In this issue, you’ll hear tips from partners around the world, discover our most recent learning tools, and hear why monitoring and evaluation (M&E) is an essential component of any program.
Hi! I’m Jamie, Vitamin Angels’ Monitoring and Evaluation Manager. I work to collect, manage, and report data at Vitamin Angels to get a sense of how our programs are doing and what areas can be strengthened to better accomplish our mission.

This newsletter is dedicated to monitoring and evaluation, also known as M&E. At Vitamin Angels, we value M&E as it helps us become a better organization. Ultimately, our M&E system can tell us if we have achieved our goal of reaching hard-to-reach populations with essential vitamins and minerals.

This year, Vitamin Angels is conducting on-site monitoring visits among 15% of our field partner network.

THANK YOU to all of our partners that we have monitored!

Jamie recommends a few helpful M&E resources for those of you looking to further integrate M&E into your programming:

- MEASURE Evaluation’s M&E Fundamentals: A Self-Guided Minicourse
- Nutrition International’s Vitamin A in Child Health Weeks: A toolkit for Planning Implementing and Monitoring
- edX Course: Evaluating Social Programs

LEARNING FOR PROGRAM SUCCESS

The service providers that give vitamin A and deworming to children under 5 are the front line in preventing micronutrient deficiency and intestinal parasites. The success of the distribution and safety of children depends on the service providers effectively learning how to safely distribute vitamin A and deworming (VAS+D). Your organization can improve the quality of services provided to children under 5 by utilizing a training/learning option from the Vitamin Angels Learning Tool Box. For many organizations, the easiest and most comprehensive method is the VAS+D eLearning Course for Service Providers. This course provides in-depth information about vitamin A deficiency and intestinal worm infections, while discussing preventive methods, including a nutritious diet and infection prevention strategies, for children and families to improve their health. It also focuses on the critical steps that a service provider needs to take to safely give vitamin A and deworming to young children. The resources in the course can also be used to monitor your distributions and ensure a standard method for giving vitamin A and deworming.

Please visit our website or contact your local Vitamin Angels Program Manager or the Learning Solutions team at technicalservices@vitaminangels.org to learn more about which learning options are best for your organization.
M&E TIPS FOR FIELD PARTNERS, FROM FIELD PARTNERS

Mobile data collection (MDC) is the use of mobile phones or tablets for the collection of data. MDC can be useful to increase the validity, speed, and efficiency in which data are available for monitoring and evaluation.

There are countless mobile phone applications or platforms to choose from. At Vitamin Angels, we use ONA to conduct on-site monitoring of field partners. We also interviewed a few field partners to learn more about which mobile data collection systems are being used to track the health and wellbeing of beneficiaries around the world.

KoBoToolbox with DESEA Peru

DESEA Peru works in isolated rural areas in the Andes between 3,700 and 4,300 meters (approximately 12,000-14,000 feet) above sea level where the mountains meet the sky. Here you will find communities of indigenous families, descendants of the Incas, that bring life to these desolate and cold areas with their colorful traditional clothing and Quechua language. DESEA Peru has been partnering with Vitamin Angels for seven years to supplement their programs and bring health to these resilient communities. We interviewed Samantha Serrano, DESEA Peru’s Program Development Coordinator, to get her take on their use of KoBoToolbox mobile technologies.
DESEA Peru has been using KoBoToolbox to track their distributions of multivitamins to hard-to-reach beneficiaries, as well as to conduct their biannual household monitoring surveys. KoBoToolbox is a free and open source suite of digital data collection tools created by the Harvard Humanitarian Initiative. It was developed for field data collection in challenging environments with limited or no infrastructure, particularly during humanitarian crisis situations. KoBoToolbox offers a user-friendly interface to create digital surveys as well as to collect data with cellphones or tablets in a number of languages. Given these features, Samantha says that this tool was well-designed for their work within DESEA Peru’s project communities.

Samantha encourages organizations looking into digital data collection options to fully evaluate their needs to help direct their search, such as the environment where the data are collected, security and language, ease of use, and cost. Samantha says that KoBoToolbox is a great option for organizations that don’t have WiFi or cellphone service in project areas, that have other language needs (besides English), and that have limited resources for investing in M&E tools.

Samantha also offered a few sites that she finds helpful: tools4dev and PMD Pro Starter are great resources when looking for free and downloadable templates for project development, monitoring and management.

**TaroWorks mobile technology with Hope for Haiti**

Hope for Haiti is an innovative international development organization that has been working in Haiti for 30 years to improve the lives of the Haitian people, particularly children. HFH has been partnering with Vitamin Angels since 2009 to receive vitamin A, deworming, and prenatal multivitamins. We spoke with Meg Orazio, Chief Impact Officer at Hope for Haiti (HFH), to get her feedback on their use of TaroWorks for mobile data collection.

HFH has been using TaroWorks to collect information, analyze metrics, and manage fieldwork in real-time. TaroWorks also works offline, which is particularly useful for organizations like HFH that partner with hard-to-reach communities that are largely rural or semi-rural. TaroWorks is a data collection tool that is also directly integrated into Salesforce.com, an online customer relationship management database. Therefore, Meg said that TaroWorks has helped HFH improve their strategic planning and donor reporting as well. By having all of HFH’s data online and organized in one place, they are able to refer to data when developing programs and easily share their impact with donors.

