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SPRING
Strengthening Partnerships, Results, and Innovations in Nutrition Globally

Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) Project

Life-of-Project Report

2011–2018




December 2018

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ABOUT SPRING

The Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) project is a seven-year USAID-funded cooperative agreement to strengthen global and country efforts to scale up high-impact nutrition practices and policies and improve maternal and child nutrition outcomes. The project is managed by JSI Research & Training Institute, Inc., with partners Helen Keller International, The Manoff Group, Save the Children, and the International Food Policy Research Institute.

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DISCLAIMER

This report is made possible by the generous support of the American people through the United States Agency for International Development (USAID) under the terms of the Cooperative Agreement AID-OAA-A-11-00031, SPRING), managed by JSI Research & Training Institute, Inc. (JSI). The contents are the responsibility of JSI, and do not necessarily reflect the views of USAID or the U.S. Government.

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Acknowledgments

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This Cooperative Agreement was executed in true partnership among the SPRING consortium, USAID Washington, USAID missions, host country governments, multilateral agencies, and a wide array of local organizations and experts. It is thanks to those partnerships that SPRING was able to attain meaningful results in the countries where we worked and to make significant contributions to global understanding about state-of-the-art multi-sectoral nutrition programming.

Acronyms and Abbreviations

AgN-GLEE	Agriculture and Nutrition Global Learning and Evidence Exchange
APNIP	Agricultural Productivity and Nutrition Improvement Project
AREA	Accelerated Reduction Effort on Anemia
ASC	*agents de santé communautaire*/community health workers
BFHI	Baby-Friendly Hospital Initiative
BFS	(USAID) Bureau for Food Security
BMI	body mass index
CDC	Centers for Disease Control and Prevention
C-IYCF	(UNICEF) Community Infant and Young Child Feeding
CLM	*Cellule de Lutte contre la Malnutrition*
CLTS	community-led total sanitation
COP	community of practice
CSO	civil society organization
DAE	Department of Agriculture Extension
DATA	District Assessment Tool for Anemia (SPRING tool)
DMI	Development Media International
EHA	essential hygiene actions
ENA	essential nutrition actions
ENN	Emergency Nutrition Network
FANTA	Food and Nutrition Technical Assistance Project
FMOH	Federal Ministry of Health
FNS	farmer nutrition schools
FY	fiscal year
GAIN	Global Alliance for Improved Nutrition
GCAN	Gender Climate Change and Nutrition Initiative
GFSS	Global Food Security Strategy
GH	(USAID Bureau for) Global Health
GLEE	Global Learning and Evidence Exchange
GOB	Government of Bangladesh
HCW	health care worker

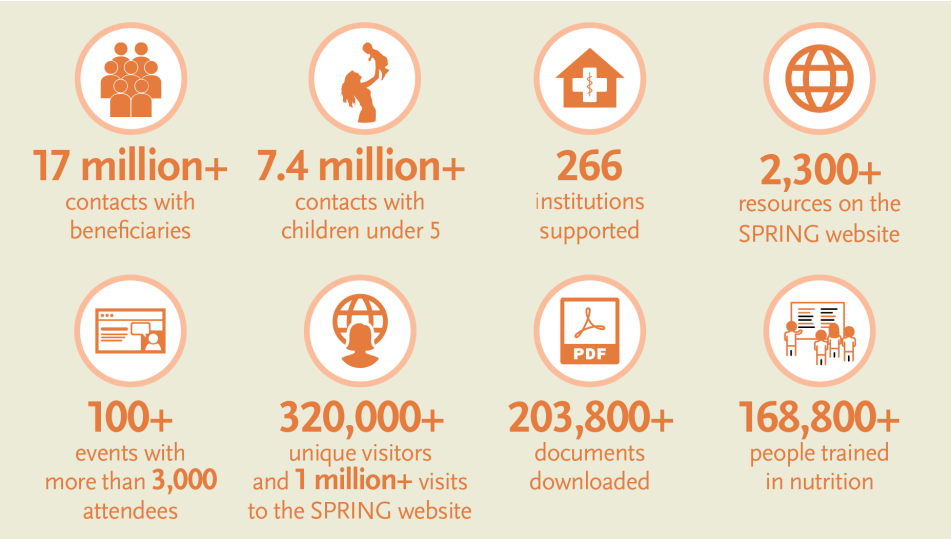
HEME	HEmoglobin MEasurement (working group)
HFP	homestead food production
HKI	Helen Keller International
ICT	information communication technologies
IFA	iron–folic acid
IFPRI	International Food Policy Research Institute
IP	implementing partners
LGA	Local Government Area
MCSP	Maternal and Child Survival Program
MIYCN	maternal, infant, and young child nutrition
MNP	micronutrient powders
MOA	Ministry of Agriculture
MOH	Ministry of Health
MOHFW	Ministry of Health and Family Welfare
MQSUN	Maximising the Quality of Scaling Up Nutrition Programmes Framework
MSPP	*Ministère de la Santé Publique et de la Population*
NACS	nutrition assessment, counseling, and support
NAWG	National Anemia Working Group
NCD	noncommunicable disease
NGO	nongovernmental organization
NNS	National Nutrition Services
NSA	nutrition-sensitive agriculture
OJT	on-the-job training
OVC	orphans and vulnerable children
PAHO	Pan American Health Organization
PBN	Pathways to Better Nutrition (SPRING research)
PEPFAR	U.S. President's Emergency Plan for AIDS Relief
PHC	primary health care
PLW	pregnant and lactating women
PY	project year
QI	quality improvement
R4D	Results for Development

RCHCIB	Revitalization of Community Health Care in Bangladesh
REGIS-ER	USAID's resilience program in the Sahel
SAAO	sub-assistant agriculture officers
SBC	social and behavior change
SBCC	social and behavior change communication
SPRING	Strengthening Partnerships, Results, and Innovations in Nutrition Globally (project)
SUN	Scaling Up Nutrition
TA	technical assistance
TCN	third-country national
TOPS	Technical and Operational Performance Support Program
TOT	training-of-trainers
UNAP	Uganda Nutrition Action Plan
UNICEF	United Nations Children's Fund
UNSCN	United Nations Standing Committee on Nutrition
USAID	U.S. Agency for International Development
WASH	water, sanitation, and hygiene
WHO	World Health Organization

Executive Summary

From 2011–2018, Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING), a Cooperative Agreement funded by the U.S. Agency for International Development (USAID), bolstered global and country efforts to scale up high-impact nutrition practices and policies. Led by JSI Research & Training Institute, Inc. (JSI), in partnership with Helen Keller International (HKI), the International Food Policy Research Institute (IFPRI), Save the Children, and The Manoff Group, SPRING provided state-of-the-art technical support, implemented a dozen long-term country programs, and demonstrated global thought leadership focused on preventing stunting and maternal and child anemia in the first 1,000 days, linking agriculture and nutrition, creating social and behavior change, and promoting systems thinking for nutrition.

Figure 1. SPRING Life-of-Project Results (through FY 2017)



SPRING implemented diverse technical assistance activities through long-term programs in 12 countries and a wide array of short-term technical assistance to more than 20 USAID missions. SPRING's groundbreaking multi-sectoral nutrition research and programming resulted in more than 17.5 million contacts with community members in more than 20 countries. The contacts we made—whether in a mother's support group, health facility, home, or hospital—strengthened the nutritional status of underserved populations through rigorous, evidence-based interventions tailored to the local context. Through our on-the-ground programming and research activities, we captured the "how" of effective nutrition programming and shared findings, lessons learned, tools, and innovations in-country and with the global nutrition community. The SPRING website, spring-nutrition.org, includes more than 2,400 nutrition resources and tools to support multi-sectoral programming across USAID's nutrition portfolio and beyond. Our knowledge platform connected academics, practitioners, and policymakers through more than 100 in-person and online events, as well as vibrant communities of practice focused on anemia prevention and the links between agriculture and nutrition.

From Bangladesh to Haiti, from Niger to the Kyrgyz Republic, SPRING tailored programming and applied learning in a continuous loop, gleaning lessons from our unique experience in each country. Results from our research and program learning were packaged in engaging formats and broadly shared to elicit feedback to refine our ideas and approaches for greater in-country impact and to feed the global nutrition evidence base. The numerous curricula, studies, webinars, events, briefs, posters, blogs, and success stories we developed have furthered conversation, thought, and action to move the needle on malnutrition.

SPRING was, in many ways, USAID's learning platform for multi-sectoral nutrition programming at both global and country levels. "Multi-sectoral" means working with and across a variety of areas within health, but it also means working with a variety of sectors *beyond* health, including agriculture, education, livelihoods, gender, market systems, and the social safety net. "Multi-sectoral" also means working with governments, civil society

organizations, and market-based private sector actors at policy and program implementation levels and with actors who engage with individuals, households, and communities. Working multi-sectorally for nutrition also entails using different engagement strategies for our common agenda—building communities of practice; conducting both academic and implementation research; using media of all kinds (digital/social, interpersonal, mass); relentlessly pursuing knowledge management, communications, and dissemination; and working flexibly and adaptively.

SPRING's core-funded global thought leadership and on-the-ground country implementation tested, adapted, and shared different approaches to operationalize USAID's Multi-Sectoral Nutrition Strategy. Highlights from our core-funded and country-specific work appear below.

Core-funded Technical Leadership Achievements

Agriculture and Nutrition

SPRING's Linking Agriculture and Nutrition team provided technical assistance to USAID staff in Washington and in Feed the Future focus countries to help them better understand and incorporate the key principles of nutrition-sensitive agriculture. The project also contributed substantially to the evidence base for nutrition-sensitive agriculture, conducting studies and creating tools to help communities and programs undertake nutrition-sensitive agriculture activities. Our easy-to-understand three-part *Pathways and Principles for Linking Agriculture and Nutrition* is seminal, guiding thinking within USAID; it has influenced the work of other organizations, such as Catholic Relief Services and FHI 360, and peer USAID projects like the Gender Climate Change and Nutrition Initiative (GCAN). Practical tools, such as the *Context Assessment Tool*, the *Accelerating Behavior Change in Nutrition-Sensitive Agriculture* online training, the *Nutrition-Sensitive Agriculture Training Resource Package*, and our popular *Agriculture and Nutrition Resource Review*, are critical components of SPRING's agriculture-nutrition legacy.

Preventing Anemia

SPRING's Anemia team was instrumental in sparking renewed interest in anemia reduction and control, validating an approach to identify the main causes of anemia that are unique to each country, and reviewing the status of interventions to reduce those causes. SPRING's unstinting commitment to high quality technical support, and new tools and resources resulted in increased attention to the assessment, prevention, and treatment of anemia in the countries where we worked. Our approach led to stronger leadership and greater technical capacity within each country. This is exemplified by our work in Ghana's Northern Region, where district personnel—once hampered by inaction because of a lack of data—are now empowered to make data-driven decisions through SPRING's District Assessment Tool for Anemia (DATA), a resource developed to help prioritize anemia interventions based on available data. We also worked to make cutting-edge research accessible to governments and implementing partners in countries and served as a major global coordination hub for anemia resources, raising anemia's global visibility through the Accelerated Reduction Effort on Anemia (AREA) community of practice, a vibrant group of 700 members from more than 65 countries.

Catalyzing Social and Behavior Change for Better Nutrition

SPRING's team for catalyzing social and behavior change (SBC) for better nutrition championed a behavior-centered approach to supporting countries, districts, groups, households, and individuals in adopting high-impact behaviors to reduce both stunting and anemia. Building on work already being done in nutrition SBC, SPRING encouraged new thinking and innovation backed by research and evidence. Our partnership with Digital Green,

for example, to test the feasibility of adapting its community-led video approach for agriculture to improve high-impact maternal, infant, and young child nutrition (MIYCN) behavior was highly successful across a number of countries and contexts. Our collaboration with the United Nations Children's Fund (UNICEF) and the Nigerian Federal Ministry of Health to evaluate the UNICEF *Community Infant and Young Child Feeding Counselling Package* in Kaduna State, Nigeria, provided crucial evidence around the effectiveness of this widely adopted intervention. We also addressed a gap in global knowledge about the diet and eating practices of adolescent girls, and we partnered with Global Alliance for Improved Nutrition (GAIN) and USAID to gather global social and behavior change communication (SBCC) thought leaders to produce the *Strategic Agenda for At-Scale Nutrition SBC.* SPRING-led partnerships like these helped elevate SBC to the top of the global nutrition agenda.

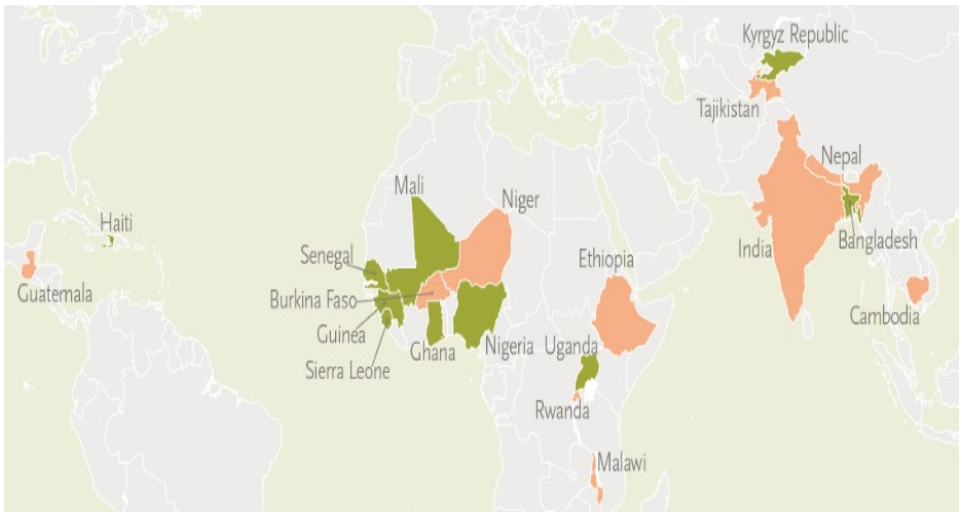
Strengthening Systems for Nutrition

SPRING's Strengthening Systems for Nutrition team pioneered a systems thinking framework for nutrition, building evidence and publishing guidance focused on nutrition policies and governance, financing, workforce development, and information use. The *Pathways to Better Nutrition Case Studies*, for example, conducted in partnership with the nutrition secretariats in Nepal and Uganda, provided practical recommendations for translating multi-sectoral nutrition policies into increased nutrition action. Similarly, SPRING reviewed policy documents for nutrition, noncommunicable disease prevention, and food security from 29 USAID priority countries to determine the extent to which these policies consistently include "double duty" actions that are known to decrease the prevalence of both under- *and* over-nutrition, stunting *and* overweight. The team also developed a guide for tracking financial support to address the dearth of data on nutrition financing and created the *Nutrition Workforce Mapping Toolkit* to help countries understand the nutrition actions of health workers. These efforts and more helped bring the concept of systems thinking into the realm of practical action, providing tools to help people reach across sectoral divides.

Country Program Achievements

Over the life of the project, SPRING worked in diverse contexts across the globe to tailor nutrition programs to local needs and provide targeted technical assistance in 21 countries. The highlights below provide a snapshot of SPRING programming in the countries where we had a multi-year presence. For more information on each country program and the technical assistance SPRING provided, visit: www.spring-nutrition.org/countries, and table 1 on pages 34-37 provides data substantiating changes in nutrition outcomes as a result of SPRING interventions.

Figure 2. SPRING Country Programs and Technical Assistance



Bangladesh

In Bangladesh, SPRING implemented an innovative, scalable, and sustainable community-based, multi-sectoral nutrition program. During five years, the project reached more than 125,000 pregnant and lactating women and their children through nearly 6,500 farmer nutrition schools (FNS). SPRING also trained and provided supportive supervision to more than 4,000 frontline health staff from over 1,400 health facilities, as well as nearly 1,000 frontline agriculture staff. Our research showed improved nutrition practices were sustained at the community level a year or more after the FNS and showed strong evidence of spillover of improved behaviors and practices to non-beneficiaries in adjacent communities, an indication of the long-term impact of our work.

Ghana

To reduce stunting in the Feed the Future zone of influence in the Northern and Upper East Regions of Ghana, SPRING developed the "1,000-day household approach." This multi-sectoral strategy focused on linking nutrition; agriculture; and water, sanitation, and hygiene (WASH), with an emphasis on priority household actions to address the underlying causes of poor nutrition among pregnant and lactating women and children under 2 years of age. SPRING's multi-sectoral approach and focus on 1,000-day households reduced stunting from 20.9 to 16.9 percent among children under 2 and from 30 to 23 percent among children under 5; it also increased the prevalence of children in this age group receiving a minimum acceptable diet from 9.5 percent to 29.5 percent. To ensure the sustainability of this work, SPRING collaborated closely with existing government and nongovernmental organizations and delivered most program interventions through existing social service systems at the district level. By focusing our activities on households, mothers, and children under 2 years of age, we achieved a greater impact in reducing stunting and increasing long-term uptake of key behaviors.

Haiti

In Haiti, SPRING focused on enhancing nutrition systems and building capacity to deliver high-quality nutrition assessment, counseling, and support (NACS) services, in close collaboration with the Ministry of Health's *Ministère de la Santé Publique et de la Population* (MSPP). The project strengthened nutrition assessment and counseling services (NACS) in 17 health facilities across the country's 10 departments. In close collaboration with the MSPP, SPRING developed a national infant and young child feeding (IYCF) training and counseling package and supported the finalization of the NACS training package. We left our Haitian counterparts with complete NACS, IYCF, and Group Education Techniques training packages; a pool of health facility trainers; and more than 500 trained health care workers with job aids and anthropometric equipment. The target facilities we worked with now understand the importance of the quality improvement process in the continuum of care and systematizing data use for decision making.

Kyrgyz Republic

In the Kyrgyz Republic, SPRING addressed stunting and anemia among women and children by promoting the uptake of 11 evidence-based practices tailored to the Kyrgyz context and targeted to women and children in the first 1,000-days window of opportunity. These interventions resulted in significant improvements of behaviors in project implementation areas, especially in exclusive breastfeeding and dietary diversity. Women's dietary diversity scores increased from an average of 4.1 food groups consumed to an average of 5.4 groups. Women in SPRING areas now consume increased amounts of dark green leafy vegetables, vitamin A–rich fruits and vegetables, and other fruits and vegetables. In SPRING implementation areas, exclusive breastfeeding more than doubled between the baseline and endline surveys, consumption of sugary and processed foods fell substantially, and children's minimum acceptable diet increased significantly from 42 to 54 percent in areas where SPRING worked.

Mali

In Mali, SPRING built resilience in the Mopti Region by preventing and treating undernutrition while targeting the critical "first 1,000 days" from pregnancy through a child's second birthday. The project forged important partnerships with local government institutions and implementing partners, providing nutrition-sensitive and nutrition-specific services to more than 165,723 community members. Collaborating with partners in 20 focus communes, SPRING used FNS, trainings in essential nutrition actions and essential hygiene actions, and community-led total sanitation to increase access to diverse and quality foods; access to quality nutrition services; and demand for and uptake of key agriculture, nutrition, and WASH-related services and practices.

Nigeria

In Nigeria, SPRING's initial work focused on reducing undernutrition and anemia and preventing stunting in Benue State and the Federal Capital Territory. In FY14, we revised our goals in response to USAID's desire to improve nutrition and food security outcomes within their U.S. President's Emergency Plan for AIDS Relief-funded programs for orphans and vulnerable children. At this time, we shifted our focus to reducing maternal and child undernutrition and improving HIV-free survival of infants and young children. SPRING improved IYCF by building capacity in the use of the *Nigeria Community Infant and Young Child Feeding Counselling Package* in facilities and communities throughout the country. After adapting and translating the package, we rolled it out across 16 states and 122 local government areas, training 2,678 people and reaching 165,295 more. Our efforts in Nigeria improved the social and policy environment for priority nutrition practices, enhanced the evidence base for using the counseling package, improved efforts to prevent undernutrition in orphans and vulnerable children communities, and contributed to an increase in exclusive breastfeeding in Kaduna State.

Sahel

In the Sahel, SPRING used innovative SBCC approaches to improve MIYCN and hygiene at the household and community levels. Working with Digital Green in Niger and Development Media International in Burkina Faso, we used community-based technology platforms to spread MIYCN and hygiene messages. This highly successful "community media" programming yielded tools, lessons learned, and substantial knowledge transfer to local partners. In 248 villages in Niger and 90 villages in Burkina Faso, 676 trained community-based mediators disseminated key nutrition and hygiene messages through 44 locally produced videos that reached 155,028 women, children, and men. SPRING also leveraged community radio for nutrition behavior change in Burkina Faso, reaching 3 million potential listeners. After SPRING provided 81 local entrepreneurs with video production capacity, mayors, local nongovernmental organizations, community development projects, and media organizations continued to work with SPRING-established community video hubs to create videos tailored to their specific needs.

Senegal

In Senegal, SPRING worked closely with existing organizations, platforms, and networks to improve nutrition of pregnant and lactating women and children under 2 years of age through agriculture, hygiene, and gender activities. We promoted nutrition-specific and nutrition-sensitive agriculture practices to increase demand for and access to improved nutrition inputs and services. Communication partners, including six community-based radio stations, created 15 radio spots that were broadcast 14,280 times and 30 interactive programs, reaching approximately 918,310 people with nutrition messages. SPRING also trained staff from partner organizations to create 10 local community videos and form local video production hubs. Producer network field agents and

community volunteers screened videos across 100 villages and facilitated discussions on different nutrition topics featured in the videos. We also established model micro-gardens, training 240 women and 25 field agents who, in turn, trained and supported approximately 2,700 women to set up their own micro-gardens across 90 villages.

Uganda

In Uganda, SPRING's work focused on reducing stunting, maternal and child anemia, and the percentage of children and adults with severe acute malnutrition. We did this by supporting national-level policies and guidelines for improved nutrition and by strengthening health and nutrition programming at the district level. Collaborating with district and national partners, USAID implementing partners, the Office of the Prime Minister, the Ministry of Health, and other organizations, we strengthened nutrition treatment and prevention services in hospitals and health centers in 51 facilities across 10 districts. We also enhanced linkages between health facilities and the community by training village health team members in counseling on IYCF practices. SPRING's support led to improvements in both the quality and quantity of services provided in health facilities, resulting in an increase in the percentage of clients in the target facilities receiving nutrition assessment—from 57 to 76 percent. We also helped revitalize the National Working Group on Food Fortification and the National Anemia Working Group, which support public-private collaboration on health and nutrition activities.

Conclusion

The SPRING partners credit USAID with a flexible, adaptable, and inclusive design of the cooperative agreement. Under USAID's guidance, we were able to evolve with the field and contribute during a very dynamic era for global nutrition. JSI, HKI, Save the Children, the Manoff Group, and IFPRI were honored to be USAID's partners in strengthening partnerships, results, and innovations in nutrition globally from 2011 to 2018. Through our work, "multi-sectoral nutrition" became better understood, more applied, and more impactful. We are proud of the legacy of learning documented at www.spring-nutrition.org, and trust our tools and resources will be useful for practitioners, researchers, program designers, implementers, and policymakers for years to come.

This report presents a broad summary of SPRING's activities and accomplishments over the life of the project, including infographics depicting country achievements (annex 3), but it is not meant to be a comprehensive accounting of the project's work over seven years. Please refer to the SPRING website (www.spring-nutrition.org) for more details on our work and results, as well as additional annual reports that are posted to the Development Experience Clearinghouse.

7 Take-Aways from 7 Years of SPRING

1. **Learning by doing, implementation science, and adaptive management are techniques well-suited to effective nutrition programming.**
2. **Integrated approaches and linkages between facilities and community are key.**
3. **Partnership is essential for multi-sectoral success.**
4. **A systems view is critical—especially when there is no system.**
5. **Measurement is challenging, but it can be approached usefully from many angles and in creative ways.**
6. **The global→country/country→global cycle works.**
7. **When you're learning, you'd better be sharing.**

Key Programmatic Activities and Achievements: Global Initiatives

In October 2011, the U.S. Agency for International Development (USAID) launched Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING), a seven-year cooperative agreement designed to bolster global and country efforts to scale up high-impact nutrition practices and policies. SPRING received core funds from the Bureau for Global Health and Bureau for Food Security to execute annual work plans designed to contribute to global evidence and understanding and provide technical assistance to USAID missions upon request. Tasked with executing the core-funded work plans, SPRING's Global Initiatives Team comprised the following groups made up of technical experts from SPRING consortium partners:

- Preventing Anemia
- Catalyzing Social and Behavior Change
- Strengthening Systems for Nutrition
- Linking Agriculture and Nutrition.

The summary below includes highlights for each team over the life of the project; for greater detail on project activities, refer to SPRING's Annual Reports, available on the Development Experience Clearinghouse.

Preventing Anemia

Background

In 2011, just before the start of SPRING, the World Health Organization (WHO) estimated that anemia affected 800 million women and children globally, especially impacting individuals in low- and middle-income countries. In the last two decades, limited progress has been made to reduce anemia rates, mainly because reducing anemia was synonymous with reducing iron deficiency, instead of using a multi-sectoral approach to address the complex interactions among anemia's multiple risk factors, as we now know is necessary. The prevention and control of anemia during the first 1,000 days was one of SPRING's core objectives. Recognizing the importance of anemia for maternal and child health and nutrition, SPRING's work on anemia focused on raising awareness of the multi-sectoral nature of anemia and building technical understanding and country capacity to address anemia. SPRING's anemia team renewed global attention to the gaps in evidence and programming that interfere with countries' ability to tackle anemia in a cost-effective way.

In Uganda, a mother feeds her child food mixed with micronutrient powder.

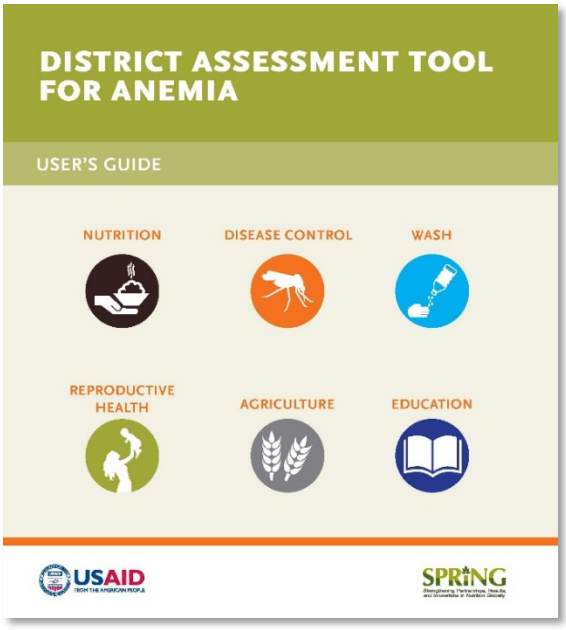
Major Accomplishments

Early in SPRING's work on anemia it was clear that increased resources, guidance, and capacity were needed to address anemia across sectors. The achievements of SPRING's anemia-specific portfolio positioned it as the go-to resource for the latest evidence and guidance on multi-sectoral anemia work. National multi-sectoral anemia platforms, supported by SPRING in a number of countries, have developed strategies and action plans that work across government ministries. We worked directly with district authorities to identify and prioritize effective anemia prevention and control interventions, and we showed how our tools and training curriculum can strengthen the capacity of district-level officials. We built global alliances and partnerships to carry out cutting-edge research and shared the results widely; we developed guidance to enable the global community to replicate our work. The anemia team's three pillars of action included country-led commitment and action, filling gaps in the evidence base with rigorous research, and building a global community to stimulate dialogue and interest in the challenge of anemia prevention and control.

Country-led commitment to multi-sectoral anemia programming at the national and district levels

Recognizing that countries needed action to address the causes of anemia within their borders, we focused on developing a validated approach that identified the main causes of anemia and then reviewed the status of interventions that could possibly reduce those causes, thereby reducing anemia. Working with national- and district-level stakeholders, we helped them understand and use the information to appropriately target interventions to the real causes of anemia. SPRING's enthusiastic promotion of this approach in Ghana, Sierra Leone, and Uganda led to a flurry of national-level activities. The governments in these countries commissioned landscape analyses of anemia and anemia programming involving the health, education, and agricultural sectors; this led to a recognition of the need for sustainable multi-sectoral anemia programs.

As a result, national anemia working groups were either formed or revived; in Sierra Leone and Uganda, these groups also formulated national strategies for anemia prevention and control. The increased awareness and attention to anemia in these countries is, in no small part, because of the unstinting technical support that SPRING contributed to these national efforts. An essential component of SPRING's approach was to increase leadership and technical capacity within the country, as exemplified by our work in Ghana's Northern Region. In that area, using a Ghana-specific curriculum we developed, SPRING certified 90 health personnel as master trainers who could teach others how to implement multi-sectoral anemia interventions. The master trainers trained 750 health workers and volunteers across the region, and the training curriculum is being adopted across the country.



SPRING developed DATA to assist countries in strengthening anemia programming at the district level.

The seeds of national action can arise from small, but important, activities; in Ghana, simply carrying out a landscape analysis led to the country-wide rollout of anemia training. National policies and strategies cannot be effective without also strengthening anemia program implementation at the district level. In Ghana, Uganda, and Nepal, SPRING's District Assessment Tool for Anemia (DATA) helped district personnel translate the technical aspects of anemia prevention and control into easy-to-understand actions and plan the best anemia intervention to overcome local implementation challenges at the district level. District personnel are no longer hampered by inaction due to a lack of data since the DATA tool provides a process for prioritizing anemia actions in that exact situation.

Advancing evidence for anemia through research and implementation science

Notwithstanding our increased understanding of the multi-factorial causes of anemia, huge evidence gaps surrounding anemia remain. That is why the use of appropriate research—its rigor, conduct, and communication—was central to SPRING's anemia approach. SPRING made cutting-edge research accessible to governments and implementing partners in countries. The systematic approach we took to micronutrient powders (MNP) is an ideal case study in the collaborative nature of implementation research. We led a global technical consultation to synthesize cross-country learning on MNP implementation that identified the need for additional research on the real-world implementation of MNP programs. To meet this need, we subsequently collaborated with the Government of Uganda and implementing partners to launch a pilot study on MNP distribution, generating evidence on elements of an MNP program that established guidelines for its implementation in Uganda. As a result of SPRING's efforts to coordinate MNP findings, there is a more robust body of evidence available around MNP effectiveness, cost, and operations, with implications for Uganda's anemia funding priorities. SPRING's collaborative approach to cutting-edge research extends to other topics, such as variations in hemoglobin measurement, which was investigated by the SPRING-led HEmoglobin MEasurement (HEME) working group, and the effect of inflammation on iron biomarkers, which was examined by an international consortium led by the Centers for Disease Control and Prevention.

SPRING's contribution to anemia prevention and treatment was painstaking; detailed documentation of our research activities is available through the project website. We authored publications, briefs, and training manuals on micronutrient interventions, mass fortification, and the effectiveness of nutrition-sensitive and nutrition–specific interventions for anemia. These documents and others translate new and complex research into action-oriented guidance.

Building a global community of anemia practitioners

For anemia programs to succeed, practitioners must learn from one another and use the latest evidence to implement multi-sectoral context-specific programs. As a global hub for anemia resources, SPRING disseminated information on anemia research and programming to various sectors and stakeholders. In collaboration with WHO and the United Nations Standing Committee on Nutrition (UNSCN), the project raised anemia's global visibility by creating and managing the Accelerated Reduction Effort on Anemia (AREA) community of practice, a vibrant community of 700 members from more than 65 countries. Members joined the online platform to discuss and debate challenges to reducing anemia. Through this platform, we held webinars and online discussions and disseminated a quarterly anemia resource review. SPRING also maintained a major presence at Micronutrient Forum global conferences (held every four years) to share the latest evidence, experiences, and news about anemia. In collaboration with the Maternal and Child Survival Program (MCSP), SPRING revived the U.S. Agency for

International Development (USAID) Multi-sectoral Anemia Task Force, which presents the latest information on anemia to USAID, its missions across the world, and its implementing partners. SPRING participation in these dissemination channels helped keep anemia reduction at the forefront of global consciousness.

Catalyzing Social and Behavior Change

Background

SPRING, with the support of USAID's Bureau for Global Health, embraced a behavior-centered approach to the design and implementation of its global social and behavior change communication (SBCC) initiatives to promote high-impact, nutrition-related behaviors to reduce stunting and anemia. Over the last seven years, SPRING's SBCC team has reflected on longstanding challenges to nutrition behavior change; explored new thinking, innovations in technology, and other opportunities to move the field forward; built the evidence for effective approaches; and taken solutions to scale. We worked to reach diverse and often marginalized groups; built creative partnerships; designed effective community-based programming; and amplified what we have learned by sharing our strategies, approaches, tools, and results with multiple stakeholders and global networks. In addition to undertaking work through SPRING's centrally funded global initiatives, the SBCC team was also mandated to provide ongoing, targeted, technical support to SPRING's country teams in Bangladesh, Uganda, Haiti, the Kyrgyz Republic, Nigeria, and Senegal encouraging at-scale nutrition SBCC and working to creatively measure the impact on behaviors. SPRING's SBCC team had a significant positive impact on nutrition SBCC, especially around the first 1,000 days, and, more recently, around adolescent nutrition. A few highlights are captured below.

A production team in India films a community video on nutrition-sensitive agriculture.

Major Accomplishments

Defining nutrition SBCC

During project start-up and throughout the life of the project, SPRING was challenged by competing definitions and conflicting terminology used to describe SBCC. To encourage consensus, SPRING helped USAID broadly define nutrition SBCC—in relationship to the agency's multi-sectoral nutrition strategy—as a "set of interventions that combines elements of interpersonal communication, social change and community mobilization activities, mass media, and advocacy to support individuals, families, communities, institutions, and countries to adopt and maintain high-impact nutrition-related practices." This definition laid the groundwork for a conceptual framework for nutrition SBCC that encapsulates much of the experience and learning resulting from SPRING.

Testing innovations in nutrition SBCC

SPRING also responded to USAID's challenge to move nutrition SBCC away from traditional approaches that rely on facility and community health agents, communication techniques, and advocacy tools, acknowledging that our understanding of behavior change and the tools at our disposal are rapidly evolving. Identifying and testing highly promising nutrition SBCC innovations, including information communication technologies (ICT), became part of SPRING's mandate, including building the evidence around these techniques and tools, developing program guidance, and sharing the learning with the global community. In year one, SPRING partnered with Digital Green to test the feasibility of adapting its community video and portable pico projector approach to promote high impact maternal, infant, and young child nutrition (MIYCN) and hygiene practices in Odisha, India. This study enabled SPRING to design a community video model—borrowed from agriculture—to promote nutrition-specific practices. The SBCC team then adapted the approach in Niger, Burkina Faso, Guinea, and Senegal, adjusting elements to meet the specific needs and objectives of each project.

Designing the future of SBCC for nutrition during the first 1,000 days and beyond

In the second year of the project, SPRING completed a major systematic literature review that identified elements of effective SBCC approaches to promote high-impact MIYCN practices. This review gave program planners and policymakers a landscape of documented approaches to promote individual and social behavior change related to nutrition, and it highlighted gaps in the evidence. Beginning in project year (PY) 3, SPRING partnered with the Global Alliance for Improved Nutrition (GAIN) and USAID to consolidate the existing evidence and experience from the field and convened a series of meetings with global SBCC thought leaders. A workshop was held in April 2014 and a larger conference organized in November of that year, bringing together high-level donors, program planners, government officials, and private sector communication and behavior change specialists to focus attention on designing the future of SBCC for nutrition. The meeting generated a Strategic Agenda for At-Scale Nutrition Social and Behavior Change Communication, putting SPRING's SBCC initiatives in the global nutrition spotlight.

Figure 3. The Strategic Agenda for At-Scale SBCC

The Strategic Agenda for At-Scale Nutrition SBCC is a blueprint for creating SBCC programs that contribute to the social and individual behavior changes needed to meet broad nutrition commitments.

Building the evidence for effective SBCC approaches

As research gaps were uncovered and prioritized, SPRING identified resources and strategic partnerships to build the evidence base. Of particular importance was SPRING's collaboration with the United Nations Children's Fund (UNICEF) and the Nigerian Federal Ministry of Health (FMOH) in conducting a robust evaluation of the *UNICEF Community Infant and Young Child Feeding (C-IYCF) Counselling Package* in Kaduna State, Nigeria. Although

elements of this global package, originally developed in 2010, were implemented in more than 50 countries and 29 Nigerian states, the package had never been formally evaluated. SPRING's support for the research in Nigeria addressed a crucial evidence gap around the effectiveness of this intervention. UNICEF headquarters is currently using the results to guide decisions by the Nigeria FMOH, and many other country nutrition programs, as they update or modify the package to address lessons learned.

SPRING's implementation of community video and community radio programming in the Sahel—in partnership with Digital Green, Development Media International (DMI), USAID's resilience program in the Sahel (REGIS-ER), and other local partners—required an initial SBCC landscape assessment, the adaptation of these platforms to the resilience setting, and a commitment to implementing at scale while building the evidence. SPRING used a mixed method approach to evaluate our community video work in Niger, including a quantitative study and qualitative participatory research to assess the acceptability of the intervention. For more information, see the Sahel section of this report.

Moving adolescent nutrition, diets, and eating practices into focus

Recognizing the lack of strong evidence and global guidance around improving the diet and eating practices of adolescents—especially adolescent girls and women of reproductive age—the SPRING SBCC team investigated this gap. In PY3, we commissioned an initial review paper then co-convened a technical consultation with the Pan American Health Organization (PAHO), USAID, and Food and Nutrition Technical Assistance Project (FANTA) in April 2015 (PY4). In PY5, based on recommendations from that consultation, SPRING supported the development of a WHO summary of guidelines on adolescent girls' nutrition and commissioned a high-profile systematic review of the diet and eating practices of adolescent girls in low- and middle-income countries. This work, presented during a stakeholder consultation convened by PAHO, USAID, and SPRING in October 2017 greatly advanced the adolescent agenda, culminating in the Adolescent Nutrition Call to Action, which focused on the need for better data to drive better policies and programs in the future. All 29 organizations represented at the consultation endorsed the call, along with more than 100 organizations that have joined since its launch in June 2018.

Sharing resources and training tools and building capacity at multiple levels

SPRING's SBCC work is recognized globally for the many state-of-the-art resources we developed and disseminated, including high-quality SBCC tools and training materials that are easily adapted to local settings. For example, in PY6 we published a suite of resources promoting the photo-to-illustration (PTI) process as a way to improve the quality of nutrition SBCC print materials. The team developed a video tutorial and written guide that synthesize its experiences creating and adapting PTI images for program implementers. In collaboration with UNICEF, we also designed and launched the Infant and Young Child Feeding (IYCF) Image Bank, which houses a collection of more than 700 original IYCF images and adaptations from UNICEF's C-IYCF Counselling Package.

SPRING's *Photo-to-Illustration Guide* orients program managers on the PTI process and its uses for developing nutrition SBC visuals.

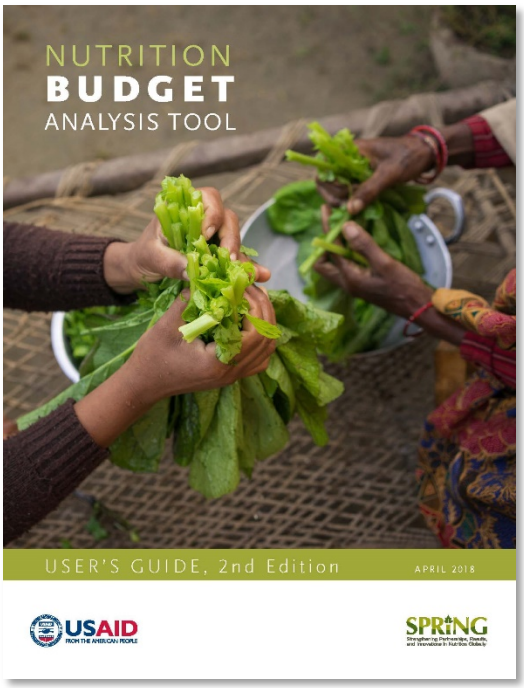
Over the life of SPRING, in addition to the community media guides and related training materials already highlighted, the SPRING SBCC team developed or adapted effective C-IYCF training materials for Nigeria, the

Kyrgyz Republic, and Haiti; MIYCN/hygiene and nutrition-sensitive agriculture (NSA) SBCC materials for India, Niger, Burkina Faso, Guinea, and Senegal; Emergency Nutrition Network (ENN) materials for Bangladesh; and a basic training package on nutrition and hygiene for orphans and vulnerable children (OVC), aged 2 to 17 in Nigeria. We also contributed to an integrated adolescent nutrition training package in Nepal and supported ongoing capacity development for nutrition SBCC through an online course aimed at Accelerating Behavior Change in Nutrition-Sensitive Agriculture; the revision of USAID's Global Health e-learning Center nutrition course; and the development of a new e-learning course on social and behavior change for nutrition.

Strengthening Systems for Nutrition

Background

When SPRING began, there was a growing awareness of the need for multi-sectoral programming for nutrition. Yet, during SPRING's early years, it became increasingly evident that multi-sectoral programming alone is not enough to make sustainable improvements in nutrition at scale. Therefore, during SPRING's second year, we began exploring how best to apply systems thinking to improve nutrition, growth, and development. We hypothesized that, without systems thinking, efforts may not adequately address key determinants of nutrition, anticipate unintended consequences, or strengthen existing systems. Therefore, we developed a framework to guide us. This framework, along the related evidence and guidance we subsequently produced, has guided a systems approach to SPRING's country and global work and contributed to new thinking for future programming.



SPRING created the *Nutrition Budget Analysis Tool* to help stakeholders understand resource gaps and advocate for adequate budgets.

Major Accomplishments

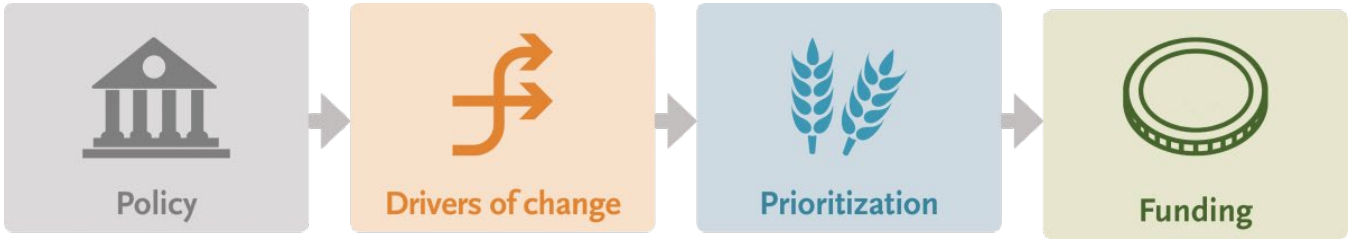
During SPRING's seven years, we built evidence and developed guidance particularly related to policies and governance for nutrition, financing for nutrition, a coordinated workforce for nutrition, the collection and use of multi-sectoral information on nutrition, and the application of systems thinking. Rooted in USAID's Multi-Sectoral Nutrition Strategy (2014–2025), SPRING further defined systems thinking and identified cross-cutting factors that influence, interact, and impact nutrition outcomes. The tools and evidence we developed on strengthening systems for nutrition have informed governments as they revise policies and information systems for nutrition, implementing partners as they track nutrition financing, and health ministries as they consider the role of health workers in nutrition service delivery. The cumulative impact of our work helped bring the concept of systems thinking into practical action, providing guidance and tools to facilitate collaboration across sectors.

