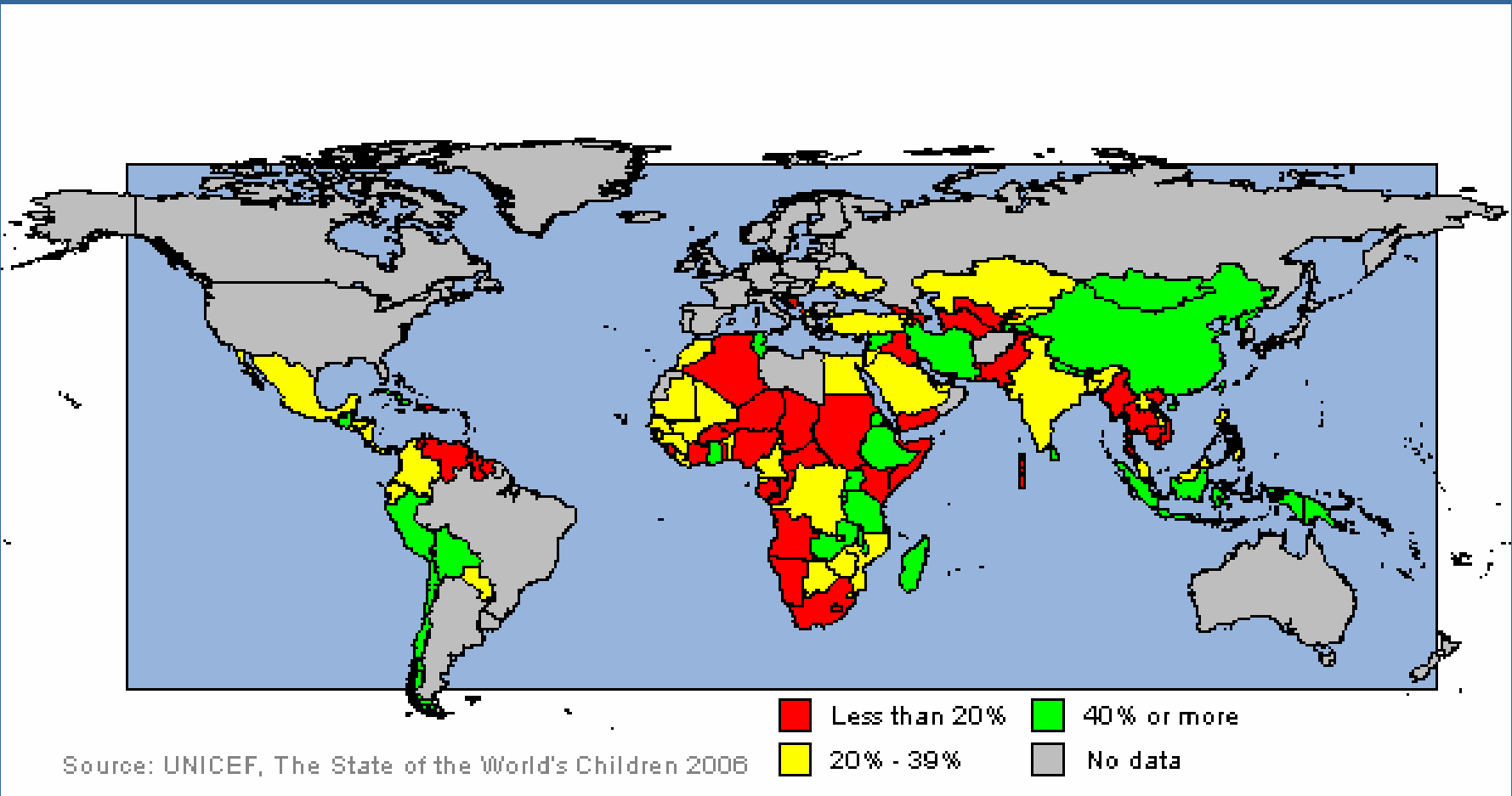


Photo: UNICEF

Work Still Needed to Increase Exclusive Breastfeeding Rates

% infants aged 0-6 months who are exclusively breastfed



Global Strategy for Infant and Young Child Feeding



WORLD HEALTH
ORGANIZATION 
unicef 

Is There a
Continuing Need
for Advocacy for
IYCF?

What about Complementary Feeding?



Photo: Kristen Marsh

- Take successful interventions to scale
- Adapt guidelines for the local context
- Find solutions to address nutrient gaps in local diets

What about Maternal Nutrition?

- Major global problem
- Limited evidence-base for what works
- Applied research needed



Photo: Tony Schwarzwald

What about Infant Feeding and HIV?



Photo: G. Pirozzi, UNICEF

Summary

- **Make the leading preventive interventions a top global health priority**
- **Promote safe infant feeding in the context of HIV**
- **Improve nutrition across a continuum of care**

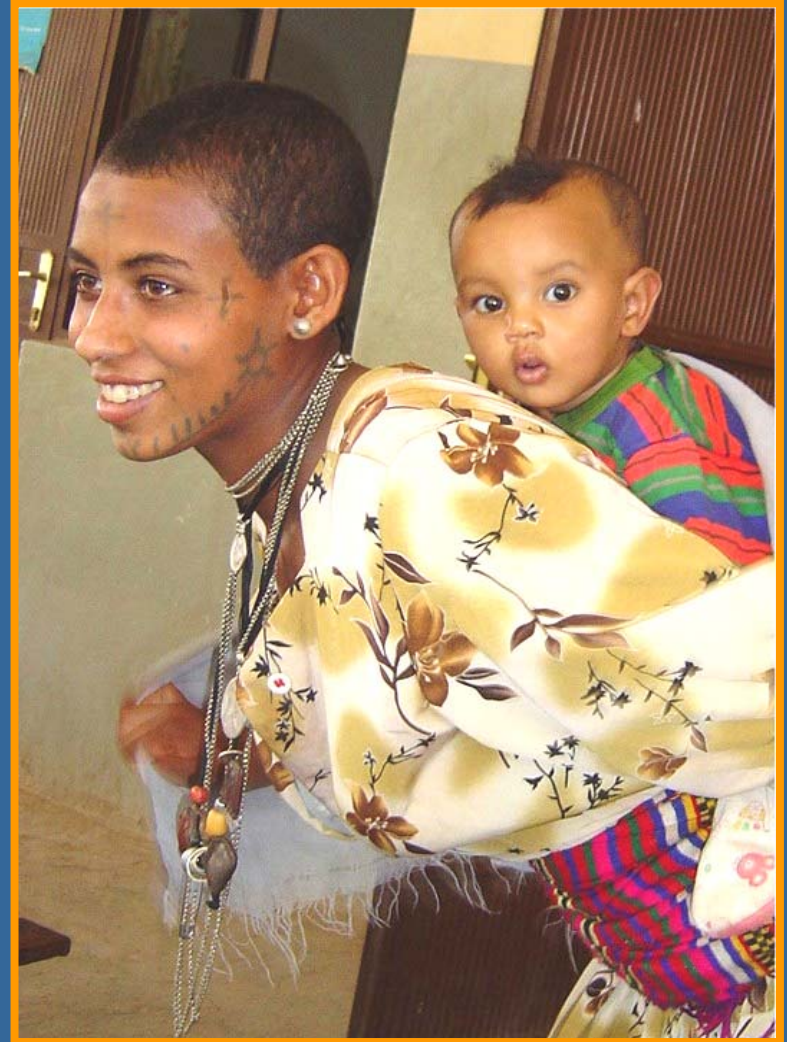


Photo: Agnès Guyon
59

Thank you!



Photo: Mary Lung'aho