Meg offers some sage advice to those who are thinking about transitioning to mobile data collection: “Tablets and phones are simple but powerful tools - don’t be worried about not having a budget for new technology. Try to make it work with what you already have!”

**VOICE YOUR THOUGHTS:**

In the spirit of monitoring and evaluation, we would love your feedback on our newsletter. Take our **one-minute survey** to let us know what you’d like to hear from us!  
*Take survey >>*
LATIN AMERICA & THE CARIBBEAN:

Asociación para la Salud y el Desarrollo (ASSADE)

Asociación para la Salud y el Desarrollo (ASSADE) provides access to health care to rural communities in the Guatemalan highlands. The majority of the communities served are Maya Kaqchikel, which is an agriculturally-based indigenous group. They face many challenges, including limited resources and a lack of access to potable water. At ASSADE, they believe that incorporating vitamin distributions within their existing programs is highly transformative, and helps to promote the wellbeing of women and children, and the communities in which they live.

ASSADE attributes the success of their interventions to two factors: taking advantage of Vitamin Angels’ training tools and the years of hard work to create an inclusive health model for indigenous communities. They are overcoming a number of obstacles, including misunderstandings related to taking the supplements, which they addressed by incorporating discussions on the theory of beliefs into their educational workshops. At ASSADE, they believe any obstacles they face are worth overcoming when the mothers they work with see the change in the health of their children after receiving vitamin A and deworming. In light of this, they remind us: “de las pequeñas cosas surgen aquellas hermosas” or “Beautiful things arise from small things”.

AFRICA: Medical Doctors Inter-Community Health Initiative

Medical Doctors Inter-Community Health Initiative (MICHI) serves rural, hard-to-reach and resource poor communities in Northern Nigeria. While most of the beneficiaries in their communities are initially unaware of the importance of vitamin A, they usually show great acceptance of the vitamins being distributed.

One reason for MICHI’s high level of success with their interventions is due to their adaptation of Vitamin Angels’ training videos to better support their service providers and communities. The staff at MICHI translated the original Vitamin Angels English training video into the local languages and dialects spoken in the communities they serve. This adaptation has helped ensure proper training of service providers, which in turn enables these local volunteers to effectively explain the products and ensure their safe distribution. As a result, MICHI has seen an increase in the efficacy and success of their program.

We encourage you to think about ways to tailor VA’s training tools to the communities you serve. If you develop videos in your own language, please share them with us!
ASIA: *United Nations Relief and Works Agency (UNRWA)- Gaza*

The United Nations Relief and Works Agency (UNRWA) Health Programme serves approximately 80% of the total population in Gaza. This refugee community has suffered from isolation and marginalization for more than 10 years. In an area with deepening poverty, there is a high level of food insecurity and malnutrition, so there is great need for vitamin A supplementation.

UNRWA Gaza’s vitamin A distribution program is successful due to the sustainability of the product supply and community acceptance of the program. Mothers are appreciative of the vitamin A supplementation program, as they understand Vitamin A improves their children’s health and immunity. Both the health providers and the beneficiaries understand the importance of vitamin A, and UNRWA runs campaigns inside the health centers to continually increase community knowledge about the importance and benefit of vitamin A. They know that knowledge is powerful and it has the potential to transform lives.

US/CANADA: *The Opportunity Alliance*

The Opportunity Alliance is a Community Action Agency serving Cumberland County, Maine. Among the many programs that the Opportunity Alliance offers their community to help alleviate poverty is their WIC program. WIC is a federal nutrition program for pregnant, postpartum, and breastfeeding women, and infants and children up to age 5. This local WIC office is vibrant and diverse, with nearly half of the clients being new Americans seeking refuge from war-torn countries, and the other half consisting of food-insecure Mainers working to overcome the challenges parents with limited resources face on a daily basis.

One of the central goals of the Opportunity Alliance WIC program in their prenatal multivitamin distribution is to eliminate barriers for their clients. By keeping each nutrition counselor’s office stocked with prenatal multivitamins, they can ensure easy and direct access to vitamins once a pregnant woman is in their office. This is especially important with some clients experiencing chronic malnutrition after living in refugee camps. Their advice to organizations considering partnering with Vitamin Angels: “Just do it- it’s so easy!”
We are excited to share a new resource we found on complementary feeding! UNICEF has put together a video series on first foods for young children. We are going to introduce this video series to you in greater detail in the future, but wanted to bring it to your attention for now.

This series of videos covers the best practices of when, what, and how to feed the first foods to young children aged 6–23 months. Using real home feeding situations, the video series show simple and feasible feeding practices to introduce nutritious first foods for children from 6 months of age, including what to prepare, how to prepare it, how much and how often to feed as the infant grows, how to keep food safe, how to feed with care, and how working mothers can continue to breastfeed their babies even after they start with first foods.

This series includes videos directed at mothers, caregivers, and frontline workers, all with similar content, but designed and edited differently to best suit the needs of their target audience. The mothers and caregivers’ series focuses more on improving knowledge and dissuading misconceptions, while the frontline workers’ series places more emphasis on the technical knowledge and how best to support caregivers. And the videos can be downloaded and used for FREE!