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The DHS Program
Nutrition Indicators in DHS surveys

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What is The DHS Program?

A USAID-funded project that provides technical assistance to:

• improve the collection, analysis and presentation of population, health, and nutrition data

• facilitate use of these data for planning, policy-making, and program management

DHS-8 implemented by ICF with partners Johns Hopkins University, PATH, EnCompass, Avenir Health, Vysnova Partners, Blue Raster
Nutrition Indicators in DHS surveys

Existing indicators in DHS-7
- Anemia
- Anthropometry
- Breastfeeding
- Complementary feeding
- Breastfeeding counselling during postnatal care
- Infant feeding during illness
- Iodized salt in households
- Micronutrient supplementation

New indicators in DHS-8
- Nutritional counseling during pregnancy
- Cash-assistance programs for pregnant women
- Source for iron-containing supplements taken during pregnancy
- Breastfeeding counseling during antenatal care
- Nutrition counseling for infants
- Minimum dietary diversity for women
- Sugary drink and unhealthy food consumption for young children
- Growth monitoring for children
- Optional module: FAO’s Food Insecurity and Experience Scale (FIES)
Nutrition e-learning course objectives

- Describe how The DHS Program collects nutrition information
- Defines nutrition indicators
- Interpretation and considerations for the nutrition indicators
Nutrition e-learning course audience

- Professionals from government
- Civil society
- Multilaterals
- Other development partners
- And more

Strengthen Capacity

Increase Data Use
### Organization of the nutrition e-learning course

<table>
<thead>
<tr>
<th></th>
<th>Subject</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Child nutritional status</td>
</tr>
<tr>
<td>2</td>
<td>Adolescent and adult nutritional status</td>
</tr>
<tr>
<td>3</td>
<td>Child growth monitoring</td>
</tr>
<tr>
<td>4</td>
<td>Infant and young child feeding (IYCF)</td>
</tr>
<tr>
<td>5</td>
<td>Women’s dietary practices</td>
</tr>
<tr>
<td>6</td>
<td>Nutrition counseling</td>
</tr>
<tr>
<td>7</td>
<td>Anemia status</td>
</tr>
<tr>
<td>8</td>
<td>Micronutrient supplementation and deworming in children</td>
</tr>
<tr>
<td>9</td>
<td>Food or cash assistance, deworming, and iron-containing supplementation during pregnancy</td>
</tr>
<tr>
<td>10</td>
<td>Salt iodization</td>
</tr>
<tr>
<td>11</td>
<td>Optional Anthropometric data quality</td>
</tr>
<tr>
<td>12</td>
<td>Optional Food insecurity</td>
</tr>
</tbody>
</table>
Format of the course: theory section

What Data on Infant and Young Child Feeding is Collected and How?
Click on each image to learn more.

- Breastfeeding
- Liquids
- Foods

Considerations When Interpreting the Indicators
Click on each tab to learn more about the indicators.

- Changes to IYCF indicators
- Exclusive Breastfeeding under 6 months
- Quantities of food and liquids consumed
- Open recall or list-based data collection
- Seasonality
- Changes to dietary questions

What are Infant and Young Child Feeding Indicators Reported in DHS Surveys?

- Breastfeeding Indicators
  - Ever breastfed
  - Ever breastfed for the first 2 days after birth

Test Your Knowledge
Before proceeding to the application portion of the module, test your knowledge by completing the following quiz.
You need to answer all five questions correctly to complete the module, but you can try to answer these as many times as you like.

Start Quiz
Welcome to the application portion of Module 4 Infant and Young Child Feeding (IYCF). We need your help to analyze Macnaibar’s IYCF data to inform our national multisectoral nutrition plan.

Reading the Infant Feeding Area Graph

The information from table 11.5 is shown graphically below. Click on each pop out to better understand the graph.

Infant feeding practices by age

Age in months

0-1 2-3 4-5
What are Infant and Young Child Feeding Indicators Reported in DHS Surveys?