Paving the way for systems thinking for nutrition

While SPRING built evidence and developed guidance and tools for individual aspects of the systems thinking framework—such as financing—our priority has been to make systems thinking accessible and make the application of a systems thinking approach feasible and operational. In addition to our initial working paper, *Systems Thinking and Action for Nutrition*, SPRING prepared two country case studies in Ghana and the Kyrgyz Republic that mapped project activities to our systems-thinking framework. Based on that experience, we developed a *Assessing the Application of Systems Thinking for Nutrition* tool that government representatives—as well as funding partners, program planners, and implementing agencies—can use as part of a systems approach to assess, design, plan, and implement programs. We shared our approach to systems thinking through various webinars and conference presentations. As actors everywhere move forward to improve nutrition, they will be able to more easily and effectively consider the complexities of malnutrition and, as a result, create better opportunities for communities across the globe.

Providing evidence of the role of policies, governance, and good data for nutrition

Before developing our systems framework, we began exploring the role of national nutrition policies on nutrition programming. SPRING's *Pathways to Better Nutrition Case Studies*, conducted in partnership with the nutrition secretariats in Nepal and Uganda, helped build the evidence base and provided practical recommendations for translating multi-sectoral nutrition policies into increased nutrition action, particularly the funding and implementation of nutrition interventions. The findings and recommendations were made accessible through engaging visualizations, dissemination events, and inclusion in the Food and Nutrition Bulletin and the Emergency Nutrition Network (ENN) Field Exchange. Government ministries and implementing partners (including the Scaling Up Nutrition [SUN] Movement) have subsequently used SPRING's work to advocate for funding, spending, and attention to governance, particularly coordination mechanisms for nutrition.



The Pathways to Better Nutrition Case Studies explored how nutrition-related activities are prioritized and funded in Nepal and Uganda by stakeholders across multiple sectors.

SPRING produced several documents focused on the role that policy plays in improved nutrition. SPRING reviewed policy documents for nutrition, noncommunicable disease (NCD) prevention, and food security from 29 USAID priority countries to determine the extent to which these policies consistently include "double duty" actions that are known to effectively decrease the prevalence of under- and over-nutrition, stunting, and overweight. We shared our findings in an easy-to-read brief for policymakers, *Addressing the Dual Burden of Malnutrition Across Policies*, and in a forthcoming issue of the *WHO Bulletin*.

Finally, information or data from a variety of sectors (agriculture, finance, education, health, etc.) play an important role in improving nutritional outcomes for women and children by helping program managers, policymakers, and international organizations better understand nutrition needs, make more informed decisions, plan more

effectively, and advocate for improved nutrition funding. SPRING has explored how to fill data gaps for nutrition across sectors and developed new tools and guidance to use the existing data. Major SPRING activities in this area included organizing a webinar series on Better Data for Nutrition; leading a collaborative effort to repurpose Household Consumption and Expenditure Surveys (multipurpose household surveys) to make them more attuned to countries' nutrition policy needs and strategies; refining a multi-partner tool for rapidly evaluating facility-level nutrition services; and the previously-mentioned tool for analyzing funding allocated by countries to implement nutrition activities.

Demystifying financial analysis for nutrition

The 2014 launch of USAID's *Multi-Sectoral Nutrition Strategy* highlighted the importance of financial systems and support for nutrition, at both the national and sub-national levels. An acute shortage of nutrition financing data inspired us to focus on developing methods and tools for tracking financial support, estimating what funding is allocated to implement nutrition activities, and how much of that funding was spent. Building on our work in Nepal and Uganda under the Pathways to Better Nutrition (PBN) case studies, SPRING developed the *User's Guide to the Nutrition Budget Analysis Tool* to help countries learn which sectors or donors are funding nutrition actions, determine the resource gaps, and advocate for additional funding. We designed the methodology and tool based on the understanding that nutrition is a multi-sectoral issue and that the process and findings must be owned by government counterparts. In 2015, in collaboration with the SUN Movement, Results for Development (R4D), and Maximising the Quality of Scaling Up Nutrition Programmes Framework (MQSUN), SPRING launched a global technical consultation group of actors involved in global nutrition budget analysis to share experiences, improve the state of the art for nutrition financial tracking, and increase the consistency of approaches followed. SPRING shared the findings from the PBN case studies, both related to policy, as well as the budget analysis tool, during numerous conferences, webinars, dissemination events, and in blogs. Our work in this area has been published in the *Food and Nutrition Bulletin* as well as *ENN Field Exchange*, and was featured in the *2016 Global Nutrition Report*. Through this work, SPRING made great strides in demystifying nutrition financing.

Expanding definitions and increasing understanding of the nutrition workforce

Although researchers identified a set of essential nutrition actions for improving growth and health, coverage of these interventions remains insufficient in most parts of the world. A serious barrier to effective coverage is a health workforce that is often ill-prepared and over-burdened and, therefore, unable to integrate nutrition into their work. In response, SPRING developed a *Nutrition Workforce Mapping Toolkit* to help countries understand which nutrition actions health workers at different levels are expected to do, trained to do, and actually do. Findings from such a mapping exercise are needed to ensure the sustainable delivery of nutrition services. Taking this one step further, SPRING developed additional guidance: *Raising the Status and Quality of Nutrition Services Within Government Systems*, a *Community Health Worker Nutrition Advocacy Tool*, *and Building a Shared Vision for Good Nutrition, Growth, and Development in the Community: A Recipe for Policymakers, Planners, and Program Managers*, along with adding nutrition indicators to the Community Health Systems Catalog developed by Advancing Partners and Communities. The goal of these products was to help programs identify gaps in nutrition service delivery, strengthen the delivery of nutrition-related services at various levels, and broaden the definition of the nutrition workforce, particularly at the community level. Not only did we engage technical experts across sectors in developing this work, but we also disseminated it to a multi-sectoral audience during webinars and conference presentations.

Linking Agriculture and Nutrition

Background

An agriculture extension worker picks cowpeas from the dry season crop in Guinea.

In 2012, the USAID Bureau for Food Security (BFS) tasked SPRING with leading a series of Agriculture to Nutrition Global Learning and Evidence Exchange (AgN-GLEE) events. Attended by USAID staff and implementing partners in four different regions, this represented the first significant effort to build Feed the Future practitioners' capacity to better link agriculture and nutrition activities. SPRING capitalized on the momentum from the AgN-GLEES, and the research community's call, to invest in more nutrition-sensitive programming—per the *2013 Lancet Series on Maternal and Child Nutrition*—to launch our work to improve the linkages between agriculture, economic growth, and nutrition. Over the life of the project, we built the evidence base for nutrition-sensitive agriculture and created capacity for communities and program implementers to implement nutrition-sensitive agriculture activities. We also shared our learning and expertise so that SPRING's tools, resources, and lessons will continue to contribute to improved nutrition beyond the life of the project.

Major Accomplishments

Building the evidence base

Since the publication of SPRING's groundbreaking 19-country landscape analysis of Feed the Future investments, *Leveraging Agriculture for Nutritional Impact through the Feed the Future Initiative*, the project has generated and synthesized evidence on nutrition-sensitive agriculture. One of SPRING's primary aims was to take the existing thinking on how agriculture can contribute to nutrition and communicate it to program designers in a practical way. We distilled conceptual frameworks for understanding the linkages between agriculture and nutrition from the existing literature into an easy-to-understand three-part pathways framework. The pathways highlight the links between production, income, and women's empowerment as ways to improve nutrition through agriculture. SPRING's pathways and accompanying set of four technical briefs have been the foundation for much of our work guiding reviews and assessments and serving as an organizing framework for our tools. Our pathways have also influenced the research, presentations, and tools developed by other organizations, such as Catholic Relief Services and FHI 360; and peer USAID projects, like the Gender Climate Change and Nutrition Initiative (GCAN).

Following publication of the briefs, SPRING focused on documenting the "how to" for operationalizing the pathways. We conducted process reviews of Feed the Future activities in Ethiopia, Guatemala, Rwanda, Senegal, and Zambia, and a case study of a homestead food production project in Burkina Faso to highlight and share better practices in integrating nutrition into agriculture investments. These reviews documented activity experiences, successes, and lessons learned, and provided suggestions for future programs to apply.

Building capacity for nutrition-sensitive agriculture activities and practices

SPRING's efforts to enhance the evidence base for nutrition-sensitive agriculture are paired with work to ensure that implementers have the capacity and tools necessary to put evidence into practice. SPRING provided hands-on technical assistance to USAID staff in Washington and Feed the Future focus countries throughout the world to help them better understand and incorporate the key principles of nutrition-sensitive agriculture. SPRING supported different countries to address a range of program learning needs, from designing and monitoring activities and creating integrated approaches to implementing activities and developing tools for capacity building.

SPRING worked at the individual activity level and at the broader country strategy level to support the design and monitoring of effective nutrition-sensitive agriculture. In Sierra Leone and Guatemala, we worked with Feed the Future value chain activities to identify leverage points for nutrition, helping activity managers address gaps in nutrition-sensitive programming in their activity's zone of influence, while also aligning with or supporting the activity's economic growth objectives. SPRING conducted a multi-sectoral nutrition assessment in Nigeria and a desk review of the available literature in Niger to identify the drivers of malnutrition in each country that informed the design of the countries' global food security strategies.

SPRING developed this easy-to-read infographic to help convey key messages about linking agriculture and nutrition.

In Rwanda, we worked with USAID's implementing partners to improve cross-activity, multi-sectoral coordination and collaboration to improve nutrition outcomes. We helped develop the Mission's first-ever integrated work plan to leverage resources and individual partners' expertise and to increase efficiencies in bringing nutrition-sensitive and nutrition-specific strategies together. Now, in its second year of implementation, the Mission documented that the work plan brought about qualitative improvements in service delivery and activity outcomes for nutrition; USAID is now testing quantitative methods to help track the results of the improved collaboration.

SPRING's technical assistance in design and capacity building for nutrition-sensitive agriculture frequently underscored the need for standardized materials or tools that could be adapted across a range of contexts. SPRING wanted to ensure that teams—whether from USAID missions, local or international nongovernmental organizations (NGOs), or beneficiary communities—could continue to implement and scale up nutrition-sensitive agriculture practices. One of the first significant gaps we found was in conducting a thorough multi-sectoral context assessment. Therefore, in addition to supporting assessments directly, SPRING developed a Context Assessment Tool that provides guidance for starting the process and contains a searchable database of over 50 tools from which users can select, based on areas of the agriculture to nutrition pathways they want to explore.

Making agriculture work for nutrition requires adopting improved practices. SPRING leveraged its experience and technical expertise in social and behavior change (SBC) programming to develop tools and guidance focused on a

behavior-centered approach to nutrition-sensitive agriculture. Our technical assistance with partners in several countries—such as Ghana, India, and Rwanda—helped practitioners identify nutrition-sensitive practices, tailor and prioritize them for specific target populations, and ensure their increased use. Our Accelerating Behavior Change in Nutrition-Sensitive Agriculture online training makes this content accessible to a wider audience.

As a culmination of SPRING's nutrition-sensitive trainings and workshops, we developed a comprehensive *Nutrition-Sensitive Agriculture Training Resource Package* that features sessions on a range of topics, including the pathways between agriculture and nutrition, behavior change concepts for nutrition-sensitive agriculture, and designing effective nutrition-sensitive activities. By building capacity and sharing our tools, SPRING helped build a global community of practice that is better equipped to design, fund, and implement nutrition-sensitive agriculture activities.

Sharing expertise in nutrition-sensitive agriculture

One of SPRING's original objectives was to "share, learn, and build an active community of practitioners." We integrated this principle into our work with a firm commitment to sharing tools, evidence, and knowledge from our team and the community in an easy-to-use, actionable form. Through consistent, high-quality communications, SPRING established itself as a leader in the nutrition-sensitive agriculture community of practice. Beginning in 2013, SPRING increased its visibility among implementers by hosting the Ag2Nut community's monthly calls. Since 2014, SPRING has also published a monthly *Agriculture and Nutrition Resource Review,* producing 43 editions, sharing 615 resources, and reaching 4,300 subscribers. SPRING received overwhelmingly positive feedback on the *Resource Review*; readers said they rely on it as a key source of published reports, events, and updates on the intersection of agriculture and nutrition.

SPRING also shared its work regularly through monthly webinars, presentations, workshops, and at conferences around the world, allowing the community to engage with our material, adding their questions and experience, and, overall, enriching the discussion around nutrition-sensitive agriculture. SPRING highlighted important findings and themes through blog posts on Agrilinks and beyond, news stories, and videos, including the overview *Looking Beyond Food for Better Nutrition.* SPRING's work will also live on in publications, such as *Advances in Food and Nutrition Research* and *Emergency Nutrition Network*, making our work in linking agriculture and nutrition available to future implementers.

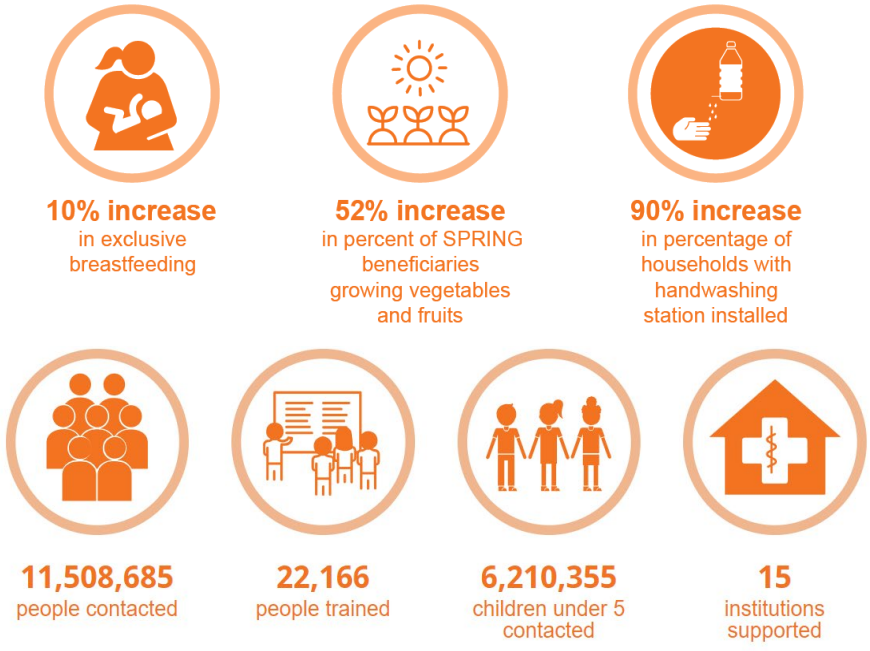
Key Programmatic Activities and Achievements: Country Initiatives

Every country in the world faces nutrition challenges, from stunting to obesity. The causes of malnutrition are complex, multi-sectoral, and unique to each country's geography, culture, infrastructure, and many other factors. Over the life of the project, SPRING had a long-term presence in 12 countries and provided technical assistance in more than 20 countries in all regions of the world. SPRING's Country Initiatives team provided oversight and technical support to our teams of host country nationals as they implemented diverse programs in response to local needs and the goals of host-country governments. Across all of our programs, SPRING put USAID's Multi-Sectoral Nutrition Strategy into practice, drawing together diverse disciplines to tackle the causes of malnutrition by improving the diversity, quality, and availability of food; supporting nutrition-sensitive and nutrition-specific care-giving; and increasing access to health care and a hygienic environment. The summaries below highlight our key programmatic activities and achievements over the life of each SPRING country program. For more details, refer to each country's final report, available on the Development Experience Clearinghouse.

SPRING/Bangladesh: 2012–2017

SPRING officially launched activities in Bangladesh in April 2012. After receiving letters of support from government directorate generals and securing a tripartite memorandum of understanding from the National Nutrition Services (NNS) and the Revitalization of Community Health Care in Bangladesh (RCHCIB)—both under the Ministry of Health and Family Welfare (MOHFW)—the project quickly moved forward to identify health facilities and workers with whom we could begin our work. The project also received support from the Ministry of Agriculture (MOA), which allowed us to work through the Department of Agricultural Extension and its hundreds of frontline agricultural extension officers, which, at the time, was a very innovative approach. SPRING used a first 1,000-days approach, looking at the critical window of a child's early development between the time a woman becomes pregnant and the child's second birthday. As such, children under 2 years of age, as well as pregnant and lactating women (PLW), were the project's primary target groups. SPRING's partnership with the two Government of Bangladesh (GOB) ministries helped us reach millions of people through the existing platforms and channels.

Figure 4. Bangladesh Life-of-Project Results and Nutrition Outcomes



SPRING implemented an innovative, scalable, and sustainable community-based, multi-channel, integrated nutrition program between April 2012 and June 2017. During this 5-year period, the project reached more than 125,000 PLW and their children through its farmer nutrition schools (FNS) approach, establishing nearly 6,500 FNS. Further, SPRING trained and provided supportive supervision to more than 4,000 frontline health staff from more than 1,400 health facilities, as well as nearly 1,000 frontline agriculture staff. We also brought the GOB departments of family planning, health services, and agriculture extension together, for the first time, around the issue of community nutrition. Improved nutrition practices were sustained at the community level a year or more after the FNS work finished, an indication of the long-term impact of our work. There was also strong evidence of spillover of improved behaviors and practices to non-beneficiaries in SPRING's working areas.

Innovation and Activities

Within the MOA, SPRING trained nearly 1,000 frontline and supervisory level staff from the Ministry's Department of Agricultural Extension, known as sub-assistant agriculture officers (SAAO). We improved the capacity of these staff members to understand and deliver key messages on nutrition during their extension work with existing farmer groups and courtyard sessions. Through this trained cadre of frontline workers, in our 5-year implementation period, SPRING made more than 1.3 million contacts that focused on nutrition. Our efforts to integrate nutrition did not just focus on "tacking on" nutrition messages to other existing activities or messaging, but, instead, we carefully tailored and adapted the essential nutrition actions (ENA) and essential hygiene actions (EHA) in ways that fostered a natural integration with ongoing agriculture work. We accomplished this by developing a curriculum—our *Community Worker Guide and Handbook*—that is specifically designed for non-health frontline workers. This effort not only made good use of an existing government channel through which nutrition messages could be delivered, but it also helped the GOB's efforts to mainstream nutrition throughout the government system. Introducing nutrition through an agriculture lens helped provide a platform through which nutrition-specific and nutrition-sensitive discussions could occur, enabling better collaboration and coordination among various government and nongovernment partners around nutrition.

A mother and her child use a tippy tap to wash their hands.

SPRING's innovative FNS approach was another example of how we mobilized community members and used the existing resources and structures to facilitate improved nutrition. SPRING merged proven interventions, including the farmer field school methodology (farmers learn by doing), the homestead food production (HFP) methodology (people learn about nutrition-diversified home garden foods), ENA (focuses on action-oriented messages during the first 1,000 days), and EHA (embeds hygiene practices into nutrition and HFP activities) to create the FNS approach. The FNS approach is an excellent platform for implementing both nutrition-specific and nutrition-sensitive activities because it focuses on learning by doing, and it uses a discovery approach rather than a hierarchical or classroom style setting. It builds women's confidence, strengthens community bonds, promotes

resilience, empowers women to take charge of their family's health and nutrition, strengthens ties to local health and agricultural workers, and shows other community members the power of small, doable actions.

Results and Reach

SPRING implemented the project across many *upazilas* (sub-districts) along the southern coastal belt of Bangladesh, in the Barisal and Khulna divisions, which falls within the Feed the Future zone of influence. We started with 15 *upazilas* in 2012 and successfully scaled our activities to 40 *upazilas* by 2013. SPRING remained in these 40 *upazilas* to both deepen and widen coverage to as many in our target population as possible. When SPRING finished activities in 2017, we estimate that we reached 60 percent of the target population of PLW within the two poorest wealth quintiles.

Through several applied research and evaluation studies carried out throughout the project, as well as through our program monitoring data, SPRING learned that innovative, multi-sectoral programs can be scaled up over a large geographic area and can lead to important behavior changes for improved nutrition that are sustained over time. Women's and children's dietary diversity increased dramatically, from an average score of 3.9 to 6.0 over nine months and remained high, at 5.6, even a year after the program finished. We also learned that the project led to other important—but unexpected—outcomes, such as increased women's empowerment, important "spillover" effects of the FNS among neighboring non-FNS households, and enthusiasm from the Department of Agriculture Extension (DAE) to promote and disseminate nutrition messages. We learned that it is beneficial and cost-effective to focus on multi-sectoral programs that use simple innovations and also that community enthusiasm can be harnessed to leverage larger and more sustainable results.

Through SPRING's FNS work, we learned that women are not only resourceful with their time and interested in taking part in small-scale food production activities, but that husbands and mothers-in-law from these households are also willing to help and support women. Further, we learned that the FNS approach appears to empower rural women. Through SPRING's research on the Women's Empowerment in Agriculture Index, we learned that women who participated in a SPRING FNS had higher empowerment scores and enjoyed greater parity with the male head of the household.

SPRING/Ghana: 2014–2017

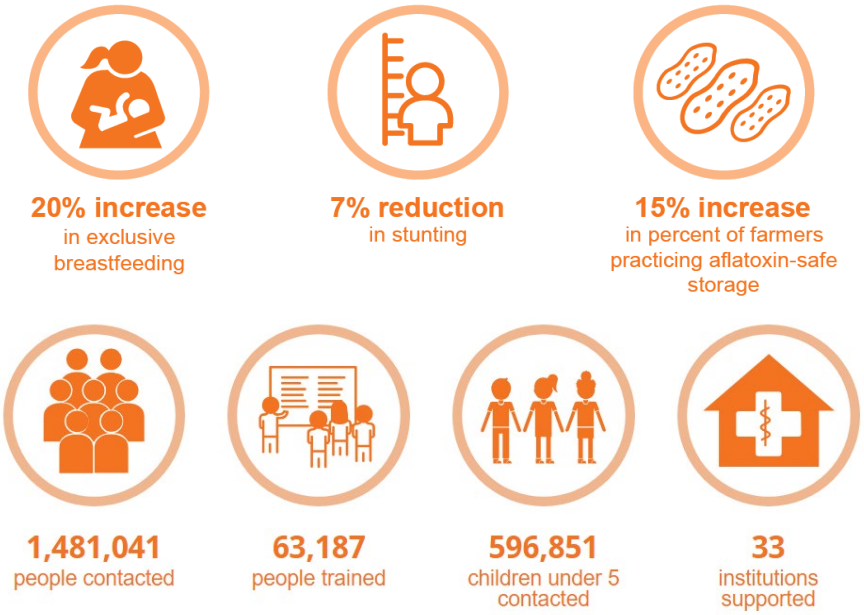
In 2014, SPRING began work in Ghana after a request from USAID/Ghana for support in reducing stunting in the Feed the Future zone of influence in the Northern and Upper East Regions. To help achieve this goal and improve nutrition in these areas, SPRING developed the "1,000-day household approach," a multi-sectoral strategy focused on linking nutrition; agriculture; and water, sanitation, and hygiene (WASH), with an emphasis on priority household actions to address the underlying causes of poor nutrition among PLW and children under 2 years of age.

During the three years from February 2014 to September 2017, SPRING's multi-sectoral approach and focus on 1,000-day households reduced stunting from 20.9 to 16.9 percent among children under 2 years of age and increased the prevalence of children under 2 receiving the minimum acceptable diet from 9.5 to 29.5 percent.

IYCF

SPRING worked at both the community and facility levels to improve nutrition by promoting optimal feeding and hygiene practices. We updated counseling materials that significantly improved the quality of IYCF services at health facilities. We also trained health providers to correctly monitor children's growth, over time, to provide targeted counseling to caregivers and mothers. We trained and supported more than 1,500 facility-based health providers and 2,400 community health volunteers who conducted peer education and behavior change support in 1,000-day households within their respective communities, including training 4,843 women in mother-to-mother support groups. SPRING also piloted a father-to-father support group program in four communities to engage more men, especially fathers, on malnutrition prevention and IYCF promotion.

Figure 5. Ghana Life-of-Project Results and Nutrition Outcomes



To ensure the quality of health services at both the facility and community levels, we established a quality improvement (QI) program that examined how improved nutrition service delivery could help staff provide better care and increase demand for nutrition services from the community. We ultimately trained staff at 95 health facilities and on 150 community teams.

Anemia

Because anemia remains a challenging health issue for women and children in 1,000-day households, we designed and rolled out a comprehensive multi-sectoral anemia reduction program package, which we used to train more than 450 staff from across 280 health facilities in our zone of influence. Immediate results included a rapid increase in hemoglobin testing and improvement in the quality of anemia counseling for pregnant women attending antenatal care services. We also successfully introduced and piloted the use of a district assessment tool for anemia, which allowed local districts to better collect information about the underlying causes of anemia in their areas and helped them use data to address these causes across government sectors.

WASH

Our "WASH 1,000" approach, also designed around the 1,000-day household, included community-led total sanitation (CLTS), plus a focus on four key hygiene behaviors: disposal of child and adult feces, handwashing at critical times, promotion of clean drinking water, and the creation of clean play spaces for children. By the end of the project, more than 9,000 households had built latrines in the 405 communities where we worked. A total of 193 communities were declared open defecation free. Survey respondents who knew critical times of

handwashing increased from 51.9 percent to 64.1 percent, and the percentage of households with functional tippy taps (simple handwashing devices) in recommended locations increased from 1.4 to 16.6.

Agriculture

We based our agriculture approach on the farmer field school (FFS) model and focused on aflatoxin reduction in groundnuts to increase the safety of this nutrient-rich staple food. We trained 274 agriculture extension agents to facilitate FFS, who, in turn, trained nearly 20,000 groundnut farmers (14,259 were women). Our work on aflatoxin prevention and reduction increased the prevalence of farmer knowledge about aflatoxin from 22.1 to 49.2 percent. Our agriculture work also included promoting consumption of nutrient-dense foods, including orange-fleshed sweet potatoes and vitamin A–enriched maize.

Farmer field schools in Ghana empower women, training them in the production of safer groundnuts.

SBCC

To promote and support the adoption of nutrition-related behaviors, almost all SPRING's activities included an SBCC component that reinforced key messages at each point of contact with beneficiaries—from health service to mother-to-mother support groups and FFS. The use of media guided these activities, including through three community drama videos produced by SPRING and shown at community events, two radio series, four short instructional videos, and four sets of counseling cards and photo aids, in addition to broad nutrition communications and advocacy. In the communities where we worked, households reached by SBCC activities increased from 66.6 to 95.5 percent.

Sustainability

To help ensure the sustainability of our work, SPRING collaborated closely with government and NGOs and delivered most program interventions through existing social service systems at the district level. To achieve this, with support from partners at multiple levels, we invested in the technical capacity of government sector departments and community organizations supporting nutrition-specific and nutrition-sensitive interventions. This approach strengthens institutional capacity for nutrition activities beyond SPRING.

Within our multi-sectoral project, to have the most impact, SPRING focused interventions on specific households. Acknowledging that people do not conduct their lives alone, our hallmark 1,000-day household approach targeted the needs of 1,000-day households for all our interventions. Caregivers in 1,000-day households participated in mother-to-mother support groups, were trained in FFS, and worked with water and sanitation management teams to build latrines and tippy taps at home, with their family's support. By focusing our activities to target households, mothers, and children under 2 years of age, we achieved a greater impact in reducing stunting and increasing uptake of key behaviors.

SPRING/Haiti: 2012–2015

In Haiti, SPRING ran for three and a half years, from April 2012–September 2015. This U.S. President's Emergency Plan for AIDS Relief (PEPFAR)-supported program focused on enhancing nutrition systems and building capacity to deliver high-quality nutrition assessment, counseling, and support (NACS) services with the Ministry of Health's *Ministère de la Santé Publique et de la Population* (MSPP). Children under 5 years of age, PLW, and people living with HIV and AIDS were the direct beneficiaries of our interventions. While a NACS program was already in place within the Haitian medical system when we began, the MSPP was concerned with how successfully health facilities were employing the approach. One of our main project goals was to provide the leadership needed to strengthen policy and advocacy for NACS throughout the levels of health care.

Figure 6. Haiti Life-of-Project Results

Building Local Nutrition Capacity

A baseline study conducted at the beginning of the program, across four regions of the country, identified a lack of standardization for conducting nutrition assessments or counseling, inconsistent provision of anthropometric equipment and supplies, little attention to nutrition in quality assurance systems that were focused primarily on HIV and tuberculosis services, only one-fourth of health workers interacting with clients doing nutrition counseling, and weak referral systems between facility and community levels. To address these concerns, SPRING strengthened NACS services for preventing and treating undernutrition in 17 health facilities across the country's 10 departments. Program interventions focused on enhancing NACS leadership at the national and departmental levels by providing job and counseling aids, equipment, and training to standardize assessment, counseling, and support services for nutrition at the facility level. SPRING also worked to strengthen the linkages between facilities and the community.

In partnership with the MSPP, SPRING developed a national infant and young child feeding (IYCF) training and counseling package, and supported the finalization of the NACS training package. Validated by the Ministry of Health, these training packages; job aids; and counseling, supportive supervision, and data collection tools are now a permanent resource for the facilities.

Training Health Facility Staff

At the facility level, SPRING worked closely with facility staff to identify gaps in their nutrition services and potential solutions to reach NACS competence. We also expanded evidence-based learning for designing, planning, and managing effective nutrition programs, focusing on workforce development and new training modalities. SPRING designed the IYCF training package as stand-alone sessions or modules delivered during several days, weeks, or months. Facility managers could decide which training methodology to use for training health care workers (HCWs) in their facilities. We conducted operations research to assess these different approaches to determine if one was more effective than the other for developing the HCWs' capacity. Some facilities decided to conduct the training in a more traditional way—shorter 5- to 10-day periods—while others

trained HCWs during several months by covering 2–4 modules per week in a type of on-the-job training (OJT) modular approach. Overall, we trained 50 health facility trainers and 598 health workers in NACS and IYCF.

To remove barriers in delivering NACS services, we procured and distributed scales, height and length measuring boards, and mid-upper arm circumference tapes for facilities that needed them. We also printed and disseminated copies of the national NACS guidelines and job aids, including care algorithms, body mass index (BMI) charts, weight-for-height Z-score tables, counseling cards, wall charts, posters, and videos.

Clinic staff in Haiti receive training on nutrition assessment, counseling, and support services.

Using a small innovations grant fund, we supported low-cost solutions for problems identified by QI committees in their gap analyses for NACS competence. We also purchased screens and curtains to ensure visual privacy during nutrition assessment and counseling; provided fans and benches to make clinic waiting areas more comfortable; installed TV and DVD players to play health messages for clients in the waiting area; and brightened walls in the pediatric units with fun paintings and cartoon decals that presented engaging nutrition messages. We conducted supportive supervision visits with MSPP nutrition focal points, called "reinforcement visits," to observe the delivery of nutrition services and offer constructive feedback to master trainers and HCWs.

Partnerships and Sustainability

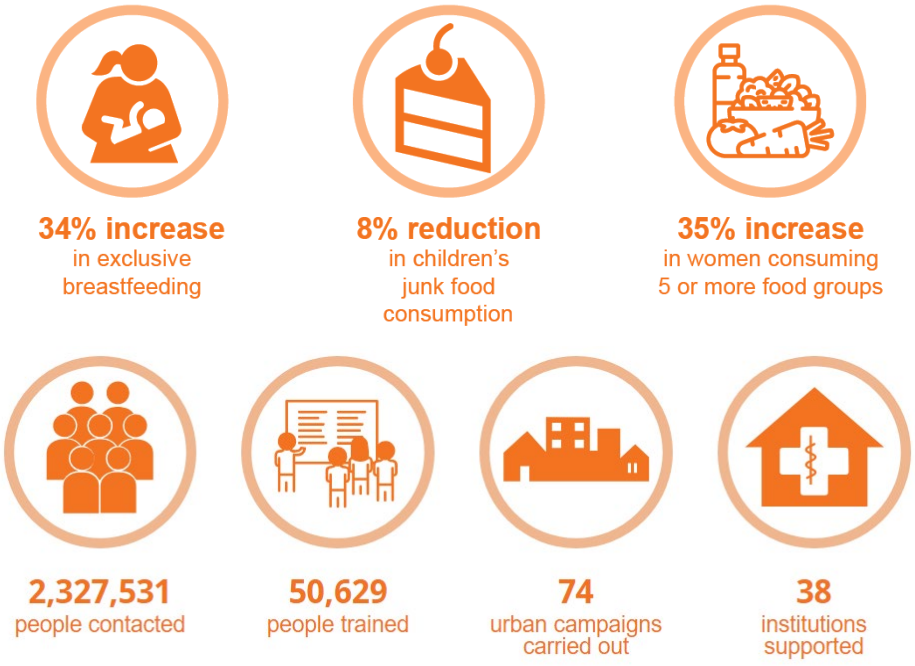
A major component of our project's success was our ability to work closely with the MSPP and country partners, providing trainings and national supervision tools for nutrition. Because we had a small country team and a facility-based approach (with little to no direct community interaction), our partners' support was vital to both implementing our work plan and assisting in capacity building activities. We trained more than 590 HCWs and the target facilities where we worked showed that they understood the importance of quality improvement in the continuum of care. By the end of the project, many facilities showed 100 percent competency in training, assessment, and counseling. This strong partnership increased the sustainability of our interventions and ensured that SPRING's legacy in Haiti is tangible. We left our Haitian counterparts with complete NACS, IYCF, and Group Education Techniques training packages; job aids and anthropometric equipment; a pool of health facility trainers; and more than 500 trained HCWs. The target facilities now understand QI's importance in the continuum of care and systematizing data use for decision-making.

Thanks to SPRING's support, health facility trainers can continue to train new staff in NACS and IYCF at low or no cost, with nutrition focal points using the national nutrition supervision tool during supportive reinforcement visits. The MSPP/Nutrition Unit and HCWs expressed a desire to continue working to improve NACS and IYCF and noted that SPRING had positioned them to keep nutrition prioritized in health care implementation. Ms. Rhudnie Angrand, MSPP nutrition focal point, summarized at SPRING's closing event: "Of all the big projects that I have seen come and go, SPRING/Haiti's legacy will be the most lasting, for it will not need money to be sustained. It is leaving a pool of trainers and complete NACS and IYCF packages that the health department trainers and health facility staff will have on hand to help maintain quality in the continuum of care."

SPRING/Kyrgyz Republic: 2014–2018

SPRING's work in the Kyrgyz Republic addressed stunting and anemia among women and children in the country by promoting the uptake of 11 evidence-based practices. These nutrition-specific practices, tailored to local contexts, relate to optimal breastfeeding, appropriate complementary feeding of children, dietary diversity throughout the year, reduced consumption of junk food, and improved handwashing and other household-level behaviors that target women and children in the first 1,000-days window of opportunity.

Figure 7. Kyrgyz Republic Life-of-Project Results and Nutrition Outcomes



SPRING/Kyrgyz Republic worked with partners to promote these practices through direct communication, mass media, routine health services, and other appropriate channels, such as agriculture projects and relevant national platforms, including the SUN initiative. SPRING focused program delivery in 11 *rayons* and townships in Jalalabad oblast (including Jalalabad city), all six rayons and townships in Naryn *oblast* (including Naryn town), and the capital city of Bishkek.

Strengthened National Policies and Health Services

A mother and child attend a Breastfeeding Week event in the Kyrgyz Republic.

SPRING engaged the MOH, academia, multilateral organizations, and other partners at the national level to address gaps in policies and to develop technical guidelines nationally and in SPRING intervention areas. SPRING identified priority policy gaps and has provided technical assistance to stakeholders to move policy forward. Most notably, we assisted in developing new national guidelines and protocols in antenatal care and in the prevention and treatment of anemia and parasitic infections.

Because the Kyrgyz Republic has high coverage of antenatal care, institutional delivery, and basic primary health care, SPRING focused on health systems strengthening through capacity building. As of March 2018, SPRING had conducted more than 7,000 trainings for health workers, which were integrated in the national post-graduate medical training institute. These topics included IYCF, supportive supervision, the Baby Friendly Hospital Initiative (BFHI), mother support group facilitation, and prevention and treatment of helminth infections. SPRING

developed a curriculum on adolescent and women's nutrition and anemia and also created a pool of master trainers, providing a resource for the MOH and other partners to use nationwide.

Going forward, strengthening pre-service training will have much more of an impact on the content and quality of nutrition services nationwide. Working with the SUN academia subgroup, SPRING spearheaded efforts to strengthen the nutrition content of pre-service training for doctors and nurses to incorporate global recommendations and standards, including anthropometry and nutrition counseling skills.

The BFHI encourages and recognizes the role of health facilities to protect, promote, and support breastfeeding and mother-child bonding. SPRING supported 27 facilities in Jalalabad and Naryn to achieve BFHI certification. Although Family Medicine Centers are primary care facilities and do not do deliveries, SPRING included these facilities in the certification process because they provide vital services during pregnancy and post-delivery that may impact breastfeeding. To-date, after an independent assessment by the national BFHI review committee, 17 facilities had received BFHI certification, with 6 more seeking certification in 2018.

Stimulated Social and Behavior Change in Communities

SPRING mobilized and trained approximately 2,600 community volunteers (activists) to reach the SPRING target population with key nutrition and hygiene messages. Each quarter, these activists reach more than 120,500 caregivers and over 20,000 children under 2 years from about 30,000 households, sharing information, tailoring recommendations, and distributing materials developed by the project, in partnership with the MOH. These conversations and materials covered topics that include iron-folic acid supplementation, maternal nutrition, IYCF, dietary diversity, and the importance of clean latrines. SPRING also reached urban audiences through large events—for example, concerts and marathons—to spread nutrition and hygiene messages within urban populations, and we trained 170 journalists to be "media messengers" for nutrition to raise awareness of the topics on local television and in print. The project also developed a series of nutrition and hygiene spots and 15 cooking demonstration videos that were aired on regional television and disseminated through social media.

Promoted a Diverse Diet for All Seasons

To promote dietary diversity, SPRING published a guidebook on best practices for home-based food preservation and storage techniques for nutrient-rich foods, as well as a cookbook designed to encourage nutritious diet choices for families, especially with children under 2. SPRING conducted trainings and presentations on nutrition-sensitive agriculture to partners working in nutrition and agriculture, as well as faculty from the Kyrgyz Agrarian University. SPRING provided technical assistance to agriculture projects and organizations—including USAID's Agro Horizon Project and the World Bank-funded Agricultural Productivity and Nutrition Improvement Project (APNIP)—to keep their programming more nutrition-sensitive. APNIP plans to replicate many of SPRING's activities and project materials to continue promoting dietary diversity.

Evidence of Significant Improvements in Nutrition Practices

From 2014–2017, SPRING undertook four surveys to assess changes in several indicators of nutrition practices for our target population. These studies revealed significant improvements of behaviors in project implementation areas, especially exclusive breastfeeding and dietary diversity. Women's dietary diversity scores increased from an average of 4.1 food groups consumed to an average of 5.4 groups. Women in SPRING areas are also consuming increased amounts of dark green leafy vegetables (from 8 percent to 41 percent), vitamin A–rich fruits and

vegetables (from 43 to 74 percent), and other fruits and vegetables (from 47 to 88 percent). In SPRING implementation areas, exclusive breastfeeding more than doubled between the baseline and endline surveys (29 to 63 percent). Consumption of sugary and processed foods fell substantially in SPRING-supported areas, particularly among children ages 0–11 months. Children's dietary diversity (consumption of four+ food groups) increased significantly, from 42 to 54 percent in areas where SPRING worked.

SPRING/Mali: 2014–2016

SPRING's work in Mali focused on building resilience in the Mopti Region by preventing and treating undernutrition, while targeting the critical "first 1,000 days" from pregnancy through a child's first 2 years. During the 15 months we worked in Mopti, the project forged important partnerships with local government institutions and implementing partners and provided nutrition-sensitive and nutrition-specific services to over 165,723 community members.

Figure 8. Mali Life-of-Project Results

Working across 20 focus communes in the Feed the Future zone of influence in the Mopti Region, SPRING used community platforms to increase access to diverse and quality foods; access to quality nutrition services; and demand for and uptake of key agriculture, nutrition; and WASH-related services and key practices. To achieve these objectives, SPRING/Mali primarily used three multi-sectoral activities: FNS, trainings in ENA/EHA, and CLTS.

Farmer Nutrition Schools

To improve dietary diversity and promote consumption of nutrient-dense foods at the household and community levels, we implemented FNS, a community gardening program, which we adapted from SPRING/Bangladesh. The FNS approach promotes good nutrition-sensitive agricultural practices, integrated with SBCC, for improved nutrition and WASH outcomes. In FY15, to adapt the FNS materials to the local context, SPRING/Mali conducted a rapid assessment. The assessment identified locally available and nutrient-dense crops—okra, pumpkin, dark leafy greens, moringa tree leaves, baobab tree leaves, papaya, carrot, beet root, shallot, and peppers—for FNS to produce in gardening activities. Our approach aimed to reduce women's share of physical labor, especially for pregnant and lactating women with children under 2 years of age, by encouraging men to increase their participation in land preparation and other physically demanding tasks.

To evaluate progress against the Feed the Future indicators, in late January 2016, we developed a data collection system and sampled FNS beneficiaries residing in all four districts of the zone of influence. Using the findings from this sample, we extrapolated the results to all 5,500 beneficiaries within a 10 percent margin of error and a 90 percent confidence interval (in line with the Feed the Future indicator guidelines).

Training in Essential Nutrition Actions and Essential Hygiene Actions

Before rolling out trainings in ENA/EHA to health facility staff and community volunteers, our staff coordinated with the Mali Ministry of Health and Hygiene to update the Government of Mali-endorsed 2008 ENA national training module for health facility staff and community volunteers to include EHA. At the facility level, the integrated ENA/EHA curriculum helped build the capacity of facility staff, strengthen health service delivery, and incorporate quality improvement mechanisms for nutrition and hygiene. At the community level, the curriculum built the capacity of community agents to use interpersonal communication and group facilitation techniques to promote and support the adoption of optimal nutrition and hygiene behaviors.

