# ANNEXE 4 : MÉTHODOLOGIES EN FONCTION DES CAPACITÉS ET RESSOURCES

| TYPE OF METHODOLOGY | OBJECTIVE & DESCRIPTION | ADDED VALUE | LIMITS | METHODOLOGY | LEVEL | SOURCE | TECHNICAL EXPERTISE | TECHNICAL SUPPORT |
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| | | | 1ERE SOURCE | | | | | |
| **FAO Problem: Agreeing on causes of malnutrition for joint action** | The guidelines present a (multisectorial or not) participatory workshop methodology that uses a Tree approach of causal analyses of Problem and Solutions options for:<br>☐ sensitization and training on multicausality of malnutrition and concrete link between nutrition, food security and livelihoods but also with wash and health;<br>☐ participatory analyses of the causes of malnutrition;<br>☐ strategic planning for integrated nutrition programmes;<br>☐ designing information and surveillance systems for nutrition and food security and join analyses of the situation;<br>☐ developing partnerships for improving nutrition, food security and livelihoods | Allows participants to consider potential causal pathways between factors (including behaviour), good approach if limited time and resources | Based on participants feedback, no feedback from the community, so identified contributing factors are educated guess based only | Literature review + Workshop | Low<br>2-5 days | http://www.fao.org/elearning/#/elc/en/course/ACMJA<br><br>http://www.fao.org/3/a-i3516e.pdf | None | FAO |
| **Nutrition Causal Analysis (Link NCA)** | A nutrition causal analysis (NCA) is a method for analysing the multicausality of undernutrition<br><br>Currently the most frequently used tool, able to provide an in-depth multicausal analysis of the causes of malnutrition and establish causality between different drivers and malnutrition,<br><br>The Link NCA relies on quantitative surveys (from secondary data and/or from a SMART nutrition survey and Risk Factor Survey conducted during the NCA) to assess undernutrition status and the prevalence of known risk. Qualitative methods are incorporated throughout the protocol to address questions regarding how or why undernutrition or good nutrition occurs, and to consider the interactions between causes, common feedback loops, and the evolution of the causes through time and seasons | Most comprehensive methodology to establish Causal pathways | Could be fastidious and demanding in resources, only valid for small areas | Lit review<br>+ Quality<br>+ Quantity<br>+ workshop | High<br>(about 3 months) | http://linknca.org/ | NCA expert | ACF / link NCA Team – Paris |
| **NCA through the SQUEAC approach** | The approach consists in using the SQUEAC1 toolbox to undertake a causal analysis of severe wasting (SAM). it is possible to use the SQUEAC toolbox to collect causal data using the level of staff selected for training as SQUEAC supervisors and trainers. Data analysis may, however, require staff with a stronger background in data-analysis. | Could be an alternative approach to establish causal pathways | Limited evidences on this approach<br><br>Requires some expertise in epidemiology | Literature review<br>+ Quality<br>+ Quantity<br>+ workshop | Medium, requires expertise in using SQUEAC tools/ methodology | https://www.ennonline.net/fex/42/causal<br><br>http://www.validinternational.org/coverage/workshop/articles_files/causalENN.pdf | SQUEAC expert | Coverage Monitoring Network<br><br>No Wasted Lives |

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| **Local déterminants of Malnutrition tool and study** | Community based assessment tool; help to understand what food/behaviors are most associated with malnutrition/hunger with a SBCC objective<br><br>Using the positive deviance approach to identify determinants of malnutrition<br><br>Methodology includes developing a matrix of possible determinants, assessing strengths through literature review completed with focus group discussion; similar than a doer/not do'ers study | Identify probable risks of malnutrition based on correlation study (RR between contributing factor and nutrition status)<br><br>Include response design | Does not include FGD with the community, qualitative part quite limited<br><br>Require expertise in statistical analysis | Lit rev<br>+ Quanti<br>+ Workshop | High | https://www.slideshare.net/jehill3/local-determinants-of-malnutrition-an-expanded-positive-deviance-study | PD expert | Food for the Hungry |
| **IPC Malnutrition** | The IPC Acute Malnutrition (IPC AMN) classification provides key information for decision makers that focuses on short-to long-term objectives to decrease acute malnutrition.<br><br>Such classification of areas in terms of severity of acute malnutrition and identification of key drivers of acute malnutrition | Based on existing data, obtained from consensus amongst actors, does not require additional data collection | Could be fastidious; causality pathways estimated through discussions between actors based on prevalence<br><br>No problem tree/ mindmapping | Secondary data analysis<br>+ workshop | Medium | http://www.ipcinfo.org/ipcinfo-website/ipc-overview-and-classification-system/ipc-acute-malnutrition-classification/en/ | Coordination between actors | FAO |
