



Reducing  
Malnutrition by  
Introducing  
Moringa in  
Mare Brignol

Preventative and  
restorative approach

# Phase 1: November- December 2013

- **Part I: Introduction of Moringa to Mare Brignol Community. (November 2013)**

- Education and Awareness:
  - *Planting and upkeep*
  - Community Seminar
  - Social Marketing (Moringa Ambassadors)
  - Distribution of Educational Material
- Implementation:
  - Planting of Community Gardens as future sources
  - Distribution of seeds and clippings among the community



# Phase 1: November- December 2013

## ○ Part II: Establishing baseline (December 2013)

- Determining Population:
  - 20 most accessible households (~100 individuals)
- Collection of Baseline Data:
  - Full name, Age, Height/Weight, Vitals, Illnesses/Symptoms commonly suffered
- Gauge effectiveness of previous Education: *Planting and upkeep*
  - In person interviews
  - Surveys
- Implementation:
  - Planting 5-10 trees per household
  - Reinforcing information through personal education.
- Deworming Program (Children 1-10)
  - Preventative and recuperative



# Phase 2: May 2014

## Transition education or planting and upkeep towards consumption.

- Collection of same baselines prior the start of consumption:
  - Comparison of data between December and May prior the start of consumption to measure changes unrelated to Moringa.
- Propose Incentives for family with healthiest plants:
  - Creates motivation to continue growing and start consuming among the community.
- Transition education towards consumption:
  - How to prune plant
  - How to consume
    - Dosage
    - Ways to consume
      - Drying leaves
- Implementation:
  - Create more community gardens
  - Plant more in each household
- Deworming Program (Children 1-10)
  - Preventative and recuperative



# Phase 3: December 2014 – May 2015

## Measure Impact of Moringa in Mare Brignol

- Collection of data
  - 6 and 12 months after consumption has begun.
  - Measure:
    - HAZ (Height/Age Z-scores)
    - WAZ (Weight/Age Z-scores)
    - BMI
    - Overall Health
      - Vitals
      - Symptoms reports
- Continue Incentives for family with healthiest plants and with most health improvement:
  - Increase motivation to continue growing and consuming Moringa among the community.
- Reinforce importance of consumption and previous education
- Implementation:
  - Use of surveys to acquire data
- Deworming Program (Children 1-10)
  - Preventative and recuperative



# Future Goals

- ① Continue Collection of Data and Education
- ② Emulate Tap-Tap project
- ③ Expand to more Households
- ④ Create School Projects
- ⑤ Have enough trees and harvest to implement powder production
- ⑥ Create a micro-economy based on Moringa leaves/powder sales
- ⑦ Spread to adjacent communities
- ⑧ Become part of the Moringa Network



# Methods to Gather Data

- Surveys