Community volunteers participate in an ENA/EHA training in Mali.

Community-Led Total Sanitation

To implement CLTS activities and help communities achieve open defecation free status in key project villages, SPRING/Mali followed the 2011 UNICEF CLTS guide, or *Guide Pratique de l'Assainissement Total Piloté par la Communauté au Mali,* and worked closely with local sanitation authorities, the *Direction Régionale de l'Assainissement et du Contrôle des Pollutions et des Nuisances*. SPRING/Mali initiated the "triggering" process in targeted communities to generate shared disgust among community members by mapping the defecation areas in the community through "transect walks" and identifying fecal pathways.

Complementing the implementation of CLTS, we promoted handwashing with soap, including the construction of tippy taps. SPRING field agents and SPRING-trained *agents de santé communautaire*/community health workers (ASC) and *relais communautaires*/community volunteers (RC) conducted handwashing demonstrations throughout Mopti using tippy taps; they also encouraged community members to construct tippy taps at two key locations in the household—near the latrine and near the kitchen.

Major Accomplishments and Lessons Learned

For both FNS and ENA/EHA, we used a cascade training approach, reaching 500 FNS leaders, who, in turn, reached an additional 5,000 FNS members. We also trained 375 health workers in ENA/EHA, who established a network of more than 200 ENA/EHA support groups, reaching more than 12,000 people in health facilities and communities. We successfully triggered 26 villages/hamlets in CLTS, ultimately certifying 20 communities (77 percent) open defecation free and facilitated the repair and establishment of nearly 1,000 latrines across 2,285 households. SPRING/Mali also supported the construction of 4,894 tippy taps across 2,447 households during the life of the project. Our work included routine follow-up visits to households or communities in each area of work—agriculture, nutrition, and hygiene—to ensure quality and reinforce behavior change.

During the first year, despite water access challenges in our gardening activities, we made far more progress toward the Feed the Future indicator targets than anticipated. Our work plan indicated that 5 hectares of gardens would be influenced by our work each season, but our data indicate that more than 130 hectares were under a

SPRING-promoted improved technique in only a single season of FY15, nearly 25 times the target number of hectares.

Beginning in FY16, USAID shifted funding to other partners and SPRING phased out. SPRING provided the successor projects with complete project documentation and materials to include activities SPRING did not undertake, such as establishing village savings and loan associations, providing quality seeds to promote nutrient-rich varieties, creating seed multiplication groups, and promoting ENA/EHA behaviors through mass media, particularly community radio.

SPRING/Nigeria: 2012–2016

SPRING's work in Nigeria began with a focus on reducing undernutrition, preventing stunting, and working with women and children to reduce anemia in Benue State and the Federal Capital Territory. In FY14, we revised our programmatic goal in response to USAID's request to improve nutrition and food security outcomes within their PEPFAR-funded programs for OVC, focusing on maternal and child undernutrition and improving HIV-free survival of infants and young children.

Figure 9. Nigeria Life-of-Project Results

SPRING's approach raised awareness and improved IYCF by building capacity throughout the country in using the *Infant and Young Child Feeding Counselling Package* in facilities (F-IYCF) and communities (C-IYCF). The packages were adapted from existing materials developed by UNICEF and WHO; at the request of the FMOH, USAID, and other partners, SPRING translated the C-IYCF counseling package into five Nigerian languages: Hausa, Idoma, Igbo, Tiv, and Yoruba.

Increasing Access to Nutrition Information and Counseling Services

Children in Nigeria practice categorizing healthy foods during concept testing for an OVC nutrition training package.

SPRING's single-most significant accomplishment is the scale up of the facility and community IYCF packages across 16 states and 122 local government areas (LGAs), training 2,678 people, and directly reaching 165,295 through implementation and work with partners. We also provided copies of both the F-IYCF and C-IYFC counseling packages to representatives in all 36 states in the federation. The C-IYCF counseling package rollout (our primary focus as requested by USAID) was based on a four-tier training cascade. It started with state-level master trainers, then moved to LGA-level trainers and coaches, then to primary health care center (PHC)

staff and community volunteers, and finally formed support groups at the community level. As a result of the IYCF cascade trainings, community volunteers established support groups for 153,174 caregivers and children under 2 to provide caregivers with nutrition information and counseling on IYCF.

Through the rollout of the IYCF packages, our strategy simultaneously built the capacity of OVC partners, civil society organizations (CSO), and government counterparts on IYCF through sensitization and advocacy, training, supportive supervision, and by strengthening coordination and collaboration among these actors. SPRING facilitated strong links between the government and OVC partners and their CSOs at the community level, thereby increasing ownership and support of IYCF activities within the states and LGAs. SPRING found that improving maternal and child nutrition practices by promoting optimal IYCF behaviors can be achieved with investments in capacity building, especially for community volunteers and facility-based health workers. This cascade approach significantly raised awareness of appropriate IYCF practices in focal communities and concurrently increased the adoption of optimal practices by caregivers and their families.

National Policy Environment for Priority Nutrition Practices and Services

Our advocacy efforts included providing technical support to the Government of Nigeria and, starting in FY14, supporting the FMOH's National Infant and Young Child Feeding Technical Working Group (IYCF TWG, also called the IYCF Task Force), which streamlines, advocates, strategizes, and offers solutions to challenges pertaining to the nutrition and health of children under 5 years of age in Nigeria. SPRING also improved the policy environment for nutrition programming by helping to harmonize nutrition monitoring tools, develop the *National Policy on Food and Nutrition and Plan of Action*, and review the *National Strategic Plan of Action for Nutrition (2014–2019).*

Community-Based IYCF Counseling Package Assessment

The results of our capacity and beneficiary assessment showed that working at scale does not compromise implementation quality. More than 70 percent of CSOs, health workers, and community volunteers who were trained by SPRING during the project retained high levels of knowledge on IYCF. More than 80 percent had favorable attitudes toward issues, such as male involvement in support groups and in the home, women's and children's nutrition when the mother is HIV-positive, and breastfeeding among working women. The capacity built by SPRING appears to have led to high-quality program implementation, which, in turn, resulted in positive IYCF practices among support group beneficiaries.

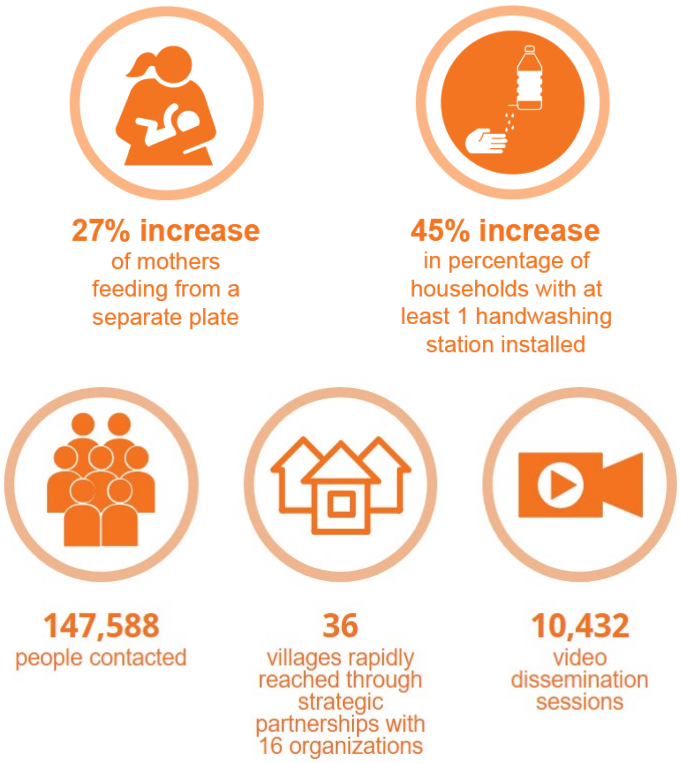
Preventing Undernutrition among Orphans and Other Vulnerable Children

We provided technical assistance to the wider nutrition and food security programming efforts of OVC partners and their supported CSOs. This included conducting reviews of nutrition assessment tools and strategies relevant to IYCF and providing recommendations on food-based approaches to combat undernutrition and information on vitamin A deficiency. In FY16, we worked with our OVC partners to develop two additional training packages. The *Nutrition and Hygiene for Orphans and Vulnerable Children in Nigeria: A Training Guide for Community-Based Organisations* provides basic technical knowledge to CSOs on the nutrition and hygiene needs beyond the first 1,000 days for children 2–17 years old, highlighting the needs of OVC and those living with or affected by HIV and AIDS. The *Nigeria: Complementary Feeding and Food Demonstration Training Package* builds the capacity of CSOs and community volunteers to counsel caregivers on complementary feeding practices using food demonstration training.

SPRING/Sahel

From 2014 to March 2018, SPRING used innovative SBCC approaches in the Sahel to improve MIYCN and hygiene at the household and community level. With Digital Green in Niger and DMI in Burkina Faso, our "community media" programming used community-based technology platforms to engage communities for improved MIYCN and hygiene. To ensure program effectiveness, we used three stages: pilot, scale up, and practice. During the pilot phase, SPRING conducted a landscape analysis of SBCC in Niger and Burkina Faso to explore how community-led media could improve health outcomes and to identify the nutrition and hygiene interventions with the greatest benefit to mothers, infants, and young children. Following the pilot phase, SPRING evaluated how well the approach was accepted and assessed its potential for expansion in multiple regions of Burkina Faso and Niger. During the scale-up phase, SPRING incorporated the lessons learned during the pilot phase to expand its interventions. Finally, in the practice phase, SPRING continued to expand, reaching more people and forging new partnerships. The final project year focused on creating tools, documenting lessons learned, and transferring capacity to partners so that programming could continue after SPRING.

Figure 10. Sahel Life-of-Project Results and Nutrition Outcomes



Innovative Activities

A production team works on a community video in Burkina Faso.

A centerpiece of SPRING's media programming in the Sahel has been community-led video, which combines low-cost technology (portable pico projectors) with interpersonal communication (human-mediated discussion groups and subsequent home visits). Our formative research at the beginning of the project helped identify and prioritize key behaviors and video topics. Video production teams or "hubs," staffed by local entrepreneurs, produced the videos in local languages. The hubs used community members as actors so viewers could identify with the scenarios and be more likely to adopt the suggested behaviors. The video disseminations were led by

676 trained community-based mediators within the existing support groups (i.e., mother-to-mother groups, safe spaces for adolescent girls, fathers' schools) in 90 villages in Burkina Faso and 248 villages in Niger. Since 2015, SPRING has reached 155,028 women, children, and men through 44 community videos in 4 local languages.

In 2015, SPRING also worked with DMI to test using radio for behavior change in Burkina Faso. SPRING produced 11 radio spots and 22 live dramas on nutrition and hygiene, reaching 3 million potential listeners through 7 community radio stations covering the RISE zone of influence.

SPRING also developed a geographic information system dashboard for the SBC interventions of partner projects in nutrition and hygiene. This tool enables users to explore activities around nutrition and hygiene implemented by USAID's partners and other projects in Niger and Burkina Faso. The dashboard enables key stakeholders to interact with the web map to see where SBC activities are occurring and to better plan and coordinate activities, thereby improving the efficiency and effectiveness of SBC interventions in the Sahel.

Robust Research

Monitoring and evaluation were central to the program's approach, from carrying out a thorough context assessment, using technology to facilitate rapid project monitoring, and conducting implementation research throughout the project. In 2015, as part of the pilot phase, SPRING conducted a mixed methods evaluation on the acceptability, effectiveness, and scalability of the community video approach in Niger. Results from the surveys in Niger indicated use of the video program increased the presence of a handwashing station at home from 14 percent at baseline to 59 percent two to four months after showing the video. Results for feeding a child 6–24 months from a separate dish also indicated promising results. After watching the video, the percentage of women who fed their child from a separate plate, increased from 70 percent at baseline to 97 percent two to four months after the intervention. Findings from the qualitative component of the study indicated that beneficiaries found the videos to be relevant and engaging and that they understood the messages being conveyed. In May 2017, during the practice phase, to assess the effects of the intervention, SPRING conducted a fourth round of data collection with the cohort of respondents from its initial evaluation. This final round of data collection provided evidence about the sustainability of the initial improvements in responsive feeding- and hygiene-related outcomes documented in 2015.

When SPRING introduced the community video approach in Burkina Faso, we first studied the contextual issues through formative research and then conducted a pre-post quasi-experimental evaluation to assess change in feeding and dietary behaviors in the East Region. Results from the household survey in Burkina Faso indicated that women were more likely to adopt recommended child feeding practices if they reported speaking with a family member about child feeding practices, such as exclusively breastfeeding. During scale-up of the project, SPRING conducted qualitative research in Niger on how community video can be used to strengthen spousal communication and improve male involvement in MIYCN behaviors. Results showed that videos helped encourage spousal communication where this type of dialogue was not common. Fathers responded favorably to the male role models depicted in the videos, which couples sought to emulate. During the last 3 years, to showcase this extensive research, SPRING prioritized gathering and disseminating information on the community video approach through webinars, workshops, field articles, and several international and national conferences.

Sustainability Efforts

Partnerships and collaboration have been key to the sustainability of our interventions. SPRING supported 13 partners in Niger and in Burkina Faso. Not only did partners allow us to integrate the community video approach into ongoing programming, they also created an enabling environment to pool their technical expertise around nutrition and hygiene, including extensive knowledge of the local context. Partner trainers from the NGO sector and government were vital for rapid scale-up. SPRING transferred capacity to 81 trainers in both countries, who, in turn, trained community volunteers. In addition, we worked closely with the governments of Niger and Burkina Faso to strengthen the program's sustainability and scale up in regions where NGOs were absent.

SPRING and partners contracted the production hubs to develop videos, an arrangement that provided a flexible, affordable communication channel for local partners and an initial source of income for the hubs. To ensure sustainability, SPRING also trained hub members in business planning, accounting, marketing, and grant writing. As a result, mayors, local NGOs, community development projects, and media organizations have contracted the hubs to produce videos tailored to their specific needs. Some of SPRING's partner projects in the Sahel adopted the community video approach and are scaling up in various regions of Burkina Faso and Niger.

SPRING/Senegal: 2015–2017

SPRING's two-year program in Senegal focused on creating, testing, and learning from local partnership approaches to improve the nutritional status of PLW and children under 2 years. The project worked closely with existing organizations, platforms, and networks in three target regions of Senegal—Kolacky, Kaffrine, and Fatick—by employing a multi-sectoral approach to tackle malnutrition with activities on agriculture, hygiene, and gender. Fostering partnerships and opportunities for collaboration with USAID-funded programs and others in multiple sectors, the project promoted nutrition-specific and nutrition-sensitive agriculture practices to increase demand for and access to improved nutrition inputs and services.

Figure 11. Senegal Life-of-Project Results

SPRING/Senegal worked closely with local partners in the agriculture, health, and media sectors. Recognizing that the underlying causes of malnutrition lie outside the health sector, SPRING coordinated and strengthened the capacity of organizations and local networks that comprise agricultural value chains and markets.

Increasing Demand for Good Nutrition-Related Practices and Services

SPRING used a variety of capacity building and SBCC approaches to raise the nutrition awareness of partner organizations and their members/clients to accelerate the adoption of essential nutrition and hygiene actions and the promotion of good nutrition-sensitive agriculture practices. We identified and focused on a set of practices and behaviors that were relevant to partner program approaches and to local conditions/needs.

Communications partners included six community-based radio stations with whom we created 15 radio spots (broadcast 14,280 times) and 30 interactive programs, as part of SPRING's SBCC approach to increase awareness and demand for good nutrition-related practices and services. SPRING reached approximately 918,310 people with nutrition messages through radio. We also trained staff from partner organizations to create 10 local community videos and form local video production hubs. The content of the videos, radio spots, and radio programs came directly from our formative research findings and they promoted growing nutritious agricultural products, proper hygiene, and gender-sensitive best practices. Producer network field agents and community volunteers were trained to screen videos across 100 villages and facilitate discussions on the topics featured in the videos.

Facilitating Access to Key Inputs and Services Essential for Good Nutrition

A gender champion couple and their baby in Senegal.

To meet the demand created through our SBCC approach, SPRING worked with local agricultural partners to increase their capacity to pursue nutrition-sensitive agricultural practices. SPRING conducted a combination of workshops on nutrition-sensitive agriculture for members of these community-based producer networks. In addition to these workshops, SPRING used demonstration plots to promote the cultivation, harvest, storage, consumption, and marketing of nutrient-rich crops, such as Obatampa maize, bio-fortified millet, orange-fleshed sweet potatoes, and a variety of nutrient-rich vegetables, while also supporting partners to introduce improved local poultry to encourage the increased consumption of chicken and eggs. We also established model micro-gardens (complete with tippy tap handwashing stations) and trained 240 women and 25 field agents, who trained and supported approximately 2,700 women to set-up their own micro-gardens across 90 villages. SPRING also strengthened the capacity of agricultural suppliers and extended their coverage by mobilizing community-based service providers to increase access to inputs and services that support nutrition-sensitive agriculture: seeds, saplings, fertilizers, protective gear, and others.

SPRING's partnerships with the health sector centered on a collaboration with the Senegalese government's *Cellule de Lutte contre la Malnutrition* (CLM) or the Unit for the Fight against Malnutrition. The CLM is attached to the Prime Minister's Office and charged with articulating and coordinating a multi-sectoral strategy to reduce malnutrition in Senegal. Through our relationship with the CLM, SPRING worked with some of CLM's implementing agencies, including *Association Sénégalaise pour le Bien-Être Familial* (ASBEF), ChildFund, and Plan Senegal.

Evidence indicates that increases in women's decision-making capacity, income, and free time positively influence family nutrition, and SPRING promoted gender-sensitive best practices through all its project activities. SPRING identified "champion couples" within communities who displayed these best practices (i.e., husbands more involved in household chores or involved their wives in decision-making) to serve as role models within their communities. These champions were recognized and celebrated for their progressive practices, which further

encouraged others to consider adopting these behaviors. Further, to reduce the amount of time women spent husking and grinding cereals manually, while simultaneously providing them with an extra source of income, the project donated cereal-processing machinery to agricultural partners.

The project also focused on improving hygiene in communities by promoting handwashing and the use of tippy taps, which increase the availability of clean water for handwashing at strategic points around the compound, including near latrines and kitchens and at the entrances to household gardens, chicken coops, or sheep pens. SPRING also helped create hygiene monitoring units, which were groups of influential community members who monitored the state of hygiene within their community and promoted the uptake of hygiene best practices. In addition to the aforementioned existing platforms, SPRING also capitalized on other community mobilization events, such as weekly markets, local fairs, or technology fairs, to promote key nutrition, hygiene, and gender messages through fun activities, such as "quiz-show" contests, tippy tap installation demonstrations, live interactive talk shows, and drama performances, etc.

Documenting Lessons Learned

Capturing and sharing key lessons and best practices that could be taken to scale was critical. To this end, SPRING/Senegal's successes and challenges related to the promotion and adoption of targeted behaviors were carefully documented, chronicled, and shared in technical briefs, videos, infographics, and blogs, as well as project reports. We monitored all activities and approaches for acceptability, sustainability, and efficacy.

SPRING/Uganda: 2012–2017

In Uganda, SPRING's work focused on reducing stunting and maternal and child anemia, as well as reducing the percentage of children and adults with severe acute malnutrition. We supported national-level policies and guidelines for improved nutrition and strengthened health and nutrition programming at the district level. The project also worked closely with district and national partners, USAID implementing partners, the Office of the Prime Minister, the MOH, and other organizations, including UNICEF and the World Food Programme.

Figure 12. Uganda Life-of-Project Results

Nutrition Assessment, Counseling, and Support

We initially received support from the Partnership for HIV-Free Survival to provide targeted NACS interventions to mothers and their children under 2, specifically in the Southwest Region. We strengthened nutrition treatment and prevention services at the hospital and health center levels in 51 facilities across 10 districts. We enhanced linkages between health facilities and the community by training village health team members in counseling on IYCF practices. SPRING's support led to improvements in both the quality and quantity of services provided at the facility level and increased the percentage of clients in the target facilities receiving nutrition assessment, from 57 percent in 2014 to 76 percent by the end of 2015.

Working closely with the Government of Uganda at the national, district, and community levels, SPRING helped integrate nutrition priorities into district development plans and budgets. The Pathways for Better Nutrition case study identified straightforward changes that sector ministries and district planners can make to increase commitments for nutrition. We disseminated the results and relevant budgeting tools at the district and national levels. SPRING also trained district government staff to understand the multi-factorial causes of anemia and key interventions to integrate anemia prevention and control into their work plans.

National- and District-Level Policy Support

SPRING also provided national-level support aligned with the Government of Uganda's priorities, as stated in the Uganda Nutrition Action Plan (UNAP). We supported the revitalization of the National Working Group on Food Fortification and the National Anemia Working Group (NAWG), which support public-private collaboration on health and nutrition activities. With SPRING's support, the working groups developed national strategies to guide scale-up and integration of anemia prevention and control and food fortification activities into government-sector work plans and budgets.

Lab technicians in Uganda test maize flour for iron.

With the Office of the Prime Minister, SPRING and partners (FANTA, REACH, and UNICEF) developed the National Advocacy and Communication Strategy, a detailed plan supporting the UNAP's advocacy and communication needs. Under this plan, SPRING helped launch an awareness campaign on the first 1,000 days and healthy Ugandan diets with the tagline "Nutrition Now for a Brighter Future" and helped the Ministry develop new communication materials to boost recognition of the official brand for fortified foods and their purchase. These materials—videos, posters, cutouts, radio ads, and print materials—are now housed with the government and are available for dissemination and promotion.

SPRING endeavored to make food fortification the primary platform for delivering micronutrients to the population of Uganda. We strengthened the capacity of Uganda's food fortification program by coordinating national fortification activities, supporting regulation and enforcement, and facilitating demand-creation for fortified foods, which increased access to fortified foods. SPRING also supported small-and medium-scale maize millers in voluntary fortification by identifying appropriate technologies for fortification and establishing a network of maize millers to strengthen their influence and bargaining power.

Finally, SPRING conducted operations research to inform national health and nutrition policy on new approaches and interventions for encouraging scale-up best practices. Our research included a pilot activity examining distribution mechanisms for micronutrient powders in Namutumba district, iron–folic acid packaging for expectant mothers, and the acceptability of maize-based fortified flours among adolescents.

Impact

During these five years, SPRING/Uganda built on the legacy of previous USAID investments and projects and improved the demand, quality, geographical coverage, and accessibility of high-impact nutrition interventions in Uganda. We worked closely with the government to strengthen national structures and reached consensus on how to address key nutrition challenges, especially anemia prevention and control, scale-up of industrial food fortification, and SBCC. Our contributions were country-owned and multi-sectoral; it is our hope that SPRING's learnings and recommendations will guide future nutrition policy and guideline implementation and that Uganda continues to make strides toward reducing stunting and anemia, particularly among its most vulnerable populations.

Monitoring, Evaluation, Research, and Learning

SPRING established rigorous monitoring, evaluation, research, and learning (MERL) systems at both the global and country levels to track results and to continuously monitor project implementation. Routine monitoring generated data to inform program learning and fine-tuned project implementation, while periodic surveys provided evidence on the extent to which nutrition practices and outcomes improved because of the project's interventions. SPRING's 60+ research and evaluation activities—from applied research on nutrition practices, literature reviews, and secondary analyses to original research on nutrition's relation to non-communicable diseases, nutrition financing, scale-up, and integration—complemented the surveys and made significant contributions to the global nutrition evidence base.

At the central level, SPRING developed a performance monitoring plan (PMP) to track key indicators over the life of the project (see annex 2). We based the project PMP on SPRING's results framework, as stipulated in our cooperative agreement, with the overall project objective of improving policies and programs to scale up effective nutrition services and the following two intermediate results (IRs):

IR1. Country-specific approaches to scale up nutrition programs improved

IR2. Global evidence base, advocacy platforms, and policies for nutrition expanded.

As a result of SPRING's commitment to country-driven, context-specific programming, country-specific approaches under IR1 varied. SPRING's global PMP is, therefore, limited to indicators that were relevant and collected across all countries. For IR2, we tracked indicators related to our research and evaluation activities and efforts to improve nutrition metrics. We also tracked our contributions to the global knowledge base through the networks and communities of practice that we led or participated in, dissemination activities, and number of visits and downloads to the SPRING website. SPRING also built MERL into each global initiative (GI) team as an integral part of each team's work (see Global Initiatives for more information). We developed country-specific Activity Monitoring and Evaluation Plans (AMEPs), based on the results framework and mandates from the USAID mission in each country where SPRING had a long-term presence. AMEPs tracked both routine monitoring indicators and outcome indicators related to nutrition outcomes, enabling SPRING to track the progress of activities in each country, as well as measure the extent to which interventions led to improved nutrition practices.

Major Accomplishments

Over the life of the project, SPRING made significant progress toward the IRs identified in the project's cooperative agreement. The highlights below represent monitoring indicators measured across all the SPRING countries:

- 422 instances of technical assistance (TA) provided (through Q2 of PY7)
- 266 institutions supported
- 5,438 facilities/service sites supported
- 168,847 people trained
- 17,616,191 people reached (contacts—people were counted every time they were reached)
- 7,412,705 children under 5 years old reached (contacts).

Country-level achievements peaked between PY3 and PY6, when most countries were active and had reached maturity in the program cycle. The patterns in figures 13 and 14 are typical of all the monitoring indicators listed above.

Figure 13. Number of People Trained

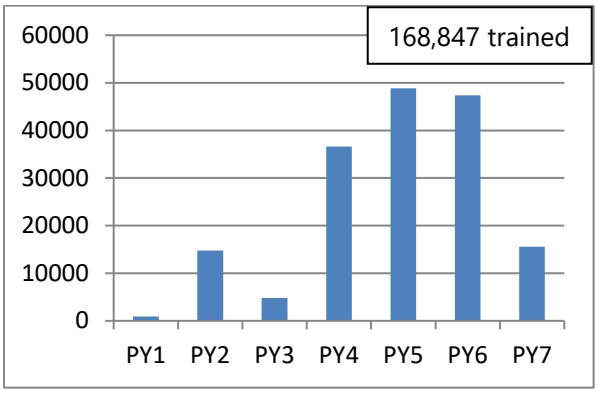
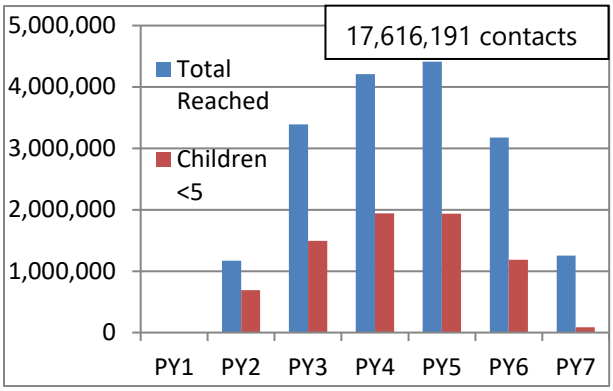


Figure 14. Number of People Reached



Summary of Nutrition Outcomes

Table 1 highlights outcomes associated with both nutrition-specific and nutrition-sensitive practices through baseline (BL) and endline (EL) survey results for SPRING intervention areas and comparison areas, where applicable. Overall, most surveys showed significant improvements in the indicators of interest between BL and EL, often substantially better than in comparison areas. Because we tailored indicators to various country-level objectives and needs, with differing time periods of implementation, comparisons can be misleading and these results must be contextualized when comparing results across countries.

Full results for each country, as well as multi-country and global studies, are available on the SPRING website. SPRING has complied with USAID's Open Data Policy, and, by the end of the project, we will have uploaded or have pending 13 datasets to the Development Data Library, making them available for secondary analysis, if desired.

Table 1. Changes in Nutrition Outcomes as a Result of SPRING Interventions

Country/Indicator	Intervention		Comparison		Survey Type/Discussion
	BL	EL	BL	EL	
IYCF Practices					
Bangladesh: exclusive breastfeeding	39%	46%	60%	40%	Population-based survey
Ghana: exclusive breastfeeding	57%	87%	NA	NA	Baseline was population based; endline was beneficiary based
Kyrgyz Republic: exclusive breastfeeding	29%	63%	37%	51%	Population-based survey
Nigeria: exclusive breastfeeding	23%	50%	21%	33%	Population-based survey: evaluation of the UNICEF C-IYCF counselling package
Bangladesh: children's dietary diversity	22%	36%	33%	16%	Population-based survey
Ghana: children's	15%	45%	NA	NA	Baseline was population based; endline was

Country/Indicator	Intervention		Comparison		Survey Type/Discussion
	BL	EL	BL	EL	
dietary diversity					beneficiary based
Kyrgyz Republic: children's dietary diversity	42%	54%	46%	41%	Population-based survey
Nigeria: children's dietary diversity	24%	8%	21%	4%	Population-based survey: evaluation of the UNICEF C-IYCF counselling package; declines may have been affected by seasonality, inflation, and high cost/low availability of food during the endline
Senegal: children's dietary diversity	18%	64%	30%	36%	Population-based survey in SPRING-supported villages
Kyrgyz Republic: % of children 6–11 months consuming "junk food" in previous day	34%	26%	19%	30%	Population-based survey
Senegal: % of mothers reporting feeding children from a separate plate	54%	90%	63%	74%	Population-based survey in SPRING-supported villages
Niger: % of mothers reporting feeding children from a separate plate	70%	97%	NA	NA	Beneficiary-based survey
Agriculture Practices					
Bangladesh: % of households growing vegetables and fruits	53%	72%	65%	66%	Population-based survey
Bangladesh: % of SPRING beneficiaries growing vegetables and fruits	43%	95%	NA	NA	Beneficiary-based survey; one year later, figure remained high at 86%
Bangladesh: mean number of fruits and vegetables grown	1.3	4.9	NA	NA	Beneficiary-based survey; one year later, figure remained high at 4.6
Bangladesh: % of SPRING beneficiaries raising poultry	75%	87%	NA	NA	Beneficiary-based survey; one year later, figure remained high, increasing to 92%
Bangladesh: mean number of chickens raised	5.3	7.9	NA	NA	Beneficiary-based survey; one year later, figure remained high, increasing to 8.4
Bangladesh: % of SPRING beneficiaries farming small, indigenous fish	12%	33%	NA	NA	Beneficiary-based survey; one year later, figure remained high, increasing to 34%
Ghana: % of farmers' groundnut storage	10%	25%	NA	NA	Composite indicator; baseline was population based; endline was beneficiary based

Country/Indicator	Intervention		Comparison		Survey Type/Discussion
	BL	EL	BL	EL	
practices meeting sufficient criteria to prevent aflatoxin					
Hygiene Knowledge and Practices					
Bangladesh: % of households with a handwashing station (tippy tap) installed	0%	90%	NA	NA	Beneficiary-based survey; one year later, figure remained fairly high, but declined to 67%
Bangladesh: % of women observed to wash both hands with soap at critical moments	NA	46%	NA	12%	Observational study of handwashing in SPRING supported villages versus non-SPRING supported
Ghana: % of women who could name at least 3 critical moments for handwashing	52%	64%	NA	NA	Baseline was population based; endline was beneficiary based
Ghana: % of households with handwashing stations in recommended locations (by latrine and cooking area)	1%	17%	NA	NA	Baseline was population based; endline was beneficiary based
Kyrgyz Republic: % of women who reported washing their hands at 3 or more critical junctures	70% Oct.	40% Feb.	89% Oct.	36% Feb.	Population-based survey; qualitative research revealed that cold winter temperatures at endline may have caused declines in all regions
Niger: % of households with at least one handwashing station	14%	59%	NA	NA	Beneficiary-based survey
Senegal: % of women who could name at least one critical moment for handwashing	83%	81%	79%	68%	Population-based survey in SPRING-supported villages; reasons for declines are unknown, but could be related to climate and water
Women's Nutrition					
Bangladesh: % of SPRING beneficiaries consuming 5 or more food groups out of 9 in previous day	29%	83%	NA	NA	Beneficiary-based survey; one year later, figure remained high at 76%
Bangladesh: mean number of food groups	3.9	6.0	NA	NA	Beneficiary-based survey; one year later, figure remained high at 5.6

Country/Indicator	Intervention		Comparison		Survey Type/Discussion
	BL	EL	BL	EL	
(out of 9) consumed in the previous day					
Kyrgyz Republic: % of women consuming 5 or more food groups out of 9 in previous day	35%	70%	31%	68%	Population-based survey
Kyrgyz Republic: mean number of food groups (out of 9) consumed in the previous day	4.1	5.4	3.8	5.3	Population-based survey
Nigeria: % of women reporting eating more food in current pregnancy than before becoming pregnant	25%	48%	30%	41%	Population-based survey; part of the evaluation of the UNICEF C-IYCF counselling package
Kyrgyz Republic: % of women reporting taking iron for 90+ days during most recent pregnancy	16%	31%	16%	26%	Population-based survey
Stunting (children under 5 years old)					
Bangladesh: % stunted	39%	33%	36%	36%	Population-based survey
Bangladesh: % severely stunted	16%	10%	7%	12%	Population-based survey
Ghana: % stunted	30%	23%	NA	NA	Baseline was population based; endline was beneficiary based
Ghana: % severely stunted	10%	7.4%	NA	NA	Baseline was population based; endline was beneficiary based

Lessons Learned

Measurement for nutrition has evolved over the life of the project, including an appreciation for the multi-faceted causes of malnutrition and the need for nuanced approaches to monitoring and evaluation for stronger programs and better advocacy. SPRING contributed to nutrition-sensitive indicator development through Feed the Future and we developed guidance for nutrition-sensitive monitoring. In addition, SPRING tracked project outputs and outcomes through a global monitoring system that captured select indicators across countries and GI teams, while country-specific AMEPs allowed each country to monitor and evaluate their programs with metrics tailored to meet the needs of USAID missions and government ministries. This system enabled SPRING to capture a set of indicators across countries for comparison, while allowing countries the freedom to design systems that meet their needs. The following recommendations are for future projects, based on our lessons learned:

1. For routine monitoring databases, Excel's limitations prevent efficient data management, including version control, because files are updated and shared between the home office and country offices for review. At a minimum, switching to systems like Google sheets can prevent some of these issues. Ultimately, systems

that allow online data entry and online/offline analysis (e.g., District Health Information System [DHIS2]) will improve data entry, management, and use.

2. SPRING's approach of allowing each country to define their own indicator set had the advantage of making MERL more relevant to some country teams. However, it made the cross-country comparisons—often expected from a global project—difficult or even impossible. In future projects, we suggest that countries still have the freedom to develop their own tailored indicator sets, but common cross-cutting indicators should include nutrition outcomes, as well as outputs.
3. Indicators should be defined and measured in a standardized way. When core indicators need to be measured differently from global and/or project standards, they should also measure the core indicator to ensure results are aggregated. In the future, improved standardization will contribute to increased learning from results, improved learning across countries, and better long-term outcomes.
4. Rigorous MERL systems should be in place from the outset of implementation. For research and learning, projects should develop a learning agenda as early as possible, defining key research and evaluation questions at both the global and country levels.
5. Projects should collect baseline data on outcomes of interest prior to implementation. SPRING had instances in which baseline surveys were de-emphasized for various reasons, including finances, priorities, and timing. As the project progressed, however, lack of baseline data in some countries had an adverse effect, limiting those countries' ability to learn and plan effectively.

Knowledge Management

During the SPRING project, knowledge management (KM) played a vital role in documenting the project's thought leadership and program learning, developing user-friendly technical tools, and connecting the global nutrition community to collectively share and learn. In the first phase of the project, our KM efforts focused on building internal systems to streamline operations and better connect our home office with our country teams and those country teams with one another. This included developing templates and tools to facilitate technical assistance and help SPRING staff identify, capture, and share learning from multi-sectoral nutrition implementation across our core-funded work plan and country teams. As part of this process, our KM team developed communication platforms and processes to facilitate program learning across the project.

Figure 15. Evidence Shared (through FY 17)

SPRING became a hub for the sharing of multi-sectoral nutrition information, tools, and ideas.

Understanding the importance of making our technical tools both compelling and engaging, we emphasized design as a key principle in the publication process to turn evidence into action. Our user-centered design approach guided development of a knowledge platform for a wide range of nutrition-related resources produced by SPRING and other global nutrition partners. We proactively communicated our progress and results, while sharing the "how" of our programs to further maximize USAID's investment in multi-sectoral nutrition. This included user-friendly job aids and tools for nutrition implementers working in diverse contexts, as well as data visualizations and infographics to share through social media and at global nutrition conferences and events. Although our multi-sectoral work is technical, people remain the center of not only our programming but also our project story. We highlighted our impact on individuals and communities in more than 60 success stories and developed multiple photo essays for USAID's Exposure platform and Medium blog, among other channels.

Facilitating Knowledge and Experience Exchange

The SPRING KM team facilitated knowledge and experience sharing through both online and in-person events that included many development practitioners working to improve nutrition across diverse disciplines. Since hosting our first Global Evidence and Experience Exchange (GLEE) in 2013, which focused on the linkages between agriculture and nutrition, SPRING went on to host six more GLEEs and over 100 in-person and virtual events on a wide range of multi-sectoral nutrition topics—from nutrition budget analysis to multi-sectoral anemia control and taking nutrition SBC to scale. Our webinars gave voice to USAID

SPRING shared 6 years of results at its Global Learning Event.

missions and nutrition practitioners working at the country level to share their work experience alongside academics' cutting-edge research.

To complement these efforts, we supported two major communities of practice working on interrelated aspects of multi-sectoral nutrition programming. Beginning in 2013, we provided KM support to the Agriculture-to-Nutrition (Ag2Nut) Community of Practice, guiding the moderators, as well as providing a platform for over 30 community calls intended to share best practices and the latest evidence on the linkages between agriculture and nutrition. We also partnered with the United Nations Standing Committee on Nutrition (UNSCN) to launch the Accelerated Reduction Effort on Anaemia. Our KM team provided technical support for effective moderation of the community, while developing and implementing a campaign that expanded the community from 25 members to over 860. We also supported the AREA Community of Practice (COP) in hosting 9 webinars to connect community members with recent research and thinking from leading anemia experts around the world.

Developing a Knowledge Platform for Multi-Sectoral Nutrition

From the launch of the SPRING website (www.spring-nutrition.org) in 2012 through June 2018, more than 320,016 unique users visited the site more than 1 million times to access 1 or more of the 2,600 resources housed on our knowledge platform. Good design was at the center of our efforts to package SPRING's work into interactive webpages, videos, and other graphics, resulting in a steady increase in audience and engagement. We developed more than 50 infographics and hosted 150 SPRING or community produced videos on the site. Over the life of the project, we produced hundreds of reports, briefs, training materials, posters, success stories, and presentations to support our Global and Country Initiative teams in implementing their work plans and capitalizing on opportunities to further share the project's work, tools, and results.

As our website grew, we optimized how technical tools and other site content were inter-connected, seamlessly bridging the project's country-based programming and our global thought leadership with external research and resources culled from the global nutrition community. The percentage of users returning to our website increased during the project and the repeat users interacted with technical content for a longer period of time, spending more time on the website and viewing more pages per visit than new visitors. Our monthly and quarterly Resource Reviews curated and synthesized the most recent and relevant technical tools and evidence around agriculture and nutrition, anemia, and systems thinking for nutrition. These were shared with more than 8,000 people through our email marketing system. We also leveraged our email dissemination list to share quarterly updates from the project, including our technical resources from both the core-funded work plan and our country work. Our quarterly email updates shared project outputs without overloading users' inboxes. In addition to limiting the total number of emails, we framed them around both our thematic areas of work and global conversations in the nutrition community to show the timeliness and relevance of SPRING's work.

Sharing the SPRING Experience

To help position USAID as a leader in multi-sectoral nutrition programming, the project increasingly focused on disseminating the body of SPRING's work. During the project, we presented at 342 conferences, meetings, or other learning events at the country level and globally. We regularly shared technical tools and resources through nutrition-related list-serves, communities of practice, and knowledge platforms, engaging with global nutrition partners to ensure nutrition was part of larger conversations around global health and agriculture. Our social

SPRING regularly promoted its messages to more than 4,000 social media followers.

media campaigns, centered around global awareness days and other USAID public health priorities, packaged videos, animations, photo galleries, infographics, and other media to share learning and tools resulting from SPRING's diverse programming. These engaging materials helped make technical content more appealing to a broad, international audience through Twitter and Facebook, which both grew steadily in followers and fans throughout the project. We also published more than 50 blogs across many different platforms focused on different aspects of nutrition, converting complex technical ideas and concepts into easy-to-understand content presented in a conversational tone through channels both within and beyond USAID. During this time, we remained cognizant that we are a technical project and much of our work must be available in the literature to remain relevant. To that end, we published more than 20 journal articles in peer-reviewed journals and other well-respected nutrition publications.

In the final phase of project implementation, we focused largely on documenting the SPRING experience through a suite of legacy documentation intended to ensure that learning and progress made through USAID's leadership and investment contribute to future efforts to end malnutrition. Our knowledge management portfolio amplified SPRING's technical work, making it relevant in global conversations and accessible to diverse audiences. Our contributions to the global nutrition knowledge base have been well recorded and recognized, elevating USAID's investment and commitment to improving nutrition.

SPRING Website Activity and Outreach: Life of Project from June 1, 2012 to September 31, 2018

- SPRING had a total of **528,577 sessions** from June 1, 2012 to May 31, 2018 with **320,016 unique users**. A session is when a user is actively engaged with the website. Users have had at least one session within the selected date range. The number of users includes both new and returning users.
- In total, SPRING had **1,067,900 page views (869,199 were unique page views)** during the life of the project.
- **Users who are familiar with the SPRING website explore content more extensively.** Returning visitors to SPRING interact with the content for a longer period of time, spending more time on the website (average: 3 minutes, 41 seconds) and viewing more pages (average: 2.45 pages) per visit than new visitors (average: 2 minutes, 04 seconds and 1.74 page views per visit).

