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# Communications Strategy for Social and Behavior Change with Focus on Nutrition during the 1,000-day Window of Opportunity (2021–2024)



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# Table of Contents

Acronyms.....	iv
Executive Summary .....	v
Short Current Situation Analysis .....	1
Problem Description.....	5
Goals, Objectives, and Recommended Actions (Activities) .....	8
Strategy Monitoring and Evaluation.....	15
Strategy Implementation .....	17
Appendix 1: Glossary.....	18
Annex 2: Behavior Change Communication Activities (Examples) .....	20
Annex 3: Above-the-Line Channels and Communication Strategy Activities.....	25

# Acronyms

CSO	civil society organization
FAO	Food and Agriculture Organization
FMC	Family Medicine Center
HPU	Health Promotion Unit
IEC	information, education, and communication
IFA	iron folic acid
KR	Kyrgyz Republic
LGA	local government authorities
M&E	monitoring and evaluation
NCD	noncommunicable disease
NSC	National Statistics Committee
PHC	Public Health Committee
RCHP&MC	Republican Center for Health Promotion and Mass Communication
SUN	Scaling Up Nutrition
TOT	training-of-trainers
UNICEF	United Nations Children's Fund
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
VHC	Village Health Committee
WFP	World Food Programme
WHO	World Health Organization

# Executive Summary

This Communications Strategy for the 1,000-day window of opportunity (the Strategy), covering the period January 31, 2021 to December 31, 2024, is designed to promote a rational, healthy diet for the appropriate growth and development of children in Jalal-Abad and Batken Oblasts, Kyrgyz Republic.

Accomplishing this mission depends on achieving two goals for (a) external communication (Goal #1) and (b) internal communication (Goal #2) by performing a series of tasks for public information and education, as well as promoting positive maternal and child nutrition in the areas of policy and social norms.

Successful implementation of the Strategy depends on two key factors: (a) **organizational readiness** to promote a particular agenda—the state of internal communications and (b) the quality of communications products and messages capable of **capturing the attention of target groups**—the factor of external communications.

Based on an analysis of the current situation (including the analysis of internal and external communications) as well as major strategic and regulatory documents, the strategy is formed around two complementary and synergistic goals of communication about positive nutrition among mothers and children. One of the goals aims to promote this message and transform behavior in the external environment; the second aims to work with internal audiences.

The internal communications goal aims to increase and strengthen the capacity of **staff who will implement** the Communications Strategy, so they can effectively and efficiently convey the messages for the 1,000-day window of opportunity to the target audiences and develop an ecosystem of knowledge and social norms favorable to expanding healthy diet practices. Together, these goals lead to improved communications capacity for the **RCHP&MC as the leading actor** in promoting the message and implementing the Communication Strategy.

The **key message** of all communications, “The first 1,000 days of a child's life determine the possibilities and prospects of the whole life path,” is embedded in all activities of this Strategy from different angles.

The Strategy consists of a communications problem statement; a situational analysis; goals, objectives, and activities; as well as monitoring and evaluation (M&E) of the results of the Strategy implementation. A budget for the strategy will be developed later as the campaign progresses from 2021 to 2024.

Formulation of the goal for external communications: **Goal #1 - Increase in the proportion of women and children receiving proper nutrition in Jalal-Abad and Batken Oblasts, focusing on the first 1,000 days of a child's life.** Accordingly, the objectives leading to its achievement include: (1.1) Increasing parents' knowledge and awareness of the importance of good nutrition for children in the first 1,000 days; (1.2) creating a supportive environment and transform social norms to promote good nutrition; and (1.3) educating and creating the right role models for young parents and their closest circle.

Internal communications objective: **Goal #2 – RCHP&MC and partners effectively promote and change social norms for rational maternal and child nutrition** (internal communications). This goal involves tasks to (2.1) form and train a group of health promotion specialists at RCHP&MC (health communication leaders) to promote healthy eating and to strengthen the institutional tradition of promoting healthy lifestyle in the country and (2.2) engage partners through integration of nutrition issues for women and children in their programs.

Goal #2 is implemented with the full involvement of the RCHP&MC leadership and its divisions.

The Strategy contains a set of strategically aligned activities for implementation of each objective in terms of their feasibility, effectiveness, timeliness, and scale of impact. The implementation of this Strategy will be discussed regularly at monthly meetings of the RCHP&MC, as well as at meetings of the Coordinating Council for the Promotion of Rational and Healthy Nutrition (the Coordinating Council) of the Ministry of Health of the Kyrgyz Republic.

International research confirms that social communication works and is effective in a wide variety of health areas, such as maternal and newborn health, family planning, other infectious diseases, etc.<sup>1</sup>

The Strategy is based on a number of behavior models with both informational and motivational goals and objectives. These models include the health belief model, the rational action model, social learning, etc.

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<sup>1</sup> Manoff Group. Defining social and behavior change communication (SBCC) and other essential health communication terms. Technical Brief. <https://www.manoffgroup.com/wp-content/uploads/DefiningSBCC.pdf>

# Short Current Situation Analysis

Over the past five years (2014–2018), nutrition of children and adults in the Kyrgyz Republic has been characterized by a proportionally insufficient intake of proteins and fats, relative to the intake of the diet, which meets minimum energy value. This is supported by the following data:

- iron deficiency anemia (37.8% of pregnant women and 34.2% of non-pregnant women; 42.6% of children in the first 5 years of life)<sup>2</sup>
- latent iron deficiency (41% of women), folic acid deficiency (42% of non-pregnant women)<sup>3</sup>
- iodine deficiency diseases (61.6% of pregnant women and 43.1% of school-age children)<sup>4</sup>
- overweight and obesity (35.7% of women and 9% of children in the first 5 years of life)<sup>5</sup>
- underweight (7.3% among women and 7.9% among children 1–6 years old)<sup>6</sup>
- low growth in children under 5 years old (12%).<sup>7</sup>

Currently, there are over 1,500 Village Health Committees (VHCs) working in the country, covering 80 percent of the rural population. In the cities and regional centers of the country, Public Health Committees (PHCs) are organized; these are associations of communities and government organizations that promote health issues among the population, including nutrition programs.

The Action for Health nutrition program, implemented in villages, is based on interpersonal interaction that informs mothers about ways to improve the diet for themselves and their young children, including promoting exclusive breastfeeding. From 2006–2020, VHCs and partners promoted the following nutrition-related health promotion initiatives:

- promotion of iodized salt
- maternal nutrition
- exclusive breastfeeding for children under 6 months
- complementary feeding of children from 6 to 24 months
- Gulazyk program to reduce iron deficiency anemia
- noncommunicable disease (NCD) lessons at schools.

According to the United Nations Children's Fund (UNICEF), the period from conception to 2 years is an important period for good growth, health, behavioral, and cognitive development. Thus, optimal infant and young child feeding, care, hygiene, and health care seeking are critical during the 1,000-day period. Maternal nutrition is essential for the health and productivity of women, as well as for the baby.<sup>8</sup>

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<sup>2</sup> Demographic and Health Study of the Kyrgyz Republic, 2012. [http://sun-kg.org/uploads/resources/demoghrfachieskoie-issliedovaniie\\_KR\\_2012.pdf](http://sun-kg.org/uploads/resources/demoghrfachieskoie-issliedovaniie_KR_2012.pdf)

<sup>3</sup> UNICEF, US CDC, NSC KR. 2009. *Preliminary results of a study of nutritional status in non-pregnant women and children from 6 to 59 months.*

<sup>4</sup> UNICEF. 2007. *National Survey of Iodine Supply in Children and Pregnant Women.*

<sup>5</sup> UNICEF, US CDC, NSC KR. 2009. *Preliminary results of a study of nutritional status in non-pregnant women and children from 6 to 59 months.*

