



Tanzania Food and  
Nutrition Centre



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Cornell University

## Scaling Up Growth: ASTUTE Addressing Stunting in Tanzania Early

### ASTUTE GOALS

Tanzania has achieved dramatic reductions in child mortality over the past 2 decades. However, malnutrition remains a serious public health problem with stunting affecting 34% of Tanzanian children under 5 years. Stunting of linear growth before age 2 predicts poor cognitive and educational outcomes in later childhood and adolescence and has important educational and economic consequences for individuals, households and communities.

Addressing Stunting in Tanzania Early (ASTUTE), led by IMA World Health and funded with UK aid from the UK government through the Department of International Development (DFID), aims to effectively operationalize Tanzania's National Nutrition Strategy at scale. ASTUTE's goal is to reach three million mothers and prevent stunting in 50,000 children, collectively reducing stunting prevalence in children under five years by at least 7 percentage points in 5 target regions surrounding Lake Victoria in Tanzania. UNICEF is implementing a related DFID-funded project in 2 additional regions in Tanzania.

### ASTUTE PARTNERS

Collaboration is an integral aspect of ASTUTE. With DFID support, IMA World Health is partnering with the Tanzanian government, the Tanzania Food and Nutrition Centre (TFNC), the Partnership for Nutrition in Tanzania (PANITA), Development Media International (DMI), and Cornell University to achieve project goals.

### CORNELL'S ROLE

Cornell University will design and conduct operations research, in collaboration with IMA World Health, to ensure that the interventions implemented are acceptable and feasible in the Tanzanian context.

Together with formative research findings and government expertise, operations research will provide the information needed to select, design, or define community intervention activities that promote nutrition-focused behavioral change.

Operations research will inform intervention efforts to build capacity of district governments, strengthen community-level implementation, promote improved care practices at home, and encourage supportive action at the household level to empower women with the time and resources needed to improve young child nutrition, health and development.



### PROPOSED RESEARCH

The target audience of this research is primarily low-income families with young children, living in the 5 target regions. Particular attention is given to pregnant and lactating women, mothers, fathers and children during the first 1000 days (pregnancy through 2 years of age). Cornell's operations research will include multiple components focused on questions relevant to implementation of ASTUTE interventions at district, community and household levels.

## **Trials of Improved Practices & Recipe Trials**

- Identify barriers, facilitators and household strategies to improve breastfeeding and complementary feeding practices
- Provide women and men with tailored counselling and ask them to test new behaviors – to improve feeding practices and to support women and reduce their workloads, allowing time for child care
- Participatory meetings with women to discuss complementary feeding and work together to identify how local ingredients can be used in nutritious recipes for very young children

## **District-level Mentoring for Multi-sectoral Nutrition**

- Scale up district-level mentoring approaches that have been tested with District Nutrition Officers and other district officials to support multi-sectoral nutrition action in communities
- Support district personnel in conducting community stakeholder mapping, connecting with civil society organizations, and use results in multi-sectoral planning in collaboration with stakeholders

## **Fidelity, Acceptability and Feasibility of Intervention Outreach Strategies**

- Assess the implementation of program outreach activities at the community level and how these activities are viewed by stakeholders (families, local organizations, village health committees, ward and village officials, health facility staff and community health workers).
- Qualitatively evaluate the process of program delivery and identify “best practices” to inform on-going training, outreach, and supervision to strengthen implementation.

Together, these components of operations research will strengthen and amplify the success of ASTUTE and contribute to the goals of improving child growth and development in Tanzania.



Ethical approval for this study has been granted by the Tanzania National Institute for Medical Research (NIMR) and the Institutional Review Board for Human Participants at Cornell University. Funding for this research is provided by UK aid from the UK government through the Department of International Development (DFID).

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