- **Approximately 77 percent** of sessions on the SPRING website occurred from outside of the United States.
- Visitors accessed the SPRING website from **222 countries with over 27 percent of all sessions occurring in Africa** and approximately **32 percent of sessions occurring in Asia.**

Top 5 SPRING Webpages (Life of Project, excluding SPRING homepage, careers, and about us)

1. Context Assessment Tool: The KAP Survey Model (Knowledge, Attitudes, and Practices)
2. Countries: Ghana
3. Countries: Uganda
4. Countries: Bangladesh
5. Countries: landing page

Top 10 Countries—Visits to SPRING, Life of Project

1. **United States**
2. **India**
3. **Bangladesh**
4. **Uganda**
5. **Nigeria**
6. **United Kingdom**
7. **Kenya**
8. **Ghana**
9. **Philippines**
10. **Ethiopia**

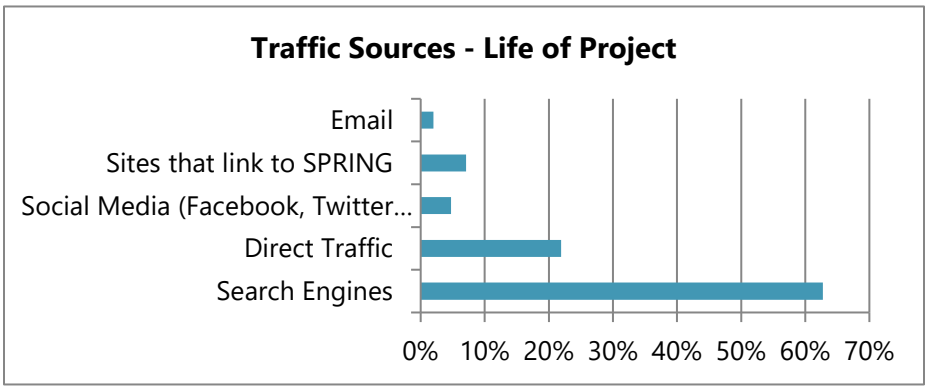
Downloads

- A total of **149,558 documents** were downloaded (unique downloads) from the SPRING website during the project. Total downloads were 203,841.
- Top 5 total downloads for this reporting period included:
    1. The Context Assessment Tool (26,610)
    2. KAP Survey model (17,357)
    3. Understanding and Applying Primary Pathways and Principles (2,370)
    4. Weekly Iron and Folic Acid Supplementation Program for Adolescents in India (webinar slides) (1,934)
    5. Evidence of Effective Approaches to Social and Behavior Change Communication for Preventing and Reducing Stunting and Anemia (1,657)
- In FY 2018, 420 people were added to SPRING's email dissemination for a total of 9,426 contacts.

Visits from Africa—by Region, Life of Project (%)

- **Eastern Africa—14%**
- **Western Africa—9%**
- **Southern Africa—1.6%**
- **Northern Africa—1.1%**

Figure 16. Outreach/Traffic to SPRING



- Sites that link to SPRING drove approximately **7 percent** of all traffic to the website. The following websites were among those that linked to the SPRING website:
    - www.jsi.com
    - securenutrition.org
    - k4health.org
    - usaid.gov
    - www.agrilinks.org
- **5 percent of all visits** to the SPRING website were generated through social media.
- In FY 2018, the number of SPRING Twitter followers **increased by 19 percent**, from 2,689 followers to a total of 3,190 at the close of the project.
- In FY 2018, the number of page likes on SPRING's Facebook **increased by 8 percent** from 1,377 to a total of 1,488 at the close of the project.

Languages

- **12.5 percent** (40,440) of all users who visited the SPRING website had browsers set to a language other than English.
- After English, the most common browser languages were French (7,815), Spanish (4,516), and Russian (3,977), followed by Portuguese (2,259), German (2,522), Chinese (1,901), and Arabic (1,422).

Blogs

Over the life of the project, SPRING shared its work through a variety of digital platforms, including 66 blogs, articles and other formats, including the 21 posts below during FY2018. All posts can be accessed on the SPRING website: https://www.spring-nutrition.org/our-impact/blog.

Feeding Khodia's Dream: Partnerships Strengthen Nutrition in Senegal
USAID Exposure, October 2, 2017

These Micronutrients Have a Mighty Impact
USAID's Medium Blog, October 4, 2017

Nurturing Care: Bringing Early Childhood Development and Nutrition Together for Greater Impact
SecureNutrition, October 1, 2017

Empowering Women Through Better Agriculture and Improved Yields: Farmer Field Schools in Ghana Benefit Women Groundnut Growers
Agrilinks, November 14, 2017

Cultivating Equal Partners in Agriculture and Nutrition
Agrilinks, November 15, 2017

Safe Groundnuts the Main Ingredient of Better Nutrition in Ghana
The Pump - November 17, 2017

Encouraging Fathers to Become Active Participants in Improved Nutrition
Agrilinks, November 21, 2017

Sharing the Load: Promoting Gender Champions for Nutrition in Senegal
Agrilinks, November 28, 2017

New e-Learning Course from SPRING Bridges Nutrition and Agriculture Programming
Agrilinks, January 17, 2018

Design Matters in Nutrition-Sensitive Agriculture
Agrilinks, January 18, 2018

More Than Just Irrigation: The Role of Water in Agriculture and Nutrition
Agrilinks, January 31, 2018

The Infant and Young Child Feeding Image Bank
Drupal.org, February 9, 2018

SMARTE Solutions for Value Chains: Telling Stories Through Community Video to Improve Agriculture
Agrilinks, April 09, 2018

Rethinking What Is Driving Rising Anemia Rates
Malnutrition Deeply, April 19, 2018

Social Behavior Change for Nutrition: Six Years of Global Programming
Malnutrition Deeply, May 03, 2018

Agriculture and Nutrition Can't Be Kept in Separate Silos, Say Experts
Malnutrition Deeply, June 21, 2018

IYCF Image Bank: Better Visuals for Your Social and Behavior Change Programming
ICT Works, June 27, 2018

Call to Action on Adolescent Nutrition Demands Better Data
IFPRI Blog, July 05, 2018

Six Key Resources to Check Out From SPRING's Agriculture-Nutrition Team
Agrilinks, July 11, 2018

Questioning the Link between Income and Adequate Diets: How to Make Myth a Reality?
UNSCN NEW, July 2018

Putting Budget Data to Work for Nutrition
Emergency Nutrition Network Field Exchange, September 13, 2018

Videos

There are currently 167 videos posted on the SPRING website (via Vimeo), with 11,237 plays and 143,036 impressions during the life of the project. An impression is counted each time the video player loads on any page, either on Vimeo.com or wherever a video is embedded. A play is counted each time someone pushes the play button on a video. Below are the top ten videos with the most impressions.

Table 2. SPRING Videos with the Most Impressions

Rank	Video	Loads
1	Designing the Future of Nutrition SBCC: How to Achieve Impact at Scale	57,329
2	Nutrition Financing: Why Does it Matter?	8,408
3	Pathways to Better Nutrition Country Case Studies	3,983
4	Looking Beyond Food for Better Nutrition	2,823
5	Leveraging Community-led Video for Nutrition	2,386
6	How Can Different Groups and Organizations Work Together to Improve Nutrition?	2,090
7	Strategic Agenda for At-Scale SBCC	1,447
8	"When a King has Good Counsellors, His Reign is Peaceful" - A Call to Action for Our Children and Our Communities' Futures (Ghana)	1,426
9	Photo to Illustration Tutorial	1,072
10	Make the Healthier Choice: Eat Fortified Foods (Uganda Animation)	1,051

Webinars

SPRING hosted 76 webinars over the course of the project, including seven webinars during FY 2018, listed below. All webinar materials and recordings are available on the SPRING website here: https://www.spring-nutrition.org/events.

Table 3. FY18 SPRING Webinars

Title	Date	Stats
1. Strengthening Food-based Approaches to Reduce Iron Deficiency: The FAO/WHO Global Individual Food Consumption Data Tool (FAO/WHO GIFT)	December 5, 2017	Attendees: 130 Viewings: 33
2. Pamodzi! "Togetherness for Nutrition." Learning from Nutrition-Sensitive Agriculture Activities in Zambia	January 23, 2018	Attendees: 151 Viewings: 190
3. Smart Investments, Big Returns: How Understanding Financial Data Can Transform Nutrition	February 27, 2018	Attendees: 86 Viewings: 125
4. Assessing Drivers of Malnutrition in Nigeria	March 21, 2018	Attendees: 133 Viewings: 86
5. Systems Thinking to Sustain Improved Nutrition	March 29, 2018	Attendees: 119 Viewings: 129
6. Learning Together for Improved Nutrition: SPRING Nutrition-Sensitive Agriculture Training Resource Package	May 24, 2018	Attendees: 81 Viewings: 19
7. Changing the Way We Think about the Cost-Effectiveness of Addressing Childhood Anemia	April 11, 2018	Attendees: 32 Viewings: 4

Operations, Finance, and Management

Throughout SPRING's seven years of implementation, the Finance and Operations (F&O) team provided quality, timely, and compliant financial and operational support, enabling the teams and individuals to work effectively and efficiently with partners and donors globally to achieve program results. The F&O team worked behind the scenes to ensure that SPRING employed the right people to perform the work at the right time, staff understood and followed corporate and USAID policies and procedures, budgets were managed and implemented, contracts were executed in a timely and compliant manner, and vendor and partner relationships were cultivated and managed.

Highlights of the F&O team's financial, operational, and administrative support include the following:

- Managed the financial and administrative operations for eight field offices—Bangladesh, Ghana, Haiti, Kyrgyz Republic, Mali, Nigeria, Senegal, and Uganda. Support included opening/closing of offices and day-to-day financial and operational backstopping support.
- Managed the financial and administrative operations for program implementation activities in 10 countries (without a field office presence): Burkina Faso, Ethiopia, Guatemala, Guinea, India, Niger, Nepal, Rwanda, Sierra Leone, and Tajikistan.
- Supported approximately 550+ international trips to provide technical assistance, disseminate SPRING's work and lessons learned, participate in global learning events and conferences, and provide programmatic management and USAID mission-specific support.
- Oversaw recruitment, onboarding, human resources management, and training and development for a staff of 50+ home office–based staff (56 staff at peak in 2016).
- Hired more than 90 U.S.-based individuals to staff both core- and country-funded positions, 20 expatriate/third-country national (TCN) individuals for positions based overseas, and 300+ local-hire positions around the world.
- Recruited, hired, and managed over 170+ consultants to support programmatic activities through short-term technical assistance.
- Executed and managed 400+ contracts (for both goods and services).
- Provided logistics support for local nutrition leaders around the world to attend dozens of global events (such as SUN and GLEE events).
- Organized, hosted, and coordinated event management for three nutrition-focused GLEE events in Cambodia, Ghana, and Thailand and three Ag/N-GLEEs in Uganda, Guatemala, and Thailand. These events attracted hundreds of leaders and missions across the multi-sectoral platform of nutrition.
- Hosted and provided event management support for 115+ high-level conferences, workshops, meetings, and symposia around the globe, bringing nutrition leaders together to promote, share, and collaborate on SPRING and other nutrition-related programming and recommendations.
- Managed a large partnership consortium of 10 partners, with major sub-agreements exceeding $44+ million.

- Successfully managed SPRING's obligation, totaling over $123+ million, with an average monthly burn rate of over $4.3 million, ensuring strong financial management, compliance, and proper use of project funds.
- Oversaw cost-share contributions of $8+ million, far exceeding the requirements of our cooperative agreement.
- Navigated and managed a complex public-private partnership with the Hershey Company, on behalf of USAID/Ghana, to purchase nut-roasting equipment totaling more than $670,000.
- Ensured SPRING's impact and resources were well documented, organized, and accessible after project closure.

Table 4 represents SPRING's life-of-project expenditures by approved budget and activity/funding source:

Table 4. Expenditures by Activity/Funding Source over Life of Project (as of April 30, 2018):

Activity/ Funding Source	Total Budget (Obligated)	Year 1 Oct '11- Sep '12	Year 2 Oct '12- Sep '13	Year 3 Oct '13- Sep '14	Year 4 Oct '14- Sep '15	Year 5 Oct '15- Sep '16	Year 6 Oct '16- Sep '17	Year 7 Oct '17- Sep '18	TOTAL
Core Global Health									
Core Nutrition	$22,607,001	$2,288,066	$2,914,989	$3,429,964	$3,035,472	$3,515,105	$4,059,132	$2,626,913	$21,869,642
Core Sahel	$2,000,000		$98,356	$411,776	$1,374,800	$115,068	$0		$2,000,000
Core Uganda-PHFS	$1,800,000		$120,240	$601,475	$670,443	$406,612	$131		$1,798,901
Core BFS									
Core BFS (AgNut, GLEEs, Conferences)	$10,246,000	$21,686	$1,053,903	$1,500,456	$1,643,438	$2,190,234	$2,150,755	$1,110,416	$9,670,888
Core BFS (SPPM)	$400,000				$238,266	$161,734			$400,000
Core BFS (Guinea)	$664,478				$78,792	$470,100	$115,586		$664,478
Core BFS (Sierra Leone)	$635,522				$30,184	$535,506	$69,831	$0	$635,522
Sub-Total Core	***$38,353,001***	***$2,309,753***	***$4,187,488***	***$5,943,671***	***$7,071,395***	***$7,394,360***	***$6,395,435***	***$3,737,329***	***$37,039,432***
Field Support									
Bangladesh	$17,657,391	$404,921	$3,377,066	$3,887,253	$4,042,714	$4,154,984	$1,790,453		$17,657,391
Ghana	$20,665,702			$766,129	$4,113,114	$8,263,442	$7,209,699	$313,317	$20,665,702
Guatemala	$113,518				$113,331	$187			$113,518
Guinea	$500,000						$465,268	$34,732	$500,000
Haiti	$2,957,739	$286,738	$777,890	$796,080	$856,460	$240,494			$2,957,662
Kyrgyz Republic	$7,589,539			$126,239	$1,314,860	$1,918,167	$2,090,253	$1,314,555	$6,764,075
Mali	$2,060,185			$7,734	$1,018,693	$1,022,745	$8,854	$2,160	$2,060,185
Nigeria	$6,935,942	$52,579	$510,516	$1,476,839	$2,328,586	$2,567,423			$6,935,943
Nigeria (BFS)	$100,000						$26	$99,614	$99,639
Nigeria Mission TA	$500,000							$162,684	$162,684
Rwanda	$31,000						$30,613		$30,613
Sahel	$4,000,000					$1,266,484	$2,139,271	$532,607	$3,938,362
Sierra Leone	$500,000						$491,014	$8,986	$500,000
Senegal	$7,300,000				$137,894	$2,524,466	$3,757,565	$815,409	$7,235,335
Tajikistan	$80,000		$2,444	$77,557					$80,000
Uganda	$13,791,262	$181,658	$2,132,763	$2,709,447	$2,891,192	$2,680,659	$2,588,314	$596,685	$13,780,718
Zambia	$9,646						$9,646		$9,646
Sub-Total Field Support	***$84,791,924***	***$925,897***	***$6,800,678***	***$9,847,279***	***$16,816,845***	***$24,639,052***	***$20,580,974***	***$3,880,749***	***$83,491,473***
Grand Total	**$123,144,925**	**$3,235,649**	**$10,988,166**	**$15,790,950**	**$23,888,240**	**$32,033,412**	**$26,976,409**	**$7,618,078**	**$120,530,905**

Conclusions, Recommendations, and Perspectives on the Future of Multi-Sectoral Nutrition

SPRING was, in many ways, USAID's learning platform for multi-sectoral nutrition programming at both global and country levels. The project relished that role and the collaboration and thought-partnership with USAID and other nutrition stakeholders that it enabled. "Multi-sectoral" means working with and across a variety of areas within health, if stunting and anemia are to be reduced and prevented, but it also means working with a variety of sectors *beyond* health, including agriculture, education, livelihoods, gender, market systems, and the social safety net. At SPRING, thanks to the engagement and support of the Bureau for Food Security, our most successful multi-sectoralism involved the agriculture sector. "Multi-sectoral" also means working with governments, civil society organizations, and market-based private sector actors, as well, at policy and program implementation levels, and it means working with the variety of actors who engage with individuals, households, communities, political/administrative entities, and national governments. By its very nature, working multi-sectorally for nutrition also necessarily entails using different engagement strategies for our common agenda—strategies including building communities of practice; conducting both academic and implementation research; using media of all kinds (digital/social, interpersonal, mass); relentlessly pursuing knowledge management, communications, and dissemination; and working flexibly and adaptively.

Just some examples of the multi-sectoral technical areas that SPRING embraced include the following:

- Within the **WASH** sector, SPRING used community-led total sanitation (CLTS) in Ghana and Mali, improved sanitation practices through the use of tippy taps in Ghana and Bangladesh, and promoted handwashing and improved toilets in Kyrgyzstan.
- In the **agriculture** sector, we adapted the farmer field schools approach in Ghana and Mali and developed farmer nutrition schools (FNS) in Bangladesh. Defining and promoting nutrition-sensitive agriculture informed our approach to the reduction of aflatoxins in groundnut production in Ghana and the production of nutrient-rich local foods in Ghana, Guinea, Mali, and Bangladesh.
- In the **health** sector within the HIV/AIDS context, SPRING scaled up nutrition assessment, counseling, and support (NACS) in Haiti and Uganda, and added new quality improvement approaches. Depending on the local context, SPRING utilized both essential nutrition actions/essential health actions and infant and young child feeding (IYCF) approaches in our country programming in Bangladesh, Ghana, Mali, Nigeria, and Senegal. SPRING addressed traditional anemia prevention and treatment approaches within the health sector, scaling up the training of health care providers in Ghana and the Kyrgyz Republic, and also developed creative new tools for district-level assessment and planning for anemia, implemented in Ghana, Nepal, and Uganda.
- With respect to **children's development**, SPRING promoted innovative ways of engaging community groups serving orphans and vulnerable children (OVC) in Nigeria, which resulted in a child-centered nutrition training curriculum for multiple age groups, moving beyond the 1,000 days to early childhood, the "forgotten middle" years of school-age children, and adolescence.
- SPRING's approach to **gender** went beyond engaging pregnant women and mothers only to innovatively weaving work with teen girls, grandmothers, fathers, and male partners into our programming. Through

the Women's Empowerment in Agriculture Index evaluation, SPRING found that our Bangladesh FNS proved impactful because of the increase in women's empowerment as well as their knowledge, skills, and practices. We tried different ways of engaging fathers in Ghana, Niger, and Senegal that were important for improving women's involvement in decision-making and men's involvement in nutrition. Grandmothers were part of support groups in Ghana and Senegal.

The SPRING partners credit USAID with a flexible, adaptable, and inclusive design of the cooperative agreement. Under USAID's guidance, we were able to evolve with the field and contribute during a very dynamic era for global nutrition. Among the things SPRING would like to highlight as major take-aways and conclusions are these:

- **Learning by doing, implementation science, and adaptive management are techniques well-suited to effective nutrition programming.** SPRING rolled out innovations developed globally for anemia, nutrition-sensitive agriculture, health systems strengthening, micronutrient supplementation, and social and behavior change in our country programs. In some countries, work begun as pilot tests or demonstration programs was successfully scaled and successfully adapted to other settings (e.g., MNPs in Uganda, DATA in Uganda and Ghana; farmer nutrition schools in Bangladesh and Mali; budget analysis in Uganda and Nepal; and participatory community videos in India, Sahel, and Senegal). In more than one country, the SPRING strategy evolved considerably at the request of the local mission or due to the exigencies of the local context.
- **Integrated approaches and linkages between facilities and community are key.** We learned in Bangladesh, Ghana, and Uganda that targeting 1,000-day households with multi-sectoral, integrated services and linking them with facility-based interventions impacted not only nutrition behaviors and practices but also stunting in young children. Scale and impact require coordinated, multi-channel activities.
- **Partnership is essential for multi-sectoral success.** SPRING came to appreciate that the "P" may be the most important letter in our name. We worked productively through local partners in Senegal (community-based agriculture and health organizations), Nigeria (community-based OVC and health service organizations), and Ghana and Bangladesh (local NGOs and Ministries of Health & Family Welfare, Agriculture, and Social Services). Within USAID, SPRING benefited immensely from partnership between the bureaus for Global Health and Food Security and linkages with the U.S.'s nascent effort to coordinate a whole-of-government approach to nutrition. Globally, SPRING developed very effective partnerships with key actors and networks, including the Global Nutrition Report consortium, the Scaling Up Nutrition Movement (SUN), and multilateral organizations such as FAO, UNICEF, the World Bank, and WHO. Our partnerships with global players centered around experience sharing; participation in or creation of communities of practice; technical assistance; research; knowledge management; and dissemination of findings, tools, and resources.
- **A systems view is critical—especially when there is no system.** There is no "nutrition system" in any country, anywhere, but SPRING led the community's thinking on what a "systems approach" to multi-sectoral nutrition looks like. This conceptual work was developed alongside our implementation in countries, so it was not used as our starting point, but as a framework we were able to build and refine as the project matured. In the final year of SPRING, we were able to ground-truth it against our years of implementation, specifically in Ghana and the Kyrgyz Republic. We directly supported health and

agriculture systems strengthening for nutrition in Bangladesh, Ghana, and Kyrgyzstan. We worked at the policy level to strengthen the enabling environment for nutrition, as well as helping to develop and implement specific policies for anemia prevention in Uganda and Kyrgyzstan and food fortification in Uganda.

- **Measurement is challenging, but it can be approached usefully from many angles and in creative ways.** SPRING struggled with constraints on our M&E component: missions sometimes did not want to spend time or resources on baselines, but they wanted to see demonstrable, measurable outcomes (e.g., Bangladesh); SPRING sometimes was tasked with working with, or relying upon, another implementing partner to "handle" the M&E for our activities (e.g., Ghana); some project timeframes were very compacted making measurement difficult (e.g., Senegal). But in every case, SPRING strategized creative approaches (including routine monitoring, qualitative studies, and quantitative data collection) and marshaled resources to be able to document, prove, or measure our work and its contributions.
- **The global→country/country→global cycle works.** As a centrally-funded global mechanism, the SPRING consortium believed wholeheartedly that the global agenda should be informed by country needs and country experience, and that the work at the country level should be informed by global evidence and good practice. This is the unique value-add of centrally-funded programs, and it was the centerpiece of the SPRING *modus operandi*. With USAID concurrence, we strove to mesh our global and country-level programming, and our core- and field-funded activities, to improve the relevance, quality, and impact of both.
- **When you're learning, you'd better be sharing.** With USAID's support, and to meet USAID's high expectations, SPRING expended a great deal of effort in the area of knowledge management, project communications, and dissemination. As hinted at above in the discussion of the importance of partnerships, SPRING's knowledge management platform became the foundation for our global connection, and our global impact.

The last words on SPRING remain these: JSI, HKI, Save the Children, the Manoff Group, and IFPRI were honored to be USAID's partners in strengthening partnerships, results, and innovations in nutrition globally from 2011 to 2018. Through our work, "multi-sectoral nutrition" became better understood, more applied, and more impactful. We are proud of the legacy of learning documented at www.spring-nutrition.org, and trust our tools and resources will be useful for practitioners, researchers, program designers, implementers, and policymakers for years to come.

Annex 1: PY 7 Q3 & Q4 Activity Matrix

With USAID approval, this matrix, the PMP data reported in annex 2, and the travel table in annex 4 comprise the required quarterly reports for PY7 Q3 and Q4.

Anemia Q3/4 PY7 Matrix						
Activity	**Deliverable(s)**	**Proposed Submission Quarter**				**Activity Status**
1.1: Strengthen multi-sectoral anemia programming at the national and district level						
1.1.1 Provide TA to countries to promote multi-sectoral anemia platform strengthening SPRING will continue to support the National Anemia Working Groups in their multi-sectoral anemia efforts at the national level. In Sierra Leone, SPRING will support the development of two briefs on IFA dosage and MNP dosage, to support national- level anemia programming. SPRING will also support the development of an adolescent nutrition brief for Uganda, in collaboration with the SPRING Uganda team. In both countries, we will conclude process documentation with the dissemination of the anemia strategy.	A. Finalize and disseminate process documentation in Sierra Leone and Uganda					This activity is complete. Uganda activities concluded in December 2017 when the SPRING/Uganda office closed. Sierra Leone's *National Multi-sectoral Strategy to Prevent and Control Anemia* was disseminated in country in January 2018. An article on SPRING's experiences supporting multi-sectoral anemia platforms was accepted for publication by the *International Journal of Health Planning and Management*.
1.1.2 Support adaptation and scale-up of anemia tools SPRING will conduct a training of trainers (TOT) in Washington, DC on the Landscape Analysis Guidance and District Assessment Tool for Anemia (DATA). This TOT will be targeted toward implementing partners and program designers in order to increase	A. TOT on the LA and DATA tools					This activity is complete. The LA/DATA workshop was held at the JSI office February 21 & 22, and we submitted a workshop report to USAID. An off-shoot of this activity, a LA/DATA workshop, was conducted in Kefi, Nigeria, on May 9 & 10 for representatives of the Nigeria government and USAID implementing partners.

the uptake of anemia tools and resources for evidence-based programming.						
1.2: Build evidence and guidance on anemia interventions						
1.2.1 Collaborate on global anemia research efforts Under the HEmoglobin Measurement (HEME) working group, we will continue to analyze the accuracy and reliability of hemoglobin measurements. The results will be presented at the WHO consultation on anemia cutoffs, as applicable. SPRING was also asked to participate in technical deliberations on the risks of excessive intake of vitamins and minerals, organized by the WHO. We will also develop a brief comparing the prevalence of anemia from different surveys conducted in similar time periods within a country. The study will be presented at the IUNS 21st International Congress of Nutrition.	A. HEME working group manuscript					This activity is complete. After the anemia team addressed comments from co-authors and USAID, we submitted the document to CDC for clearance (as two of our authors are CDC employees), and subsequently to the WHO for publication.
	B. Anemia assessment brief					This activity is complete. The anemia team addressed comments from USAID, CDC, Government of Guatemala, and two USAID peer reviewers before submitting the final brief to USAID.
1.2.2 Finalize and disseminate results of MNP study SPRING completed the Uganda MNP implementation study in PY6, and dissemination will conclude in PY7. In addition, SPRING will draft a brief on the global implications of MNP distribution, based on the Uganda MNP study costing results, and will undertake a spatial modeling study using geographical information collected during the MNP study.	A. Brief on Implications of Costs of MNP within national programs					This activity is complete. The final brief was submitted to USAID an has been posted to the website and submitted to DEC.
	B. Report on spatial analysis					This activity is complete. The final report was submitted to USAID an has been posted to the website and submitted to DEC.
1.2.3 Small-scale Maize Mills Fortification Costing Study SPRING/Uganda proposed a technical	A. Report on the cost of fortification					This activity is complete. The final report was submitted to USAID/DC and USAID/Uganda at the end of July.

feasibility study to determine the best feeder for use in small-scale maize mills, to support the Uganda Ministry of Trade, Industry and Cooperatives' effort to include small scale millers in the national fortification program. We will carry out a comprehensive cost analysis of the use of feeders in small-scale mills, compared with the feeders used in normal-size mills, to assess the economic and technical feasibility of scale up to the national level.	with small mills in Uganda					USAID/Uganda will share the report with the Government of Uganda.
1.3: Support global coordination efforts to reduce anemia						
1.3.1 Maintain Accelerated Reduction Effort on Anemia (AREA) Community of Practice (CoP) In collaboration with the World Health Organization (WHO) and the United Nations Standing Committee on Nutrition (UNSCN), SPRING will continue to manage the AREA CoP, including maintaining and building membership, posting and facilitating online discussions ranging from technical debates to presentation opportunities at conferences, and carrying out webinars on relevant topics. SPRING will also continue to review news items and recent literature from scholarly journals and other publications, curating a list to be shared with the CoP and other interested parties.	A. Webinars (2)					
	B. Resource reviews (2)					This activity is complete. Two resource reviews were prepared and disseminated this project year, with the second (and final) resource review shared in April.
1.3.2 Support USAID Anemia Task Force Support the USAID Anemia Task Force to foster cross-agency knowledge and collaboration on anemia programming. SPRING will co-chair meetings of the Task Force with MCSP, with each project responsible for two of the four meetings in	A. Quarterly meetings (2)					This activity is complete. SPRING supported two meetings of the task force in PY7, as planned. We held the third Task Force meeting of PY7 on May 24, 2018, where we presented the results of two studies—the seven-country analysis of the variability of hemoglobin concentrations and the analysis of the differences in

PY7. The Task Force will promote the sharing of member organizations' work, foster coordination of USAID-funded projects in anemia-related research, policy, and programming, and identify appropriate joint activities.						hemoglobin measurement between the DHS and micronutrient surveys among children 6–59 months of age.

SBCC Q3/4 PY7 Matrix						
Activity	**Deliverable(s)**	**Proposed Submission Quarter**				**Activity Status**
2.1: Advance evidence and capacity for promising SBC delivery strategies						
2.1.1 Provide global technical assistance for SBC programming Provide general support to USAID missions or implementing partners for SBC programming related to training, strategy development, community media, MIYCN trainings, etc., based on current need and demand. This may include MIYCN trainings and/or TOTs for community-level implementers and partners, TA for community media, support for adapting C-IYCF materials, or other SBC-related technical assistance.	Trip and TA reports, as well as any relevant inputs and outputs are expected as deliverables					This activity is complete. SPRING partnered with Save the Children/UK to develop a thought piece on engaging adolescents to accelerate progress on the first 1,000 days. The final draft of this article has been posted to the website and submitted to DEC. We also provided TA to the Suaahara II (SII) project in Nepal through technical review of its adolescent nutrition and health strategy and training manual, including the design and development of complementary SBCC materials. In May 2018, two SPRING staff traveled to Nepal to develop and concept-test draft materials for SII's package and provide specific recommendations for the structure and content of the training manual.

2.2: Disseminate guidance and tools for applying best practices in nutrition SBCC						
2.2.1 Document experiences and adapt tools to guide implementation of community media in nutrition-sensitive agriculture activities Using learning generated through community media activities in India, Guinea, and other countries, SPRING will develop and adapt practical tools to support countries to implement multi-sectoral community media activities, including guidance/tools on selecting appropriate nutrition-sensitive agriculture practices for promotion; working with agriculture value chain actors to promote nutrition-sensitive agriculture practices; and using alternative dissemination channels, including tablets and/or smartphones. These tools will adapt SPRING/Sahel's Community Video Roadmap to form a complementary set of materials that can accompany SPRING's *Community Video for Nutrition Guide*.	Package of tools/job aids					This activity is complete. SPRING developed a user-friendly webpage featuring all SPRING's guidance and tools for community media. This webpage includes three new documents: (1) a blog post on using community video in Guinea to promote nutrition-sensitive agriculture practices among agriculture value-chain actors (posted on Agrilinks), (2) a brief on using tablets and smartphones in video production and dissemination, and (3) a set of sample guiding questions for identifying and prioritizing nutrition-sensitive agriculture behaviors.
2.2.2 Develop guidance for best practices in designing SBC strategies SPRING will leverage our experience creating SBC strategies for country governments and implementing partners (e.g., Uganda, Sierra Leone, the Kyrgyz Republic), and will produce clear, practical guidance on developing an SBC strategy, referencing existing tools developed by SPRING, TOPS, Health Communication Capacity Collaborative, and others.	SBC Strategy Guidance Brief					This activity is complete. We identified and compiled a range of useful tools for designing, implementing, and monitoring SBC strategies, such as SBC strategy documents and other useful sample documents and templates, submitted to USAID for review and now live on the SPRING website
2.2.3 Develop and update e-learning courses on nutrition and SBC SPRING will generate new and updated content for two e-learning courses, in collaboration with the Knowledge for Health program: an update of the Global Health e-learning course on nutrition,	Course content and materials for two e-learning courses					This activity is complete. Throughout PY7, SPRING has worked on updating the Global Health eLearning Center's (GHeL), "Nutrition: An Introduction" course, as well as developing content for a new course on SBC for nutrition. The

and a course on SBC, adapted from SPRING's Accelerating Behavior Change for Nutrition-Sensitive Agriculture.						two new e-courses are live on the Global Health e-Learning Center site.
2.3: Disseminate SBC work globally and across countries						
2.3.1 Share results of the Nigeria C-IYCF Evaluation, translating findings into practical recommendations SPRING will build on the learning generated through its evaluation of the C-IYCF counselling package in Nigeria, in collaboration with UNICEF and the Nigeria MOH. This will include supporting the adaptation of the C-IYCF counselling package and accompanying tools based on study results; documenting lessons learned after implementing the package; and working with UNICEF to share the findings of the evaluation, through a journal article or other events.	Journal article manuscript(s)					This activity is complete. The findings of the C-IYCF evaluation were disseminated in Nigeria, New York City, and Washington, DC. SPRING and UNICEF/Nigeria jointly agreed to fund a journal supplement on these findings and the C-IYCF counselling package, to be submitted to the *Maternal and Child Nutrition* journal. All articles for the supplement are drafted and are under review by co-authors from UNICEF (NYC, Nigeria, Thailand, and Rwanda) and the Rwanda MOH, as well as several independent consultants.
2.3.2 Work with the global nutrition community to translate SPRING's findings and resources for adolescent girls' nutrition into action. SPRING will continue to support global efforts to generate evidence and guidance on adolescent nutrition. In October 2017, SPRING and PAHO/WHO will hold an Adolescent Nutrition Consultation to share the findings of SPRING's systematic review and derivative product for adolescent girls' nutrition, and identify research and learning priorities to guide future programming and guidelines development.	Stakeholder Consultation Meeting					This activity is complete. The stakeholders' consultation was held in Q1. The meeting report, all consultation documents are now available on the SPRING website. Over 100 organizations joined the resulting "Call to Action" within a month of its launch at the WHO-GAIN Adolescent Nutrition meeting in Geneva in June.
2.3.3 **Share SPRING's lessons learned and resources with the global nutrition community through virtual and in-person presentations and discussions.**	At least 3 in-person or virtual presentations for a					This activity is complete. In Q3, members of the SPRING SBCC team led eight presentations at the International SBCC Summit, focusing on community media, the photo-to-

SPRING will disseminate SBC learning and resources at global conferences and in webinars and/or webchats through a range of channels, including— • An easily searchable webpage that compiles all SPRING's community video experience, resources, and related materials. • Presentation of SPRING's work at the 2017 IUNS conference and the 2nd International SBCC Summit, April 2018. • Management of the C-IYCF Image Bank SPRING created in PY6. • Dissemination of SPRING's work, including the image bank, tutorial video, and Photo-to-Illustration Guide at conferences to promote uptake and use of the materials.	conference or webinar					illustration process, IYCF Digital Image Bank, and nutrition-sensitive agriculture. Other dissemination done in PY7 included a dissemination meeting on the IYCF Image Bank and Photo-to-Illustration guide held in the UNICEF offices in New York, and several presentations at the International Conference on Nutrition in Buenos Aires in Q1. At the end of June, SPRING also presented on the IYCF Image Bank during the Food Assistance for Nutrition Evidence Summit in Washington, DC.

Systems Q3/4 PY7 Matrix						
Activity	**Deliverable(s)**	**Proposed Submission Quarter**				**Activity Status**
3.1: Assess the application of systems thinking for nutrition						
Activity 3.1.1 Assess the integration of double duty actions in national nutrition policies Building on WHO's recent global nutrition policy review—What does it take to scale up nutrition action?—SPRING will review the existing national nutrition action plans to determine the extent to which double-duty actions have been included. Based on the findings, SPRING will prepare a blog and/or infographic.	Blog/infographic					This activity is complete. SPRING has posted a brief analyzing policies on double-duty actions in 29 of USAID's high priority countries and submitted it to DEC.
Activity 3.1.2 Promote the application of systems thinking through collaboration and coordination with global partners We will continue to participate in SUN's Community of Practice 1: Resource Mobilization and Planning. In collaboration with SUN, we will conduct another working group virtual meeting on nutrition budget analysis. In addition, will present at the SUN Global	Working group meeting Presentation					In addition to presenting at the SUN Global Gathering, SPRING organized two budget analysis

Gathering (Nov 2017) and/or upcoming SUN regional meetings, and support the Sierra Leone country delegation to attend the Global Gathering.						working group calls, exceeding our target for the year. The first call, on December 12, focused on tools and systems. The call on March 14 discussed methodologies and subnational budget analysis. Representatives from the SUN Movement, World Bank, UNICEF, R4D, and MQSUN participated in the calls.
Activity 3.1.3 Document and share SPRING processes for and experiences with translating knowledge into policy and practice Through its global and country-based work, SPRING's work has contributed to the development and implementation of national policies, strategies, and plans. SPRING will synthesize experiences on translating research and program learning into policy, across countries and technical teams, based on document review and discussions with core and country staff. Format to be determined, but may include blog series and webinar.	Brief					This activity is complete. The brief, *Translating Evidence into Policy*, summarizes what SPRING learned about how to supply useful, credible, timely evidence to create good policy has been posted to the SPRING website and submitted to DEC.
3.2: Develop, test, and share tools and guidance for applying systems thinking for nutrition.						
Activity 3.2.1 Develop tool and guidance for periodic assessments of systems for nutrition Based on our efforts to map SPRING's programs in the Kyrgyz Republic and Ghana to our systems framework for nutrition, SPRING	Tool and guidance					This activity is complete. SPRING developed tool and accompanying

will develop guidance (and a tool) for periodic assessments that programs can use to apply systems thinking.						guidance built on the work we conducted in Ghana and the Kyrgyz Republic to test the SPRING systems framework and its usefulness for assessing, designing, implementing, monitoring, and evaluating inter- and multi-sectoral nutrition programs. It is posted on the website and has been submitted to DEC.
Activity 3.2.2 Orient USAID implementing partners on SPRING's budget analysis tools Deliver a half-day training in Washington, DC, for USAID and implementing partners on our nutrition budget analysis methodology, based on the trainings that SPRING conducted in Uganda. Depending on interest and availability, we could replicate this training as a skills-building session conferences or at the country level. We will explore opportunities to share resources at other SUN gatherings throughout the year or other regional meetings, such as or the South Asia Food and Nutrition Security Initiative meeting.	Workshop (agenda, slides, and other materials)					This activity is complete. As part of a continued effort to increase the reach of SPRING's nutrition financing and budget analysis resources, SPRING conducted a workshop on the *2018 Nutrition Budget Analysis Tool and Guide* on April 17; 21 participants joined from 10 different organizations.
Activity 3.2.3 Orient USAID implementing partners on SPRING's *Recipe for Good Nutrition, Growth, and Development in the Community*	Workshop (agenda, slides, and other materials)					This activity is complete. On May 11, SPRING conducted a

Present the *Recipe for Good Nutrition, Growth, and Development in the Community* during a half-day workshop in DC for USAID and implementing partners. This guidance focuses on strengthening the harmonization and capacity of community-level providers for nutrition. Depending on interest and availability, we could replicate this training as a skills- building session conferences or at the country level.						consultation meeting on the "recipe" for *Building a Shared Vision for Good Nutrition, Growth, and Development in the Community*, including 17 participants from a range of organizations. The consultation provided participants with an overview of the "recipe" document, which offers practical suggestions for developing a harmonized, mutually reinforcing network of community nutrition services. It is posted on the SPRING website and has been submitted to DEC.

Agriculture to Nutrition Q3/4 PY7 Matrix							
Activity	**Deliverable(s)**	**Proposed Submission Quarter**				**Activity Status**
4.1: Deliver technical assistance in the design and implementation of nutrition-sensitive agriculture programming						
4.1.1 Complete Guide to the Design and Monitoring of Nutrition-Sensitive Agriculture Value Chain Activities Update draft design guide based on feedback and ongoing work with BFS to produce a short technical note and guidance to facilitating a process to incorporate nutrition-sensitive interventions, outcomes, and indicators into agriculture value chain projects.	Guide (short technical note) and facilitator's resources					This activity is complete. SPRING submitted the *Guide for Effective Design of Nutrition-Sensitive Agriculture Activities* to USAID as a final deliverable on May 29, with a Technical Note that summarizes the guide and a lessons learned report that documents our learning from developing this guidance during the past 4 years.
4.1.2 Technical assistance in designing nutrition-sensitive agriculture activities Provide training and technical assistance on nutrition-sensitive agriculture, or other related topics, for USAID mission staff, implementing partners, and other key stakeholders, using SPRING's materials and training tools (for context assessment, design, and social and behavior change).	Trip reports summarizing use of tools, results, and lessons learned					Our final technical assistance assignment, training staff on the *Cultivating Nutrition* Activity in Senegal (follow-on to Yaajeende), was completed by May 17 and all reports, tools, and lessons learned have been submitted to USAID Senegal and BFS. The *Training Resource Package for Nutrition-sensitive Agriculture* was the basis for these two trainings: one for staff in Kaffrine and one for staff in Sedhiou, Senegal.
4.2: Build evidence (operations research, technical guidance documents, tools)						
4.2.1 Report of nutrition assessments in two GFSS countries Conduct literature review and in-country data collection to understand the current nutrition situation in two countries identified by USAID to inform GFSS implementation plans. Nigeria's	Two reports capturing the nutrition situation in each country					SPRING completed this activity in Q1. Assessments for Nigeria and Niger are final and posted to the SPRING website and DEC.

final report will be submitted in Q1 and a second country is planned.						
4.2.2 SPRING nutrition-sensitive agriculture lessons learned Undertake and document lessons learned in implementing nutrition-sensitive agriculture interventions based on experience in one SPRING country. Also, develop a brief documenting the challenges encountered in developing nutrition-sensitive agriculture program design guidance (see Activity 4.1.1).	One report and one brief					This activity is complete. SPRING completed the first lessons learned document in Q2 in the form of a blog. The lessons learned document related to the design guidance was submitted, with the rest of the Design Guide, on May 29.
4.2.3 Publish paper on key approaches for nutrition-sensitive agriculture To contribute to the growing field of nutrition-sensitive agriculture, SPRING will generate an article documenting at least one approach for supporting multi-sector nutrition and nutrition-sensitive agriculture.	One journal article					This activity is complete. We drafted one article and one commentary and submitted both for peer-review. The commentary—Acting: Five Ways to Improve Nutrition through Agriculture Now—was accepted by Global Food Security and is being peer reviewed. The article—*The Effect of Farmer Nutrition Schools on Household Food Production and Women's Dietary Diversity in Bangladesh*—was submitted to *World Nutrition* for peer review. At present, it is expected that both articles will be published in 2018. Both articles were also shared during Q3 with USAID.
4.3: Share, learn, and build an active community of practitioners						
4.3.1: Maintain and expand a platform for knowledge management Create, document, and share resources related to the linkages between agriculture and nutrition.	A. Monthly resource review (3)					This activity is complete. Our final monthly Resource Review was published April 3, 2018. We published six Monthly Resource Reviews during the fiscal year, doubling our goal. The final edition of the *Resource Review* reached over 4,300 subscribers, and shared 14 of the 629 total resources

Increased dissemination, a primary focus for all activities during FY17, will expand the sharing of knowledge across the fields of agriculture and nutrition.						disseminated over the past four years through this newsletter.
	B. Virtual learning and experience exchange events (at least 3 SPRING and 4 Ag2Nut CoP events/calls)					This activity is complete. We completed our support to the Ag2Nut Community of Practice in April, handing over facilitation of the monthly calls to the Agriculture Nutrition and Health (ANH) Academy. During PY7, we supported three Ag2Nut calls, and hosted two internal webinars in January and March on our TA in Zambia and the Nigeria GFSS nutrition assessment. Our final webinar highlighting the *Training Resource Package for Nutrition-sensitive Agriculture* took place on May 24.
4.3.2: Consolidate and document SPRING's learning on linking agriculture and nutrition, highlighting its cross-cutting elements. Document and share lessons learned in designing, implementing, and monitoring nutrition-sensitive agriculture programming. In addition, team members will contribute to overall learning and documentation for SPRING, drawing upon our work promoting nutrition-sensitive agriculture at global and country levels.	A. Conference participation					SPRING attended the Board for International Food and Agriculture Development public meeting on *Resilience Measurement and Analysis* and are making plans to present at the CORE Group Spring meeting on June 7, the World Bank's *Disruptive Innovations* conference June 13–15, and at the ANH Academy Annual Conference in Ghana June 25–29. We also presented the ABC online training at the *SBCC Summit* in April, and the Training Resource Package at the AgReach *Revalorizing Extension Symposium* in April.
	B. SPRING dissemination event(s) and related materials					This activity is complete. Our final half-day learning event took place on May 10, with over 40 participants from USAID, implementing partners, and SPRING. We presented the *Nutrition-Sensitive Training Resource Packag*e and conducted a panel discussion to highlight SPRING's accomplishments in providing TA, developing tools and building capacity in nutrition-sensitive agriculture and multi-sectoral coordination and collaboration for improved nutrition outcomes. In addition, we posted a blog on Agrilinks in April about the updated Context Assessment tool.