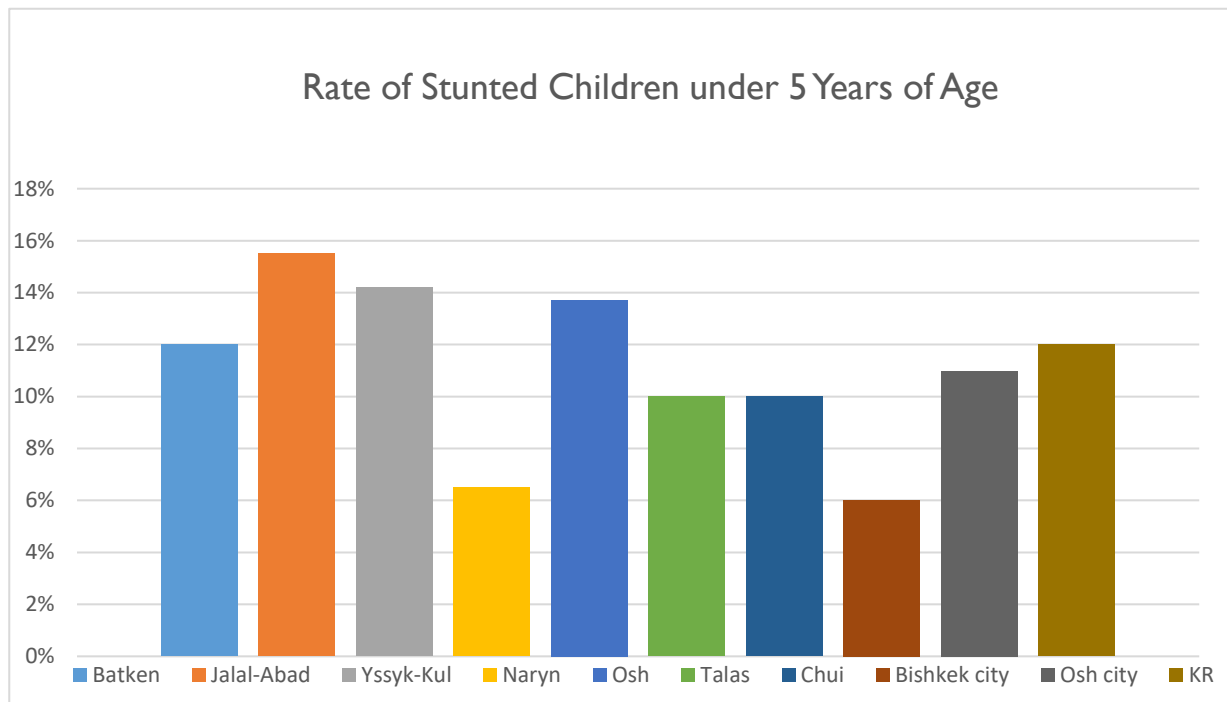
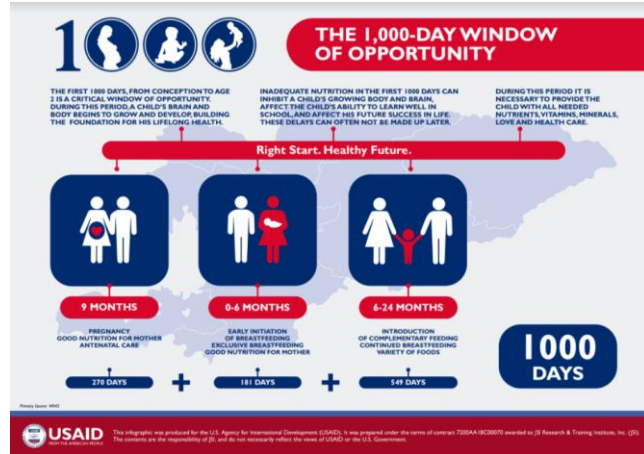
<sup>6</sup> Ibid.

<sup>7</sup> NSC of the Kyrgyz Republic, UNICEF. 2018. *MICS cluster survey. Final report.* Bishkek.

<sup>8</sup> UNICEF's website: [https://www.unicef.org/nutrition/index\\_breastfeeding.html](https://www.unicef.org/nutrition/index_breastfeeding.html)

It has been proven that in the **first 1,000 days of a child's life, her/his brain develops very fast. Appropriate nutrition and care within this period is the basis for healthy growth and development of the child, which even affects her/his future.**

In combination, acquired knowledge and information about the importance of the first 1,000 days of life, a supportive enabling environment, and the use of model behavior examples will give the child the opportunity to grow and develop correctly in the future.



Source: MICS 2018.

According to a cluster study by the National Statistics Committee (NSC) and UNICEF, in 2018, 81 percent of children in the Kyrgyz Republic are attached to the breast within the first hour after birth. The rate of exclusive breastfeeding until 6 months remains low at 46 percent.<sup>9</sup> At the delivery hospital, almost every tenth child (13%) begins to receive infant formula, which requires further research. While complimentary feeding is recommended from 6 months, only 43 percent of children over 6 months receive the minimum acceptable diet, which, most likely, is one of the reasons for the high prevalence of nutrition disorders. The lowest minimum dietary diversity is observed among children in Batken Oblast (27% versus 60% countrywide).<sup>10</sup> The consequence of malnutrition is stunting, which is observed in 12 percent of children under 5 years. The highest level of stunting was recorded among the poorest

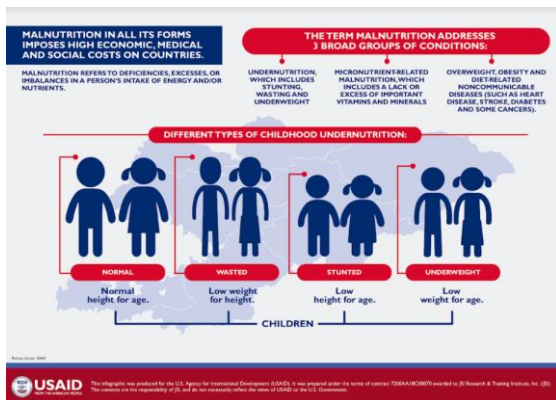
<sup>9</sup> Ibid.

<sup>10</sup> NSC of the Kyrgyz Republic and UNICEF. 2018. MICS cluster survey. Final report. Bishkek.



households (14%) and the lowest level among children from the richest households (9.2%). In rural areas, this indicator was higher than in urban areas (13.1% and 8.8%, respectively). Stunting was lowest among children aged 6 months (5.4%) and reached a maximum during 18–23 months of age (17.2%). Analysis of the socio-demographic characteristics of the target audience, its habits (patterns) of information consumption, as well as the situation in the media market helped determine the communications channels for effectively delivering information and key messages of this communication strategy to a mass audience—the so-called above-the-line (ATL) channels (see Appendix 3).

Use of information varies considerably between urban and rural areas. Given the circumstances of the Kyrgyz Republic, territorial factors often compound socio-demographic factors. In particular, this is due to the different levels of socio-economic development of the country’s regions, which is determined not only by the level of Internet use, but also by the variety of information resources available to the audience.



A media literacy study of the population of the Kyrgyz Republic by the Public Foundation of the Institute of Media Policy, conducted for the Soros Foundation-Kyrgyzstan in 2018,<sup>11</sup> stated that the average level of public confidence in information seen/heard from various media resources is about 6 points on a 10-point scale, where 1 is “I absolutely do not trust,” and 10 is “I completely trust the source of information.” M-Vector, the Internews Network in the Kyrgyz Republic, and the Soros Foundation-Kyrgyzstan conducted the eighth wave of research on media preferences among the Kyrgyz population in 2017.<sup>12</sup> Based on the research

results, a matrix of channels with target audiences was developed for the Communications Strategy for effective interaction during its implementation.

Achieving the goals and objectives of the Strategy will lead to reaching the Global Agenda for Sustainable Development 2030 in Kyrgyzstan. The RCHP&MC team intends to develop close cooperation with the SUN-Kyrgyzstan multi-sectoral platform on nutrition and food security, which brings together the efforts of all key partners, international organizations, development agencies, civil society sector, business, and academic community.

This multi-sectoral platform is leading the work to implement comprehensive measures to ensure accountability and policy coherence through inter-sectoral collaboration to achieve the first three globally-aligned Sustainable Development Indicators related to nutrition activities or affecting the first 1,000 days of a child’s life:

- decrease of anemia among women from 35 to 21 percent.
- decrease of stunting among children under 5 years old from 12,9 to 7,7 percent.
- decrease of low birth weight from 5,9 to 4,4 percent.
- increase of breastfeeding under 6 month from minimum 41 to 60 percent.<sup>13</sup>

<sup>11</sup> PF "Institute of Media Policy" for the Soros Foundation Kyrgyzstan. 2018. The level of media literacy in the Kyrgyz Republic.

<sup>12</sup> M-Vector, Representative Office of Internews Network in the Kyrgyz Republic, and Public Fund "Soros Kyrgyzstan." 2018. Media preferences of the population of Kyrgyzstan (8th wave).