USAID

The DHS Program
Demographic and Health Surveys
Table 11.17 Presence of iodized salt in household
Among all households, percentage with salt tested for iodine content, percentage with salt in the household but the salt was not tested, and percentage with no salt in the household; and among households with salt tested, percentage with iodized salt, according to background characteristics, Macnaiber DHS 2020

<table>
<thead>
<tr>
<th>Background characteristic</th>
<th>Among all households, percentage:</th>
<th>Among households in which salt was tested:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>With salt tested</td>
<td>With salt, but salt not tested</td>
</tr>
<tr>
<td>Residence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>99.6</td>
<td>0.0</td>
</tr>
<tr>
<td>Rural</td>
<td>98.7</td>
<td>0.5</td>
</tr>
<tr>
<td>Region</td>
<td></td>
<td></td>
</tr>
<tr>
<td>North</td>
<td>99.3</td>
<td>0.1</td>
</tr>
<tr>
<td>South</td>
<td>99.3</td>
<td>0.3</td>
</tr>
<tr>
<td>Central</td>
<td>99.3</td>
<td>0.1</td>
</tr>
<tr>
<td>West</td>
<td>98.4</td>
<td>0.3</td>
</tr>
<tr>
<td>Wealth quintile</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lowest</td>
<td>98.9</td>
<td>0.0</td>
</tr>
<tr>
<td>Second</td>
<td>99.3</td>
<td>0.1</td>
</tr>
<tr>
<td>Middle</td>
<td>99.4</td>
<td>0.1</td>
</tr>
<tr>
<td>Fourth</td>
<td>99.4</td>
<td>0.1</td>
</tr>
<tr>
<td>Highest</td>
<td>99.4</td>
<td>0.5</td>
</tr>
<tr>
<td>Total</td>
<td>99.0</td>
<td>0.3</td>
</tr>
</tbody>
</table>

1 Includes households in which salt could not be tested for technical or logistical reasons, including availability of test kits.
Taking the course

- Duration of course 2-3 hours
- Certification upon completion of 10 modules
- Course is free
- Sign up to register on The DHS program Learning Hub
Other courses available on the DHS LHub

• Introduction to The DHS Program
• Essential Reading & Understanding The DHS Program Tables
• Essential Statistical Concepts for Understanding DHS Program Data
• DHS Dataset Users
• Interpreting Trends in Malaria Indicators
www.DHSprogram.com
Email us at: info@dhsprogram.com
Zoom Meeting Interpretation Reminder

Click the Interpretation icon to have the option to hear the meeting in Spanish or English.

To continue listening to the presentation in English while our speakers are presenting in Spanish, select to hear English from the menu of interpretation options.
Mireya Palmieri
Health and Nutrition Epidemiological Surveillance System (SIVESNU) of Guatemala

Gabriel Jose Perez Tuna
SESAN (Nutrition Secretariat Office) of Guatemala
Uso de datos poblacionales para mejorar políticas públicas y programas de nutrición en Guatemala

Population-Based Survey Data Use for Improved Nutrition Policies and Programs in Guatemala

Gabriel Pérez – SESAN, gabriel.perez@sesan.gob.gt
Mireya Palmieri – INCAP, mireyapalmieri@gmail.com
GOVERNMENT OF GUATEMALA: Secretariat of Food and Nutrition Security and Ministry of Health

USAID

CDC

INCAP

UNICEF
Nutrition questions to be answered by decision makers

What is the current status of different nutrition indicators?

What changes in nutrition problems can be measured and documented?

What interventions should be improved in order to increase effectiveness?