4.3.3 SPRING agriculture-nutrition learning series Series of short presentations/workshops on nutrition-sensitive agriculture topics at USAID/Washington.	3–5 brown bag learning events					This activity is complete. SPRING held two brown bag sessions at BFS in March and April on the ABC Training and the Nigeria GFSS nutrition assessment. The May 10 Training Resource Package event was the third of these learning events.

Annex 2: Supplementary Information on Selected Program Monitoring Indicators

This section highlights progress made toward SPRING's main quantitative indicators over the life of the project. Our Performance Monitoring Plan (PMP) at the end of this appendix lists those indicators; they are organized by the overall project objective and the Intermediate Results (IRs) of SPRING's results framework. The PMP contains both global and country indicators, which SPRING regularly collected, analyzed, and reflected on to track project performance and provide feedback for program management. We used our system of project tracking sheets (PTS) in Microsoft Excel to generate tables and track key indicators for project reports. Much of the information in this section comes from those sheets. Summary PMP data for all indicators is in table 12 on pages 116-118.

All countries with field offices developed M&E plans, based on country-level results frameworks, with country-specific PMPs aligned with those frameworks and indicators based on specific needs. In this section, we report on project-wide indicators collected by most or all countries, while the final country reports present country-specific indicators. Project-wide indicators include the number of people trained, people reached (contacts), geographic units supported, and service sites and institutions supported.

SPRING also made important contributions to the global evidence base (IR2 of the results framework), which included attending high-level meetings and conferences, producing documents, participating in and leading networks and communities of practice, carrying out research and evaluation activities, improving nutrition metrics, tracking website visits, and carrying out other dissemination activities.

PMP Indicator 1 and 1.1.1: Number of children under 5 reached and estimated number of contacts made through SBCC activities

One of SPRING's main indicators was the number of people reached (adults and children under 5 years of age) during SPRING activities. The project reached beneficiaries through a wide array of approaches, tailored to meet local needs. People reached were defined differently in each country, generally using the simplest and most accurate measure given for the type of activity. For example, in Bangladesh, SPRING reached people through farmer nutrition schools (FNS), one-on-one counseling in health facilities, and agriculture extension workers. Ghana counted children under 5 who received vitamin A in health facility activities supported by SPRING, while total contacts included people reached through the 1,000-day household approach in selected communities. Haiti counted people receiving a nutrition assessment, counseling, and support in hospitals, with a focus on HIV patients. In the Kyrgyz Republic, SPRING counted people reached both through health facilities and community activists who shared health, agriculture, and hygiene messages. Mali counted FNS participants, people who installed tippy taps, members of support groups, and attendance at community meetings. Nigeria recorded contacts made through counseling during trainings and various SBCC activities. Senegal counted people reached through community video and outreach by community health workers. Burkina Faso, Niger, Guinea, and Sierra Leone mainly counted people reached through community videos. And, finally, in Uganda, SPRING counted people reached with nutrition services in health facilities and people receiving MNPs through SPRING's operations research on that topic, and during community events.

Table 5 summarizes the number of contacts resulting from SPRING activities over the life of the project, by country and by year. Overall, SPRING's activities resulted in more than 17.6 million contacts, including over 14.3

million with females and 7.4 million children under 5.[1] The countries reaching the largest number of people were Bangladesh, Ghana, the Kyrgyz Republic, and Uganda; most contacts were made in years PY3–PY5 when those countries were most active. People were counted every time SPRING reached them, so these figures may have some people counted multiple times.

Table 5. Number of People Reached (Contacts) by SPRING Country Activities, Life of Project

Country	PY1	PY2	PY3	PY4	PY5	PY6	PY7	Total
Bangladesh								
Male	0	0	0	0	0	0	0	0
Female	4,596	1,133,561	3,073,494	2,980,110	3,116,740	1,200,184	0	11,508,685
Children <5	2,713	686,806	1,487,902	1,662,621	1,637,059	733,254	0	6,210,355
Total	**4,596**	**1,133,561**	**3,073,494**	**2,980,110**	**3,116,740**	**1,200,184**	**0**	**11,508,685**
Burkina Faso								
Male	0	0	0	0	0	0	0	0
Female	0	0	0	0	1,141	6,053	0	7,194
Children <5	0	0	0	0	0	3,539	0	3,539
Total	**0**	**0**	**0**	**0**	**1,141**	**6,053**	**0**	**7,194**
Ghana								
Male	0	0	0	66,714	197,897	210,552	0	475,163
Female	0	0	0	68,401	194,206	219,160	0	481,767
Children <5	0	0	0	101,958	194,187	227,966	0	524,111
Total	**0**	**0**	**0**	**237,073**	**586,290**	**657,678**	**0**	**1,481,041**
Guinea								
Male	0	0	0	0	85	179	0	264
Female	0	0	0	0	263	1,112	0	1,375
Not known	0	0	0	0	79	0	0	79
Children <5	0	0	0	0	0	0	0	0
Total	**0**	**0**	**0**	**0**	**427**	**1,291**	**0**	**1,718**
Haiti								
Male	0	1,581	3,457	3,559	0	0	0	8,597
Female	152	3,497	5,712	5,901	0	0	0	15,262
Not known	0	52	122	139	0	0	0	313

[1] Adult females plus children under 5 adds up to more than the total because, in most cases, a woman with a child under 5 was counted as one contact.

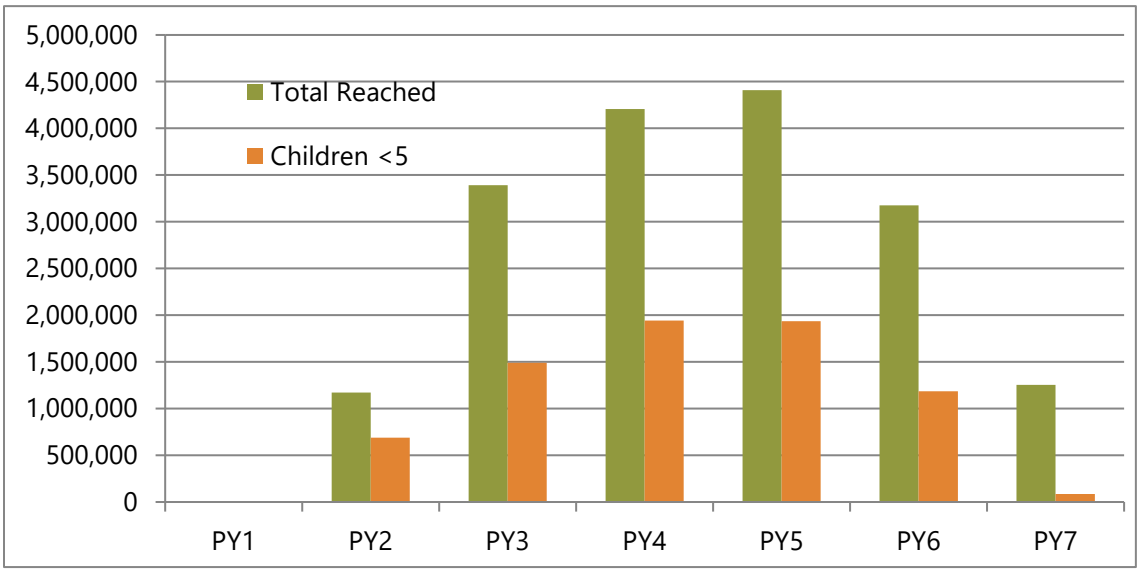
Children <5	0	70	158	321	0	0	0	549
Total	**152**	**5,200**	**9,449**	**9,920**	**0**	**0**	**0**	**24,721**
Kyrgyz Republic								
Male	0	0	0	15,487	122,561	275,037	334,823	747,908
Female	0	0	0	40,244	320,727	599,822	621,789	1,582,582
Not known	0	0	0	0	0	0	298	298
Pregnant women	0	0	0	0	6,148	74,356	117,593	198,097
Children 5–18	0	0	0	0	0	56,875	11,734	68,609
Children <5	0	0	0	7,565	55,550	166,034	166,479	395,628
Total	**0**	**0**	**0**	**63,296**	**504,986**	**1,172,124**	**1,252,716**	**2,993,122**
Mali								
Male	0	0	0	3,479	34,284	0	0	37,763
Female	0	0	0	63,589	65,807	0	0	129,396
Children <5	0	0	0	8,223	4,235	0	0	12,458
Total	**0**	**0**	**0**	**75,291**	**104,326**	**0**	**0**	**179,617**
Niger								
Male	0	0	0	0	26,827	86,187	0	113,014
Female	0	0	0	0	7,086	20,294	0	27,380
Children <5	0	0	0	0	15,806	41,160	0	56,966
Total	**0**	**0**	**0**	**0**	**33,913**	**106,481**	**0**	**140,394**
Nigeria								
Male	0	3,991	3,720	1,466	359	0	0	9,536
Female	0	6,359	10,189	6,190	2,993	0	0	25,731
Children <5	0	1,000	2,279	2,200	1,148	0	0	6,627
Total	**0**	**11,350**	**16,188**	**9,856**	**4,500**	**0**	**0**	**41,894**
Senegal								
Male	0	0	0	0	132	2,730	0	2,862
Female	0	0	0	0	508	11,631	0	12,139
Children <5	0	0	0	0	138	12,357	0	12,495
Total	**0**	**0**	**0**	**0**	**778**	**26,718**	**0**	**27,496**
Sierra Leone								
Male	0	0	0	0	14	35	0	49
Female	0	0	0	0	34	34	0	68
Not known	0	0	0	0	90	792	0	882
Children <5	0	0	0	0	70	0	0	70

Total	**0**	**0**	**0**	**0**	**208**	**861**	**0**	**1,069**
Uganda								
Male	0	7,083	4,094	192,963	2,651	873	0	207,664
Female	0	11,735	9,105	480,970	28,238	2,116	0	532,164
Not known	0	0	279,457	48	0	0	0	279,505
Children <5	0	2,206	793	158,690	26,152	2,066	0	189,907
Total	**0**	**21,024**	**293,449**	**832,671**	**57,041**	**5,055**	**0**	**1,209,240**
Total	**4,748**	**1,171,135**	**3,392,580**	**4,208,217**	**4,410,350**	**3,176,445**	**1,252,716**	**17,616,191**

** Children plus adults do not always add up to the totals because, as mentioned above, many times when children were accompanied by their mothers, the mother plus child were counted as one person. In some cases, when people were reached during community events, gender information was not captured.*

Figure 17 shows the total number of contacts for the entire project, by year. The shorter bars show children under 5 years of age, while the taller bars show total contacts. Overall, the figure illustrates the tremendous growth achieved by SPRING during the ramp-up and mature phases, followed by a decline in PY6 as some country programs began closing down, and a steep decline in the last year because there was only one country remaining (Kyrgyz Republic).

Figure 17. Number of Contacts through SBCC Activities Conducted by SPRING, Total and Children <5, by Year



PMP Indicator 2: Number of children under 5 who received vitamin A from USG-supported programs

Ghana was the only SPRING-supported country where project activities helped to provide vitamin A to children through the health facilities. Over the course of the project, facilities supported by SPRING in Ghana provided vitamin A to 331,827 children under 5.

PMP Indicator 1.1: Situational/landscape analyses conducted by SPRING

SPRING carried out nine landscape analyses/situational assessments during the project, mostly during the early and middle stages of the project. The landscape analyses included the following topics:

- NACS initial facility assessment in Haiti
- NACS initial facility assessment in Uganda
- Uganda partner assessment
- Desk review of Tajikistan
- Anemia landscape assessment: Uganda
- Anemia landscape assessment: Ghana
- Anemia landscape assessment: Sierra Leone
- Landscape analysis of SBCC-related activities in the Sahel
- Landscape analysis of agricultural information systems in Ghana.

PMP Indicator 1.1.2: Number of people accessing nutrition e-learning module

SPRING launched the Accelerating Behavior Change in Nutrition Sensitive Agriculture e-learning course in the spring of PY6. In PY6, 1,134 people accessed the online course and 770 accessed it during the first two quarters of PY7.

PMP Indicator 1.2: People trained in child health and nutrition through USG-supported health area programs

Building capacity was one of SPRING's main activities at the country level. SPRING's training activities reflected the multi-faceted nature of the project and our efforts to address nutrition through multiple sectors, partners, and approaches. The project's training activities usually included health workers at various levels, depending on the country—from hospitals to different kinds of health facilities, to community health workers. In most countries, we first trained a cadre of master trainers who then trained individuals through cascade trainings. Depending on the country, SPRING also trained community leaders in hygiene, diet, food storage, and other aspects of nutrition; and we trained farmers in methods for growing more nutritious crops and storing food safely. In some countries, we trained individuals in aspects of SBCC, such as making community videos, or in functional areas like M&E. To summarize, SPRING's achievements in capacity building illustrate the range of topics and approaches needed to address all aspects of nutrition as a multifaceted and multi-sectoral issue.

Table 6 shows the number of people trained by SPRING over the life of the project. In total, SPRING trained 168,847 individuals. Ghana, the Kyrgyz Republic, and Bangladesh trained the largest numbers of people, with most

training occurring during PY2 (Bangladesh) and PY4–PY6. In Ghana, most trainings were with farmers through farmer field schools on preventing aflatoxin contamination. In the Kyrgyz Republic, cadres of health workers and community activists were trained multiple times on different nutrition topics. And, similarly in Bangladesh, SPRING trained farmers and frontline health workers multiple times in different nutrition topics. In PY7, all countries—except the Kyrgyz Republic and Sahel—had closed down, so most of the training that year was in the Kyrgyz Republic.

The figures count people every time SPRING trained them, so some trainees are counted multiple times.

Table 6. Number of People Trained by Country, by Gender, by Year

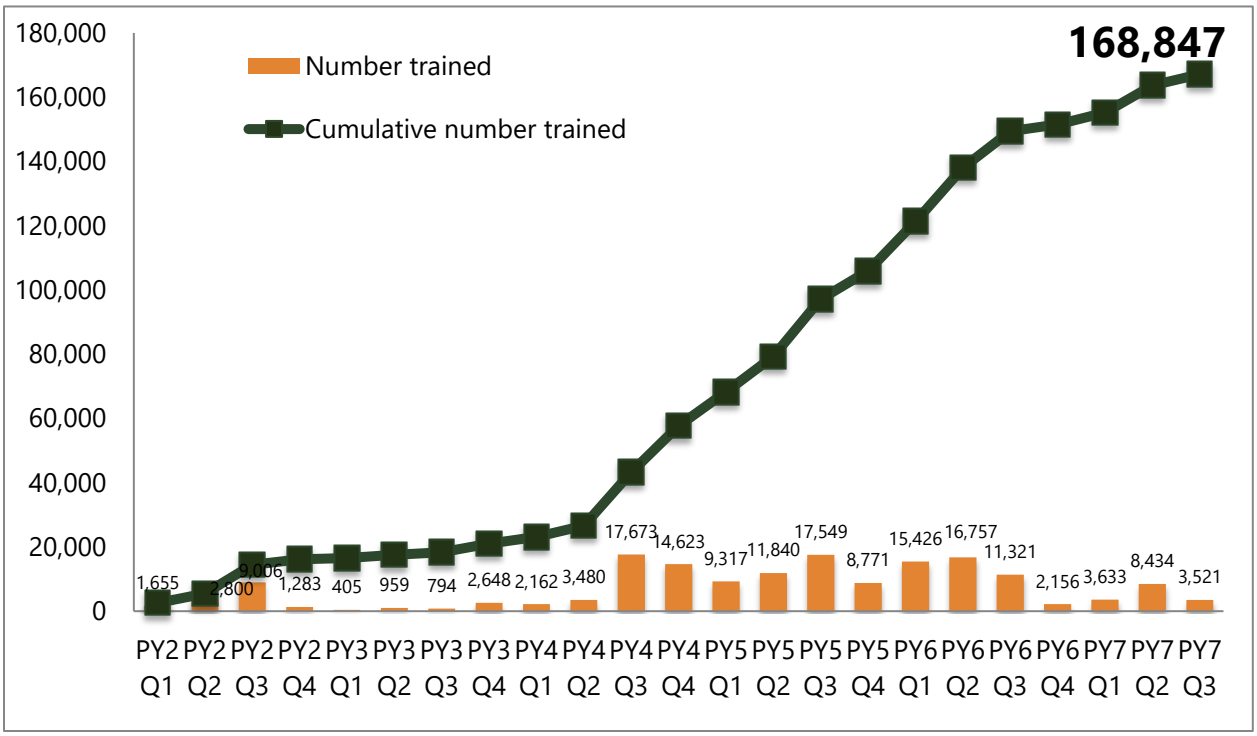
Country	PY1	PY2	PY3	PY4	PY5	PY6	PY7	Total
Bangladesh								
Male	584	8,215	841	2,381	850	0	0	12,871
Female	192	5,835	115	2,919	234	0	0	9,295
Total	**776**	**14,050**	**956**	**5,300**	**1,084**	**0**	**0**	**22,166**
Burkina Faso								
Male	0	0	0	0	120	222	167	509
Female	0	0	0	0	38	96	44	178
Total	**0**	**0**	**0**	**0**	**158**	**318**	**211**	**687**
Ghana								
Male	0	0	0	5,799	8,599	6,451	0	20,849
Female	0	0	0	7,116	16,780	18,442	0	42,338
Total	**0**	**0**	**0**	**12,915**	**25,379**	**24,893**	**0**	**63,187**
Guinea								
Male	0	0	0	0	59	36	0	95
Female	0	0	0	0	41	27	0	68
Total	**0**	**0**	**0**	**0**	**100**	**63**	**0**	**163**
Haiti								
Male	6	42	19	77	0	0	0	144

Female	139	225	276	465	0	0	0	1,105
Total	**145**	**267**	**295**	**542**	**0**	**0**	**0**	**1,249**
Kyrgyz Republic								
Male	0	0	0	390	415	475	501	1,781
Female	0	0	0	6,154	12,978	18,249	14,290	51,671
Total	**0**	**0**	**0**	**6,544**	**13,393**	**18,724**	**14,791**	**53,452**
Mali								
Male	0	0	0	503	262	0	0	765
Female	0	0	0	5,372	5,338	0	0	10,710
Total	**0**	**0**	**0**	**5,875**	**5,600**	**0**	**0**	**11,475**
Niger								
Male	0	0	0	0	177	210	298	685
Female	0	0	0	0	131	143	288	562
Total	**0**	**0**	**0**	**0**	**308**	**353**	**586**	**1,247**
Nigeria								
Male	0	25	443	582	78	0	0	1,128
Female	0	72	673	649	156	0	0	1,550
Total	**0**	**97**	**1,116**	**1,231**	**234**	**0**	**0**	**2,678**
Senegal								
Male	0	0	0	0	279	665	0	944
Female	0	0	0	0	315	809	0	1,124
Total	**0**	**0**	**0**	**0**	**594**	**1,474**	**0**	**2,068**
Sierra Leone								

Male	0	0	0	0	4	434	0	438
Female	0	0	0	0	1	440	0	441
Not Known	0	0	0	0	0	98	0	98
Total	**0**	**0**	**0**	**0**	**5**	**972**	**-**	**977**
Uganda								
Male	0	99	1,046	1,693	869	256	0	3,963
Female	0	231	1,393	2,486	1,135	290	0	5,535
Total	**0**	**330**	**2,439**	**4,179**	**2,004**	**546**	**0**	**9,498**
Total	**921**	**14,744**	**4,806**	**36,586**	**48,859**	**47,343**	**15,588**	**168,847**

Figure 18 shows the number of people trained in each quarter (solid bars) and the cumulative number trained (top line) from Q1 of FY13 (PY2), near the beginning of the SPRING project. Since the project's inception, we trained almost 170,000 people on a wide range of nutrition topics. The quarterly bars show when the main trainings occurred. The main initial trainings took place in Bangladesh during Q3 of FY13. The next big waves occurred during FY15 and FY16, when Ghana, the Kyrgyz Republic, and other countries came on board or reached maturity. The figure also shows declines in training in the last several quarters as countries begin the process of closeout, although the Kyrgyz Republic continued training large numbers of people up until their closeout in Q3 of PY7.

Figure 18. Number of People Trained over Time



PMP Indicator 1.3.1: Geographic reach of SPRING country activities

Table 7 shows the number of geographic units (e.g., *upazilas*, departments, LGAs, districts) where SPRING operated in countries where SPRING had offices. The table shows targets and the total number of geographic units in the country. In all countries, SPRING met or exceeded the number of areas we had targeted. Coverage as a percentage of geographic units in the country should be interpreted with caution, because the figures do not indicate the level of intensity within each area.

Table 7. Geographic Coverage of SPRING Country Activities

Country (name of geographic areas)	Number Reached over the Life of the Project (LoP)	Maximum Number Targeted	Number in Country	Number Reached over LoP as a % of:	
				Maximum number targeted	Number in-country
Bangladesh (upazilas/ sub-districts)	40	40	486	100	8
Ghana (districts)	15	15	216	100	7
Haiti (departments/ states)	10	10	10	100	100
Kyrgyz Republic (townships/districts)*	20	18	NA*	111	NA*

Country (name of geographic areas)	Number Reached over the Life of the Project (LoP)	Maximum Number Targeted	Number in Country	Number Reached over LoP as a % of:	
				Maximum number targeted	Number in-country
Mali (communes)	20	20	703	100	3
Nigeria (LGAs/districts)	120	120	774	100	16
Senegal (communes)	50	42	557	119	9
Uganda (districts)**	39	10	112	390**	35

** Because the Kyrgyz Republic figures in the first two columns include both townships and districts, it is not possible or meaningful to show country totals.*

*** Uganda exceeded its targets by a wide margin because, late in the project, the Government of Uganda and USAID identified a need for sensitization meetings on consumption of fortified maize flour at the district level. These meetings were held in 22 districts, mostly in FY17. The meetings were not planned at the beginning of that year when the targets were set.*

Table 8 shows similar information, but for all SPRING countries year-by-year.

Table 8. Geographic Coverage of SPRING Country Activities over Time

Country	PY1	PY2	PY3	PY4	PY5	PY6	PY7	Total
Bangladesh (upazilas/sub-districts)	15	40	40	40	40	40	0	40
Burkina Faso	0	0	0	0	25	25	NA	25
Ghana (districts)	0	0	0	15	15	15	0	15
Guinea	0	0	0	0	5	4	0	5
Haiti (departments)	1	3	5	9	0	0	0	10
Kyrgyz Republic (townships/ districts)	0	0	0	12	17	20	18	20
Mali (communes)	0	0	0	20	20	0	0	20
Niger	0	0	0	0	11	11	NA	11
Nigeria (LGAs)	2	4	23	105	120	0	0	120
Senegal	0	0	0	0	8	49	0	50

Sierra Leone	0	0	0	0	NA	12	0	12
Uganda (districts)	3	10	12	12	10	28	0	39
Total	**21**	**57**	**80**	**213**	**271**	**204**	**18**	**367**

PMP Indicators 1.3 and 1.4: Service sites and institutions reached by SPRING country activities

SPRING provided country-level support through both service facilities and institutions. Table 9 shows the number of service sites supported in each country, over time. In most countries, the number includes at least some health facilities where SPRING provided training, supportive supervision, SBCC materials, and/or other support. In Bangladesh and Mali, the number also included FNSs, while in Nigeria, it included IYCF support groups. Due to its large network of FNS schools, Bangladesh had the largest number of service sites. Over the life of the project, SPRING provided support to more than 5,000 sites.

Table 9. Number of Facilities or Service Sites Receiving SPRING Support, by Country and Year

Country	PY1	PY2	PY3	PY4	PY5	PY6	PY7	Total
Bangladesh	209	2,154	3,876	2,659	2,684	2,684	0	3,876
Burkina Faso	0	0	0	0	0	0	0	0
Ghana	0	0	0	282	285	295	0	295
Guinea	0	0	0	0	16	0	0	16
Haiti	3	5	12	17	0	0	0	17
Kyrgyz Republic	0	0	0	148	186	302	198	319
Mali	0	0	0	200	153	0	0	200
Niger	0	0	0	0	0	0	0	0
Nigeria	0	30	349	507	563	0	0	563
Senegal	0	0	0	0	0	0	0	0
Sierra Leone	0	0	0	0	0	92	0	92
Uganda	0	48	51	51	39	60	0	60
Total	**212**	**2,237**	**4,288**	**3,864**	**3,926**	**3,433**	**198**	**5,438**

Table 10 displays the number of institutions supported by SPRING for PY6, for all the project years, by quarter. In most countries, SPRING supported the Ministry of Health, as well as other government ministries and nongovernmental institutions. Types of support vary, but, in most cases, it includes training, supportive supervision and/or other kinds of capacity building. Over the life of the project, SPRING supported 266 institutions. SPRING's program in Nigeria, which had a special focus of supporting state ministries and other USAID projects, supported the largest number of institutions.

Table 10. Institutions Supported by SPRING, by Country, Year and Quarter

Country	PY1	PY2	PY3	PY4	PY5	PY6	PY7	Total
Bangladesh	2	9	7	8	8	4	0	15
Burkina Faso	0	0	0	0	4	7	0	7
Ghana	0	0	0	11	16	11	0	33
Guinea	0	0	0	0	14	8	0	18
Haiti	4	3	2	2	0	0	0	7
Kyrgyz Republic	0	0	0	11	11	46	46	46
Mali	0	0	0	11	10	0	0	14
Niger	0	0	0	0	8	9	0	9
Nigeria	0	26	19	36	49	0	0	76
Senegal	0	0	0	0	14	17	0	17
Sierra Leone	0	0	0	0	0	4	0	4
Uganda	0	7	15	17	10	10	0	20
Total	**6**	**45**	**43**	**96**	**144**	**145**	**46**	**266**

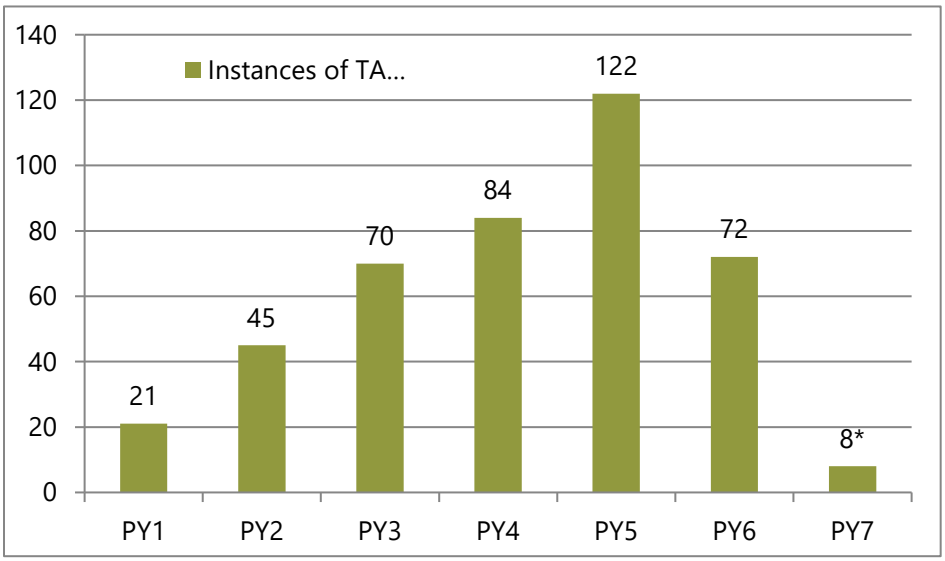
PMP Indicator 1.5: Number of health facilities with established capacity to manage acute undernutrition

SPRING considers capacity to be "established" for management of acute malnutrition (MAM) if at least one person successfully completed a training on the topic and/or an assessment showed adequate capacity to manage acute malnutrition based on the desired performance criteria. Fifty-one health facilities in Uganda and 17 in Haiti met this definition during PY2–PY4 by successfully completing NACS training, which included a module on MAM. Additionally, SPRING provided supportive supervision in MAM to four health facilities in Mali—which UNICEF had trained in MAM—for a total of 72 SPRING-supported facilities with capacity for MAM at some point during the project.

PMP Indicator 1.6: Instances of technical assistance provided

Technical assistance (TA) is defined as support provided by SPRING—including SPRING staff and consultants—to country programs during temporary duty assignments. SPRING provided technical assistance 422 times during the project, steadily increasing each year until PY6, when TA began to slow down as country programs began to close.

Figure 19. Number of Instances of Technical Assistance Provided, by Year



*Through Q2

PMP Indicator 2.1: Number and type of dissemination activities supported by SPRING

SPRING counts dissemination activities as certain types of items posted on the SPRING website, as well as meetings attended where SPRING *either* hosted or presented, or both (see next indicator, 2.1.1). During the project, SPRING posted over 2,300 items to the website—1,202 counted as dissemination activities.[2] In addition, SPRING attended 252 meetings where we either hosted or presented. Thus, SPRING supported a total of 1,704 dissemination activities during the full project. The 1,202 web dissemination activities included—

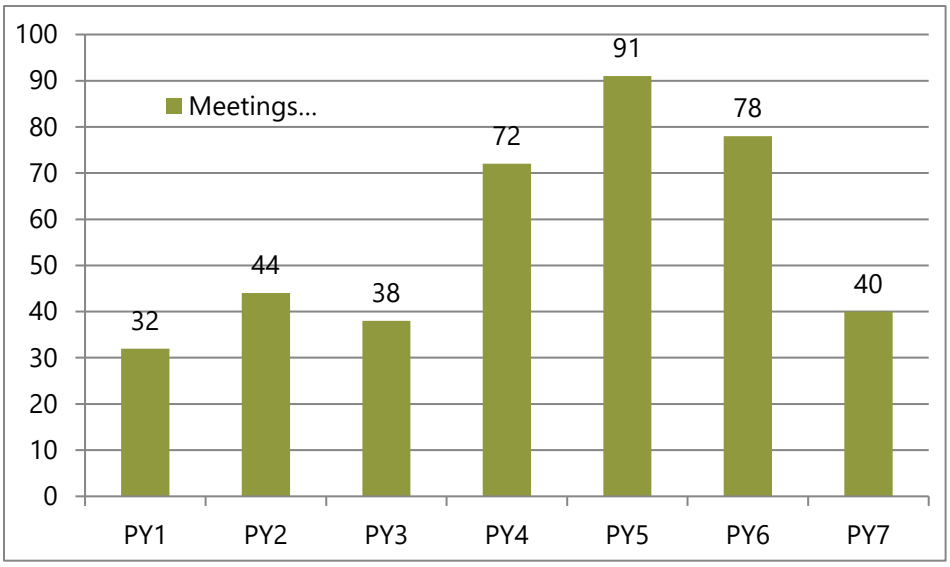
- 42 A2Z resources
- 7 audio clips
- 65 activity pages
- 15 basic pages
- 86 briefs
- 12 case studies
- 16 country pages
- 101 events pages
- 3 feature pages
- 5 field notes
- 88 galleries
- 55 infographics
- 63 resource reviews and literature reviews (each full review counted once)
- 4 multi-sectoral nutrition focus pages
- 25 national anemia profiles
- 217 news items
- 37 posters
- 79 reports
- 15 series
- 6 stories
- 61 success stories
- 20 technical pages
- 54 tool summaries
- 31 training materials
- 95 videos (not counting community level videos).

[2] Certain items were listed as individual multiple items, but were actually one dissemination "activity." For example, in the figures above, resource reviews were counted just once each time a set of articles was posted, so not every article is counted in the 1,202 items.

PMP Indicator 2.1.1: Number of country, regional, and global meetings conducted or attended

SPRING attended 395 high-level meetings during the project, including 135 hosted by SPRING and 207 at which SPRING staff presented. Figure 20 shows the number of meetings attended during the project, by year.

Figure 20. Number of High-level Meetings Attended by SPRING, by Year



PMP Indicator 2.1.2: Number of networks or community of practice groups that SPRING leads or participates in

In addition to hosting and attending the high-level nutrition meetings above, SPRING led or participated in 49 networks or community of practice groups during the project:

- 1,000 Days Advocacy Group
- Accelerated Reduction Effort on Anemia Community of Practice
- Agriculture-Nutrition Community of Practice (Ag2Nut)
- Alive and Thrive
- Anemia Task Force
- ANH- Academy for Nutrition and Health
- BabyWASH Coalition Community of Practice (led by World Vision)
- Bread for the World Movement
- Civil Society for Scaling up Nutrition in Nigeria (CS-SUNN)
- Clean, Fed, and Nurtured Community of Practice
- CORE Group Anemia Working Group

- CORE Group M&E Working Group
- CORE Group Nutrition Working Group
- CORE Group SBCC Working Group
- Developing Local Extension Capacity (DLEC) Project Community of Practice
- Early Childhood Development Action Network (ECDAN)
- Emergency Nutrition Network
- EN-NET Community of Practice
- FAO: Global Forum on Food Security and Nutrition
- Feed the Future Food Security Communication Working Group
- Food Security and Nutrition Network (TOPS)
- FSN Network – Knowledge Management Task Force
- FSN Network – Nutrition and Agriculture Linkages in Africa Network
- FSN Network – Social & Behavioral Change Task Force
- Global Health Delivery Online
- Global Health Knowledge Collaborative
- Nutrition Report, through blog
- HIPNET Health Information Professionals Network
- IASC Global Nutrition Cluster
- Infant Feeding in Emergencies Core Group – Emergency Nutrition Network
- ICT Works (Information and Communication Technologies community of practice)
- Interagency Technical Advisory Team (IATT) Working Group on Infant and Child Survival
- Interagency Working Group on Community Health Worker Performance
- mHealth Technical Working Group (interagency)
- MIYCN-FP Technical Working Group
- Nexus between WASH, nutrition, and Feed the Future community of practice
- NYAS nutrition research agenda working group – delivery science focus area
- Partnership for HIV-Free Survival (PHFS)
- SBCC/EE Summit Program Sub-Committee for the upcoming SBCC Summit in Bali
- The Small Enterprise Education and Promotion Network (SEEP)
- Social Media Interagency Working Group
- Society for Implementation Science in Nutrition (SISN).
- Scaling Up Nutrition (SUN) – Civil Society Network

- SUN/SPRING/R4D/MQSUN Global Harmonization of Budget and Expenditure Analysis Methods for Nutrition Consultation Series (co-host)
- SUN COP1 for Resource Mobilization
- USAID Bureau for Food Security Agrilinks Knowledge Sharing Platform
- USAID: FOSTER
- World Bank Secure Nutrition Platform
- World Bank/R4D/1,000 Days Costing and Financing Global Nutrition Targets technical advisory group.

PMP Indicator 2.2.1: Research and evaluation activities

Contributing to the global evidence is an important part of SPRING's work. From the outset and throughout the project, we undertook a variety of research and evaluation studies to contribute to global evidence and, also, to help countries learn and improve their programs. During the project, SPRING carried out more than 60 studies. The main studies are presented below, grouped by whether they were funded primarily as global initiatives, by country funding, or both. Many of the studies were carried out over several years.

Funded by Global Initiatives (GI) or Jointly between GI and Countries

1. Literature review on SBCC approaches for nutrition-sensitive behaviors.
2. Analysis and model on the relationship of early life undernutrition and undernutrition programming on risk of later life cardiovascular disease (based on Bangladesh data); results shared through final report, conferences, and high-level consultations.
3. Literature review of impact of early-life conditions on later-life diabetes.
4. Research briefs produced on undernutrition during early life and risk of NCDs later in life (10 countries).
5. Secondary analysis of DHS data to better understand IFA provision and consumption across high-burden countries and which factors lead women to take less that the full dose of IFA during pregnancy. SPRING developed 21 country briefs, a summary report, a journal article, and multiple conference presentations.
6. Analysis of Household Consumption and Expenditure Survey (HCES) data on nutrient intake and primary sources of micronutrients in Bangladeshi, Nigerian, and Ugandan households.
7. Simulation model estimating the potential impact of vitamin A–fortified vegetable oil in Bangladesh; journal article completed.
8. Analysis of household consumption and expenditure surveys to improve reliability and relevance of survey questions for nutrition programming; 100 country analyses resulted in a journal article and results were shared in expert consultations.
9. SPRING (IFPRI) carried out a feasibility study for adapting the Digital Green approach to promote nutrition practices in Orissa, India. The positive results led to the widespread use of community videos as a way to promote a broad range of nutrition practices in several other SPRING countries.
10. Literature review on the current state of mHealth for nutrition, in terms of literature and projects.
11. Process review on the use of agriculture extension agents to promote nutrition in Ethiopia within three Feed the Future activities.

12. Qualitative study on cross-sector coordination and different approaches in implementing agriculture/nutrition projects in Burkina Faso.
13. Ag-Nut (Ethiopia): Process review of the use of agriculture extension agents to promote nutrition in Ethiopia within three Feed the Future activities.
14. Ag-Nut (Burkina Faso): Qualitative study on cross-sector coordination in implementing agriculture/nutrition projects in Burkina Faso.
15. Ag-Nut: Review of policies and strategies that can be leveraged in agriculture and health systems to maximize the impact on nutrition.
16. Ag-Nut: Desk review of lessons learned from Feed the Future projects on agriculture-nutrition pathways.
17. Ag-Nut (Bangladesh, Guatemala, Rwanda): Documents approaches to multi-sectoral coordination in three Feed the Future countries. Completed a case study/TA report for Rwanda. We presented preliminary findings for the three countries at the CORE Group conference in May of PY5. Finalized, posted, and presented the report at various venues.
18. Ag-Nut (Guatemala): Qualitative research on Feed the Future success stories along the agriculture-nutrition pathway in Guatemala.
19. Ag-Nut (Rwanda): Qualitative research on the role of increased income and women's empowerment on nutrition in Feed the Future activities in Rwanda.
20. Ag-Nut (Ghana): Documented experience integrating nutrition into agriculture information systems.
21. Ag-Nut (multi-country): SPRING completed and disseminated guidance on data collection for nutrient-rich value chain commodities. Completed the final report in 2016, followed by a webinar to discuss the research and lessons learned in collecting data on household consumption of nutrient-rich value chain commodities. USAID also conducted a webinar to release the new guidance and noted SPRING's research contribution.
22. Ag-Nut and SBCC (India): SPRING partnered with Digital Green, LSHTM, VARRAT, and Ekjut on a Bill & Melinda Gates Foundation–funded randomized control trial to test the community video approach for nutrition and agriculture in Keonjhar district in India. SPRING's SBCC team provided TA to identify and promote nutrition-specific behaviors and nutrition-sensitive agricultural practices.
23. Ag-Nut (Nigeria): SPRING conducted a nutrition assessment to inform the Global Food Security Strategy (GFSS) country team's development of a five-year, GFSS interagency country plan to reduce food insecurity, poverty, and malnutrition in Nigeria. In September 2017, the team collected data in four out of seven GFSS-focus states (Cross River, Kebbi, Benue, and Niger) to explore drivers of malnutrition, focusing on dietary and infant and young child feeding practices, and agricultural practices. Methods included key informant interviews, focus group discussions, household surveys, and community observations.
24. Ag-Nut (Niger): SPRING conducted a desk review that provides a picture of the status, trends, and drivers of malnutrition in Niger, and aims to inform core priorities for future programming and investment by USAID/Niger, under the GFSS. The review focused on trends, data, and related information on stunting, acute malnutrition, and micronutrient deficiencies at the national and district levels.
25. Anemia (Ghana): Qualitative research/secondary analysis/process documentation on developing multi-sectoral national anemia control strategies.

26. Anemia (Sierra Leone): Qualitative research/secondary analysis/process documentation on developing multi-sectoral national anemia control strategies.
27. Anemia (Uganda): Qualitative research/secondary analysis/process documentation on developing multi-sectoral national anemia control strategies.
28. Anemia (Uganda): SPRING carried out an operations research study on the effects of alternative packaging on adherence to IFA supplementation in pregnant women. In PY7, we submitted the final report. The team from Mulago Hospital also submitted a manuscript on the study to the *International Journal of Women's Health*.
29. Anemia (Uganda): Evaluation of the MNP delivery methods for facility versus community distribution. A midline assessment was conducted to understand the successes and barriers of early distribution and to identify areas for program improvement. The endline compared coverage and costing between delivery arms. Two manuscripts were submitted to journals in 2018. The first, on findings from the household-level quantitative and qualitative survey, was submitted to *Maternal and Child Nutrition*; the second, on the cost and cost effectiveness of facility versus community distribution of MNP, was submitted to *The Lancet: Global Health*.
30. Anemia: "Review of Reviews" was a study of multiple systematic reviews on the impact of nutrition-specific and nutrition-sensitive interventions on anemia. Out of 13,140 abstracts from the search results, 375 were screened, and 128 of the 375 articles were included. The final report was submitted to USAID and to the *International Journal of Epidemiology* in PY7.
31. Anemia (Uganda): A costing study to calculate the start-up and operational costs associated with micro- and small-scale maize flour fortification, as well as the related governmental monitoring and evaluation costs, including the impact of scale of milling operations on the estimated costs.
32. SBCC (Sierra Leone): SPRING carried out TIPs in 24 households to develop SBCC materials for pumpkin consumption as a complementary food, clean play spaces, and handwashing. We completed the final report and journal article.
33. SBCC (Nigeria): SPRING carried out a multi-year evaluation (PY3–PY7) of the impact of the UNICEF C-IYCF counselling package in Nigeria. Nutrition outcomes were measured over time in an intervention local government authority (LGA) and in a comparison LGA. Baseline, mid-process, and endline reports and interim briefs were posted on SPRING's website. Findings were also presented to key stakeholders in Nigeria in September 2017.
34. Systems (Nepal): A mixed methods longitudinal study in Nepal, *Pathways to Better Nutrition*, examined the changes in prioritization and financing of nutrition activities under national nutrition action plans. The final Nepal PBN report was posted on the SPRING website as an interactive document. A global PBN launch event was held, marking the culmination of a series of launch events for this research. The *Food and Nutrition Bulletin* accepted an article based on these results.
35. Systems (Uganda): A mixed methods longitudinal study in Uganda, *Pathways to Better Nutrition*, examined the changes in prioritization and financing of nutrition activities under national nutrition action plans. We posted the final Nepal PBN report on the SPRING website as an interactive document. A global PBN launch event was held, marking the culmination of a series of launch events for this research. The *Food and Nutrition Bulletin* accepted an article based on these results.

