## Nutrition and Global Health Internship Opportunity

Project Title: Community Led Total Nutrition (CLTN) Programs in Madagascar, Niger, and

Tanzania

**Duration**: Flexible; preferable for 2-3 months

Preferred Student Level: Graduate or doctoral

**Qualifications Desired**: Knowledge of French preferable

**Compensation**: Possible to have some travel funding available

**Description**: Our team will study the impacts of community-led total nutrition (CLTN) interventions led by Catholic Relief Services in sub-Saharan Africa on the prevalence and incidence of stunting. In Madagascar alone, nearly one of every two children is stunted, with Niger (42.2%) and Tanzania (34.5%) just below that. While major efforts and investments are being made around nutrition and some improvements have been made overall (reduction from 198 to 151 million children stunted), West/Central and Eastern/Southern Africa have actually seen an increase in the number of children that are stunted (22.8 to 28.9 million children stunted). Many evidence-based interventions to reduce stunting and wasting exist and are effective but focus primarily on individual or household actions. These activities are critical and should continue. However, there are less that promote interpersonal (beyond household) and community actions that can further have a major influence on nutritional outcomes.

CRS is strategically placed in many countries affected by high levels of child undernutrition. CLTN drives an innovate approach in communities to strengthen social mobilization efforts around nutrition: entertainment-based approach, a social movement is initiated that promotes community cohesion, individual and shared responsibility. The proposed research on CLTN will build the evidence on approaches targeting the improvement of child and adolescent nutrition.

The major research/learning questions to be addressed by the research include:

- What are the changes (nutrition and non-nutrition related) brought about by the CLTN approach at the individual, household, community levels? To what extent do changes differ across social groups, age groups and localities?
- What are the positive and possible negative changes in objective health/nutritional status, knowledge and practices around nutrition and child care as well as in indicators identified by communities;

How did the CLTN approach influence these changes? How much variation is there
between localities in these processes? Are there external conditions that help or impede
the CLTN approach to influence positive change? Which ones and what role do they
play?

Our team will be responsible for helping CRS design and roll-out the study by training enumerators and setting up data collection systems. CRS will be responsible for conducting the research. Our team will then be responsible for analyzing data and conducting an impact evaluation of these interventions.

Mentor & Contact: Christopher Golden (golden@hsph.harvard.edu)