What is happening or has happened regarding national and international nutrition goals and targets?
Sistema de Vigilancia Epidemiológica de Salud y Nutrición – SIVESNU
Epidemiological Health and Nutrition Surveillance System

- System based on annual surveys
- Cross-sectional household survey
- 9-month data collection
- Nationally representative estimates
- Modular flexible design
Potential data use

- Evidence on non resolved and emergent nutrition problems
- Coverage monitoring to adjust plans and budgets
- Bivariate and multivariate analysis
- Territorial assessments for development
- Public policy design and updating
- Evaluation of strategies and programs
Caso 1: Desnutrición crónica en menores de 5 años: problema prioritario de nutrición en Guatemala

• Tipo de decisiones a proponer:

- Mejorar capacidad adquisitiva alimentaria familiar
- Implementar campañas de promoción de asistencia a control de crecimiento en niños menores de 2 años
- Monitorear los servicios de salud a nivel municipal

• Ajustes en el marco de política pública:

- SAN: énfasis en aspectos redistributivos
- Desarrollo Social / Protección Social
- Empleo
Caso 2: Sobrepeso y obesidad en adultos

- **Tipo de decisiones a proponer:**
  - Prevenir el incremento de la malnutrición en todos los grupos
  - Reducir los efectos de la doble carga de la malnutrición en la salud (ECNT)

- **Ajustes en el marco de política pública:**
  - Actualización de la POLSAN: prioridades, objetivos, estrategias, intervenciones
  - Rectoría de las ECNT en políticas de salud
  - Fortalecimiento de nutrición y alimentación saludable en el grupo escolar
Caso 3: Alimentos fortificados

- **Ajustes al marco de política pública:**
  - Reforzar la POLSAN en temas de regulación de programas de fortificación y vinculación con la Comisión Nacional para la Fortificación, Enriquecimiento y/o Equiparación de Alimentos (CONAFOR)
  - Fortalecer técnica y presupuestariamente el monitoreo de alimentos fortificados en MSPAS
  - Institucionalización de SIVESNU para confirmar deficiencias, cobertura y calidad de fortificación
Esha Sarswat
IFPRI
Generating data dialogue for nutrition-related decision-making in India: POSHAN’s District Nutrition Profiles

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International Food Policy Research Institute, New Delhi, India
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May 18, 2022
The story of District Nutrition Profiles: Genesis - 2014

- Rise in demand for nutrition data
- Intent to raise awareness on the problem and the solution
- Recognized need for data presentation that is:
  - Visually appealing and in an easy to understand
  - Easy to disseminate
  - Facilitates conversations for actions towards addressing nutrition-related challenges.
Process of generating DNPs

- Consultation with a group of stakeholders
  - Identified the needs and the level of engagement
- Use UNICEF conceptual framework to frame the profile
- Identified the indicators and the data sources
- Developed DNPs: First 8 DNPs were developed for 3 states
- Collaborated with 3 civil society partners to pilot the DNPs
- DNP automation in 2017 - Produced 640 profiles (DNP 1.0)
- Updated with recent NFHS-5 data in 2021-22 (DNP 2.0) - Produced 707 profiles

Source: UNICEF
## Indicators in DNPs

### 71 indicators that cover the range of nutritional determinants and outcomes

<table>
<thead>
<tr>
<th>Domains</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demographic</td>
<td>6</td>
</tr>
<tr>
<td>Nutrition outcomes</td>
<td>13</td>
</tr>
<tr>
<td>Immediate determinants</td>
<td>12</td>
</tr>
<tr>
<td>Underlying determinants</td>
<td>8</td>
</tr>
<tr>
<td>Intervention coverage</td>
<td>32</td>
</tr>
</tbody>
</table>

### Criteria for indicator selection for DNPs

1. Topical priority
   - Aligning with India’s National Nutrition Mission
   - Global references for determinants

2. Applicability to a general population

3. Need to monitor progress
   - Whether coverage of an indicator is optimal or not?
   - Wide use of indicator

4. Availability of data in NFHS4 and NFHS5
**Snapshot of DNPs**

- A total of **707** profiles are available including:
  - **575** for districts that had comparable data between NFHS-4 and NFHS-5
  - **132** for non-comparable districts
Use cases

- Training of administrators and other support staff on understanding the basic concepts of nutrition, to help them identify how to tackle malnutrition.
Supporting policy makers and influencers at national, state & district level with data and evidence on nutrition.
Media engagement to raise awareness around the malnutrition problems and solutions.
Multiple knowledge products and engagement with stakeholders: with a focus on data
Thank You

Visit www.poshan.ifpri.info
Write to e.sarswat@cgair.org