36. Systems: Qualitative research on USAID nutrition-related projects on defining and achieving scale.

Country-funded

1. Bangladesh: Evaluation of tippy tap use in FNS and non-FNS households; observational study and household survey.
2. Bangladesh: Cohort study on adoption and sustainability of ENA/EHA actions. SPRING carried out a household survey of a cohort of FNS women immediately before, immediately after, and one year after participation in FNS.
3. Bangladesh: Spillover/diffusion study on the uptake of ENA/EHA practices by neighbors of FSN participants; qualitative study.
4. Bangladesh: Women's Empowerment in Agriculture (WEIA) study of gender roles related to agricultural work. SPRING carried out the assessment in areas where we worked and compared findings against a larger nationwide survey carried out by IFPRI.
5. Bangladesh: Secondary analysis of data from the Food Security and Nutrition Surveillance Project (FSNSP), augmented with additional rounds carried out by SPRING using the same methods. The study measured changes in nutrition outcomes in SPRING and non-SPRING upazilas, over time.
6. Burkina Faso: SPRING evaluated the effectiveness of the Digital Green community video approach on women's and children's nutrition behaviors.
7. Burkina Faso: Radio capacity assessment to evaluate the extent to which the project has built technical capacity of local radio stations and enhanced their reach.
8. Burkina Faso: Qualitative study—*The Social Spread of a Spot*— investigated the social impact of a radio campaign at the community level.
9. Ghana: Facility and household surveys to assess the performance of health providers trained by SPRING and nutrition practices adopted by project beneficiaries. SPRING carried out baseline and midpoint surveys.
10. Ghana: SPRING contributed to the baseline and endline surveys carried out by the Monitoring, Evaluation, and Technical Support Services (METSS) project. The baseline was population-based and the endline was beneficiary-based, on the assumption that endline beneficiary villages would be similar to the overall baseline population.
11. Haiti: Facility survey to assess the status of NACS in selected hospitals.
12. Haiti: Exploring Approaches to Building Capacity for Nutrition Assessment, Counseling, and Support Services. SPRING carried out an operations research study to evaluate a new approach to improve the nutrition workforce capacity in Haiti. The study tested on-the-job training approaches versus traditional classroom trading and modified the classroom training.
13. Kyrgyz Republic: Formative research on factors influencing nutrition-related behaviors.
14. Kyrgyz Republic: SPRING carried out four waves of surveys from 2014–2017, a baseline survey, two winter dietary diversity surveys, and an endline survey. The surveys looked at a range of nutrition behavioral outcomes. The baseline and endline compared SPRING intervention areas with a comparison area. We presented results on two occasions to key stakeholders in the Kyrgyz Republic.

15. Kyrgyz Republic: Qualitative research (focus groups and key informative interviews) to study the dynamics of women's diet in winter and explore why consumption of some foods, surprisingly, went up in winter compared with the baseline, which took place in the fall.
16. Kyrgyz Republic: Qualitative research (focus groups and key informative interviews) to learn about dynamics of handwashing and child feeding and to explore why those variables deteriorated between the baseline and endline.
17. Mali: Survey to determine baseline for gross margin per hectare, total value of sales, total value of targeted nutrient-rich value chain commodities set aside for home consumption by direct beneficiary producer households, and total number of hectares under improved technologies or management practices resulting from SPRING's assistance.
18. Niger: Formative research to define priority video content and determinants of behaviors to address in the videos.
19. Niger: Qualitative research on male involvement in IYCF.
20. Niger: A mixed-methods evaluation combined qualitative and quantitative components, including a participatory stakeholder workshop in July 2015 to assess the acceptability of the SPRING/Digital Green pilot intervention in Maradi. We collected baseline, midline, and endline quantitative data, and completed a costing analysis of the various components of the proof of concept and scale up.
21. Nigeria: Mixed methods assessment of capacity of SPRING partners to provide and support nutrition services, including the effects on beneficiaries.
22. Senegal: SPRING carried out knowledge, attitudes, and practices baseline/endline survey for SPRING's zone of influence. The study included nine qualitative focus group discussions with producer network members who participated in SPRING activities.
23. Tajikistan: Completed a desk review.
24. Uganda: Used a tool (Logistics System Assessment Tool), developed by JSI's USAID | DELIVER PROJECT, to complete a qualitative assessment of the supply chain for nutrition products.
25. Uganda: Evaluated the integration of NACS into routine health care in health facilities where SPRING/Uganda operates. SPRING posted a brief with the report's highlights on its website.
26. Uganda: Household survey of uptake of nutrition practices in SPRING districts using an aggregated lot quality assurance sampling (LQAS). The three rounds of surveys took place in six districts in East Central and Southwest Uganda.
27. Uganda. SPRING carried out a sensory assessment of maize-based fortified foods among secondary school children in PY6 and PY7. The study investigated the acceptability of serving iron-fortified foods in schools.

PMP Indicator 2.2.2: Number of instances where standard nutrition metrics are improved based on SPRING inputs

Another way SPRING works to improve global evidence is by improving nutrition metrics. Over the life of the project, we undertook eight activities that contributed to or have the potential to contribute to improved nutrition metrics. Each is briefly described below.

1. **PY1 – NCDs.** SPRING innovated the use of the DHS reproductive calendar data to refine the standard low birth weight indicator. Using this new method, we separated (at least at month marks) the births that were pre-term from normal term. Within low birth weight, the distinction is a more fine-tuned measure in relation to the risk of metabolic disruption, leading to a higher risk of NCDs later in life.
2. **PY2 and PY3 – HMIS indicators.** SPRING/Uganda worked with the Uganda MOH to identify, define, and finalize NACS indicators to include in the national health management information system (HMIS). The indicators included the number of people receiving nutrition assessment, counseling, and support; appropriate treatment of acute malnutrition among HIV-positive children; and women reporting to be exclusively breastfeeding. By the end of PY2, HMIS partners agreed to adopt the new indicators for health facility use; and, in PY3, they incorporated them into the official HMIS forms. SPRING assisted with printing the forms and basic training on how to use them.
3. **PY4 – REF-NACS.** SPRING developed a Toolkit for Rapid Evaluation of Facility-Level Nutrition Assessment, Counseling, and Support (REF-NACS) to help program implementers gather information on the capacity of health facilities to implement NACS for pregnant women, children, and people living with HIV (PLHIV). SPRING developed this set of tools in collaboration with other USAID-funded projects—FANTA, LIFT, and ASSIST—to help countries strengthen NACS services provided through the health system. The toolkit contributes to improved nutrition metrics by defining priority measures of the provision and quality of nutrition services, particularly nutrition counseling, which has not been consistently defined or measured. It includes a standardized set of instruments and guidance to enhance data quality. The toolkit was completed in PY4 and posted on the SPRING website.
4. **PY4 – Workforce Mapping Tool.** This tool provides program managers, human resource managers, capacity building and quality improvement consultants, and technical assistance providers from donors and ministries of health with a relatively simple, but comprehensive, way to collect data on nutrition-specific actions performed by health workers at different health system levels. The tool contributes to improved nutrition metrics by calculating nutrition workforce size, composition, qualification, availability, gaps, and training status within different levels of the health facility. Further, the tool assists in collecting and comparing data on various cadres of health workers for their training, responsibilities, and tasks. We completed the tool was in PY4 and posted it on the SPRING website.
5. **PY4-PY6 – Budget Analysis Tool.** The success of national nutrition plans relies heavily on adequate funding, but because of its multi-sectoral nature, planning and budgeting for nutrition work is not easy. Nutrition advocates lack access to accurate and timely financial data, which impacts their ability to ensure adequate nutrition resources. To address these important gaps, SPRING developed an easy-to-use tool for nutrition stakeholders to determine where the funding is, understand the existing resource gaps, and advocate for adequate budgets. The tool contributes to improved nutrition metrics by providing a methodology for defining, collecting, and analyzing data on nutrition budgets and allocations. The tool was completed in PY4 and posted on the SPRING website. SPRING and partners used it and presented it at meetings and conferences in PY5 and PY6. Using an updated version of the analysis guidance, SPRING also continued to co-host a global consultation around nutrition budget analysis.
6. **PY4 and PY5 – New NRVCC indicator.** SPRING tested the validity of a newly proposed indicator related to nutrient-rich value chain commodities (NRVCC), and produced a guidance document to help USAID missions and implementing partners collect and report on the indicator. Fieldwork in Bangladesh, Cambodia, Malawi, and Zambia tested aspects of its validity. The guidance document assisted USAID

missions and implementing partners in collecting and reporting data for the indicator by providing guidance on appropriate data collection methods. This contributed to improved nutrition metrics by helping implementing partners report more effectively and with improved data quality. It can also help USAID projects capture to what extent agriculture market systems interventions improve nutrition through production and consumption of a nutrient-rich commodity. The guidance document was completed and submitted to USAID in PY5. Guidance was incorporated into the *Feed the Future Agricultural Indicators Guide*. From February to June 2016 in PY5, SPRING organized a series of events to disseminate the document, including an internal brown bag talk, a webinar, a photo gallery on the SPRING website, and a presentation at a research conference.

7. **PY5 and PY6 – Landscape Analysis Guidance.** SPRING developed a step-by-step guide to support policy makers and program implementers in gathering and interpreting anemia-related data to understand the anemia situation in a country and to develop an evidence-based approach to anemia prevention and control. This guidance leads users through the process of conducting a landscape analysis for anemia, providing references and examples to explain each step. We completed the tool in PY5 and posted it on the SPRING website with a downloadable PDF version. The tool was used for an anemia assessment in Honduras in Q4 of PY6. It improves nutrition metrics by enabling practitioners to carry out a landscape analyses in a rigorous, standardized way, so as to enhance the understanding of the environment and situation in which anemia programs will be implemented.
8. **PY5 and PY6** – the District Assessment Tool for Anemia (DATA). DATA is a global, Excel-based toolkit that increases awareness of anemia among district-level actors and helps districts prioritize activities to strengthen anemia programming by identifying enablers and barriers to program implementation. DATA is completed during a two-day facilitated workshop, with active participation from district-level actors from multiple sectors, including health, water and sanitation, agriculture, and education. SPRING also developed two accompanying resources: the DATA User's Guide and the DATA Facilitator's Guide. After initial testing in Ghana in PY4, the DATA package was finalized in PY5 and was posted on the SPRING website. In PY6, the USAID-funded SUAAHARA-2 project used DATA in two pilot districts to plan interventions that match the areas of need, based on district-level evidence. The DATA tool improves nutrition metrics by giving district-level stakeholders guidance on indicators and data collection, as well as data visualization features that show managers which aspects are working well and which need improvement, thus encouraging the improved use of information.

PMP Indicator 2.2.3. Documents (reports, tools, statements) produced

SPRING finalized 668 documents of various types during the project. Figure 21 shows that, for the most part, numbers continued to increase as the project progressed and as more results were available. Table 11 includes a full listing of documents produced. This indicator counts the number of documents that were completed and submitted to USAID as deliverables during the quarter, as indicated in the table. Most are posted on the SPRING website.

Figure 21. Number of Documents Produced by SPRING, by Year

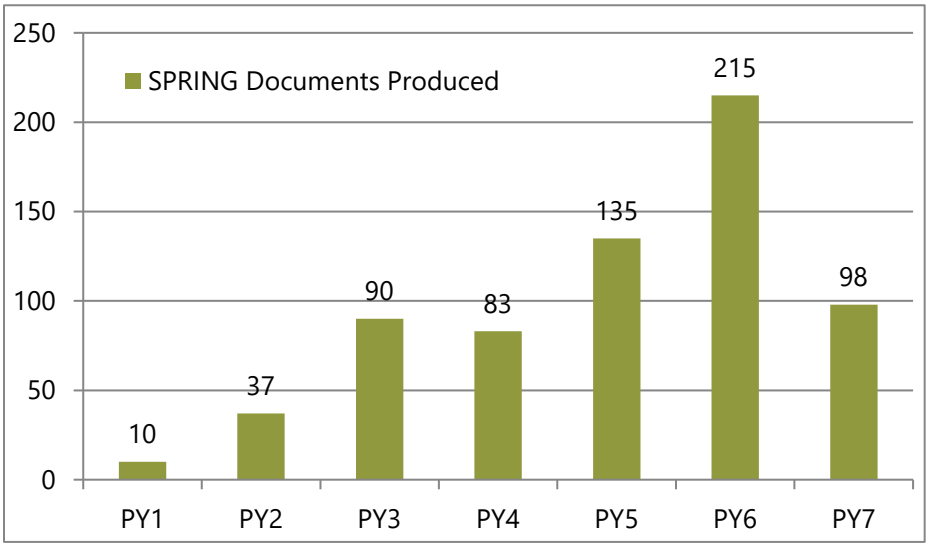


Table 11. Documents Produced by SPRING, Life of Project

Title	Type
Project Year 1, Quarter 3	
1,000 Days Approach Framework-Q3	Informational product
Project Year 1, Quarter 4	
SPRING Brochure	Informational product
SPRING Folders	Informational product
SPRING/Uganda Brochure	Informational product
SPRING/Haiti Brochure (French)	Informational product
Research Prioritization Report with (5) Concept Notes	Technical document
IFA Overview and (4) Country Briefs	Technical document
SBCC Literature Review	Technical document
NCD Country Profiles (10), with regional profiles to follow	Technical document
Initial NCD Model Results	Informational product
Project Year 2	
SPRING Nutrition Brief: A Rapid, Initial Assessment of the Distribution and Consumption of IFA Tablets through ANC – Series (***22 briefs***)	Brief
SPRING/Nigeria Brochure	Informational Product
Estimating the impact of vitamin A-fortified vegetable oil in Bangladesh in the absence of dietary assessment data	Journal Article
Maize Meal Fortification in Africa: Markets, Feasibility, Coverage and Costs	Journal Article

Title	Type
A Rapid, Initial Assessment Of The Distribution And Consumption Of IFA Tablets Through Antenatal Care In 20 Countries	Presentation at IUNS
Community-Led Formative Research To Determine Priority Nutrition Behaviors For An Innovative Participatory Video Feasibility Study	Presentation at IUNS
Evidence Of Effective Approaches To Social And Behavior Change For Preventing And Reducing Stunting And Anemia	Presentation at IUNS
Factors Motivating Home Garden Choices Affecting Dietary Diversity In Bangladesh	Presentation at IUNS
National And Sub-National Estimates Of Child And Adult Nutritional Status Related To Later Life Nutrition-Related Non-Communicable Disease	Presentation at IUNS
Positive Unintended Consequences in Programs for Women's and Child Nutrition in Bangladesh: Scaling Up Tippy Taps	Presentation at IUNS
Profile Of The Public Health Nutrition Workforce In High Burden Stunting Countries	Presentation at IUNS
The Use Of Participatory, Community-Led Videos In India: Pushing New Buttons For Nutrition, Livelihoods And Agriculture	Presentation at IUNS
Tools For Assessing Nutrition Assessment, Counseling And Support Services At The Facility Levels	Presentation at IUNS
Using Agriculture for Improved Nutrition: A Case Study of a USAID 'Feed the Future' Project	Presentation at IUNS
What Do We Know About The Feed The Future Initiative's Progress Toward Nutrition Goals?: Results Of A Global Landscape Analysis	Presentation at IUNS
Nutrition SBCC e-Learning Landscape Report	Report
Project Year 3	
Side-by-Side Summary of Two "Packages" for Community-Based Infant and Young Child Feeding Counseling	Informational product
Digital Green Progress Report	Briefs/other report
mNutrition Strategy	Strategy document
Workforce Mapping Tool	Tools
Phase 1 Report of the Early Life Nutrition Linkages to NCD Model	Research report
Social and Behavior Change Communication Pathways for Maternal, Infant, and Young Child Nutrition Practices	Briefs/other report
Addendum to the Nutrition SBCC eLearning Landscape Report	Briefs/other report
Nutrition SBCC eLearning Curriculum Concepts Brief	Briefs/other report
Agriculture and Nutrition Global Learning and Evidence Exchange (AgN-GLEE) Final Report	Briefs/other report
SPRING PY2 Annual Report	Briefs/other report

Title	Type
Using the DHS Reproductive Calendar to Estimate the Effect of Family Planning Use on Birth Weight	Presentation
Building on Uganda 's Progress in Reducing Anemia: From Evidence to Action	Presentation
Toolkit for Evaluating Capacity for and Implementation of Nutrition Assessment, Counseling, and Support Services at Health Facilities Part I: Introduction, Background and General Guidance on Priority Measurement Points for NACS Part II: Tools for the NACS Health Facility Assessment	Tools
Building on Uganda's Progress in Reducing Anemia: Examining the Role of Increased Care-Seeking, Service Provision and Improved Health-Related Behaviors	Technical Report
The Anemia Action Plan: A Multi-sectoral Response to Anemia in Uganda	Technical Report
The Uganda Anemia Action Plan: Progress Report	Progress Report
Iron-Folic Acid Distribution and Consumption through Antenatal Care: Identifying Barriers across Countries using an Analytic Process	Journal Article
National Anemia Profiles (20)	Technical Brief
MNF Satellite Symposium Workshop Report	Workshop Report
CORE Group Anemia Consultation Workshop Report	Workshop Report
Digital Green Feasibility Study	Technical Report
Nigeria C-IYCF Draft Protocol	Research Protocol
Thought Paper: Describing common elements in agriculture and nutrition theories of change	Technical Brief
Defining Scale-Up of Nutrition Projects	Technical Brief
Snapshots of Nutrition in Nepal (Pathways to Better Nutrition Case Study Evidence Series - Nepal)	Technical Brief
Multiple-Use Water Services: Toward a Nutrition-Sensitive Approach	Technical Brief
The Role of Increased Income and Women's Empowerment on Nutrition: A Review of Two Feed the Future Activities in Rwanda	Technical Brief
Inventory and summaries of context assessment resources and guide to its use	Technical Report
Ag-Nut Tajikistan Activity Report	Workshop Report
USAID Nutrition-Sensitive Programming (mapping report)	Technical report
Synthesizing Effects of Food Environment and Nutrition	Technical Report
Leveraging Agriculture for Nutrition Impact through the Feed the Future Initiative (chapter in book, *Advances in Food and Nutrition Research volume 74)*	Technical Report
SBCC in the Sahel: A Landscape Assessment of Nutrition and Hygiene Social and Behavior Change Communication in Niger and Burkina Faso	Technical Report

Title	Type
Women's Empowerment and Men's Engagement: How a Focus on Gender Can Support Agriculture and Nutrition	Presentation
Improving Nutrition through Agriculture: Understanding and Applying Primary Pathways and Principles	Presentation
What is needed for Global Monitoring of Access to Adequate Food?	Presentation
The Social Change Communication and Mobilization (SCC & M) Sub-strategy (Uganda)	Presentation
Social Change Communication and Mobilization: Review of evidence and experience	Presentation
Food Security Information Network Overview	Presentation
Estimating the impact of vitamin A-fortified vegetable oil in Bangladesh in the absence of dietary assessment data	Journal Article
Evidence of Effective Approaches to SBCC for Preventing and Reducing Stunting and Anemia	Technical Report
Using Agriculture Extension Agents to Promote Nutrition: A Process Review of Three Feed the Future Activities in Ethiopia	Technical Brief
Working Together? Experiences of Intersectoral Integration in an NGO Nutrition Program	Technical Report
Phase 1 Report of the Early-Life Nutrition Linkages to NCD Model	Journal Article
Nepal Strategic Background Report (Pathways to Better Nutrition Case Study Evidence Series - Nepal)	Technical Report
Understanding Scale-up in the Context of the Ugandan Nutrition Action Plan (Pathways to Better Nutrition Case Study Evidence Series - Uganda)	Technical Report
Snapshots of Nutrition in Uganda (Pathways to Better Nutrition Case Study Evidence Series - Uganda)	Technical Brief
Understanding the Agricultural Income Pathway (Improving Nutrition Through Agriculture Technical Brief Series: Brief 3)	Technical Brief
Leveraging Agriculture for Nutritional Impact through the Feed the Future Initiative: A Landscape Analysis of Activities Across 19 Focus Countries	Technical Report
Training to Integrate Agriculture and Nutrition in Bangladesh (Agriculture-Nutrition Field Note)	Field Note
Training to Integrate Agriculture and Nutrition in Honduras (Agriculture-Nutrition Field Note)	Field Note
Integration and Coordination in Guatemala (Agriculture-Nutrition Field Note)	Field Note
Integration and Coordination in Nepal (Agriculture-Nutrition Field Note)	Field Note
Understanding the Food Production Pathway (Improving Nutrition Through Agriculture Technical Brief Series: Brief 2)	Technical Brief

Title	Type
Supporting Agriculture and Nutrition Interventions at the Community Level in Senegal (Agriculture-Nutrition Field Note)	Field Note
Understanding and Applying Primary Pathways and Principles (Improving Nutrition Through Agriculture Technical Brief Series: Brief 1)	Technical Brief
Understanding the Women's Empowerment Pathway (Improving Nutrition Through Agriculture Technical Brief Series: Brief 4)	Technical Brief
Market Purchase Motivations Among Rural Men in the Khulna District of Bangladesh: A Qualitative Study	Technical Report
A Rapid Initial Assessment of the Distribution and Consumption of Iron-Folic Acid Tablets Through Antenatal Care (21)	Technical Brief
Household Consumption and Expenditures Surveys (HCES): A Tool for Better Understanding Food and Nutrition Issue	Presentation
Using HCES to Better Understand Dietary Patterns: A Nigerian Example	Presentation
Individual Energy and Nutrient Intake from a 24-hour and 7-day Recall: Comparing Estimates using the 2011/2012 Bangladesh Integrated Household Survey	Presentation
Exploring the Use of HCES to Assess Diet Quality and Population Level in Guatemala, with a Special Focus on Maternal and Infant Groups	Presentation
The Importance of a Multi-sectoral Approach for Anemia Reduction	Presentation
Building on Uganda's Progress in Reducing Anemia: From Evidence to Action	Presentation
Using Community Systems to Reduce Anemia: The Case of Nepal	Presentation
Assessing Anemia Causes & Interventions at the District Level	Presentation
Iron-folic Acid Distribution and Consumption through Antenatal Care: Identifying Barriers Across Countries	Presentation
Linking Agriculture to Micronutrient Nutrition: Early Efforts from Feed the Future	Presentation
Designing Food Fortification Programs Using Household Consumption and Expenditure Surveys (HCES): A Bangladesh Example	Presentation
Individual Energy and Nutrient Intake from a 24-hour and 7-day Recall: Comparing Estimates Using the 2011/2012 Bangladesh Integrated Household Survey	Presentation
Promoting Compliance to Iron–Folic Acid Intake in Pregnant Women in Uganda: Prioritizing the Myriad of Factors	Presentation
Food Fortification Monitoring and Evaluation Framework: Operationalizing the Uganda National Fortification Guidelines	Presentation
Building on Uganda’s Anemia Progress: From Evidence to Action	Presentation
Maximizing Nutrition Impact through Feed the Future: A Framework for "How"	Presentation
Growing together? Experiences of intersectoral integration in an NGO nutrition program	Presentation

Title	Type
General SPRING bookmark	Informational product
Counseling toward Healthier Communities: Health Care Providers Making a Difference in Their Communities	Informational product
Journey to a Promising Future: The Story of a Woman Farmer in Rural Bangladesh	Informational product
BFS Round Up Review	Other
NCD Digest	Other
Country Nutrition Profiles (19 total)	Briefs/other report
Bangladesh Community Worker's Handbook	Tools
Bangladesh Community Worker's Training Guide	Tools
SPRING Brochure (Kyrgyz language)	Informational product
SPRING Bookmark (Kyrgyz language)	Informational product
SPRING Brochure (Russian language)	Informational product
SPRING Bookmark (Russian language)	Informational product
Project Year 4, Quarter 1	
SPRING/Haiti Final Country Report	Report
USAID Discussion Paper: Convergence and Tension in Nutrition-Sensitive Agriculture Market Development Activities	Report
Success Story: Bringing Better Nutrition to Orphans and Vulnerable Children in Nigeria	Success Story
Success Story: Exclusive Breastfeeding in Rural Kyrgyzstan: One Mother's Journey to Success	Success Story
Success Story: Mothers in Remote Utagban Become Models for Exclusive Breastfeeding	Success Story
Success Story: Speaking Up for Better Nutrition: Bangladeshi Mothers Learn to Share Best Practices	Success Story
Success Story: The Power of a Latrine	Success Story
Success Story: Vegetables, Fish, and Tippy Taps: The Critical Role of Community Nutrition Champions in Bangladesh	Success Story
Success Story: When WASH 1,000 Came to Piyaligo	Success Story
Haiti Curricula: Formation en Nutrition MSPP: Evaluation Nutritionnelle Et Référence	Tool
Haiti Curricula: Formation en Nutrition: Assistance-Conseil En Nutrition	Tool
Haiti Curricula: Formation en Nutrition: Education De Groupe Sur La Nutrition	Tool
Understanding and Applying Primary Pathways and Principles (FRENCH version)	Tool
Understanding the Agriculture Income Pathway (FRENCH version)	Tool
Understanding the Food Production Pathway (FRENCH version)	Tool

Title	Type
Understanding the Women's Empowerment Pathway (FRENCH version)	Tool
User's Guide to the Nutrition Budget Analysis Tool	Tool
SPRING/Bangladesh Talks Handwashing on Jiboner Golpo	Video
District Technical Brief: Report on Nutrition Financing in Kisoro District, Uganda	Brief
District Technical Brief: Report on Nutrition Financing in Lira District, Uganda	Brief
District Technical Brief: Summary of Findings on Nutrition Financing in Lira and Kisoro Districts, Uganda – 2013/2014 and 2014/15 Fiscal Year	Brief
District Technical Brief: Summary of Qualitative Findings in Kisoro and Lira Districts, Uganda - 2014 and 2015	Brief
Learning from the Uganda Nutrition Action Plan Implementation in Kisoro and Lira Districts: Pathways to Better Nutrition Study	Brief
Snapshots of Nutrition in Nepal: Accham	Brief
Snapshots of Nutrition in Nepal: Kapilvastu	Brief
Snapshots of Nutrition in Nepal: Parsa	Brief
Actions Essentielles en Nutrition et Actions Essentielles en Hygiène. Guide de Formation : Agents de Santé et Responsables de Nutrition	Guide
Actions Essentielles en Nutrition et Actions Essentielles en Hygiène. Guide de Formation: Agents Communautaires	Guide
Project Year 4, Quarter 2	
District Assessment Tool for Anemia: A User's Guide	Guide
District Assessment Tool for Anemia: Facilitator Guide	Guide
Monitoring and Surveillance for Multiple Micronutrient Supplementation in Pregnancy	Journal
Actions Essentielles en Nutrition et Actions Essentielles en Hygiène. Manuel de référence pour agents de santé et responsable de programme de nutrition	Manual
Actions Essentielles en Nutrition et Actions Essentielles en Hygiène. Manuel de référence sur les pratiques Clés : Agents Communautaires	Manual
Ghana Environmental Mitigation and Monitoring Plan	Plan
Final Survey Report: Nutrition Indicators Results from Six Districts in South Western and East Central Uganda	Report
Ghana: Field Testing of District Assessment Tool for Anemia—Preliminary Results	Report
Mali Final Country Report	Report
Micronutrient Powders Consultation: Lessons Learned for Operational Guidance—Meeting Report	Report
SPRING Quarterly Report: Quarter 1, PY5 (October 1, 2015–December 31, 2015)	Report
Use of Tippy Taps and Handwashing Practices in Bangladesh: Qualitative Study	Report
Agriculture and Nutrition in Mali through a Gender Lens: A Literature Review	Review
Agriculture and Nutrition Resource Review (February 2016)	Review

Title	Type
Agriculture and Nutrition Resource Review (January 2016)	Review
Agriculture and Nutrition Resource Review (March 2016)	Review
Anemia Resource Review (March 2016)	Review
Lifesaving Links in Nigeria: The Critical Role of Infant and Young Child Feeding Support Groups	Success story
Project Year 4, Quarter 3	
Use of Aggregated Lot Quality Assurance Sampling Methods in Uganda to Provide Implementation-Relevant Evaluation Data	Poster
Increasing Nutrition Sensitivity of Value Chains: A Review of Two Feed the Future Projects in Guatemala	Brief
Nutrition Financing: Why Does It Matter?	Video
Nutrition and Development of Children Under Two Years of Age	Job aids and tools
Leveraging Agriculture for Nutritional Impact through the Feed the Future Initiative	Journal article
Iron-Folic Acid Distribution and Consumption Through Antenatal Care: Identifying Barriers Across Countries	Journal article
Annex: SPRING Pathways to Better Nutrition Budget Methods - Uganda	Brief
Strategic Agenda for At-Scale SBCC	Video
Formative Research: Key Influencers of Household Food Access in the Western Highlands of Guatemala	Report
Systems Thinking and Action for Nutrition	Brief
Nutrition Workforce Mapping Toolkit	Job aids and tools
Tool for Rapid Evaluation of Facility-Level Nutrition Assessment, Counseling, and Support: A User's Guide	Job aids and tools
Designing the Future of Nutrition SBCC: How to Achieve Impact at Scale Video	Video
Community Video for Nutrition Guide	Series
USAID Launches SPRING in the Kyrgyz Republic	News
Project Year 4, Quarter 4	
For the Long Haul: Financing Sustained Commitment to Nutrition	Briefs
Annex: SPRING Pathways to Better Nutrition Qualitative Methods - Nepal	Briefs
Annex: SPRING Pathways to Better Nutrition Budget Methods - Nepal	Briefs
Annex: SPRING Pathways to Better Nutrition Budget Methods - Uganda	Briefs
Strengthening the Links between Nutrition and Health Outcomes and Agricultural Research	Journal Articles
Uganda National Working Group on Food Fortification Receives Ethiopian Delegation	News
SPRING Joins Global Leaders for International Conference on Integrated Nutrition for East Africa	News
USAID Acting Administrator Visits a SPRING/Bangladesh Farmer Nutrition School	News
Project Improves Nigerian Capacity to Deliver Infant and Young Child Feeding Messages	News

Title	Type
SPRING/Uganda Celebrates World Breastfeeding Week 2015	News
SPRING/Bangladesh Recognized by the Government of Bangladesh on World Population Day	News
Tippy Taps and Community Nutrition Champions to Play a Larger Role in Bangladesh	News
SPRING/Bangladesh Celebrates World Breastfeeding Week with Multiple Events	News
Nutrition Financing Takes Center Stage at Major International Conferences	News
From Policy to Practice: Learning from the Multi-sectoral Uganda Nutrition Action Plan Implementation in Kisoro District	Posters
A More Plentiful Home	Success Stories
Local Video: How Can Working Parents Feed Their Young Children Frequently?	Videos
Local Video: How Can We Ensure Dietary Diversity in the Sahel?	Videos
Local Video: How to Exclusively Breastfeed?	Videos
Local Video: A Good Start to Exclusive Breastfeeding	Videos
Local Video: Responsive Feeding is Possible	Videos
Local Video: Men Support Handwashing in Maradi	Videos
Project Year 5, Quarter 1	
National Anemia Profiles [16 country briefs]	Briefs
Adapting National Nutrition Action Plans to the Sub-national Context: The Case of Nepal	Brief
Integration of Nutrition Assessment, Counseling, and Support into Uganda's Routine Health Service Delivery--Ntungamo Technical Brief	Brief
Snapshots of Nutrition in Uganda: Kisoro District	Brief
Snapshots of Nutrition in Uganda: Lira District	Brief
USAID Technical Guidance Brief: Effective At Scale Nutrition SBCC	Brief
Educating and Training a Workforce for Nutrition in a Post-2015 World	Journal Article
Increasing Nutrition Sensitivity of Value Chains: A Review of Two Feed the Future Projects in Guatemala	Poster
Adolescent Girls', Women's, and Maternal Nutrition in Low and Middle Income Countries (LMIC): Current Context and Scientific Basis for Moving Forward	Report
Baseline Nutrition Survey in the Kyrgyz Republic	Report
Distribution of Micronutrient Powders in Namutumba District [Uganda]	Report
Guinea Nutrition Assessment	Report
Haiti: Exploring Approaches to Building Capacity for Nutrition Assessment, Counseling, and Support Services	Report
Integrated Nutrition and Agriculture Needs Assessment for Sierra Leone	Report
Integration of Nutrition Assessment, Counseling, and Support into Uganda's Routine Health Service Delivery--A Monitoring Report	Report

Title	Type
Review of Programmatic Responses to Adolescent and Women's Nutritional Needs in Low and Middle Income Countries	Report
SPRING/Haiti Data Collection and Quality Improvement Report	Report
USAID Discussion Paper: Convergence and Tension in Nutrition-Sensitive Agriculture Market Development Activities	Report
Success Story: Bringing Better Nutrition to Orphans and Vulnerable Children in Nigeria	Success Story
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Understanding the Women's Empowerment Pathway (FRENCH version)	Tool
User's Guide to the Nutrition Budget Analysis Tool	Tool
SPRING/Bangladesh Talks Handwashing on Jiboner Golpo	Video
Project Year 5, Quarter 2	
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District Technical Brief: Report on Nutrition Financing in Lira District, Uganda	Brief
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Snapshots of Nutrition in Nepal: Kapilvastu	Brief
Snapshots of Nutrition in Nepal: Parsa	Brief

Title	Type
Actions Essentielles en Nutrition et Actions Essentielles en Hygiène. Guide de Formation : Agents de Santé et Responsables de Nutrition	Guide
Actions Essentielles en Nutrition et Actions Essentielles en Hygiène. Guide de Formation: *Agents Communautaires*	Guide
District Assessment Tool for Anemia Facilitator Guide	Guide
District Assessment Tool for Anemia: A User's Guide	Guide
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Agriculture and Nutrition Resource Review (January 2016)	Review
Agriculture and Nutrition Resource Review (March 2016)	Review
Anemia Resource Review (March 2016)	Review
Lifesaving Links in Nigeria: The Critical Role of Infant and Young Child Feeding Support Groups	Success story
Project Year 5, Quarter 3	
Learning from Nepal's Multi-Sectoral Nutrition Plan Implementation in Three Priority Districts	Brief
SPRING/Bangladesh Fact Sheet	Fact Sheet
SPRING/Kyrgyz Republic Fact Sheet	Fact Sheet
SPRING/Nigeria Fact Sheet	Fact Sheet
SPRING/Senegal Fact Sheet (English and French)	Fact Sheet
Farmer Nutrition School Technical Guide: Vegetable Gardening, Native Chicken Rearing, and Pond Fish Culture	Guide
Conducting an Infant and Young Child Feeding Support Group in Nigeria	Job Aid

Title	Type
SPRING/Guinea Monitoring and Evaluation Plan	Plan
SPRING/Kyrgyz Republic: Activity Monitoring and Evaluation Plan, 2015–16	Plan
SPRING/Sierra Leone Monitoring and Evaluation Plan	Plan
Estimating Country-Level Nutrition Investments: Global Implications of a Two-Country Study	Poster
Using WASH to Improve Nutritional Outcomes for Pregnant Women and Young Children: The SPRING "WASH 1,000" Experience in Northern Ghana	Poster
Pathways to Better Nutrition: Final Findings (Accham, Nepal)	Presentation
Pathways to Better Nutrition: Final Findings (Kapilvastu, Nepal)	Presentation
Pathways to Better Nutrition: Final Findings (Parsa, Nepal)	Presentation
Ghana: Landscape Analysis of Anemia and Anemia Programming	Report
Informing Video Topics and Content on Maternal, Infant, and Young Child Nutrition and Handwashing: Situational Analysis and Formative Research in Maradi, Niger	Report
Mali Agriculture Indicators Report—Rainy and Dry Seasons	Report
Meeting Report: Technical Consultation on Nutrition Financial Analysis	Report
Multi-Sectoral Nutrition Strategy Global Learning and Evidence Exchange (MSN-GLEE): West Africa MSN-GLEE Conference Report, Accra, Ghana, January 19–21, 2016	Report
Review of Programming for Orphans and Vulnerable Children in Nigeria: Exploring Opportunities for Future Investments in Nutrition Social and Behavior Change Communication	Report
SPRING Quarterly Report: Quarter 2, PY5 (January 1, 2016–March 31, 2016)	Report
Agriculture and Nutrition Resource Review (April 2016)	Resource Review
Agriculture and Nutrition Resource Review (June 2016)	Resource Review
Agriculture and Nutrition Resource Review (May 2016)	Resource Review
Strengthening Systems Resource Review (May 2016)	Resource Review
Bangladesh's Family Welfare Visitors: Getting Nutrition Messages to the Right Clients at the Right Time	Success Story
Fishing for Good Nutrition: How Backyard Fish Farming Is Improving Diets in Bangladesh	Success Story
SPRING/Haiti Works with "Nutrition Focal Point" Agents to Amplify Nutrition Messages	Success Story
Supportive Husbands, Healthy Families: Spouses Team Up to Improve Nutrition in Bangladesh	Success Story
Micronutrient Powders for Young Children: USAID Technical Implementation Brief	Technical Brief
Anemia Landscape Analysis Guidance (web content)	Web Tool

Title	Type
Project Year 5, Quarter 4	
Operationalizing Multi-Sectoral Coordination and Collaboration for Improved Nutrition: Recommendations from an In-Depth Assessment of Three Countries' Experiences	Brief
Reducing Malnutrition through Farmer Nutrition Schools: Key Elements for Implementation Based on the SPRING Experience in Bangladesh	Brief
USAID Multi-Sectoral Nutrition Strategy Technical Guidance Brief: Nutrition-Sensitive Agriculture—Applying the Income Pathway	Brief
Engaging Government Health Staff to Promote Nutrition at the Community Level: A Retrospective Analysis from Bangladesh	Brief
USAID Multi-Sectoral Nutrition Strategy Discussion Paper: Convergence and Tension in Nutrition-sensitive Agriculture Market Development Activities.	Brief
How Do Community Health Workers Contribute to Better Nutrition?: India	Brief
Bangladesh Case Study: Multi-Sectoral Coordination and Collaboration of the Feed the Future Portfolio	Case Study
Enhancing Multi-Sectoral Coordination and Collaboration through the CHAIN Project: A Rwanda Case Study	Case Study
Improving Nutrition Outcomes through the Western Highlands Integrated Program (WHIP): A Guatemala Case Study	Case Study
Healthy Nutrition for Children and the Whole Family Cookbook (Russian and Kyrgyz)	Cookbook
Understanding Anemia: Guidance for Conducting a Landscape Analysis	Guide
Understanding Anemia: A User's Guide to the Landscape Analysis Tool	Guide
Facilitator's Guide to Training Health Workers in Ghana to Measure Haemoglobin and Assess Anaemia with the Hemocue hb 301 Device	Guide
When a King Has Good Counselors, His Reign is Peaceful: Viewer Discussion and Action Planning Facilitator's Guide	Guide
Kyrgyz Republic Clean Latrines and Handwashing Handouts (Kyrgyz)	Handout
Kyrgyz Republic Dietary Diversity Handout (Kyrgyz)	Handout
Optimizing the Multi-Sectoral Nutrition Policy Cycle—A Systems Perspective	Journal
The Governance of Multisector Nutrition Programs in Ethiopia and Nepal: Real World Opportunities and Constraints from Policymaker Perspectives	Journal
Prioritizing and Funding the Uganda Nutrition Action Plan	Journal
Assessing Progress in Implementing Uganda's Nutrition Action Plan: District Level Insights	Journal
Experiences and learning for continual program improvement micronutrient powders interventions	Journal
Experiences and learning in delivering and supporting behavior change for micronutrient powders interventions	Journal

Title	Type
Experiences and learning in planning and coordinating micronutrient powders interventions and supply	Journal
Experiences and Learning from the 'Micronutrient Powders Consultation: Lessons Learned for Operational Guidance': Executive summary	Journal
Kyrgyz Republic: Nutrition and Care of Young Infants and Children Facility Tools (Russian and Kyrgyz)	Poster
Pathways to Better Nutrition Global Recommendations	Presentation
Intermediate Outcomes and Indicators for Nutrition-Sensitive Agriculture	Report
Ghana: Field Testing of District Assessment Tool for Anemia—Findings	Report
Pathways to Better Nutrition Nepal Case Study: Final Report	Report
Pathways to Better Nutrition Uganda Case Study: Final Report	Report
SPRING Quarterly Report: Quarter 3, PY5 (April 1, 2016–June 30, 2016)	Report
Seeing Is Believing: The SPRING/Digital Green Experience in Niger—Evidence from a Community Video Approach for Nutrition and Hygiene Behaviors	Report
Spring/Digital Green Collaboration Progress Report: Using Participatory, Community-Led Video to Promote Nutrition and Hygiene in Niger	Report
Evaluation of the Nigeria Community Infant and Young Child Feeding Counselling Package: Baseline Report	Report
Evaluation of Nigeria's Community Infant and Young Child Feeding Counselling Package: Progress Report #4	Report
A Qualitative Review of Micronutrient Powder Distribution in Namutumba District, Uganda: Results of a Midline Assessment	Report
Raising the Status and Quality of Nutrition Services within Government Systems	Report
Creating a More Welcoming Environment at Hôpital Immaculée Conception des Cayes Supports Nutrition Counseling in Haiti	Success Story
From Decaying Peels to Delicious Produce	Success Story
One Mother at a Time: Bringing Dietary Diversity and Better Health to Infants and Young Children in the Kyrgyz Republic	Success Story
Smart Support for Better Nutrition	Success Story
The Magic of Orange-Fleshed Sweet Potatoes	Success Story
Better Farming Methods Yield Healthy Results: Learning from SPRING/Ghana's Farmer Field School	Success Story
Nigeria's Nutrition-Saavy Dads: The Benefits of Involving Fathers in Infant and Young Child Feeding Support Groups	Success Story
Planting the Seeds of Better Nutrition in Mali: A Community Leader Improves Her Family's Nutrition through Household Gardening	Success Story
From Salty Snacks to Fresh Food: Community Activists in the Kyrgyz Republic Improve Food-buying Habits	Success Story
Improved Infant Nutrition Gives Nigerian Mothers a Sense of Community and Pride	Success Story