<sup>13</sup> PF "Center of analyzing health insurance policy." Kyrgyz Republic. Bishkek. <https://www.gov.kg/files/news/froala/4400f6708100e3632e3cfaf0857942cdcc08f79f.pdf>

The Strategy’s situational analysis provides data to determine target groups and approaches that inform messages and communication channels for 2021–2024. The results of the situation analysis and discussion with RCHP&MC and partners formed the basis for the goals, objectives, messages, and activities of this Strategy.

The target groups of the situational analysis, identified as a result of the literature and research review, determine the nature and quantity of resources required to implement this Strategy:

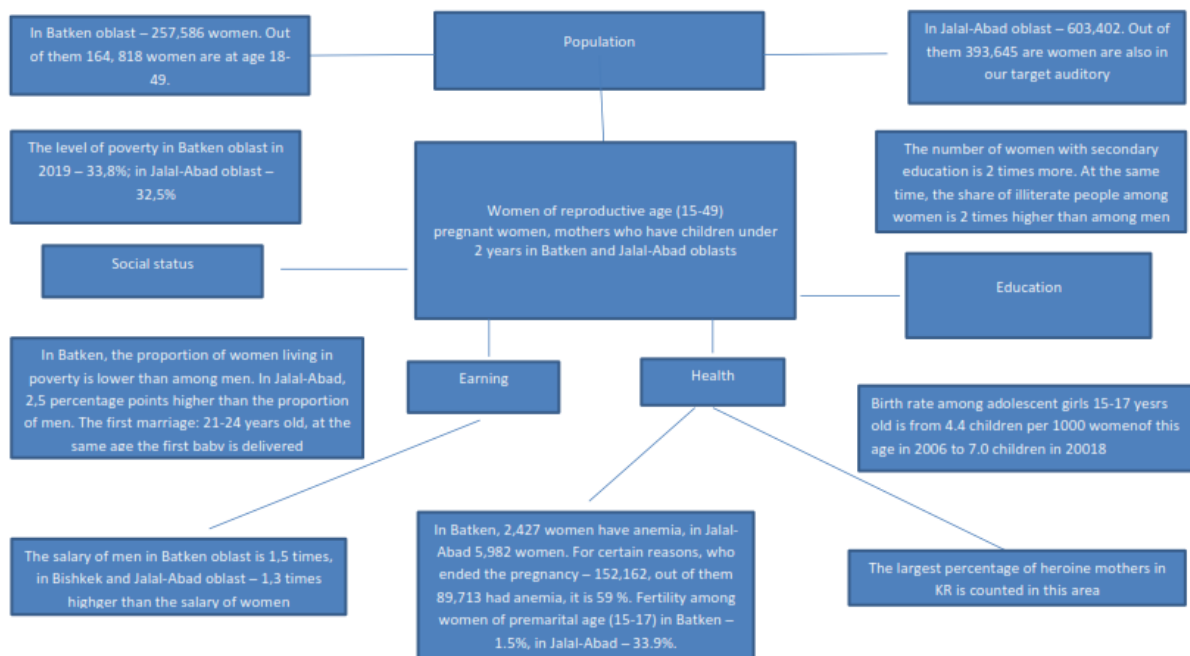
- Primary target audience: women of reproductive age (15–49 years old); pregnant women and their partners; mothers with children under 2 years old.
- Secondary target audience: family (husband, children) and close relatives (father’s parents, mother’s parents); employers; RCHP&MC employees; partners from civil society and the private sector; media representatives, influencers; donors.

### Characteristics of the Primary Target Audience

The permanent population of the Kyrgyz Republic, as of January 1, 2019, is 6.39 million people, including 3.22 million women and 3.17 million men.<sup>17</sup> In urban areas, the share of women exceeds the share of men (52.4%), but in rural areas, on the other hand, men exceed women to an insignificant extent (50.7%). The number of women in Batken Oblast is 257.6 thousand people, of which 164.8 thousand women aged 18–49 are among the primary target audience of this strategy.

In Jalal-Abad Oblast, there are 603.4 thousand women of whom 393.6 thousand are the primary target audience. The largest percentage of “Hero Mothers” (women giving birth to seven or more children) lives in these two oblasts.

## THE PICTURE OF THE TARGET AUDITORY



## Problem Description

The RCHP&MC was established in 2001, at the beginning of the reform of the country's health protection and promotion service. The work of the center is based on the principles of focusing on the needs of the population and promoting public health policies in close collaboration with other sectors. The RCHP&MC established partnerships and integrated health promotion functions at the Health Promotion Units (HPU) under Family Medicine Centers (FMCs). The key task of the RCHP&MC in the nutrition area for 2021–2024 is the development and implementation of information and education campaigns that lead to sustained attention of the media communities, donors, and public groups, as well as to “first 1,000 days” activities. Ideally, strategic communications lead to absorbed messages and cultural norms that motivate behavior change. As such, the RCHP&MC Strategy is aimed at **mobilizing rural and public health committees of Jalal-Abad and Batken Oblasts in promoting the issues of healthy diet for women and children by strengthening the knowledge and skills of community leaders with emphasis on gender roles**, which influences how information is perceived as well as changes in behavior and social norms.

Recognition of this issue should be an initial and fundamental step to the **successful promotion of healthy nutrition in the first 1,000 days of a child's life**, which is a foundation for building healthy communities and sustainable development of the country for the long term. The Strategy builds a coherent and logical system of goals, objectives, activities, and formulated messages for specific target audiences (target groups) to successfully and effectively implement the campaign.

This Strategy is the continuation of the *Communications Strategy to Promote the Information Campaign “1,000-day window of opportunity” for 2016–2017*.<sup>14</sup> The Strategy for 2021–2024 was developed on the basis of prior revisions and analyses,<sup>15</sup> new tendencies, and approved regulations. The legal framework of the Strategy is the *Concept of Rational and Healthy Nutrition for the Kyrgyz Republic Population for 2021–2025*,<sup>16</sup> approved in order to implement the *Kyrgyz Republic Government Program on Population Health Protection and Development of the Health System for 2019–2030*. “Healthy person—prosperous country”<sup>17</sup> is part of promoting rational and healthy nutrition. The Communications Strategy “1,000-day Window of Opportunity” will provide an opportunity for all nutrition partners to join the effort to achieve the national goals for 2021–2024.

The main executive body of the *Kyrgyz Republic Ministry of Health* accountable for implementing the above concept is the RCHP&MC, which operates through the Southern branch of RCHP&MC, Bishkek Health Promotion Center, HPU offices under the FMCs, and has experience conducting nutrition information campaigns. HPU specialists and partners/members of VHCs conduct trainings and awareness raising at the local level.

The main partners of the RCHP&MC in the development and implementation of the Strategy for introducing social and behavior change approaches are—

- Multi-sectoral nutrition and food security platform SUN-Kyrgyzstan
- Kyrgyz Association of Village Health Committees Civil Alliance for Improving Nutrition and Food Security

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<sup>14</sup> The Republican Center for Health Promotion (2016–2017). SPRING Project (Strengthening global nutrition partnership, effectiveness and innovation of nutrition on the global level), USAID, <https://www.spring-nutrition.org/>

<sup>15</sup> The Republican Center for Health Promotion, Bishkek, Kyrgyz Republic. 2016. *Communication Strategy to Promote the Information Campaign “1,000-day Window of Opportunity.”*

<sup>16</sup> Order of MHKR №923 as of 04.11.2020.

<sup>17</sup> MHKR Program 2019–2030 “Healthy person—prosperous country.” <http://cbd.minjust.gov.kg/act/view/ru-ru/12976?cl=ru-ru>

- Kyrgyz State Medical Institute for Retraining and Advanced Training
- USAID Advancing Nutrition Project
- Mercy Corps, UNICEF, World Food Programme (WFP), United Nations (UN), United Nations Population Fund (UNFPA), World Health Organization (WHO), Food and Agriculture Organization (FAO), NCD Project, and others.

The RCHP&MC is a state institution under the Ministry of Health of the Kyrgyz Republic that provides services for delivery of preventive measures that promote healthy living. RCHP&MC has its own internal structure and relationships that form the internal environment of the organization. It includes resources, equipment, use of technology, personnel, information, socio-psychological climate, organizational structure, and image of the organization.

The RCHP&MC is managed by a director who is hired and can be dismissed by the Ministry of Health of the Kyrgyz Republic. The director supervises the RCHP&MC staff. The director is responsible for the overall work, control, and analysis of the organization’s activities based on an assessment of performance indicators, as well as taking the necessary measures to improve performance of the organization.