| **Design for Behavior change (DBC)/ Barrier Analysis** | The Barrier Analysis tool is a rapid assessment tool used in community health and other community development project to better identify barriers to behavior change that (if adopted) would have a significant positive impact on the health, nutrition, or well-being of targeted groups (e.g., preschool children) in a project area<br><br>This approach allows to better understand very specific bottle neck linked with behaviour.<br><br>BA helps to identify determinants of behavior change among a specific target audience. The four most commonly found determinants are self-efficacy (what makes it easier to perform the behavior? What makes it difficult to perform the behavior?), social norms (who approves or supports you doing the behavior? What makes it difficult to perform the behavior?), positive consequences (what do you see as the advantages or good things of performing the behavior?), and negative consequences (What makes it difficult to perform the behavior?). Typically researchers interview 45 "do'ers" (people who already practice the behavior) and 45 "non-doers" (people who do not practice the behavior) and compare the responses. A difference of 15% or greater between the two interviewee categories is considered statistically significant. | Barrier Analysis has proven beneficial to implementers seeking to identify specific behavioral determinants. This is useful when quantification of findings is needed.<br><br>Limits your research focus to practical, relevant research questions<br><br>Focuses on one clearly defined behavior<br><br>BA is a relatively easy approach that can be conducted in a short period of time, allowing implementers to quickly make decisions based on findings.<br><br>Easy sampling if you have audience members available. | Highly structured methodology presents limitations: it cannot be generalized to entire audience populations, it is limited to the behavior you have selected (i.e. handwashing), and it can not be generalized to other risk-reducing behaviors.<br><br>Should be combined with other methods, such as unstructured in-depth interviews, participant observation, focus group discussions, TIPS, and participatory action research methods, to uncover unexpected socio-cultural details beyond barriers that can help shape the design of activities and messages and catalyze change. Consultative, audience-centered methods have dual value in both the formative research and implementation stages and through deeper ownership, contribute to more sustainable change. | Quality<br>+ Quantity<br>+ Workshop | Medium | https://www.fsnnetwork.org/designing-behavior-change-agriculture-natural-resource-management-health-and-nutrition | SBCC expert | Core Group |

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| **Bottle neck Analysis (UNICEF)** | The bottleneck-analysis (BNA) approach enables such an analysis and facilitates monitoring of bottlenecks in service delivery. This approach builds on health system conceptualisation of service coverage and is a systematic way to look at the main determinants of effective coverage for interventions in order to identify problem areas and act on them in a timely manner.<br><br>BNA involves:<br>• Identification of bottlenecks to service delivery, root causes and solutions;<br>• Activity planning for resolving bottlenecks and tracking corrective actions; and<br>• Monitoring bottlenecks to determine whether actions are effective and support service providers in adjusting actions as needed.<br>The approach is more a programme evaluation but could be useful in the identification of potential outcome/bottle necks in access | Initially designed for programme evaluation and improvement, could be used for an in-depth analysis of specific driver linked to the use of health services | Limited to establishing pathways, might come as a 2nd step, after identification of major determinants of malnutrition | Lit rev<br>+ Workshop | Medium | https://www.ennonline.net/fex/54bottleneckanalysistool<br><br>http://www.coverage-monitoring.org/wp-content/uploads/2015/12/BAA-12-08-2015.pdf | Coordination between actors | UNICEF |
| **2ND SOURCE OF INFORMATION/ PROVIDE COMPLEMENTARY INFORMATION ON A SPECIFIC CONTRIBUTING SECTOR (IYCF, FSL, WASH, HEALTH.. (LIST NOT EXHAUSTIVE)** | | | | | | | | |
