Case Study
Implementing the ENA framework: Experience from Mali 2005-2009

1. Background

The “Synergy and Action for Nutrition+” (SAN+) project of Helen Keller International (HKI) was implemented in all nine health districts of the Koulikoro Region in southwestern Mali between October 2005 and September 2009. The project was designed to improve the nutritional status of children, pregnant and lactating women resident in the Koulikoro region. The project strategy was to improve the health and nutritional status of children under 2 and their mothers by strengthening the delivery of key nutrition services at community health facilities (CSCom) and promoting behavior change at the community level using the Essential Nutrition Actions (ENA) framework.

The ENA framework aims to extend the delivery and uptake of the seven highest impact nutrition interventions by integrating services and improved counseling for behavior change into all existing health contacts and platforms and to extend nutrition support into communities using trained volunteer groups to reach mothers of children in the critical “1000-day window” from conception through 2 years of age.

2. Nutrition Context

Even with political stability, Mali has long suffered from chronically high levels of undernutrition, attributable most importantly to poor infant and young child nutrition practices, underlying food insecurity, and poor access to health, water and sanitation services combined with high levels of poverty. The prevalence of acute malnutrition exceeds WHO emergency thresholds throughout much of the country, with recent estimates of 9.9% nationally and 12.4% in Koulikoro, and stunting at about 38%. More than 70 percent of children 6 to 59 months and over half of pregnant women suffer from anemia (2010 MICS). Exclusive breastfeeding is estimated to be 38% but the proportion of children 6-23 months fed a minimally adequate diet as defined by WHO is only 7%.

The project design included: a comprehensive training component; a strong behavior change communications component with specific messages for key groups such as health care providers, parents, grandmothers, volunteer community health agents (relais), and decision-makers; and a component to encourage community mobilization and the establishment of support groups. The project trained 227 medical officers and 162 auxiliary mid-wives serving in health facilities across the region as well as 3,675 community volunteers in ENA and the techniques of counseling for behavior change. This major capacity building initiative led to considerable strengthening of the quality of nutrition services provided through community health centers and increased nutrition knowledge at the community level. In addition, collaboration with community radio stations led to regular broadcasts of key nutrition messages. Project endline data indicated that the project met or exceeded the majority of behavioral targets and anemia (low hemoglobin) was measured as 73% at baseline vs. 39% at endline among pregnant women and 93% at baseline vs. 75% at endline among children 6-23 months of age.

4. **Building ownership within the Ministry of Health (2007-2012)**

The SAN+ project demonstrated the effective, low-cost reintegration of nutrition services into health facilities at the community level and persuaded the MOH to explore ways to replicate this success on a national level, using lessons learned from the experience of SAN+. Also as a result of SAN+, the MOH has a set of training modules and tested BCC materials, complete with visual aids, which focuses on improving the nutrition of infants, young children and their mothers and appropriate for use throughout the country. The MOH was a strong partner to the project and showed a serious commitment to improving health and nutrition services nationally.

5. **Challenges and way forward**

Mali signed on to the Scaling Up Nutrition (SUN) movement and is forging ahead with efforts to strengthen nutrition strategies, including development of a multi-sectoral nutrition plan, led by the Ministry of Health as well as the Prime Minister’s office, and engaging the Ministry of Agriculture, the Food Security Commission, the Ministry of Education, and other line ministries. The UN REACH mechanism is also active in Mali, and is supporting the government’s efforts to cost its nutrition plan and coordinate partners. Mali is currently updating the PROFILES nutrition advocacy tool to estimate the impact of reducing malnutrition in terms of human potential and lives saved, and economic losses averted. HKI continues to provide support for ENA and the SUN movement.

**For more details contact:** Jennifer Nielsen HKI/HQ [jnielsen@hki.org](mailto:jnielsen@hki.org)

This project was made possible with support from the American people delivered through the U.S. Agency for International Development (USAID). The contents of this case study are the responsibility of HKI and do not necessarily reflect the opinion of USAID or the U.S. Government.