### Structure of the RCHP&MC



The organizational structure and internal communications provide for the distribution of functions and decision-making authority among managers and employees of the structural units of the RCHP&MC, ensuring the most effective interaction and coordination among departments and employees.

The goals of the internal communications are to create favorable conditions for the development of the organization’s human resources, reduce management costs, and prevent labor disputes and interpersonal conflicts. Communication between managers and subordinates is carried out from top to bottom (top-down direction) and bottom-up (upward direction).

- Downward communication is used for setting objectives, describing work activities, communicating feedback and other procedures.
- Upstream communication includes employee reports and conversations with the organization’s staff.

Horizontal communications are used in information exchange between employees and departments. They can be both formal (obligatory) and informal. Such communication takes the form of a friendly conversation or correspondence and is necessary for efficient coordination of actions.

The main management models used by the RCHP&MC are as follows:

- Bureaucratic model with a clear division of labor using qualified specialists for each position, which enables mobilization of human energy and coordination of people’s work in executing complex,

long-term projects; it ensures that work is well-coordinated and clear for the team working toward achieving a common goal. This model is built on a hierarchy of management and the presence of formal rules and norms (weekly planning meetings, job descriptions, monthly plans, and reports).

- Organic model where decisions are based on joint discussions, employees are encouraged to work creatively and are willing to make progressive changes in the organization, the principle of persuasion and teamwork is in place, and the responsibility of each employee for common success is increased. The organic model includes working meetings with the participation of employees from different departments, brainstorming, trainings, round tables, seminars, team building, etc.

Effective management of people is possible only with competent management of information directed at employees and effective feedback. The higher the rank of a manager, the more information she/he has to process and provide her/his employees in order for them to perform their duties. Therefore, RCHP&MC uses the following methods and channels for the effective transfer of information and for building internal two-way communication:

- Face-to-face communication has the highest information capacity, such as speaking at meetings (planning meetings, seminars, working meetings, etc.).
- Written correspondence (programs, orders, protocols with meetings' decisions, approved plans, letters, memos and reports, presentations, etc.).

Information channels: Telephone, fax, and virtual communication (e-mail, instant messenger, video conferencing, websites, social networks, etc.).

Heads of mass communications are accountable for implementing the Communications Strategy “1,000-day Window of Opportunity” and NCD prevention, which is approved by an internal order of the RCHP&MC director.

For successful implementation of the Strategy, all newly recruited team members will receive nutrition package training on the first 1,000 days period, including capacity strengthening within RCHP&MC according to their duties. All activities will be distributed among staff departments according to the plan and job responsibilities. The heads of the Mass Communications, NCD Prevention, and Community Outreach departments regularly evaluate the activities, identify achievements and problem areas, analyze, and, if necessary, propose adjustments to the action plan of the Communications Strategy. Responsible staff (heads of departments) submit regular reports on Strategy progress to the organizational/methodological department that assesses performance of the Strategy. Results are discussed each quarter at the RCHP&MC meeting, and discussions are included in the meeting agenda for the Coordinating Council (Order #923 of April 11, 2020, *Concept on Rational and Healthy Nutrition of the Population of the Kyrgyz Republic for 2021–2025*). The annual review of results and planning for next steps is carried out with implementing partners for the Communications Strategy. The RCHP&MC team prepares the final analytical report and proposals for the next stage of promoting the Communication Strategy throughout the republic.

# Goals, Objectives, and Recommended Actions (Activities)

**Goal #1: Increase by 10 percent the proportion of women and children receiving appropriate nutrition in Jalal-Abad and Batken Oblasts, including the first 1,000 days of a child's life.**

**Objective #1.1: Improving knowledge and awareness of parents about the importance of appropriate nutrition for children in the first 1,000 days of their lives.**

**Key message:**<sup>18</sup> Parents make the foundation for human health and the first 1,000 days of life are decisive. Don't miss them! (Promotion of the importance of maternal and child nutrition in the first 1,000 days of a child's life through media, social media, leaders/bloggers).

**Target audience #1:** Women of reproductive age (15–49) (primary). **Interest:** It is important and interesting for women to know how to give life and raise healthy children.

**Target audience #2:** Pregnant women and their partners (primary). **Interest:** It is important to plan for the child's proper nutrition in advance, both financially, qualitatively, etc.

**Target audience #3:** Mothers with children less than 2 years old (primary). **Interest:** It is important for mothers that their children are healthy; therefore, knowledge about proper nutrition and sources of nutrients will prevent possible problems.

**Target audience #4:** Family (husband, children) and close relatives (father's parents, mother's parents) (secondary). **Interest:** Enabling the family to thrive and develop effectively as an ecosystem.

**Target audience # 5:** Employers (secondary). **Interest:** Employees must be healthy and not distracted from the production process.

**Activity #1.1.1:**<sup>19</sup> Create a thematic block on Instagram. **Timeline:** 2021–2022

**Short description:** Generating content on the topic “proper nutrition for children” through a well-known food blogger, for example, a mother of several children, who administers the pages of Ashkana sylary and Kelinchek.kg on Instagram.

**Benefit:** Long-term quality content on social media can compensate for the weakness of educational institutions, etc. **Risks:** Lack of quality control; media can discredit the topic and be misleading.

**Activity units of measurement/evaluation:** Number and quality of subscribers, visits, comments, etc. (targets will be set in the operational plan).

**Activity #1.1.2:** Regular publications (print, electronic) in the media (media plan) (above-the-line).

**Brief description:** The annual media plan, scheduled according to the goals and achievements of the Strategy, includes press conferences, press releases, interviews, reports, storytelling (multimedia, etc.), TV and radio broadcasts.

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<sup>18</sup> This task should convey the “message strategy” to the public/target groups.

<sup>19</sup> Activities are prescribed not by audience, but by the entire task as a whole. This means that each activity is intended for all audiences defined in the task.

**Benefit:** The media has an impact on mass audiences and dictates the (political and social) agenda. **Risks:** Without information flow control, the media can be manipulated by sensational and/or patriarchal rhetoric.

**Activity units of measurement/evaluation:** Quantity and quality of publications, reviews, etc. (each year the media plan sets targets).

**General assessment of Objective #1.1:** Carried out in 2024 as part of the overall assessment of the strategy of the RCHP&MC using a survey method, content analysis, or through statistical data.

**Objective #1.2: Create a supportive environment for promoting healthy nutrition and transforming supportive social norms.**

**Message strategy:** To achieve this comprehensive goal, social norms and society as a whole must support mothers with babies, including access to proper and nutritious food for mother and baby, and a supportive environment for pregnant and lactating women.

**Target audience #1:** Women of reproductive age (15–49) (primary). **Interest:** It is important and interesting for women to know how to give life and raise healthy children.

**Target audience #2:** Family (husband, children) and close relatives (father's parents, mother's parents) (secondary). **Interest:** Enabling the family to thrive and develop effectively as an ecosystem.

**Target audience #3:** Employers (secondary). **Interest:** Employees must be healthy and not distracted from the production process. To do this, they need to create appropriate conditions (for example, a mother and child room in offices).

**Target audience #4:** PMSA medical workers. **Interest:** This issue is within their competence, and in the long term communication on this topic facilitates their work and increases its effectiveness.

**Target audience #5:** Maternity hospital workers. **Interest:** This issue is within their competence, and in the long term communication on this topic facilitates their work and increases its effectiveness.

**Target audience #6:** Village and Community Health Committees (VHC, CHC). **Interest:** This issue is within their competence, and in the long term communication on this topic facilitates their work and increases its effectiveness.

**Target audience #7:** Other civil society organizations (NGOs, trade unions, associations, etc.). **Interest:** This is a human rights issue and creating the conditions for improvement in this area contributes to success and growth for CSOs.

**Target audience #8:** State and local self-government bodies, decision-making leaders. **Interest:** This issue is within the purview of public administration, and in the long term communication on this topic facilitates their work and increases its effectiveness.

**Target audience #9:** Mass media (media). **Interest:** This is a matter of public interest and the mission of the media includes an educational function to serve the public by delivering vital information to every home.

**Activity #1.2.1:** Visualization to promote the idea of proper nutrition in the first 1,000 days.  
**Timeline:** 2021–2023.

**Short description:** Viral videos and informative infographic video about the 1,000 days, according to the media plan.

**Benefit:** Visual communication has become the most effective way to convey information and knowledge, as well as to persuade people. **Risks:** Information noise, transmission distortion, overloads.

**Activity units of measurement/evaluation:** Quantity and quality of visual products, views, downloads comments, broadcasts, and users.