| **IPC Acute Food Insecurity** | The IPC Acute Food Insecurity (IPC AFI) classification provides strategically relevant information to decision makers that focuses on short-term objectives to prevent, mitigate or decrease severe food insecurity that threatens lives or livelihoods. In particular, the IPC Acute Food Insecurity classification provides Identification of key drivers of acute food insecurity. | Provide information on the different drivers on acute food insecurity | | Lit Rev<br>+ Workshop | Medium | http://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/manual/IPC_Technical_Manual_3_Final.pdf<br><br>+ CILSS/CH result<br>+ IPC result link | Coordination between actors | FAO |
| **Cost of diet** | Brief Description: The Cost of the Diet (CoD) is an assessment tool that uses software to estimate the amount and combination of local foods needed to provide a typical family with a diet that meets their averaged needs for energy and recommended intakes of protein, fat, and micronutrients. The tool aims to answer the following questions:<br>1. What is the minimum cost of foods that meet the nutrient needs of a typical household?<br>2. Can a nutritious diet be achieved using locally available foods?<br>3. Is this diet affordable?<br>4. If not, what could be done? | | | Primary and secondary data collection<br>+ workshop | Medium<br>(about 6 weeks) | https://www.spring-nutrition.org/publications/tool-summaries/cost-diet | Expert | SAVE THE CHILDREN |

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| **Fill the Nutrient GAP** | WFP's Fill the Nutrient Gap tool analyses the nutrition situation in a country and identifies the barriers faced by the most vulnerable to accessing and consuming healthy and nutritious foods. The project is carried out in collaboration with a range of national stakeholders and its results are used to inform policies and programming in social protection, food systems, health, agriculture, education and other sectors that can contribute to improving nutrition. | | | Primary and secondary data collection + workshop | Medium | https://www.wfp.org/publications/2017-fill-nutrient-gap | Expert | WFP |
| **The Comprehensive Food Security & Vulnerability Analysis (CFSVA)** | The Comprehensive Food Security & Vulnerability Analysis (CFSVA) is a unique tool designed to understand and describe the profiles of food-insecure and vulnerable households, identify the root causes of hunger, and analyze the risks and emerging vulnerabilities among populations in crisis-prone countries. It also makes recommendations on the best response options (food or non-food) to reduce hunger, target the neediest and informing preparedness | | | Primary and secondary data collection + workshop | High | https://www.wfp.org/publications/comprehensive-food-security-and-vulnerability-analysis-cfsva-guidelines-first-edition | Expert | WFP |
| **SMART Survey (nutrition and mortality)** | Provide | | | Primary and secondary data collection + workshop | High | https://smartmethodology.org/survey-planning-tools/kit-de-formation-smart/ | Expert | ACF Canada |
| **MICS and DHS surveys** | Demographic and Health Surveys (DHS) are nationally-representative household surveys that provide data for a wide range of monitoring and impact evaluation indicators in the areas of population, health, and nutrition. | | | Primary and secondary data collection + workshop | High | https://www.dhsprogram.com/What-We-Do/Survey-Types/DHS-Methodology.cfm | Expert | UNICEF |
| **KAP** | Knowledge, Attitude and Practices (KAP) survey is a quantitative method (predefined questions formatted in standardized questionnaires) that provides access to quantitative and qualitative information. KAP surveys reveal misconceptions or misunderstandings that may represent obstacles to the activities that we would like to implement and potential barriers to behavior change. Note that a KAP survey essentially records an "opinion" and is based on the "declarative" (i.e., statements). In other words, the KAP survey reveals what was said, but there may be considerable gaps between what is said and what is done. | | | Primary and secondary data collection + workshop | Medium | https://www.spring-nutrition.org/publications/tool-summaries/kap-survey-model-knowledge-attitudes-and-practices | None | SPRING/ UNICEF |
| **Household Economic Assessment (HEA)** | The Household Economy Approach (HEA) is a livelihoods-based framework for analyzing the way people obtain access to the things they need to survive and prosper. It helps determine people's food and non-food needs and identifies appropriate means of assistance, whether short-term emergency assistance or longer term development programs or policy changes are necessary | | | Primary and secondary data collection + workshop | High | https://www.spring-nutrition.org/publications/tool-summaries/household-economy-approach-practitioners-guide | Expert | SAVE THE CHILDREN |