Title	Type
Growing Nutritious Food at Home: Families in Ebom, Nigeria Embrace Homestead Gardens	Success Story
Putting Training into Practice for Better Infant and Young Child Nutrition in Nigeria: A Community Volunteer's Story	Success Story
Union Facilitator's Leave a Legacy of Better Nutrition Practices in Bangladesh	Success Story
Anemia Landscape Analysis Tool	Tool
Baseline Tools: Evaluation of the Nigeria Community Infant and Young Child Feeding Counselling Package	Tool
District Assessment Tool for Anemia	Tool
National and District Tools to Guide Anemia Programming	Tool
Kyrgyz Republic: Five-Day Training of Facilitators/Trainers: Adolescent and Women's Nutrition and Anemia—Facilitator Guide	Training Materials
Pathways to Better Nutrition Case Studies: Understanding How Policy Translates into Action	Video
SPRING Promotes Nutrition-Sensitive Agriculture	Web Page
Project Year 6, Quarter 1	
Evaluating the Nigeria Community Infant and Young Child Feeding Counselling Package: Design Overview	Brief
Evaluation of the Nigeria Community Infant and Young Child Feeding Counselling Package: Nutrition Prioritization	Brief
Evaluation of the Nigeria Community Infant and Young Child Feeding Counselling Package: Women's Empowerment	Brief
Laying the Groundwork for Behavior Change Strategies in Sierra Leone: Understanding Maternal, Infant, and Young Child Nutrition and Nutrition-Sensitive Agriculture Practices in Tonkolili District, Sierra Leone	Brief
Literature Review on Pumpkin in Sierra Leone	Brief
Pathways to Better Nutrition Case Study Evidence Series—Technical Brief #4: Toward Shared Goals. Building Multi-sectoral Coordination for Nutrition in Uganda and Nepal	Brief
SPRING/Uganda Fact Sheet	Fact Sheet
Nigeria Complementary Feeding and Food Demonstration Training: Complementary Feeding Manual	Training Materials
Nigeria Complementary Feeding and Food Demonstration Training: Facilitator's Guide	Training Materials
Nigeria Complementary Feeding and Food Demonstration Training: Food Demonstration Manual	Training Materials
Nigeria Complementary Feeding and Food Demonstration Training: Recipe Cards	Training Materials

Title	Type
Nigeria Complementary Feeding and Food Demonstration Training: Training Handouts	Training Materials
Nutrition and Hygiene for Orphans and Vulnerable Children in Nigeria: A Training Guide for Community Based Organisation—Guidance for Facilitators	Training Materials
Nutrition and Hygiene for Orphans and Vulnerable Children in Nigeria: A Training Guide for Community Based Organisation—Job Aids and Handouts	Training Materials
Nutrition and Hygiene for Orphans and Vulnerable Children in Nigeria: A Training Guide for Community Based Organisation—Module 1: Introductory Module for Facilitators	Training Materials
Nutrition and Hygiene for Orphans and Vulnerable Children in Nigeria: A Training Guide for Community Based Organisation—Module 2: Activities for Children 2–5 Years	Training Materials
Nutrition and Hygiene for Orphans and Vulnerable Children in Nigeria: A Training Guide for Community Based Organisation—Module 3: Activities for Children 6–11 Years	Training Materials
Nutrition and Hygiene for Orphans and Vulnerable Children in Nigeria: A Training Guide for Community Based Organisation—Module 4: Activities for Children 12–17 Years	Training Materials
Clean Latrines and Handwashing (in Kyrgyz only)	Handout
Dietary Diversity Handout (in Kyrgyz only)	Handout
Bangladesh Country Achievements—Project Year 5	Infographic
Five Ways to Improve Nutrition through Agriculture	Infographic
Ghana Country Achievements—Project Year 5	Infographic
Kyrgyz Country Achievements—Project Year 5	Infographic
Senegal Country Achievements—Project Year 5	Infographic
SPRING/Nigeria—Scaling Up IYCF Training	Infographic
Uganda Country Achievements—Project Year 5	Infographic
Community Video: *Allaitement Exclusif au Sein Maternel*	Local Video
Students Pledging to Build Handwashing Stations at Home	Local Video
Barriers and Enablers to the Consumption of Pumpkin and Fish in Tonkolili, Sierra Leone	Poster
Challenges with Identifying Rapid Methods That Are Accurate and Cost Effective for Food Fortification Monitoring and Inspections	Poster
Developing Effective Messages for Better Nutrition and Hygiene in Tonkolili: The TIPs Method	Poster
Engaging Entrepreneurs in Developing Community Videos for Nutrition	Poster
Experiences and Learning from the 'Micronutrient Powders Consultation: Lessons Learned for Operational Guidance'	Poster

Title	Type
Nutrition and Care of Infants and Young Children Facility Tools (in Russian and Kyrgyz only)	Poster
Opportunities for Nutrition-Sensitive Value Chains in Tonkolili, Sierra Leone	Poster
Piloting Through Partnership: Micronutrient Powders In Uganda	Poster
Reflecting on Experiences to Improve Programming: Looking at Micronutrient Powder Distribution Qualitatively	Poster
Systematic Review of Reviews: Comparing Nutrition-Specific and -Sensitive Intervention Impacts on Anemia and Hemoglobin Concentrations	Poster
Using SBCC to Lower Barriers to Appropriate Use of Micronutrient Powders in Uganda	Poster
Anemia Task Force Meeting Report for November 28, 2016 and Flyer	Report
Evaluation of Nigeria's Community Infant and Young Child Feeding Counselling Package - Progress Report #1	Report
Evaluation of Nigeria's Community Infant and Young Child Feeding Counselling Package - Progress Report #2	Report
Evaluation of Nigeria's Community Infant and Young Child Feeding Counselling Package - Progress Report #3	Report
Evaluation of the Nigeria Community Infant and Young Child Feeding Counselling Package: Report of a Mid-Process Assessment	Report
La CCSC au Sahel : Une évaluation du paysage de la communication pour le changement social et comportemental en matière de nutrition et d'hygiène au Niger et au Burkina Faso	Report
Looking Back, Looking Forward: Feed the Future Report on Nutrition, Gender, and Climate Smart Agriculture	Report
Recherche Formative Sur Les Percetions Communautaires Et Comportements En Nutrition Hygiene Et Sante En Burkina Faso: Rapport Provisoire	Report
Shifting Nutrition and Hygiene Behaviors in Sierra Leone Utilizing Trials of Improved Practices	Report
Sierra Leone: Barrier Analysis Survey on Fish and Pumpkin	Report
SPRING Annual Report Project Year 5	Report
Voir, c'est croire : Preuves fournies par une approche de vidéo communautaire pour les comportements liés à la nutrition et l'hygiène	Report
Anemia Resource Review, December 2016	Resource Review
Allocating Money for Better Nutrition in Nigeria	Success Story
Breastfeeding Basics Mean Better Nutrition: The Important Role of Nutrition Counseling in Ghana	Success Story
Conquering Challenges to Better Nutrition: The Women of Kajuru, Nigeria	Success Story

Title	Type
Helping Hospitals Become "Baby-Friendly": Improving Nutrition for Mothers and Children in the Kyrgyz Republic	Success Story
Women Empower Women to Improve Children's Diets in Nigeria	Success Story
Evaluation of the Nigeria Community Infant and Young Child Feeding Counselling Package: Baseline Tools	Tools
Project Year 6, Quarter 2	
Kyrgyz Republic Food Storage Booklet (Kyrgyz)	Booklet
Endline Survey Results of Nutrition Assessment Counseling and Support (NACS) Services in Health Facilities Supported by SPRING/Uganda: Technical Brief	Brief
Engaging Government Agriculture Staff to Promote Nutrition at the Community Level: A Retrospective Analysis from Bangladesh	Brief
Micronutrient Assessment and Anemia Risk Factors: Programmatic Implications from the Findings of the Biomarkers Reflecting Inflammation and Nutritional Determinants of Anemia (BRINDA) I Project"	Brief
USAID Technical Guidance Brief: Gender Considerations for Achieving Nutrition Outcomes through Agriculture	Brief
USAID Technical Guidance Brief: Introduction to Nutrition Budget Analysis and Its Relevance to Nutrition Implementation	Brief
District Assessment Tool for Anemia Training of Trainers Guide	Training materials
Kyrgyz Republic National Anemia Technical Guideline and Protocol (Russian)	Guide
Training Supervisors to Mentor Health Workers Who Provide Counselling on Infant and Young Child Feeding: A Three-Day Course for Kyrgyz Mentor-Supervisors—Facilitator's Guide	Training materials
10 Recommendations for Translating Nutrition Policy into Nutrition Action	Infographic
SPRING/Bangladesh: Mobilizing Communities for Better Nutrition	Infographic
10 Keys to Developing a Culture of Better Information Use: Challenges and Successes of a Global Nutrition Project	Poster
Making Climate-Smart Agriculture Work for Nutrition	Poster
SPRING/Kyrgyz Republic Baby-Friendly Hospital Initiative Posters (Kyrgyz)	Posters
Anemia Profiles for Cambodia, Democratic Republic of Congo, and Lesotho	Profiles
Assessment of SPRING-Supported Implementation of Infant and Young Child Feeding in Nigeria: Measuring the Knowledge, Attitudes, and Practices of Partners and Caregivers	Report
Nigeria Final Country Report: 2012–2016	Report
Opportunities for Integrating Nutrition into Agricultural Information Systems in Northern Ghana	Report
SPRING Quarterly Report: Project Year 6, Quarter 1—October 1, 2016–December 31, 2016	Report

Title	Type
Uganda: Learning Exchange Visit to Sanku Project Site in Tanzania	Report
Women's Empowerment in Agriculture Index Results from SPRING/Bangladesh's Farmer Nutrition Schools: A Quantitative Study	Report
Agriculture and Nutrition Resource Review: February 2017	Resource Review
Agriculture and Nutrition Resource Review: March 2017	Resource Review
Anemia Resource Review: March 2017	Resource Review
Systems Strengthening Resource Review: March 2017	Resource Review
Success Story: Growing Food for a Growing Family in Senegal: How Multi-Sectoral Nutrition Benefits the Whole Household	Success Story
Success Story: Hidden Treasure: In Bangladesh, Worms Help Improve Nutrition through Better Homestead Gardens	Success Story
Success Story: Police Officers Help Spread Better Hygiene and Nutrition in Bangladesh	Success Story
Counselling Cards to Improve Infant and Young Child Feeding in the Kyrgyz Republic (Kyrgyz)	Training Materials
Farmer Nutrition School Flashcards	Training Materials
Iron-Folic Acid Commitment Card—Kyrgyz Republic (Kyrgyz)	Training Materials
Two-Year Anemia Calendar: Kyrgyz Republic (Kyrgyz and Russian)	Training Materials
Community Video: *Alimentation Complémentaire* (French)	Video
Farmer Nutrition Schools in Bangladesh	Video
Making Agricultural Market Development Activities More Nutrition-Sensitive	Video
SPRING/Bangladesh Project Overview	Video
Project Year 6, Quarter 3	
Multi-sectoral Tools to Address Anemia at the National and Local Levels	Article
Changing the Way We Think about Micronutrient Assessment and Anemia Programming: Findings from the Biomarkers Reflecting Inflammation and Nutritional Determinants of Anemia (BRINDA) Project	Brief
Funding Nutrition: Building a Healthier Future	Brief
Great Mothers, Healthy Children Campaign: SPRING/Uganda Southwest SBCC Program Brief	Brief
Reducing Anemia in Uganda: The SPRING Approach and Lessons Learned	Brief
Six Key Actions to Reduce Anemia: From Learning to Practice	Brief
Thinking about Cost-Effectiveness in Nutrition Interventions: Technical Brief	Brief
Farmer Nutrition School Advocacy Guide with Recommendations for Adaptation	Guide
Good Agronomic Practices for Safe Groundnut Production in Ghana: Video Facilitator's Guide	Guide

Title	Type
Act to Reduce Anemia Infographic	Infographic
Ghana Aflatoxin Management Photo-Aid	Job Aid
Ghana WASH 1,000-Day Approach Photo-Aid	Job Aid
Kyrgyz Republic: Deworming Leaflet for Families	Job Aid
Kyrgyz Republic: Deworming School Ruler and Facility Poster	Job Aid
Kyrgyz Republic: Healthy Nutrition for Mothers to Promote Growth and Development of Your Baby	Job Aid
Kyrgyz Republic: National Deworming Clinical Protocol	Job Aid
Accelerating Behavior Change in Nutrition-Sensitive Agriculture	Online Training
Participatory Community-Led Video Approach Catalyzes Social and Behavior Change for Nutrition	Poster
SPRING Quarter 2 Report: January 1–March 30, 2017	Report
The Father Factor: How Community Video Encourages Male Involvement for Better Nutrition and Hygiene Behaviors in Niger	Report
USAID Multi-Sectoral Anemia Task Force Meeting Report and Flyer: March 1, 2017	Report
Agriculture and Nutrition Resource Review: April 2017	Resource Review
Agriculture and Nutrition Resource Review: June 2017	Resource Review
Agriculture and Nutrition Resource Review: May 2017	Resource Review
Bringing Health to Neighbors through Better Hygiene: A Chief's Wife Champions SPRING's WASH 1,000 Approach	Success Story
Hassya's Story: Community Video for Nutrition in Niger (English and French)	Video
How Can Different Groups and Organizations Work Together to Improve Nutrition?	Video
SPRING Bangladesh Project Overview	Video
Using Community-Led Video to Improve Nutrition in the African Sahel (English and French)	Video
Project Year 6, Quarter 4	
Bangladesh Farmer Nutrition School Cohort Study: Technical Brief	Brief
Ghana: Engaging Community Members to Adopt Effective WASH Practices	Brief
Ghana: Helping Health Workers and Caregivers Improve Nutrition through Multi-Sectoral Programming	Brief
Ghana: Reducing Aflatoxin Risks as Part of a Multi-Sectoral Approach to Nutrition	Brief
Piloting through Partnership: Findings from the Uganda Micronutrient Powders Study	Brief

Title	Type
Reducing Anemia in Ghana: The SPRING Approach and Lessons Learned	Brief
Strengthening Nutrition within the Kyrgyz Republic Health System	Brief
Systems Thinking for Better Nutrition in the Kyrgyz Republic: Helping Program Planners See the Forest and the Trees	Brief
The Integrated 1,000-Day Household Approach in Ghana	Brief
Country Brochures for Ghana, Guinea, Kyrgyz Republic, Sahel, Senegal, and Uganda	Brochures
Aflatoxin-Safe Groundnut Production and Consumption in Ghana: Community Drama Video Facilitator's Guide	Guide
Community Health Volunteer Manual for Anaemia Control in Ghana: Participant Guide	Guide
Community Media for Social and Behavior Change: Using the Power of Participatory Storytelling	Guide
Feuille De Route Pour L'approche De La Video Communautaire	Guide
Health Worker Training Manual for Anaemia Control in Ghana: Facilitator Guide	Guide
Health Worker Training Manual for Anaemia Control in Ghana: Participant Guide	Guide
Manuel de Formation sur le Genre et la Nutrition	Guide
Mother Support Groups: Three-Day Training of Facilitators/Trainers. Facilitator Guide. Kyrgyz Republic.	Guide
Photo-to-Illustration Guide	Guide
Sénégal: Manuel de formation sur l'agriculture sensible à la nutrition	Guide
Vidéo Communautaire Guide de Référence du Matériel République du Niger	Guide
Farmer Nutrition Schools: Multi-Sectoral Action, Durable Results	Infographic
Ghana Nutrition Infographic	Infographic
Senegal: Working Together to Share the Burden	Infographic
SPRING Results at a Glance	Infographic
SPRING/Ghana: Engaging Communities to Improve Nutrition through the 1,000-Day Household Approach	Infographic
SPRING/Senegal Improving Nutrition through Partnership	Infographic
SPRING: Building the Multi-Sectoral Knowledge Base	Infographic
Uganda: Fortifying National Efforts to Improve Nutrition for All	Infographic
A Multisector Approach to Monitoring Planned and Actual Nutrition Spending	Journal Article
Community Video in the Sahel: From Pilot to Scale	Journal Article
Comparing the Costs and Cost-Effectiveness of Alternative Multiple Micronutrient Powder Delivery Platforms: An Intervention Targeting Young Children in Rural Uganda"	Journal Article

Title	Type
Facility and Community-based Delivery of Micronutrient Powders in Uganda: Opening the Black Box of Implementation Using Mixed Methods	Journal Article
Impact of nutrition-specific and nutrition-sensitive interventions on hemoglobin concentrations and anemia: A meta-review of systematic reviews	Journal Article
Laboratory and Field Spectrophotometry Methods for Quantifying Iodine in Salt: A Performance Evaluation	Journal Article
Community Video: An Adaptable and Effective Tool for Nutrition Social and Behavior Change	Poster
Comparing the Effectiveness and Cost-effectiveness of Facility-Based Versus Community-Based Distribution of Micro-Nutrient Powders in Rural Uganda	Poster
Evidence-Based Design: Agreeing on Priority Practices among Smallholder Farm Families for Improved Nutrition in Odisha, India	Poster
Exploring Variations in Hemoglobin Concentration and Measurement—the HEmoglobin MEasurement (HEME) Working Group	Poster
Human Resources and Achievement of National Nutrition Plans	Poster
New Multi-sectoral Tools to Address Anemia at the National and District Levels	Poster
Nutrition Recommendations for Improving Adolescent Girls' Health and Wellbeing	Poster
Promoting Nutrition and Hygiene for Orphans and Vulnerable Children throughout Childhood in Nigeria	Poster
Role-modeling Culturally Appropriate Nurturing Care Practices to Improve Infant and Young Child Nutrition	Poster
National Anemia Profiles for Bangladesh and Sierra Leone	Profiles
A Review of Household Food Storage and Preservation Practices in the Kyrgyz Republic	Report
Assessment of Nutrition-Sensitive Agriculture Practices for SMARTE Project, Republic of Guinea	Report
Bangladesh Farmer Nutrition School Cohort Study	Report
Guide du Facilitateur : Agriculture sensible à la nutrition pour les agents AVENIR en Guinée	Report
La Facteur Père : Comment la vidéo communautaire encourage l'implication des hommes pour de meilleurs comportements de nutrition et d'hygiène	Report
Program Considerations in Food Fortification	Report
Sierra Leone: Entry Points for Nutrition in the Feed the Future Value Chains	Report
Spillover Effect of SPRING/Bangladesh Farmer Nutrition Schools among Non-Project Beneficiaries: A Qualitative Study	Report
SPRING Quarter 3, FY17 Report	Report
Bangladesh Final Country Report	Report

Title	Type
The District Assessment Tool for Anemia (DATA) in Nepal: Experience and Lessons Learned	Report
Uganda: Mapping of Maize Millers	Report
Agriculture to Nutrition Resource Review, July 2017	Resource Review
Agriculture to Nutrition Resource Review, September 2017	Resource Review
Sierra Leone National Multi-sectoral Strategy to Prevent and Control Anaemia 2017–2025	Strategy
SPRING/Sierra Leone Social and Behavior Change Strategy	Strategy
Uganda Anaemia Prevention and Control Strategy 2017/18–2021/22	Strategy
Uganda Anemia Strategy Costing Report	Strategy
Uganda Anemia Strategy Monitoring and Evaluation Plan	Strategy
Uganda Food Fortification Costing Strategy	Strategy
Uganda Food Fortification Strategy	Strategy
Charting a Path to Better Nutrition in Ghana	Success Story
Clean Fields Bring Stronger Yields	Success Story
Empowering Women through Better Agriculture and Improved Yields	Success Story
Integrating Agriculture, Nutrition, and Hygiene Knowledge for Improved Health Practices	Success Story
Soap to the Rescue! Kyrgyz Students WASH Away Germs for Better Nutrition	Success Story
The Power of Powders in Uganda	Success Story
Counselling Cards for Father-to-Father Support Groups: Infant and Young Child Feeding and Gender in Ghana	Training
Counselling Cards for Hygiene Practices—Sierra Leone	Training
DYNASET-SETAL: Materiel Didactique	Training
DYNASET-SETAL: Pour la Lutte Contre la Malnutrition à Travers le Maintien de la Propreté Autour de l'Enfant	Training
Facilitator's Guide for Father-to-Father Support Groups: Infant and Young Child Feeding and Gender in Ghana	Training
Farmer Field School Curriculum: Good Agronomic Practices for Groundnut Production in Ghana	Training
Ghana: Quality Improvement Curriculum for Community Health (Guide and Slide Deck)	Training
Ghana: Quality Improvement Curriculum for Health Facilities (Guide and Slide Deck)	Training
India Maternal, Infant, and Young Child Community Nutrition and Nutrition-Sensitive Agriculture Trainings: Facilitator Training Tips	Training

Title	Type
India Maternal, Infant, and Young Child Community Nutrition Training: Facilitator's Guide	Training
India Maternal, Infant, and Young Child Community Nutrition Training: Training Aids	Training
India Maternal, Infant, and Young Child Community Nutrition Training: Training Handouts	Training
India Nutrition-Sensitive Agriculture Training: Facilitator's Guide	Training
India Nutrition-Sensitive Agriculture Training: Training Aids	Training
India Nutrition-Sensitive Agriculture Training: Training Handouts	Training
Districts Address Anemia with DATA	Video
Looking Beyond Food for Better Nutrition	Video
Make the Healthier Choice: Eat Fortified Foods	Video
The Impact of Blister Packaging Iron and Folate on Adherence to Medication and Haemoglobin Levels among Pregnant Women at Mulago Hospital Antenatal Clinic: A Randomised Controlled Trial	Working Paper
Project Year 7, Quarter 1	
Couples as Champions for Gender Equality: Learning and Recommendations from SPRING in Senegal	Brief
Helping Program Planners See the Forest and the Trees: Applying Systems Thinking for Better Nutrition in Ghana	Brief
Helping Program Planners See the Forest and the Trees: Applying Systems Thinking for Better Nutrition in Kyrgyz Republic	Brief
Impact of Radio on Nutrition-Related Knowledge Behaviors in Senegal	Brief
Putting Budget Data to Work for Nutrition and Using Budget Data to Accelerate Progress on Nutrition.	Brief
SPRING in the Kyrgyz Republic: Evidence of Significant Improvement in Nutrition Practices	Brief
SPRING's Contribution to Industrial Food Fortification in Uganda	Brief
Moving Nutrition Social and Behavior Change Forward: Lessons from the SPRING Project	Brief
Building a Shared Vision for Good Nutrition, Growth, and Development in the Community: A Recipe for Policymakers, Planners, and Program Managers	Guide
Designing Effective Nutrition-Sensitive Agriculture Activities: Facilitator's Guide	Guide
Facilitator's Guide for Conducting Mother to Mother Support Group Monthly Meetings in Ghana	Guide
La Farine Composee: Guide de Production	Guide

Title	Type
Using Budget Data to Accelerate Progress on Nutrition	Infographic
Summary Table of WHO Guidance on Preventive Population-Based Strategies to Control Anaemia Using Iron Supplementation	Job Aid
Understanding the Process of Strengthening Multi-Sectoral Efforts for Anemia Reduction: Qualitative Findings from Sierra Leone and Uganda	Journal Article
Interactive Radio for Scaling Up Agricultural Solutions: Rollout Plan for the SMARTE Project	Plan
Evaluating the Effects of a Community Video Approach to Improve Infant and Young Child Nutrition: The SPRING Experience in Burkina Faso	Poster
Community Video Approach to Promote Improved Nutrition in Resilience Program: A Process Evaluation	Report
Multi-sectoral Anemia Efforts at the National Level in Uganda: Process Documentation Findings	Report
Piloting and Implementing the District Assessment Tool for Anemia in Uganda: Experiences and Lessons Learned	Report
Results of a Midline Survey in SPRING-Supported Health Facilities and Communities in Northern Ghana	Report
Seeing Is Believing in Niger: Sustaining Improved Nutrition and Hygiene Behavior Change through Community Video–Endline Data Evaluation	Report
The SPRING Community Video Program in East Region, Burkina Faso: Effects on Women and Children's Nutrition and Hygiene Behaviors (ENGLISH and FRENCH)	Report
Zambia: Nutrition-Sensitive Agriculture in Practice: Review of Approaches and Experience in Three Development Activities	Report
Uganda: Process for Conducting a One-Year Pilot Project of Vitamin and Mineral Powders Distribution in Namutumba District	Report
SPRING Annual Report Project Year 6	Report
Anemia Resource Review: November 2017 Edition	Resource Review
A Little Help from My Friends: Village Savings and Loan Associations Help Build Nutrition Resilience in Ghana	Success Story
Community Video Spurs Collective Action to Improve Sanitation in Ghana	Success Story
Finding a Shared Purpose: Strengthening Coordination and Collaboration for Improved Nutrition in Rwanda	Success Story
Supportive Supervision Brings Better Health Services to the Kyrgyz Republic	Success Story
Nutrition-Sensitive Agriculture Training Resource Package	Training Materials

Title	Type
Project Year 7, Quarter 2	
Drivers of Malnutrition in Niger: Analysis of Secondary Date Sources	Brief
Funding Nutrition: Building a Healthier Future in Uganda	Brief
Guiding Questions for Nutrition-Sensitive Agriculture Practices	Brief
Lessons Learned in Developing Guidance for Designing and Monitoring Nutrition-Sensitive Agriculture Activities	Brief
Using a Quality Improvement Approach in Facilities and Communities in Ghana: Enhancing Nutrition within the First 1,000 Days	Brief
Sahel Roadmap for the Community Video Approach—English Version	Guide
Using Financial Data to Accelerate Progress on Nutrition	Infographic
Sahel Social and Behavior Change GIS Mapping Dashboard: User's Manual	Manual
Eat Fine Fish for Welbodi—Sierra Leone	Poster
Assessing Drivers of Malnutrition in Nigeria	Report
Community Infant and Young Child Feeding Counselling Package in Kaduna State Nigeria: Final Summary Report	Report
Diet and Eating Practices among Adolescent Girls in Low- to Middle-Income Countries	Report
Ghana Final Country Report	Report
Guinea Final Country Report	Report
Guinea: Formative Assessment of Household Maternal, Infant, and Young Child Nutrition and Hygiene Practices	Report
Kyrgyz Republic: Training Community Volunteers on Nutrition and Hygiene—Module Toolkit	Report
Multi-Sectoral Anemia Efforts at the National Level in Sierra Leone	Report
Nutrition Stakeholders Mapping in Bauchi, Kebbi, and Sokoto, Nigeria	Report
Sierra Leone Final Country Report	Report
SPRING Quarter 1 Report	Report
SPRING/Kyrgyz Republic: Women's Winter Dietary Diversity Summary Report	Report
The State of Maize Flour Fortification in Uganda	Report
USAID Anemia Multi-sectoral Task Force Meeting Report and Summary Flyer: December 13, 2017	Report
Using Farming Families' Perspectives to Inform Recommended Priority Practices	Report
Agriculture and Nutrition Resource Review: February 2018	Resource Review
Agriculture and Nutrition Resource Review: March 2018	Resource Review
Anemia Resource Review, Spring 2018	Resource Review

Title	Type
Hygiene Champions Improve Health in Senegal, One Village at a Time	Success Story
Kindling Best Nutrition Practices in Kindergarten	Success Story
Counseling Cards: Best Agronomic Practices for Pumpkin—Sierra Leone	Training Materials
Community Media for Social and Behavior Change: Learning from the SPRING Project	Video
Kyrgyz Republic Animated Video on Clean Latrines (in Russian and Kyrgyz)	Video
Kyrgyz Republic Animated Video on Junk Food (in Russian and Kyrgyz)	Video
Project Year 7, Quarter 3	
Be the Change You Want to See: Healthy Nutrition Behaviors in Kyrgyz Republic Begin with Those Who Promote Them	Success Story
Evaluation of the Nigeria Community Infant and Young Child Feeding (C-IYCF) Counselling Package	Report
The Potential to Improve Nutrition through Use of Fortified Maize Flour in Schools in Uganda: Results of a Mixed-Methods Research Study	Report
Spatial Analysis of Community- and Facility-Based Distribution of Micronutrient Powders in Rural Uganda	Report
SPRING Quarter 2 Report	Report
Tools for Anemia Programming: An Immersion Workshop Report	Report
Uganda Final Country Report	Report
Adapting Nutrition Social and Behavior Change Communication Interventions to Meet Audience and Partner Needs (English and Russian)	Brief
Addressing the Dual Burden of Malnutrition through National Policies and Plans: A Multi-Country Policy Review	Brief
Adolescent Nutrition Call to Action: Better Data Now to Drive Better Policies and Programs in the Future	Brief
Comprehensive Costing in Micronutrient Supplementation	Brief
Engaging Adolescents to Accelerate Progress on the First 1,000 Days	Brief
Translating Evidence into Policy Brief	Brief
Reducing Malnutrition and Anemia through a Multichannel Approach	Infographic
Experiences and Lessons Learned for Delivery of Micronutrient Powders Interventions	Journal Article
Experiences and Lessons Learned for Planning and Supply of Micronutrient Powders Interventions	Journal Article
Experiences and Lessons Learned for Programme Improvement of Micronutrient Powders Interventions	Journal Article
Taking Action: Five Ways to Improve Nutrition Through Agriculture Now	Journal Article

Title	Type
Variability in hemoglobin measurement with the HemoCue® and hematology analyzer: Analysis from seven countries	Journal Article
Accelerated Reduction Efforts on Anaemia Community of Practice Standard Operating Procedures Manual	Manual
Combining Health and Agriculture Formative Research to Improve Dietary Diversity	Poster
District Assessment Tool for Anemia (DATA)	Poster
Agriculture and Nutrition Resource Review: April 2018	Resource Review
Assessing the Application of Systems Thinking for Nutrition	Tool
Nutrition Social and Behavior Change Strategy Library	Tool
15 Recipe Videos in Russian for the Kyrgyz Republic	Videos

PMP Indicator 2.2.4: Number of unique visits on SPRING website

SPRING's launched its website in the second half of PY1, and the number of unique visitors has grown impressively every year since (PY7 figures are incomplete at this writing). During the life of the project, 320,016 unique viewers visited the website, logging more than 1 million total pageviews. Please see the Knowledge Management section of this report for more detailed statistics on website visits and use.

Performance Monitoring Plan

Table 12 summarizes all PMP indicators for the life of SPRING. The table shows results year-by-year, and totals for the project. These results are as of June 30, 2018. Figures from earlier quarterly and annual reports are updated with information submitted after the reports were submitted.

Table 12. Performance Monitoring Plan and Progress Tracking (country-based figures as of 6/30/2018)

No	Indicator	Achievements—Life of Project							
		PY1	PY2	PY3	PY4	PY5	PY6	PY7	Total
Strategic objective: Policies and programs to scale up effective nutrition services improved									
1	Number of children under 5 reached by USG-supported nutrition programs	2,713	690,082	1,491,132	1,941,578	1,934,345	1,186,376	166,479	7,412,705
2	Number of children under 5 who received vitamin A from USG-supported programs*	0	0	0	101,958	88,112	141,757	0	331,827
IR 1: Country-specific approaches to scale up nutrition programs improved									
1.1	Number of situational analyses/landscape analyses conducted by SPRING	3	2	3	2	4	1	0	9
1.2	Number of people trained in child health and	921	14,744	4,806	36,586	48,859	47,343	15,588	168,847

	nutrition through USG-supported health area programs								
1.3	Number of facilities or services (e.g., health facilities) reached with SPRING support	212	2,237	4,288	3,864	3,926	3,433	198	5,438
1.4	Number of institutions reached with SPRING support	6	45	43	96	144	145	46	266
1.5	Number of health facilities with established capacity to manage acute undernutrition	0	45	62	72	11	0	0	72
1.6	Number of instances of technical assistance provided to SPRING-supported countries**	21	45	70	84	122	72	8**	422
Sub-Result 1.1: Country-specific SBCC programs strengthened									
1.1.1	Estimated number of contacts made through SBCC activities	4,748	1,171,135	3,392,580	4,208,217	4,410,350	3,176,445	1,252,716	17,616,191
1.1.2	Number of people accessing nutrition e-learning module**	NA	NA	NA	NA	NA	1,134	770**	
See also indicators 1.2, 1.3, 1.4, 1.6									
Sub-Result 1.2: Country-specific approaches to improve dietary quality and diversity (including micronutrient adequacy) advanced									
See indicators 1.2, 1.3, 1.4, 1.6									
Sub-Result 1.3: Country-specific scale up of evidence-based nutrition interventions supported									
1.3.1	Number of geographic units reached by SPRING activities	21	57	80	213	271	204	18+	367
1.3.2	Percentage of geographic units in the country reached by SPRING activities	See table 7							
1.3.3	Percentage of target population reached on SPRING-supported geographic units	NA (only available in some countries)							
See indicators 1.2, 1.3, 1.4, 1.6									
IR 2: Global evidence base, advocacy platforms, and policies for nutrition expanded									
2.1	Number and type of dissemination activities supported by SPRING**	23	127	291	256	360	430	217	1,704

Sub-Result 2.1: Policy and advocacy efforts to support food and nutrition policies and programming strengthened									
2.1.1	Number of country, regional, and global meetings conducted or attended**	32	44	38	72	91	78	40	395
2.1.2	Number of networks or community of practice groups that SPRING led or participated in	15	25	23	27	38	37	39	49
Sub-Result 2.2: Evidence-based learning, M&E for effective approaches to scale up nutrition services expanded									
2.2.1	Number of research and evaluation activities conducted by SPRING	10	15	30	22	34	24	16	63
2.2.2	Number of instances where standard nutrition metrics are improved, based on SPRING inputs	1	1	1	4	4	3	0	8
2.2.3	Number of documents (reports, tools, statements) produced by SPRING	10	37	90	83	135	215	98	668
2.2.4	Number of unique visits to SPRING website***	684	7,311	20,720	48,426	75,888	98,357	74,843	320,016

* For children under 5 reached with vitamin A, to avoid double counting, only the first two quarters of each year were counted.
** Through Q2 of PY7
*** The total figure is unique visitors for the entire project (through Q2 of PY7). Therefore, the sum of unique visitors in each year is less, because some people visited the website in more than one year and they would be double-counted if the total only summed all seven years.

Annex 3: Life-of-Project Country Infographics

SPRING/BANGLADESH

MOBILIZING COMMUNITIES FOR IMPROVED NUTRITION

SPRING's work in Bangladesh (2012-2017) aimed to improve the nutritional status of pregnant and lactating women and children under two. By working through multiple channels, SPRING mobilized communities to adopt the essential nutrition actions and essential hygiene actions and consume nutritious and diverse diets throughout the year.

DIVERSIFYING DIETS THROUGH FNS

SPRING trained 126,255 pregnant and lactating women through 6,421 farmer nutrition schools. By emphasizing small doable actions, FNS participants gain the knowledge and skills they need to link food production (vegetable gardening, poultry rearing, and fish culture) with improved nutrition and hygiene practices.

LEVERAGING CHAMPIONS FOR NUTRITION

Community nutrition champions (CNCs) are farmer nutrition school (FNS) graduates elected by their peers to voluntarily spread messages about nutrition and hygiene in their communities. SPRING trained 6,421 CNCs to empower local women to speak up for health and nutrition, to strengthen relationships with health facilities, and encourage other women to use these services.

USING A MULTISECTORAL APPROACH

SPRING trained over 1,000 agriculture extension officers on the essential nutrition actions (ENA) and essential hygiene actions (EHA), and to identify opportunities to incorporate them into their routine work. These extension workers are now strong advocates for nutrition, including the male farmers in their existing farming groups.

STRENGTHENING THE HEALTH SYSTEM

SPRING supported 1,095 community clinics and 309 *upazila* health and family welfare centers to strengthen the nutrition counseling skills of more than 4,000 frontline health and family planning workers and nearly 1,100 supervisors. Through training and supportive supervision visits, SPRING emphasized the delivery of quality nutrition services at all supported frontline health facilities.

EXPANDING REACH THROUGH PARTNERSHIPS

SPRING partnered with USAID-funded projects including SHIKHA, NHSDP, AIN and WASHplus, as well as governmental and UN bodies. Partnerships helped SPRING reach more people and ensure that the greatest number of people possible received messages about nutrition and hygiene.

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SPRING
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PROGRAM RESULTS

	WITHOUT SPRING INTERVENTION	WITH SPRING INTERVENTION
Household members who wash both hands with soap after using the toilet	**6%** comparison group in SPRING working area	**76%** SPRING FNS participants
Female empowerment score	**0.62** comparison group in SPRING working area	**0.75** SPRING FNS participants
Women's dietary diversity score	**3.9** Pre FNS (2014)	**6.0** Post FNS (2015)
Children under 6 months who were exclusively breastfed	**28%** within SPRING working areas before SPRING interventions (2011/2012)	**51%** within SPRING working areas after SPRING interventions (2016)
Children 6-23 months receiving a minimum diverse diet	**15%** within SPRING working areas before SPRING interventions (2011/2012)	**38%** within SPRING working areas after SPRING interventions (2016)

2012 — Developed Community Worker Guide and Handbook on nutrition for non-health frontline workers

2013 — Scaled up from 15 to 40 *upazilas*

2014 — Launched Farmer Nutrition School guide and established 2,560 FNS in 40 *upazilas*

2015 — Conducted refresher trainings on ENA and EHA for 3,275 frontline and 1,058 supervisory level health and family planning workers

2016 — Achieved 60% coverage of target population across the 40 *upazilas*

2017 — Launched Farmer Nutrition School toolkit

Visit us at: www.spring-nutrition.org

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SPRING/GHANA

Engaging Communities to Improve Nutrition through the 1,000-Day Household Approach

SPRING's work in Ghana (2014–2017) aimed to improve the health of 1,000-day households with pregnant women and/or children under 2 years of age. Using evidence-based practices, SPRING developed a multi-sectoral program to reduce stunting and anemia in 15 districts of the Upper East and Northern regions of Ghana. The project linked the sectors of nutrition, WASH (water, sanitation, and hygiene), and agriculture, and employed social and behavior change communication approaches at household, community, and facility levels.

WASH
Building Capacity for Clean Communities

We used the WASH 1,000 approach to promote four key behaviors: disposing human and animal feces safely; handwashing at critical times; boiling or treating water for children 6–24 months; and creating clean and safe play spaces for children. Through SPRING's work, 154 communities have been declared open-defecation free, with over 6,756 latrines constructed using household and community resources.

AGRICULTURE
Promoting Safe Farming for Healthy Food

SPRING trained 19,899 farmers in good agronomic/harvesting practices to reduce dangerous aflatoxin contamination in groundnuts, which are widely consumed in northern Ghana. Chronic exposure to this toxin contributes to stunting and anemia.

SBCC
Expanding Our Reach through Innovative Channels

SPRING shared nutrition and hygiene messages through multiple platforms to encourage and reinforce behavior change. This included showing stunting advocacy and WASH 1,000 video dramas at community durbans and airing our radio serial drama, *Shrubs of Today Become Tomorrow's Forest*. We also developed high-quality picture aids to facilitate communication in our WASH and agriculture training activities.

WASH
Encouraging Handwashing at Critical Times

SPRING encouraged community members to construct and use tippy taps, simple handwashing stations made of locally available and inexpensive materials. With 9,235 tippy taps constructed in homes, we also integrated WASH 1,000 messages into school health clubs and encouraged the construction and use of tippy taps for handwashing at 124 schools.

NUTRITION
Improving Nutrition Counseling and Services

SPRING trained over 4,000 community health workers and volunteers on nutrition topics, including infant and young child feeding and anemia. Improving supervision of health workers helped ensure that messages were disseminated, the quality of services strengthened, and access to services improved.

NUTRITION
Helping Caregivers Improve Nutrition at Home

SPRING also formed and supported mother-to-mother and father-to-father support groups, encouraging community/family members to help each other share experiences and adopt new practices to improve the health and nutrition of their families.

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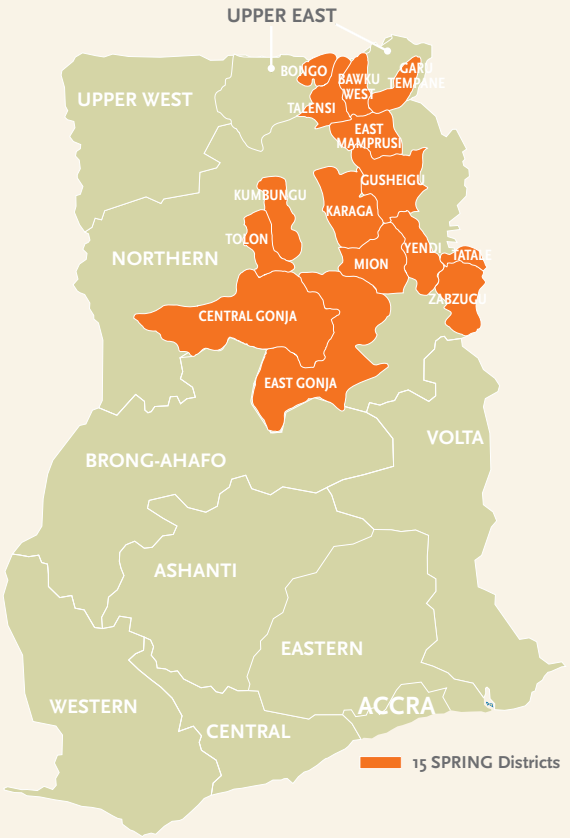
PROGRAM PARTNERS

SPRING enjoyed successful partnerships with the Government of Ghana and its decentralized units of the District Assemblies, including the Ghana Health Service, Ghana Education Service, Ministry of Food and Agriculture (MOFA), District Environmental Health and Sanitation Unit, Department for Community Development and Social Welfare, and Information Services Department; USAID Implementing Partners, including RING, ATT, ADVANCE, Systems for Health, Evaluate for Health, Communicate for Health; and multilaterals, including UNICEF and WFP, civil society organizations, and several other stakeholders, leading to more sustainable programming and wider coverage of communities.