**Activity #1.2.2:** Below-the-line (TTL) tools - information materials (press kit, posters, booklets, brochures, reports). **Timeline:** 2021–2024.

**Short description:** Annually, according to the media plan, create/update information materials. Example: Balaga koshumcha tamak, outdoor posters and banners with key messages in places where the target group is often located (FMCs, playgrounds, public transport, etc.)

**Benefit:** It is an integral element of communication, ensuring consistency and correctness of knowledge. **Risks:** Information noise, transmission distortion, overloads.

**Activity units of measurement/evaluation:** Quantity and quality of materials, downloads, inquiries, readers, links, users.

**Activity #1.2.3:** Regular updates to the official page content for RCHP&MC on social networks, the creation of chat bots for the exchange of information (Telegram *Ene Zhana Bala*, etc.). **Timeline:** 2021–2022.

**Short description:** Monthly new publications from the series News, Publications, Interesting Facts, Successful people—the result of a balanced nutrition, etc. on YouTube (Bilip al, Sak salamat), Instagram, Facebook, and other pages of the RCHP&MC.

**Benefit:** The digital footprint ensures consistency, convenience of obtaining information on demand (through search engines), and correctness of knowledge. **Risks:** Information noise, transmission distortion, overload, denial-of-service attacks.

**Activity units of measurement/evaluation:** Quantity and quality of activities on social media channels, views, downloads, comments, broadcasts, users, etc.

**Overall assessment of Objective #1.2:** Implementation of this task can be assessed through secondary sources—analysis of the health situation carried out by independent research institutes, nongovernmental and international organizations, the private sector, as well as an assessment of the health sector situation for the country's strategic programs.

**Objective #1.3:** Education/creation of correct role models for young parents and their inner circle.

**Message strategy:** Influencers support and practice, form the necessary behaviors so their followers learn about the benefits and importance of practice of exclusive breastfeeding up to 6 months (continued up to 2 years); regular visits to the doctor during pregnancy, according to the protocol; correct eating behaviors of a pregnant woman (proper nutrition); proper child care (through the prism of nutrition); early breastfeeding; etc.

**Target audience #1:** Women of reproductive age (15–49 years) (primary). **Interest:** It is important and interesting for women to know how to give life and raise healthy children.

**Target audience #2:** Family (husband, children) and close relatives (father's parents, mother's parents) (secondary). **Interest:** Enabling the family to thrive and develop effectively as an ecosystem.



**Target audience #3:** Representatives of the creative industry. **Interest:** This is a matter of social responsibility and a good way to present oneself as a caring and respectable celebrity in terms of reputation capital.

**Target audience #4:** Mass media (media). **Interest:** This issue concerns more than half of the country's population, and the mission of the media includes an educational function in order to serve the population by delivering vital information.

**Activity #1.3.1:** Engaging pop stars and bloggers (mothers of several children and famous people in southern and northern region) to promote the message “The first 1,000 days are the key to the health and success of children in the future.” **Timeline:** 2021–2022.

**Brief description:** Develop a celebrity and influencer engagement plan with the right messages for their audiences.

**Benefit:** Wide coverage of the target primary and secondary audience, which can be informed about the issue. **Risks:** It is necessary to monitor the quality of messages so as not to reinforce gender stereotypes.

**Activity units of measurement/evaluation:** Statistics and quality of their accounts.

**Activity #1.3.2:** Engaging a popular TV presenter and blogger to promote the message “The father is the support of the family and children,” caring for the health of his wife and children; father of four children, blogger Ermek Nurbaev. **Timeline:** 2021.

**Brief description:** Develop and implement a plan with a message for young men and women.

**Benefit:** Wide coverage of the target primary and secondary audience, which can be informed about the issue. **Risks:** It is necessary to monitor the quality of messages so as not to reinforce gender stereotypes.

**Activity units of measurement/evaluation:** Statistics and quality of his accounts.

**Overall assessment of Objective #1.3:** The overall assessment of the task will be evident from the content of social networks, the amount of content in the media and social networks, measured through content analysis and media research conducted by independent researchers, organizations, and institutions.

**Goal #2:** RCHP&MC and partners effectively promote and change social norms for rational nutrition of mother and children (internal communications).

**Objective #2.1:** Form and train a group of health promotion specialists at the RCHP&MC (leader of health communications) that will promote healthy nutrition and strengthen the institutional tradition of promoting healthy lifestyles in the country.

**Message strategy:** RCHP&MC is a source of high-quality and reliable information and expertise in rational nutrition issues for the population and continuously increases its professional potential.

**Target audience #1:** Employees of the RCHP&MC, specialists of the health care institution at FMC, medical workers of PMSA, schools for expectant mothers. **Interest:** Professional knowledge and tools help in career growth, personal fulfillment, self-esteem, and creation of a higher-standard role model.

**Target audience #2:** VHCs, local community leaders, NGOs, Ministry of Education and Science (teachers). **Interest:** professional development and growth, self-realization, benefit to the local community.

**Activity #2.1.1:** Refine and digitize nutrition guidelines. **Timeline:** 2021–2022.

**Brief description:** Guidelines for nutrition for pregnant women, breastfeeding, and complementary foods are translated into an interactive online format. Quizzes and infographics are developed and published on the website of the RCHP&MC. Media promotes this resource to its target audience, which is actively involved in the use of these resources.

**Benefit:** Online and interactive formats concisely, succinctly, and consistently convey information, provide constant and free access to knowledge and expertise, which is critical for remote regions. **Risks:** insufficient promotion, target groups may remain unaware of their existence and opportunities to take advantage of them.

**Activity units of measurement/evaluation:** Quantity and quality of materials, downloads, users, reviews.

**Activity #2.1.2:** Create a national team of trainers to promote nutrition issues at the RCHP&MC. **Timeline:** 2021–2024.

**Brief description:** Organization of training-of-trainers (TOT) on rational nutrition issues and the M&E system for the RCHP&MC and consolidation of the training of target groups in their functional responsibilities with performance indicators, and periodic and regular capacity building of this team.

**Benefit:** The creation and institutionalization of a group of trainers is a direct and long-term fulfillment of the mission of the RCHP&MC to educate the population. **Risks:** Lack of resources (financial, human, etc.) and political will, and organizational instability.

**Units of activity measurement/evaluation:** Quantity and quality of personnel, regularity of TOTs and trainings, webinars, and other training events, as well as materials and reviews.

**Activity #2.1.3:** Regularly inform all departments of the RCHP&MC about the progress of the “1,000 Days” campaign and interesting facts about rational nutrition through weekly mailings and internal messengers, etc. **Timeline:** 2021–2024.

**Brief Description:** A template for an internal bulletin is created, which shall be filled with news (300 words maximum) and with useful links for colleagues from other departments. All interested departments can participate in the formation of the bulletin.

**Benefit:** Having a regular bulletin will raise the organizational culture of the entire RCHP&MC to a new level of quality; improve communication; systematize work; document achievements, lessons, and experiences; contribute to organizational development; and broaden the horizons of staff. **Risks:** May turn into formality with diminishing interest.

**Units of activity measurement/evaluation:** Quantity and quality of bulletins, regularity of releases, downloads, materials, reviews.

**Activity #2.1.4:** Trainings for the staff of the RCHP&MC on strategic planning and best practices of similar institutions of public administration in other countries. **Timeline:** 2021–2023.

**Brief description:** Trainings in strategic planning, social partnership, communication competencies and communication skills, interpersonal communication, media relations, etc.

**Benefit:** Trainings will allow each employee to see him/herself and his/her role in the implementation of the mission of the RCHP&MC and will inform his/her work, career,

and personal growth. Trainings also contribute to team cohesion. **Risks:** Lack of resources, time, and prioritization.

**Units of activity measurement/evaluation:** Quantity and quality of trainings, the effectiveness of the “1,000 Days” campaign implementation, team cohesion, and the draft Strategic plan of the RCHP&MC (document).

**Overall Assessment of Objective #2.1:** This objective will be evaluated at the end of each year as part of an overall assessment of the performance of the RCHP&MC according to the policies and regulations of the Ministry of Health.

**Objective #2.2:** Engage partners by integrating nutritional issues for women and children into their programs.

**Message Strategy:** Proper nutrition for women and children requires an integrated approach and engagement of different partners with complementary mandates to achieve synergy and results by 2024.

**Target Audience #1:** Mercy Corps, USAID. **Interest:** The agencies' mandates include nutritional issues, maternal and child health issues.

**Target audience #2:** UN agencies (WFP, UNICEF, UNFPA, FAO, WHO, etc.). **Interest:** The agencies' mandates include nutritional issues, maternal and child health issues.

**Target Audience #3:** Aga Khan. **Interest:** Working with communities in rural areas and highlands.

**Target Audience #4:** Multilateral Platform on Nutrition and Food Security SUN-Kyrgyzstan. **Interest:** The priority and tasks of the platform are to increase the level of exclusive breastfeeding (part of 1,000 days), as well as laws, jobs, support for women.

**Activity #2.2.1:** Regular discussions of the “1,000 Days” campaign at the meetings of the Coordination Council on Nutrition. **Timeline:** 2021–2024.

**Brief description:** To include in the agenda of the Coordination Council meetings regular discussions about the progress of the “1,000 Days” campaign.

**Benefit:** Regular inclusion and discussion of the issue promotes greater engagement of partners, awareness and understanding of the strategic importance of the issue. **Risks:** Unhealthy competition for resources and exclusion of important sector partners (for example, NGOs) from the process.

**Units of activity measurement/evaluation:** Minutes of the Coordination Council meetings and the quality of discussions.

**Activity #2.2.2:** Organize a coalition at the Multilateral Platform on Nutrition to promote and implement the “1,000 Days” campaign. **Timeline:** 2021–2022.

**Brief description:** RCHP&MC makes a presentation and initiates discussion of this Communication Strategy to mobilize additional resources for its implementation.

**Benefit:** Increase in the effectiveness of implementing the Strategy as a united front, broad involvement, coverage of additional regions (except for Jalal-Abad and Batken). **Risks:** Inconsistency of the RCHP&MC teams and partners, lack of coordination and resources.

**Units of activity measurement/evaluation:** Quantity and quality of partners involved, the amount of resources involved.

**Overall assessment of Objective #2.2:** The effectiveness of the objective is expressed in the volume of mobilized resources, quantity and quality of partners, as well as in the achievement of an overall result to inform the population about rational nutrition.

# Strategy Monitoring and Evaluation

Monitoring is an ongoing process aimed at tracking implementation of the Communication Strategy with the approved plan. During the monitoring process, there may be a need to adjust the plan. Evaluation is a process that determines the results of a completed or ongoing activity or stage of the Communications Strategy.

RCHP&MC, within the framework of this Strategy, will apply an internal monitoring system to assess the effectiveness of the Communication Strategy using quantitative and qualitative indicators. Monitoring will be carried out in three main areas of implementation of the Communication Strategy: governance, evaluation, and accountability.

Quantitative indicators:

- number of trained people from target groups (health workers, VHC members, women of reproductive age)
- number of released media and promotional materials (TV spots, TV clips, TV programs, interviews, audio clips, posters, banners, booklets, articles in print and online, including on the website of the RCHP&MC)
- video views, coverage, social media engagement, nutritional issues page visits
- number of blogger-partners of the RCHP&MC and online platforms
- number of social events/actions, including joint ones with partners, dedicated to nutritional (mother and child) issues as part of the Communication Strategy.

Qualitative indicators:

- awareness of the target group with regards to nutritional issues
- positive attitude toward the received information
- applicability (use) of information, knowledge in practice
- feedback from the population/target group on online publications, from focus groups on promotional materials, activities carried out within the framework of the Strategy.

Quantitative indicators will be reflected in the quarterly reports of the health promotion offices of regional FMCs, as a result of planned and approved events on annual basis, as well as in regular reports of specialists from the relevant departments of the RCHP&MC (mass communication, work with communities, prevention of NCDs, etc.).

To collect qualitative indicators, we plan to conduct online surveys among the target audience, as well as interviews and focus group studies in pilot regions. Qualitative and quantitative data are collected and analyzed by the organizational/methodological department. Based on the results of the analysis of quantitative and qualitative indicators, a brief interim analytical report will be prepared periodically to plan further steps to implement the Strategy and prepare recommendations for the final report.

The monitoring results will be included in the agenda of the meetings of the Coordinating Council. The decisions from the meeting are sent to all stakeholders within two weeks. Thus, monitoring is carried out in three main areas of implementation of the Communications Strategy: management, evaluation, and accountability.

M&E methods and tools used in the Strategy implementation process:

- reports according to the approved form, including data on activities carried out by specialists of the HPUs (number of participants, partners, etc.)
- minutes of meetings, recordings of round tables with interested parties and representatives of the target audience
- broadcast information from TV channels and radio stations
- monitoring of work with digital media (views, coverage, number of visits, involvement in social media)
- a sociological survey method allows us to obtain a large amount of M&E data in a short time, at a fairly low cost
- interviews with key informants or focus group discussions, more in-depth research, may cover fewer interested parties, but give more qualitative indicators (achievements and problems, observations, experiences of participants, their attitude to nutrition and feelings).

### **Expected Results of the Communication Strategy Implementation**

1. Ninety percent (90%) of women of reproductive age (pregnant women, young mothers with children under 2 years) in Jalal-Abad and Batken Oblasts will know about the importance of maternal and child nutrition in the first 1,000 days of life.
2. The number of women practicing exclusive breastfeeding in Jalal-Abad and Batken Oblasts will increase by 15 percent (according to the 2018 MICS, 59% in Batken Oblast and 53% in Jalal-Abad Oblast).
3. The number of women taking iron folic acid (IFA) preparations for at least 90 days during pregnancy will increase by 15 percent.
4. The number of children whose nutrition meets the minimum requirements of a varied diet will increase by 15 percent in Jalal-Abad Oblast and by 25 percent in Batken Oblast (according to 2018 MICS, 27% in Batken Oblast and 66% in Jalal-Abad Oblast).
5. The number of women of childbearing age practicing a variety of diets from five food groups (according to SPRING 4/5) will increase.

# Strategy Implementation

In the process of strategic planning, RCHP&MC, at the meeting of the Coordinating Council, is studying the Communications Strategy in-depth and, together with the main actors and partners, making a detailed plan to implement the strategy; determining areas of responsibility and budget; exchanging experience and knowledge; and determining methods, tools, and timing for M&E. The information is discussed at all levels and communicated in a timely manner to each specialist in the health facilities, implementers, and partners of the RCHP&MC. At this stage, management—

- makes decisions on the effectiveness of the use of available resources and on the organizational structure
- revises the Strategy implementation plan in case of unforeseen circumstances.

**Strategy implementation** is a critical process because it is what, if successful, leads to the achievement of the objectives. It is carried out through the development of detailed action plans, information materials, scenarios, training manuals, programs, and budgets and procedures, which can be considered the short- and medium-term plans for the implementation of the Strategy. The main components of successful implementation of the Strategy are as follows:

- The Strategy goals and plans are communicated to all involved executives and partners to make them understand what the organization is trying to achieve, and to involve them in the implementation of the Strategy.
- The management ensures the timely availability of all resources required to implement the Strategy, and creates an implementation plan in the form of targets.
- During the implementation of the Strategy, each level of management completes its tasks and performs the functions assigned to it.

**The evaluation** of the implemented Strategy will answer the question, *will the chosen strategy lead to the achievement of the intended objectives?* If the strategy meets its goals, its further evaluation is carried out in the following areas:

- Compliance of the chosen Strategy with changes in the target audience (awareness, attitudes, behavior).
- Compliance of the chosen Strategy with the potential and possibilities of the RCHP&MC and the partners (organizational readiness).
- Acceptability of the risk included in the Strategy (global pandemic, political instability, natural disasters).

The results of the Strategy implementation are also evaluated through the feedback system (sociological surveys, focus groups, feedback, etc.) and monitoring of RCHP&MC activities, during which the course of the previous stages can be adjusted. M&E activities are included in the action plan and are carried out in the process of implementation and upon its completion.

Changes that are carried out during the implementation of strategies are called strategic changes. To carry out changes, it is necessary to uncover, analyze, and predict the risks in the planning of changes, minimize them, and consolidate the new status quo. The RCHP&MC processes and documents the results of M&E, shares the lessons learned with partners, and uses the lessons learned and recommendations to develop next steps to change social norms and nutrition behavior in the first 1,000 days of a child's life among the population throughout the Kyrgyz Republic.