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HAITI Country Achievements FY2015

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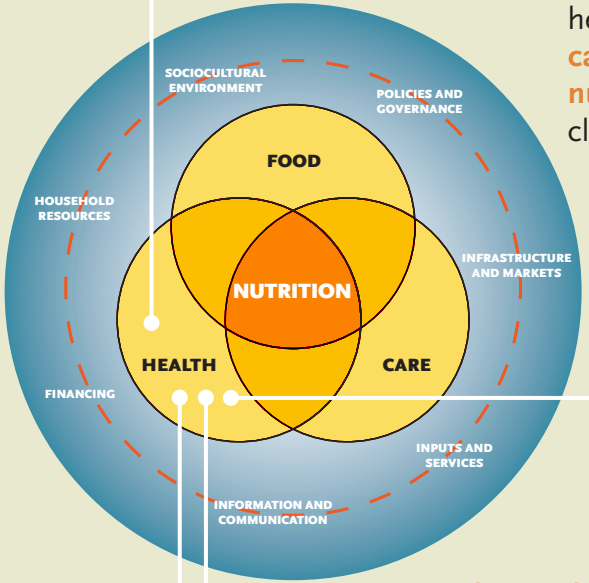
SPRING IS WORKING TO STRENGTHEN THE NUTRITION SYSTEM IN HAITI

Fifteen health facilities received items purchased from the SPRING/Haiti Quality Improvement Fund, to help enhance the **quality of nutrition services** through low-cost feasible solutions

Held two group education technique trainings for 58 pediatric and prenatal health workers to **build capacity to deliver nutrition messages** to clients in a group setting



Trained 260 health workers in **Nutrition Assessment, Counseling, and Support (NACS)** in 17 health facilities across 9 departments

Obtained MOH validation and distributed 100 copies of the NACS training package including the Protocol, Reference Manual, Trainers and Participants guides, and CD containing training package

REACHING PEOPLE

SPRING/Haiti focuses on strengthening Nutrition Assessment, Counseling, and Support (NACS) in 17 health facilities across nine departments throughout the country.

EXERTING INFLUENCE: HIGHLIGHTS

- May — Established QI fund
- August — Finalized the On-the-Job (OJT) research report
- August — Job aids and anthropometric equipment distributed
- September — Developed Haiti's National Anemia Profile
- October — Data Collection & Quality Improvement Report published
- October — NACS Launch event

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SPRING/Kyrgyz Republic

Reducing malnutrition and anemia through a multichannel approach

Since 2014, SPRING has promoted the uptake of 11 evidence-based practices to improve the nutritional status of children under two and women of reproductive age in the Kyrgyz Republic. SPRING built strategic partnerships to support national nutrition initiatives, strengthen the capacity of health care workers to provide quality nutrition services, improve household nutrition practices, and increase agriculture's contribution to nutrition outcomes.

PROGRAM RESULTS

	BEFORE		AFTER
Women's dietary diversity score increased from	4.1 food groups	to	5.4 food groups
IRON & FOLIC ACID Women taking IFA tablets for at least 90 days during pregnancy increased from	22%	to	40%
Exclusive breastfeeding increased from	29%	to	63%
Consumption of sugary foods by children 0–11 months decreased from	34%	to	26%
Children meeting minimum dietary diversity requirements increased from	42%	to	54%

SPRING worked in 11 *rayons* and townships of Jalalabad *oblast*, the entirety of Naryn *oblast*, and the capital city of Bishkek.

Evidence-Based Practices Promoted by SPRING

1. Consumption of iron supplements by pregnant women
2. Dietary diversity for women with emphasis on food sources of iron and foods that enhance iron absorption
3. Dietary diversity for children aged 6 to 23 months with emphasis on food sources of iron and vitamin A and foods that enhance iron absorption
4. Optimal meal frequency for children aged 6 to 23 months
5. Early initiation of breastfeeding
6. Exclusive breastfeeding from birth through the first six months
7. Timely introduction of appropriate complementary foods
8. Reduced consumption of foods of low nutrient value (junk food)
9. Presumptive treatment for helminths for pregnant women and young children
10. Handwashing at five critical times (after using the latrine, after changing a baby's diaper/cleaning a child, before preparing food, before feeding a child, and after handling animals)
11. Adoption of methods for safe and prolonged storage of nutrient-dense produce for the winter

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SPRING'S MULTICHANNEL APPROACH TO REDUCING MALNUTRITION

DEVELOPING NATIONAL PROTOCOLS AND GUIDELINES

Supported the Ministry of Health to update clinical guidelines on antenatal care and prevention and treatment of anemia and helminth infections

STRENGTHENING THE HEALTHCARE SYSTEM

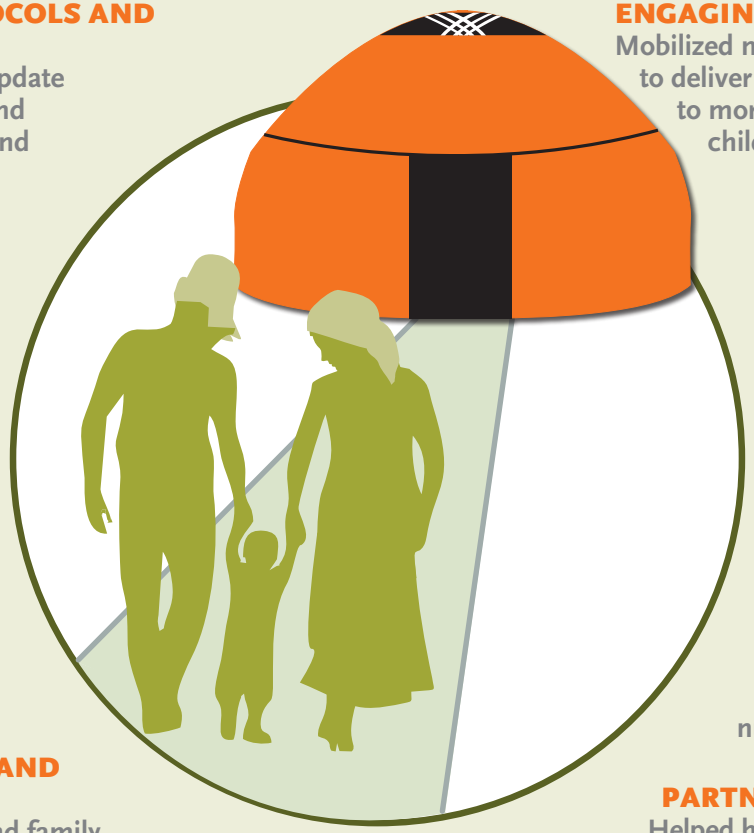
Delivered about 7,000 health worker trainings in 300+ facilities on key nutrition topics and provided supportive supervision to ensure retention of knowledge and skills

PRIORITIZING NUTRITION IN PRE-SERVICE EDUCATION

Revised the nutrition curriculum for medical universities and colleges across the country

MAKING HOSPITALS MOTHER- AND BABY-FRIENDLY

Trained and supported 27 hospitals and family medicine centers in the Baby-Friendly Hospital Initiative certification process with 17 health facilities receiving certification and 8 more under review



ENGAGING COMMUNITY VOLUNTEERS

Mobilized more than 3,200 community volunteers to deliver key nutrition and hygiene messages to more than 120,500 caregivers and 20,000 children under two

USING TOOLS TO PROMOTE DIETARY DIVERSITY

Published a guidebook on home-based food preservation and a cookbook with healthy recipes to increase year-round dietary diversity

REACHING URBAN AREAS

Leveraged Facebook and regional TV channels to increase reach, aired 30 videos on nutritious recipes and positive nutrition and hygiene behaviors, and organized entertaining educational events to promote good nutrition among urban audiences

PARTNERING ACROSS SECTORS

Helped health, education, and agriculture projects integrate nutrition elements into their programming to address direct and underlying causes of malnutrition

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MAY 2018

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MALI Country Achievements FY2015

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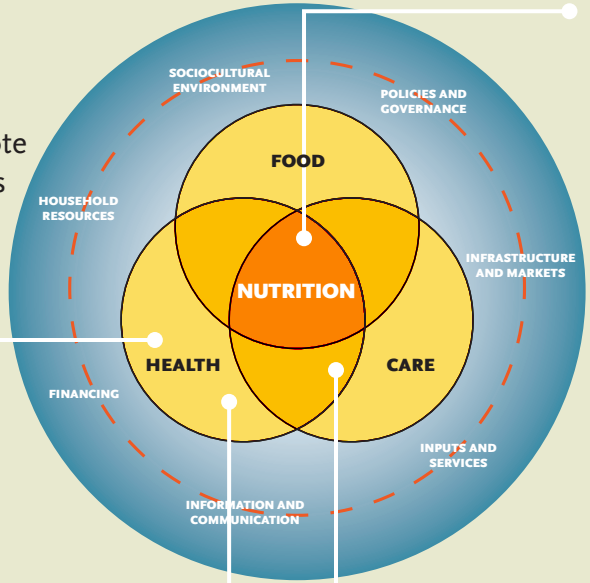
SPRING IS WORKING TO STRENGTHEN THE NUTRITION SYSTEM IN MALI

Following facility-level ENA/EHA trainings, **conducted supportive supervision visits using tablet computers** that provide real time feedback to help promote improved staff practices and monitor the quality of nutritional services received by clients

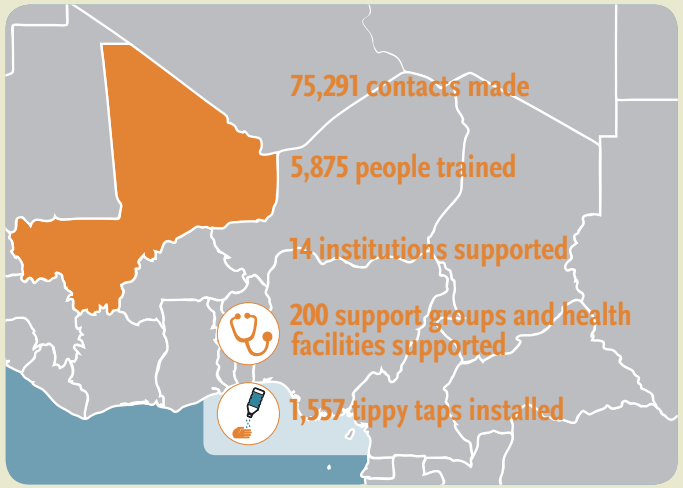
Initiated training for 500 leaders in nutrition-sensitive agriculture through 20 commune-level Farmer Nutrition Schools who in turn **trained an additional 5,000 farmers** to increase access to diverse and quality foods



In collaboration with the regional government, **triggered community-led total sanitation in 15 villages and established 1,557 tippy taps** at the household level

Completed cascade trainings on the Essential Nutrition Actions and Essential Hygiene Actions (ENA/EHA) for 375 facility-based health workers and community actors

REACHING PEOPLE



SPRING is working across 4 cercles, 20 communes, and 100 villages in Mali, reaching community leaders and health workers with nutrition-sensitive agriculture, ENA/EHA, and WASH interventions.

EXERTING INFLUENCE: HIGHLIGHTS

- January — Established SPRING office in Sevare, Mopti
- May — Hosted homestead food production workshop
- June — Launched Farmer Nutrition Schools
- July — Completed ENA/EHA trainings
- September — Triggered 15 villages in CLTS

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SPRING/NIGERIA

Scaling Up IYCF Training

SPRING's work in Nigeria aimed to reduce maternal and child under nutrition and improve HIV-free survival of infants and young children. We built the capacity of local government, USAID Implementing Partners, civil society organizations, and health workers in the implementation of the **Nigeria Community and Facility Infant and Young Child Feeding (IYCF) Counselling Package** in 122 local government areas across 16 states.

TIMELINE OF ACTIVITIES

2012
Translated national IYCF counselling package into six local languages

2013
Rolled out IYCF package in three local government areas (LGAs) across two states

2014
Rolled out IYCF package in 20 LGAs across five states with PEPFAR partners SMILE and STEER

2015
Rolled out IYCF package to 15 LGAs across three states with PEPFAR partners ARFH, HIFASS, and WEWE

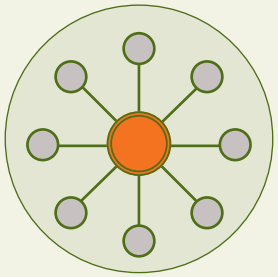
Scaled up across 13 states with five PEPFAR partners

2016
Reached a total of 122 LGAs across 16 states

ACHIEVING SCALE THROUGH PARTNERSHIPS

STAGE 1 COLLABORATE AND COORDINATE

- Harmonize approach
- Build awareness and buy-in
- Cascade training to partners
- Conduct M&E trainings
- Provide joint supportive supervision



STAGE 2 BUILD PARTNER CAPACITY

- Secure buy-in in expansion areas
- Cascade training to partner's network
- Provide oversight through supportive supervision

STAGE 3 ENHANCE NUTRITION OBJECTIVES

- Continue to support rollout of IYCF activities
- Provide technical assistance to other nutrition initiatives

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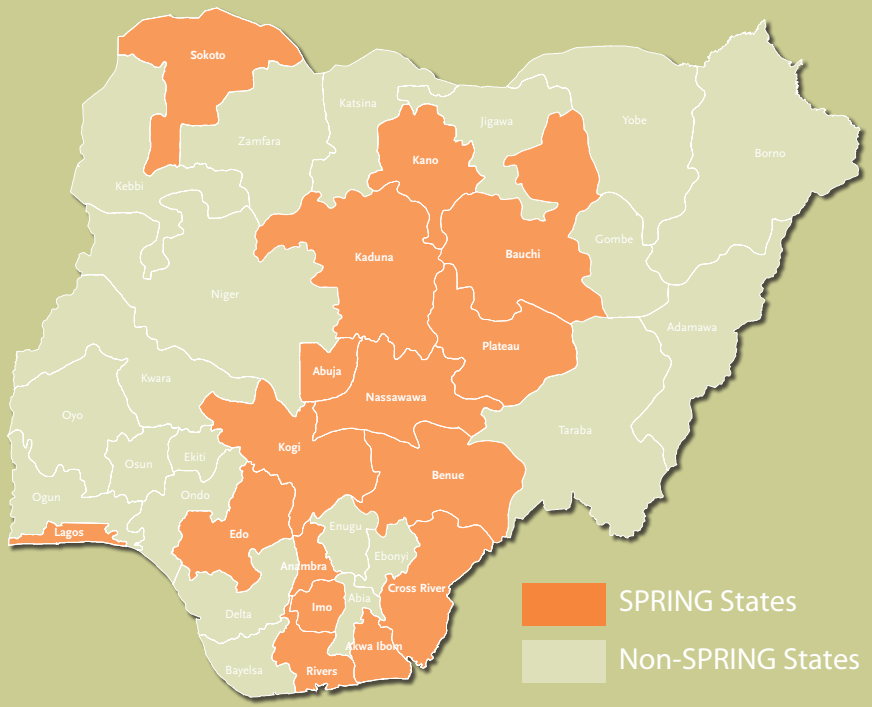
IYCF PROGRAM RESULTS

Over **2,600** people trained

Over **3,000** support groups formed*

Over **152,000** caregivers and children under 2 reached*

*through direct implementation and support provided to partners



RESPONDING TO PARTNERS' NEEDS

After successfully working on rolling out the IYCF counselling package, our partners requested we help strengthen their broader nutrition goals. Consequently, we developed a complementary feeding and food demonstration training as well as a curriculum for community-based organizations on nutrition and hygiene for OVCs age 2-17. We trained groups of master trainers who will roll out of these curricula with support from local partners.

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November 2016

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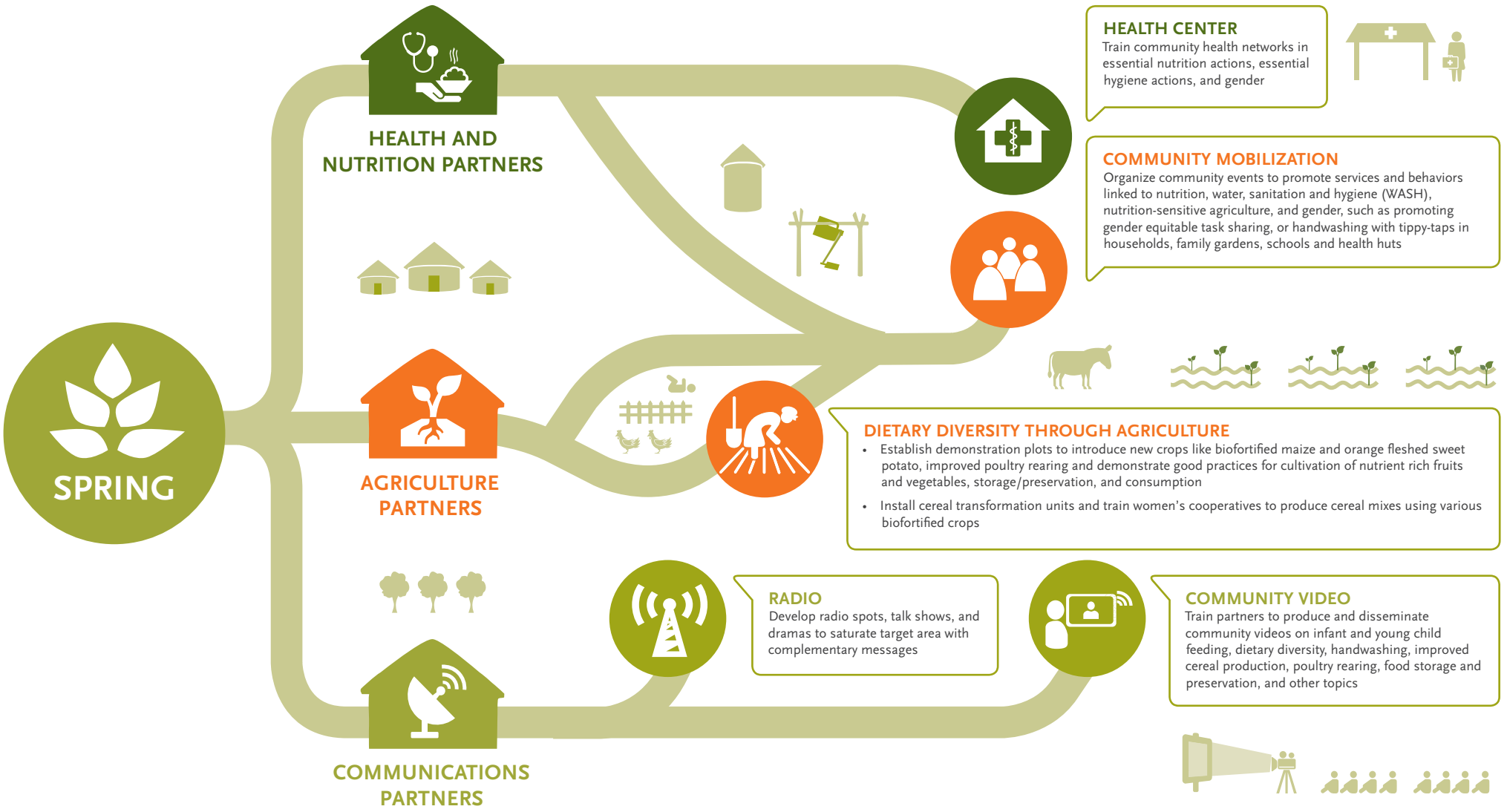
SPRING/SENEGAL

Improving Nutrition through Partnership

In Senegal, SPRING is improving nutrition among pregnant and lactating women and children under two with a **coordinated training**, **communication**, and **support strategy**. Through a multisectoral network of partners in the Kaolack, Fatick, and Kaffrine regions, SPRING **equips beneficiaries** with improved nutrition knowledge and high-impact behaviors to reduce malnutrition.



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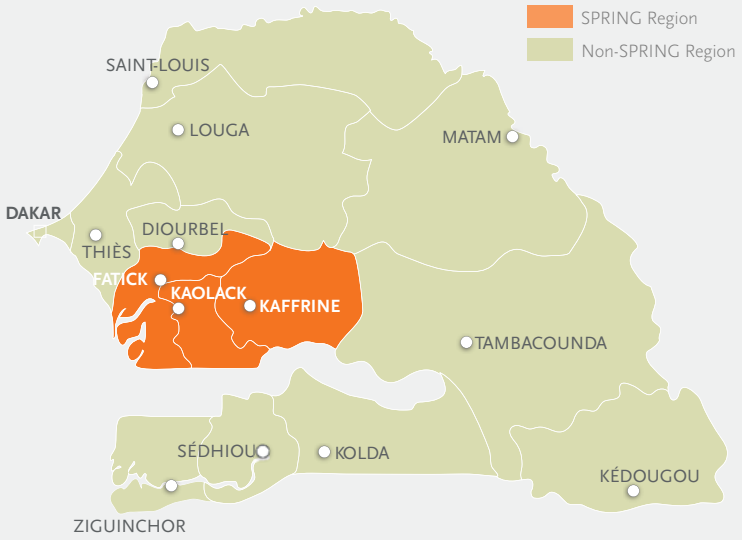
SPRING WORKS ACROSS SECTORS TO STRENGTHEN NUTRITION

Trained farmer partner networks, seafood processors, community health workers, community-based organizations and women's groups on a range of topics, including **1,161** participants on **nutrition-sensitive agricultural practices**, **271** on **improved nutrition practices** (i.e. **IYCN** and **dietary diversity**), **133** on **gender equity**, and **1,139** on **WASH**.

Broadcast **15,120 radio spots and 144 interactive radio programs** on IYCF, hygiene, gender, dietary diversity and agriculture to improve nutrition

Established **1492 demonstration sites** including: **36 fields** growing an **improved maize** variety, **52 plots for orange-fleshed sweet potato**, and **44 with bio-fortified millet**, **199** on **tippy-tap** installation and use, **12 on poultry raising**, and **1,149 micro gardens**

24,489 contacts established with **community videos** across **104 villages**



PROGRAM PARTNERS

GOVERNMENT OF SENEGAL

Office of the Prime Minister, Unit for Combating Malnutrition

Ministry of Agriculture

Ministry of Health and Social Action

PRODUCER NETWORKS

FEPROMAS

ADAK

SYMBIOSE

APROFES

UCPCL

YAKHANAL

USAID PROJECTS

Yaajeende

Naatal Mbay

NON-GOVERNMENTAL ORGANIZATIONS

Caritas

ChildFund

World Vision

Plan International

918,310
people reached

2,878
people trained

17
institutions supported

10
community videos produced

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SPRING/UGANDA

Fortifying National Efforts to Improve Nutrition for All

In Uganda, SPRING provides technical assistance and leadership at the national and district levels to help reduce stunting, micronutrient deficiencies, and anemia, particularly in children and women of childbearing age.

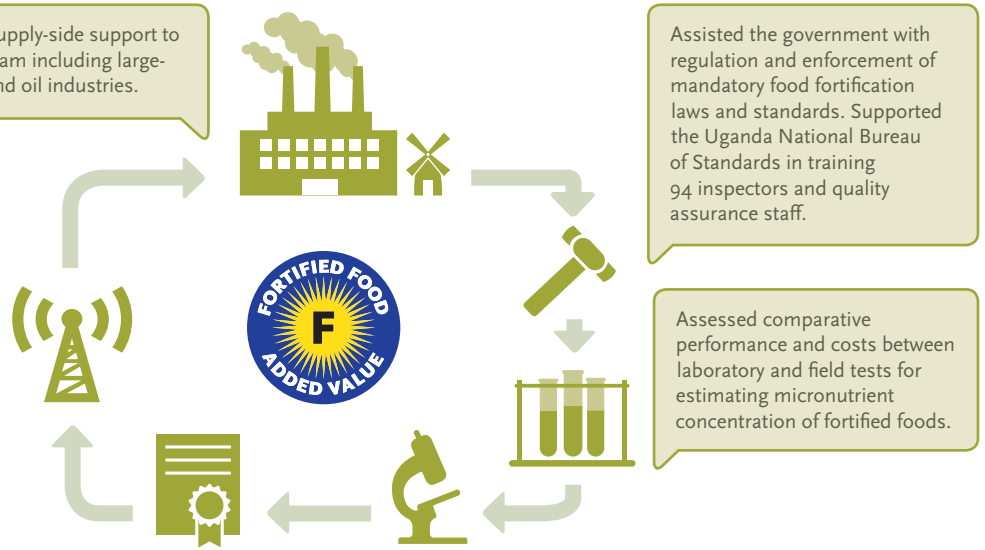
AT THE NATIONAL LEVEL, SPRING SUPPORTED THE GOVERNMENT OF UGANDA TO:

- Lead the development of the five-year **multi-sectoral National Anemia Prevention and Control Strategy, the National Industrial Food Fortification Strategy**, and corresponding budgets, action plans, and monitoring and evaluation frameworks.
- Launch a **national nutrition behavior change** campaign with **1,800 radio spots** delivered through 14 radio stations across the country to promote healthy growth in the first 1,000 days and eating a healthy Ugandan diet.

ENCOURAGING FORTIFIED FOODS IN UGANDA

SPRING's offered demand-side and supply-side support to Uganda's industrial fortification program including large-scale and small-scale wheat, maize, and oil industries.

Promoted fortified foods through radio, TV, social media, posters, flyers. Advocated for government institutions (i.e. schools, hospitals) to procure fortified products



Assisted the government with regulation and enforcement of mandatory food fortification laws and standards. Supported the Uganda National Bureau of Standards in training 94 inspectors and quality assurance staff.

Assessed comparative performance and costs between laboratory and field tests for estimating micronutrient concentration of fortified foods.

Helped Ugandan Bureau of Standards to train, assess, and recognize five laboratories that analyze fortified food samples.

Trained 308 food industry employees in fortification standards, food safety, and the analysis of fortified foods samples. Supported the Ugandan Bureau of Statistics to conduct monitoring and evaluation of the food fortification program.

OPERATIONS RESEARCH

SPRING distributed micronutrient powders to 22,366 eligible children ages 6–23 months in Namutumba District, comparing distribution through community health workers versus health facilities.

SPRING and Mulago Hospital recruited 991 women for a randomized trial to examine the effect of iron/folate supplement packaging on regimen adherence

Piloted SPRING's District Assessment Tool for Anemia (DATA) and trained 93 people on how to assess anemia prevalence and catalyze action for district-level anemia programming.

Assessed the acceptability of maize-based fortified flours in schools to identify motivators, concerns and barriers to the procurement and usage of fortified maize meal to feed adolescents attending school.

USAID FROM THE AMERICAN PEOPLE

This graphic is made possible by the generous support of the American people through the United States Agency for International Development (USAID) and Feed the Future, the U.S. Government's global hunger and food security initiative, under the terms of the Cooperative Agreement AID-OAA-A-11-00031 (SPRING), managed by JSI Research & Training Institute, Inc. (JSI) with partners Helen Keller International, the Manoff Group, Save the Children, and the International Food Policy Research Institute. The contents are the responsibility of JSI, and do not necessarily reflect the views of USAID or the United States Government.

www.spring-nutrition.org

USAID's multi-sectoral nutrition project

SPRING
Strengthening Partnerships, Results, and Innovations in Nutrition Globally

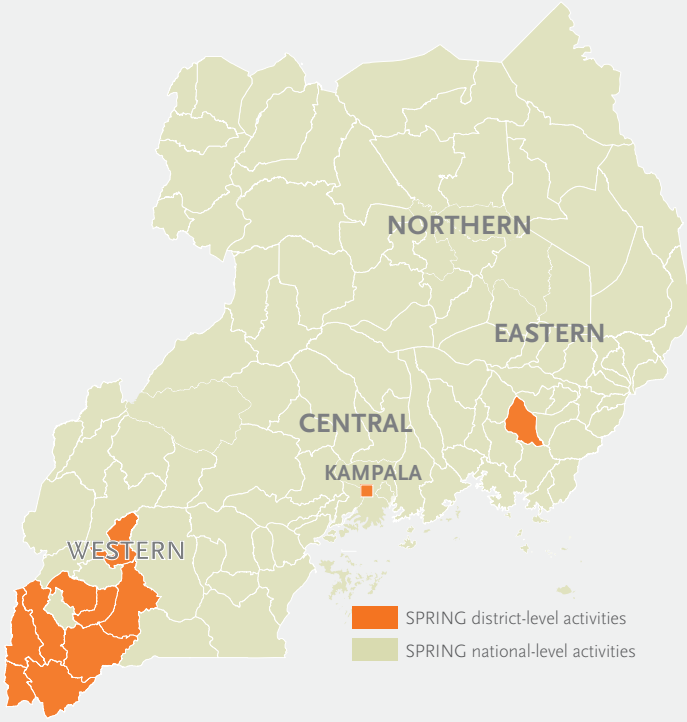
IN ADDITION TO WORKING AT THE NATIONAL LEVEL, SPRING WORKED AT THE DISTRICT LEVEL IN THE SOUTHWEST AND EAST CENTRAL REGIONS.

NUTRITION ASSESSMENT, COUNSELING, AND SUPPORT (NACS) SERVICES IN HEALTH FACILITIES

SPRING built capacity for nutrition assessment, counseling and support (NACS) in 51 health facilities across ten districts in the Southwest and East Central regions of Uganda. SPRING's NACS interventions helped to link clients to nutrition-sensitive interventions provided by the health, agriculture, food security, social protection, education, and rural development sectors.

GREAT MOTHERS, HEALTHY CHILDREN SOCIAL AND BEHAVIOR CHANGE CAMPAIGN

SPRING developed eight community-created videos to promote nutrition-sensitive and nutrition-specific messages among caretakers of children under two in the southwestern region. Through the Great Mothers, Healthy Children campaign, frontline health workers held video screening and discussion sessions in 216 villages that led to improved knowledge and increases in the target behaviors among the 14,317 participants and beyond.



2013–2015 Implemented NACS activities in the Southwest and East Central regions of Uganda

2014–2015 Launched the Great Mothers Healthy Children campaign in Kisoro and Ntungamo districts.

October 2015 SPRING, the Office of Prime Minister, FANTA, and UNICEF launched the National Nutrition Advocacy and Communication Strategy.

February 2016 Launched operations research to inform national distribution strategy testing home-based and facility-based delivery mechanisms for micronutrient powders.

May 2017 Supported the integration of anemia prevention and control initiatives in the pre-service training curriculum for the Mulago Health Tutors College

June 2017 Supported the GoU to develop their five year multi-sectoral National Food Fortification Strategy and multi-sectoral National Anemia Prevention and Control Strategy.

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Annex 4: Accumulated Travel for Project Year 7

Annex 4. Accumulated Travel for Project Year 7

Quarter	Departure Date	Return Date	Traveler(s)	Destination	TA provided?	Core/ Country	Purpose
1	9/7/2017	10/5/2017	Lidan Du Lisa Kowalski Sarah McClung Sarah Hogan	Nigeria	Yes	Core BFS	To conduct field work to support SPRING nutrition analysis to inform Nigeria Global Food Security Strategy (GFSS) Country Plan.
1	10/1/2017	10/6/2017	Dr. Robert Mwadime Dr. Edward Bonku Babajide Adebisi Bridget Rogers	Washington, DC	No	Project Management Country (Uganda, Ghana, KR)	To present and participate in the SPRING Global Learning Event.
1	10/2/2017	10/7/2017	Denish Moorthy	Panama City, Panama	No	Core GH	To participate at the WHO Technical consultation on the "Risk of Excessive Intake of Vitamins and Minerals Delivered Through Public Health Interventions – Current Practices and Case Studies"
1	10/9/2017	10/20/2017	Nathalie Albrow	Senegal	No	Country (Senegal)	To participate in both learning events, support the drafting of the end-of-project report, and assist with
1	10/15/2017	10/20/2017	Heather Danton Peggy Koniz-Booher Sascha Lamstein Amanda Pomeroy-Stevens Phil Moses Altrena Mukuria Tim Williams Danya Sarkar	Buenos Aires, Argentina	No	Project Management Core GH	To present and participate at the IUNS 21st International Congress of Nutrition
1	10/23/2017	10/26/2017	Hillary Murphy	Sierra Leone	Yes	Core GH	To participate in the National Anemia Working Group in support of the development of the Sierra Leone

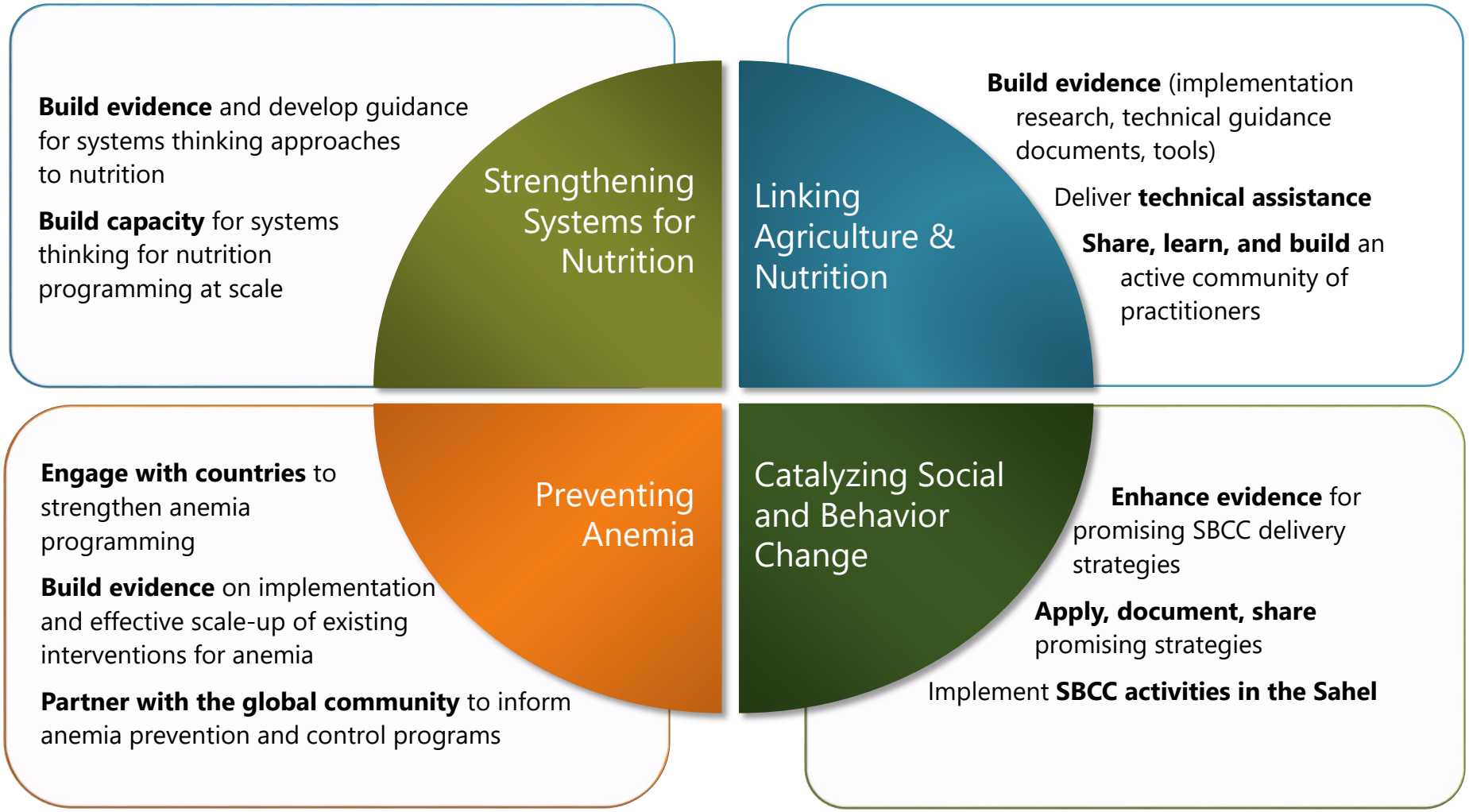
1	10/29/2017	10/31/2017	Zulfiqar Bhutta Emily Keats Abigail Kaplan Ramage Maria Pura Rayco Solon Carlos Monteiro	USA	No	Core GH	To participation in a Stakeholders Consultation on Adolescent Girls' Nutrition: Evidence, Guidance, and Gaps sponsored by PAHO, USAID, and SPRING in Washington, DC.
1	10/30/2017	11/17/2017	Kate Litvin Frances James	Uganda	No	Country (Uganda)	To assist with final project documentation efforts and provide project close-out support to the
1	11/2/2017	11/5/2017	Carolyn Hart	Italy	No	Project Management	To attend the Global Nutrition Summit 2017: Milan, a high-level event on nutrition and food for healthier
1	11/6/2017	11/17/2017	Betsy Ott	Uganda	No	Country (Uganda)	To support financial and operational close-out of the SPRING Uganda office.
1	11/6/2017	11/10/2017	Gwyneth Cotes Helen Connolly Aminata Shamit Koroma	Cote D'Ivoire	No	Core GH	To participate in and present at the SUN Global Gathering in Cote D'Ivoire and facilitate participation
1	11/8/2017	11/17/2017	Mike Foley	Kyrgyz Republic	No	Country (KR)	To conduct a management visit and support project close-out.
1	11/8/2017	11/17/2017	Tim Williams	Kyrgyz Republic	Yes	Country (KR)	To attend the end line survey roundtable event, provide monitoring and evaluation technical assistance.
1	11/11/2017	11/18/2017	Altrena Mukuria	Uganda	No	Country (Uganda)	To assist with final project documentation efforts and provide project close-out support to the
1	11/13/2017	11/17/2017	John Nicholson	Morocco	No	Project Management	To participate in and present at a Strategic Information Workshop for JSI's USAID-funded projects and encourage knowledge sharing across the globe.
1	11/26/2017	12/3/2017	Denish Moorthy	Switzerland	No	Core GH	To participate in two meetings – Meeting of the experts to discuss results from the HEmoglobin MEasurement (HEME) working group and other studies, and the WHO Technical meeting on "Use and interpretation of hemoglobin concentrations for assessing anemia status in individuals and populations".

1	11/26/2017	11/30/2017	Kristina Granger Ashley Aakesson	Egypt	Yes	Core GH	To give keynote and co-facilitate a regional workshop on social and behavior change (SBC) design for World Food Program country offices prioritizing SBC in country strategic plans.
1	12/1/2017	12/6/2017	Sarah Titus	South Africa	No	Core BFS	To attend the 3rd International Conference on Global Food Security.
2	1/15/2018	2/2/2018	Altrena Mukuria	Nigeria	No	Country (Nigeria)	To support the development of the stakeholder mapping exercise and staff recruitment for the ongoing Nigeria TA activity.
2	1/28/2018	2/2/2018	Heather Danton and Sarah McClung	Guatemala	Yes	Core BFS	To test the SPRING Design Guide and provide technical assistance through a two-day workshop for the implementing partners of the newly awarded FAIR Project to help make their activity designs more nutrition-sensitive.
2	2/5/2018	2/16/2018	Tim Williams	Kyrgyz Republic	No	Country (Kyrgyz)	Provide technical assistance related to qualitative research on nutrition practices in the Kyrgyz Republic
2	2/14/2018	2/23/2018	Ashley Aakesson and Sarah Titus	Rwanda	Yes	CORE BFS	Technical assistance to USAID Rwanda implementing partners on behavior change for nutrition-sensitive agriculture
2	2/19/2018	2/28/2018	Esther Braud and Alix Harou	Niger, Burkina Faso	No	Country (Sahel)	To provide project close-out support in Niger and Burkina Faso
2	3/25/2018	4/6/2018	Denish Moorthy and Emily Baker	Uganda	No	Core GH	Undertake data collection for study on cost of fortification of maize flour in Eastern and Central regions of Uganda
2	3/29/2018	4/6/2018	Rachel Holtzman and Temur Mukairshoev (Save the Children)	Kyrgyz Republic	No	Country (Kyrgyz)	Financial Review & Closeout for the SPRING project
3	4/3/2018	4/8/2018	Heather Danton	Kyrgyz Republic	Yes	Country (Kyrgyz) Core	Prepare for and lead Two-Day Training on Nutrition-Sensitive Agriculture

3	10-Apr	4/14/2018	Gaoussou Nabaloum	Senegal	Yes	Country (Senegal)	To provide technical assistance to Cultivating Nutrition on community video
3	4/8/2018	4/14/2018	Sarah McClung	Nigeria	Yes	Country (Nigeria)	To support the Community-Infant and Young Child Feeding (C-IYCF) training in Abuja
3	4/16/2018	4/20/2018	Ashley Aakesson, Andrew Cunningham, Leanne Dougherty, Peggy Koniz-Booher, Phil Moses, Hillary Murphy, John Nicholson, Aida Shambetova	Indonesia	No	Core BFS, Core GH, Core KM, Country (Sahel, Kyrgyz Republic)	Present and participate at the 2018 International Social and Behavior Change Communication Summit in Nusa Dua, Indonesia
3	4/30/2018	5/11/2018	Altrena Mukuria, Gwyneth Cotes, Sascha Lamstein, Denish Moorthy)	Nigeria	Yes	Country (Nigeria)	To conduct and facilitate a series of trainings to orient USAID implementing partners and other nutrition stakeholders to SPRING nutrition-related tools, resources, and approaches.
3	4/28/2018	5/5/2018	Denish Moorthy	Uganda	No	Country (Uganda), Core GH	Represent SPRING at meetings on Micronutrient Powder (MNP) in Uganda
3	5/7/2018	5/17/2018	Nathalie Albrow, Sarah Hogan, Phil Moses	Senegal	Yes	Country (Senegal)	Conduct training on nutrition-sensitive agriculture (NSA) for Cultivating Nutrition program staff
3	5/7/2018	5/18/2018	Peggy Koniz-Booher and Andrew Cunningham	Nepal	Yes	Core GH	Technical support for adolescent health, nutrition and WASH strategy and related training and SBCC materials development
3	6/11/2018	6/22/2018	Tim Williams and Michael Foley	Kyrgyz Republic	Yes	Country (Kyrgyz Republic)	To attend the SPRING/Kyrgyz Republic closeout events and provide support for monitoring and evaluation and programmatic closeout
3	6/19/2018	6/20/2018	Carolyn Hart	Switzerland	No	Project Management	Participate in the two-day "Adolescents: Agents of change for a well-nourished world" expert consolation being organized by GAIN and the WHO

3	6/20/2018	6/22/2018	Dr.Kalys Nogoibaeva	Republic of Moldova	No	Country (Kyrgyz Republic)	To attend the regional WHO workshop on progress achieved with prevention and control of soil-transmitted helminthiasis in the WHO European Region
3	7/7/2018	7/16/2018	Altrena Mukuria	Nigeria	Yes	Country (Nigeria)	To facilitate consultative meetings on BFI protocols

Appendix 5: SPRING Framework



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