# Appendix I: Glossary

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Social Norms and Behavior	A socially established rule of behavior that regulates relations between people, social life.
<b>Health Belief Model Theory</b>	<b>A social psychological model of health behavior change designed to explain and predict health-related behavior, especially health care utilization.</b>
Theory of Reasoned Action and Planned Behavior	Explains the relationship between attitudes and behavior. It is mainly used to predict how people will behave based on pre-existing attitudes and behavioral intentions. An individual's decision to engage in a particular behavior is based on their expected outcomes from performing that behavior.
<b>Social Learning Theory (Albert Bandura's Theory)</b>	<b>People in society learn from each other through observation, imitation, and modeling. This theory is a bridge between the theories of behaviorism and cognitive learning as it covers the functions of attention, memory, and motivation.</b>
Behaviorist Theories of Learning	Characterized by the fact that the analysis of the learning process takes into account only the influences (stimuli) that are applied to the learner and his or her responses to these influences.
<b>Cognitive Learning</b>	<b>The term "cognitive" comes from the Latin word <i>cognitio</i> (knowledge, cognition), meaning cognitive, having to do with cognition. Teaching emphasizes traditional cognitive processes: perception, attention, memory, imagination, and thinking.</b>
Social and Behavior Change Communication	An interactive process with communities to develop individualized messages and approaches using various channels of communication to build and develop positive habits and behaviors. The main goal is to promote and support individual, community, and societal behavior change; and support appropriate behaviors.
<b>Target Audience</b>	<b>A group of people, defined according to certain parameters (attributes), which are to be influenced through certain communication channels and tools. It is divided into primary and secondary audiences.</b>
Opinion Maker	A person who has a great influence on the representatives of a particular target audience.
<b>Influencer</b>	<b>Social media user who has a large and loyal audience with authority or understanding of a particular subject. The influencer influences the target group through his own blog or social network account, where he can offer specific content</b>



Above-the-line (ATL)  
Tools

In public relations, advertising is one of the methods to promote products and services of organizations, which means non-targeted mass promotion of the brand in order to increase its recognition among the general public. For this purpose, large-scale advertising on TV, radio, and other media can be used.

**Below-the-line (BTL) Tools**

**Direct work with target groups of the campaign, such as round tables, seminars, press conferences, press tours, and press breakfasts. In theory, these tools mean narrowly focused and highly specialized advertising for a specific group of people with traceable indicators of the effectiveness of investments in promotion for specific target groups (audiences).**

Public Relations (PR)

This is the professional management of information flows between the organization and the public in order to build the reputational capital of a company, organization, political person, party, brand, etc.

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## Annex 2: Behavior Change Communication Activities (Examples)

This table provides examples of activities, tactics, and tools to change behavior. To implement the Communication Strategy, the RCHP&MC Team will consider its capacities and partners to overcome existing barriers and build long-lasting, effective relationships in order to establish an environment conducive to healthy nutrition for mothers and children.

Behavior to Change	Barriers	Positive Factors and Partners' Support	Activities and Tactics Promoting the Changed Behavior
1. Regular visits to doctors during pregnancy according to protocol	<ul style="list-style-type: none"> <li>- Lack of information</li> <li>- Stereotypes (mentality, culture, religion)</li> </ul>	<p><b>Interpersonal communication</b>  <i>HPU, health professionals, birthing classes under the health agencies, VHC, PHC, initiative groups</i></p>	<ul style="list-style-type: none"> <li>- Education; trainings; meetings; consultations; dissemination of information, education, and communication (IEC); campaigns</li> <li>- Inclusion of health and nutrition of pregnant women and children in the agenda of local government authorities' (LGA) meetings, village meetings (jamaats, juma namaz, women's councils, sherine, etc.)</li> <li>- Information and awareness-raising campaign</li> </ul> <p><i>Video, audio, infographics, printed products (banners, booklets, Balaga koshumcha tamak book, etc.), interviews, reports, broadcasts, articles, blogs on social media about nutrition of children and women, messenger channels (telegram chat bot Ene zhana bala)</i></p>
2. Self-monitoring of health (IFA supplementation)	<ul style="list-style-type: none"> <li>- Lack of information</li> <li>- Socio-economic factors</li> <li>- Lack of confidence in health professionals</li> </ul>	<p><b>Community</b>  <i>Family, society, state</i></p> <p><b>Mass media</b>            Media, digital and social media, influencers, bloggers, blogs</p>	
3. Nutritional behavior of pregnant women (adequate nutrition)	<ul style="list-style-type: none"> <li>- Lack of information</li> <li>- Economic factors</li> <li>- Role of other family members in the food</li> </ul>	<p><b>Interpersonal communication</b>  <i>HPR, health professionals, birthing classes under the health agencies, VHC, PHC, initiative groups</i></p>	<ul style="list-style-type: none"> <li>- Education, trainings, meetings, consultations, dissemination of IEC, campaigns</li> </ul>

	<p>budget</p> <ul style="list-style-type: none"> <li>- Family nutrition culture</li> </ul>	<p><b>Community (Advocacy)</b> <i>Family, society, state</i></p> <p><b>Mass media</b> Media, digital and social media, influencers, bloggers, blogs</p>	<ul style="list-style-type: none"> <li>- Inclusion of health and nutrition of pregnant women and children in the agenda of LGA meetings, village meetings (jamaats, juma namaz, women’s councils, sherine, etc.)</li> <li>- Information and awareness-raising campaign</li> </ul> <p><i>Video, audio, infographics, printed products (banners, booklets, Balaga koshumcha tamak book, etc.), press-cafe, interviews, reports, broadcasts, articles, blogs on social media about nutrition of children and women, influencers, bloggers (correct behavior patterns)</i></p>
4. Early start to breastfeeding	<ul style="list-style-type: none"> <li>- Lack of information</li> </ul>	<p><b>Interpersonal communication</b> <i>HPR, maternity hospitals, health professionals, birthing classes under the health agencies, lactation consultants, VHC, PHC</i></p>	
5. Exclusive breastfeeding up to the age of 6 months (up to 2 years)	<ul style="list-style-type: none"> <li>- Lack of information</li> <li>- Excessive advertising of artificial foodstuffs</li> <li>- Role of health professionals</li> <li>- Work</li> <li>- Priorities in the family</li> <li>- Culture, mentality</li> </ul>	<p><b>Interpersonal communication</b> <i>HPR, FMC, maternity hospitals, health professionals, lactation consultants, VHC, PHC</i></p> <p><b>Community (Advocacy)</b> <i>Family, society, state</i></p> <p><b>Mass media</b> Media, digital and social media, influencers, bloggers, blogs</p>	<ul style="list-style-type: none"> <li>- Education, trainings, meetings, consultations, dissemination of IEC, campaigns</li> <li>- Certification of health agencies in Baby-friendly Hospital Initiative ranking</li> <li>- Monitoring of the Kyrgyz Republic (KR) law implementation on the protection of breastfeeding</li> <li>- Organization of round tables, meetings, awareness of employers on the implementation of the law</li> <li>- Inclusion of health and nutrition of pregnant women and children in the agenda of LGA</li> </ul>

			<p>meetings, village meetings (jamaats, juma namaz, women’s councils, sherine, etc.)</p> <p>- Information and awareness-raising campaign</p> <p><i>Video, audio, infographics, printed products (Balaga koshumcha tamak book), press-cafe, interviews, reports, broadcasts, articles, blogs about nutrition of children and women, influencers, bloggers, messenger channels (telegram chat bot Ene zhana bala)</i></p>
<p>6. Introduction of complementary feeding from the age of 6 months</p>	<ul style="list-style-type: none"> <li>- Lack of information</li> <li>- Socio-economic factors</li> <li>- Family nutrition culture</li> </ul>	<p><b>Interpersonal communication</b> <i>HPR, health professionals, VHC, PHC, initiative groups</i></p> <p><b>Community</b> <i>Family, society, state</i></p> <p><b>Mass media</b> Media, digital and social media, influencers, bloggers, blogs</p>	<ul style="list-style-type: none"> <li>- Education, trainings, meetings, consultations, dissemination of IEC, campaigns</li> <li>- Monitoring of the KR law implementation on the protection of breastfeeding</li> <li>- Inclusion of health and nutrition of pregnant women and children in the agenda of LGA meetings, village meetings (jamaats, juma namaz, women’s councils, sherine, etc.)</li> <li>- Information and awareness-raising campaign</li> </ul> <p><i>Video, audio, infographics, printed products (Balaga koshumcha tamak book), press-cafe, interviews, reports, broadcasts, articles, blogs about nutrition of children and women, influencers, bloggers, messenger channels (telegram chat bot Ene zhana bala)</i></p>

7. Adequate child care (through the nutrition prism)	- Lack of information	<p><b>Interpersonal communication</b> <i>HPR, FMC, health professionals, VHC, PHC</i></p> <p><b>Community</b> <i>Family, society, state</i></p> <p><b>Mass media</b> Media, digital and social media, influencers, bloggers, blogs</p> <p><b>Interpersonal communication</b> (in addition to the above mentioned) <i>HPR, FMC, maternity hospitals, health professionals on lactation, VHC, PHC</i></p>	<p>- Education, trainings, meetings, consultations, dissemination of IEC, campaigns</p> <p>- Inclusion of health and nutrition of pregnant women and children in the agenda of LGA meetings, village meetings (jamaats, juma namaz, women’s councils, sherine, etc.)</p> <p>- Information and awareness-raising campaign</p> <p><i>Video, audio, infographics, printed products (Balaga koshumcha tamak book), press-cafe, interviews, reports, broadcasts, articles, blogs about nutrition of children and women, influencers, bloggers, messenger channels (telegram chat bot Ene zhana bala)</i></p>
8. Global pandemic and nutrition			
9. Water, sanitation, and hygiene	- Lack of information	<p><b>Interpersonal communication</b> <i>HPR, FMC, health professionals, VHC, PHC</i></p> <p><b>Community (Advocacy)</b> <i>Family, society, state</i></p> <p><b>Mass media</b> Media, digital and social media, influencers, bloggers, blogs</p>	<p>- Education, trainings, meetings, consultations, dissemination of IEC, campaigns</p> <p>- Inclusion of health and nutrition of pregnant women and children in the agenda of LGA meetings, village meetings (jamaats, juma namaz, women’s councils, sherine, etc.)</p> <p>- Information and awareness-raising campaign</p> <p><i>Video, audio, infographics, printed products (Balaga koshumcha tamak book), press-cafe, interviews, reports, broadcasts, articles, blogs about nutrition of children and women,</i></p>

			<i>influencers, bloggers, messenger channels (telegram chat bot Ene zhana bala)</i>
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## Annex 3: Above-the-Line Channels and Communication Strategy Activities

This table provides channels and tools with monitoring indicators relevant to a mass audience represented by women of reproductive age (15–49 years), pregnant women and their partners, mothers with children up to 2 years of age, their families (husband, children), close relatives (parents of father, parents of mother), employers, partners from civil society, and the private sector.

Channels	Tools	Monitoring (rating)
<b>TV:</b> <b>KTRK, ELTR, NewTV, Yntymak</b>	Preparation and production  Social videos and infographics  TV reports  Ene zhana bala, Dabager broadcast	97 percent of the KR population has a television at home  94 percent of the total number of KR citizens prefer television <sup>20</sup>  72 percent give a positive opinion  Languages preferred the most are Russian (38%) and Kyrgyz (54%)  Preferred types of TV programs are news, feature films, and music videos  According to the average daily audience, OTRK (KTRK) is in first place (15%), KTRK Music is in second (11%). In the south, KTRK is in first place, Yntymak TV is in second <sup>21</sup>
<b>Radio:</b> <b>Kyrgyzstan Obondoru, EL FM, Salam Radio, Tumar FM</b>	Preparation and production, broadcasting  Audio materials  Reports, interviews  Ene zhana bala, Den Sooluk broadcast	In the last six months, 76.1 percent of the KR population listened to the radio  Men listen a little more 60 percent, and women about 55 percent  Older people prefer the radio (35–44 years)

<sup>20</sup> Media literacy level in KR. OFR “Institute of Media Policy” for the fund “Soros Kyrgyzstan”, 2018

<sup>21</sup> Media preferences of the population of Kyrgyzstan (8th wave). M-Vector, Internews Network Representation in the Kyrgyz Republic and Public Foundation “Soros Kyrgyzstan”, 2018

		<p>The radio is generally for listening to music. The second criterion for the choice of radio is the availability and content of radio news</p> <p>In the average weekly audience for the whole of KR, the top three radio stations are Kyrgyzstan Obondoru, Min Kyyal, Evropa Plus. As for the south, these are Kyrgyzstan Obondoru, Tumar FM, EL FM, Salam Radio</p> <p>In general, four major peaks (prime time) of radio listening can be identified for the KR market: first, morning prime time is before noon; second, lunch break prime time from 1 pm to 2 pm; third peak in both years, noon, from 4 pm; and fourth peak, evening, from 7 pm<sup>22</sup></p>
<p><b>Print media and information portals:</b></p> <p><b>Newspaper and online platform Superinfo, online platform and TV Azattyk media, Batken tany, AkiPress</b></p>	<p>Organization and preparation</p> <p>Interviews and publications in electronic and print media</p> <p>Den Sooluk, Paidaluu keneshter, TV slots</p> <p>Ezhe sindile on Azattyk media</p>	<p>The print media audience constituted 49.1 percent of the population</p> <p>Readership among rural populations is higher than among urban (49.4 percent and 43 percent)</p> <p>The proportion of women reading print media on both the Internet and paper versions is higher than that of men</p> <p>The majority of the population aged 35 and over read newspapers (over 50%). The Internet versions, on the other hand, is read more by the population up to the age of 35.</p> <p>The leading print publication is the newspaper Superinfo, which is read by 29 percent of the population. Another popular publication is Vechernii Bishkek, read by 5 percent of those surveyed. At the same time, in each locality there is a significant audience for locally printed publications, such as Batken tany and Daryger.</p>

<sup>22</sup> Media literacy level in KR. OFR “Institute of Media Policy” for the fund “Soros Kyrgyzstan”, 2018



		Kyrgyz is the main language of the population that reads newspapers at 73.8 percent. Russian language publications are read by 23.9 percent of the print media audience.
<p><b>Social media:</b>  <b>Facebook, Instagram, Odnoklassniki,</b>  <b>Youtube, Telegram, WhatsApp</b></p>	<p>Content and updates on the official page of the campaign and social media organization Mykty azyktanuu</p> <p><a href="http://www.med.kg">www.med.kg</a>  <a href="http://www.ds.kg">www.ds.kg</a>          additionally: <a href="http://www.roditeli.kg">www.roditeli.kg</a></p> <p>Blogs, forums on social media:          ene_jana_nariste (30,1 thousand subscribers) and ene_bala (17 thousand subscribers)</p> <p>Influencers, bloggers, young mothers and families:  <b>Gulmira Asanakunova</b>, Ashkana syrlary (110 thousand subscribers)  <b>Anzhelika Bekbolieva</b> (2,5 million subscribers)  <b>Samara Karimova</b>  <b>Ermek Nurbaev</b> (830 thousand subscribers)</p> <p>Creation of a chat bot to assist the specialist on nutrition</p>	<p>69 percent of the KR population use the Internet</p> <p>55 percent of the population in the southern region use the Internet, as opposed to 80 percent in Bishkek.</p> <p>In urban areas, 73 percent of the inhabitants use the Internet, while in rural areas the proportion is only 52 percent.</p> <p>Most users use messenger applications when accessing the Internet (59%), and fewer users visit web news resources (29%).</p> <p>Among news sites, 19 percent of the users most often visit the news portals Super.kg, Azattyk.kg.</p> <p>The most visited social networks are Instagram (1,000,000 users between the ages of 16 and 65), Facebook and Odnoklassniki (700,000 users between the ages of 16 and 65), and V Kontakte (705,446 users between the ages of 16 and 65).<sup>23</sup></p> <p>Young people prefer to receive news content in entertainment form from social networks (images and short videos) via the mobile Internet (48% of the population). They communicate in groups in the WhatsApp application and communities in Instagram (for example omks.kg, which has over 441,000 subscribers).<sup>24</sup></p>

<sup>23</sup> OFR "Institute of Media Policy" for the fund "Soros Kyrgyzstan." 2018. *Media literacy level in KR.*

<sup>24</sup> M-Vector, Internews Network Representation in the Kyrgyz Republic and Public Foundation "Soros Kyrgyzstan." 2018. *Media preferences of the population of Kyrgyzstan (8th wave).*

	<p>“1,000 Days” on Telegram or WhatsApp ene_jana_nariste</p> <p>Video blogs on Youtube</p> <p><b>Blogger journalist</b> Saltanat Adylbek kyzy</p> <p><b>Journalist and mother</b> Sapargul Abdinabi kyzy (BBC)</p> <p><b>Consultant</b> on breastfeeding Elena Mikheeva</p>	<p>Among users of messenger applications, the leader is WhatsApp (96%) and the second-place application is Telegram.</p>
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