A review of nutrition-related service delivery packages: What they train providers to deliver

Research summary

By Sascha Lamstein and Kelsey Torres

Sascha Lamstein is a senior technical advisor for the United States Agency for International Development Advancing Nutrition.

Kelsey Torres is a technical project officer for the United States Agency for International Development Advancing Nutrition project.

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What we know: A range of nutrition-related service delivery packages exists (including training materials, job aids and monitoring and supervision tools) which aims to increase coverage of nutrition and health services to infants and young children.

What this article adds: Nutrition service delivery packages are rarely rolled out at scale, resulting in inconsistency of services delivered within and between countries. The United States Agency for International Development (USAID) Advancing Nutrition project reviewed six prominent, globally recognised service delivery packages to enable government and non-governmental implementing partners and their programme managers to better harmonise, combine or adapt the packages or to introduce, strengthen or expand them. The results of the review highlight the need to promote responsive caregiving and early learning, supplement health worker training with counselling skills to ensure that health workers can tailor counselling to individual breastfeeding challenges, particularly in emergency contexts and, depending on context, to expand training to encourage reductions in the intake of sugarsweetened beverages, salt, processed meats and high-fat foods with limited nutritional value and increases in the consumption of unprocessed or minimally processed fruit, vegetables, legumes and animal-source foods.

Background

To increase coverage of the nutrition and health needs of infants and young children, governments, donors and implementing organisations have developed a range of service delivery packages – often including training materials, job aids such as counselling cards or decision algorithms and monitoring and supervision tools. Unfortunately, these service delivery packages are rarely rolled out at scale and, therefore, services are inconsistent across countries and even regions within the same country (Lutter et al., 2011; Gillespie et al., 2015; WHO, 2018; Development Initiatives, 2020). In response, the United States Agency for International Development (USAID) Advancing Nutrition project reviewed prominent, globally recognised service delivery packages to enable government and non-governmental implementing partners and their programme managers to better harmonise, combine or adapt the packages or to introduce, strengthen or expand them. The review also focuses on assessment, treatment and counselling knowledge and skills that providers are taught to support infant and young child nutrition (IYCN).

This paper summarises the findings from our review of six of those packages, detailed in Table 1.

While all the packages reviewed focus on front-line services, they have distinct target audiences, objectives, intended beneficiaries and trainees.

Findings

Assessment of nutritional status and development milestones

Providers are taught to use a variety of measures of the nutritional status for children under five years of age: mid-upper arm circumference (CMAM/MAMI, NACS and CNCC [Caring for the Sick Child course only]), weight-for-length/height (CMAM/MAMI and NACS), weight-for-age (CMAM/MAMI and IMNCI) and bilateral pitting oedema of the feet (CMAM/MAMI and NACS). Only the IMNCI training suggests assessing children for vitamin A deficiency and classifying anaemia. The CMAM/MAMI, NACS and IMNCI packages teach providers to assess children for anaemia by looking at the palmar pallor. The CMAM/MAMI package is the only one that teaches providers to assess children for feeding difficulties (e.g., cleft lip or palate, tongue tie, ab-

normal tone or posture, excessively open/clenched jaw, unable to support head or poor trunk control, body stiff and hard to move or coughing and eye tearing while feeding [signs of unsafe swallowing]). Only the NACS training for facility-based providers and the CNCC Caring for the Newborn at Home course train providers to assess birth weight and classify low birth weight. Only the CMAM/MAMI training and the CNCC Caring for the Newborn at Home course teach providers to assess breastfeeding positioning and technique.

Treatment of anaemia and micronutrient deficiencies and the management of malnutrition

The C-IYCF and ENA/EHA packages focus exclusively on teaching providers to counsel caregivers of children under two years of age on optimal nutrition practices. Only the CMAM/MAMI, IMNCI and NACS training packages teach providers how to treat malnutrition and provide iron and vitamin A supplements. The IMNCI training also teaches providers to treat a number of common childhood illnesses, demonstrate optimal breastfeeding positioning and treat breastfeeding problems.

Counselling, promotion and support are critical for improving IYCN

For quality counselling, providers need a number of interpersonal communication (IPC) skills and to be familiar with priority behaviours. The C-IYCF training, as well as the ENA/EHA and NACS training for health workers, teach almost all the IPC skills needed for counselling. The IMNCI training, ENA training for community workers, the NACS training for community volunteers and CMAM/MAMI package teach relatively few counselling skills.

Providers are also taught to model, promote and support specific behaviours during health facility visits, home visits, mothers’ group meetings and/or other events. Some of the packages provide...
Table 1

<table>
<thead>
<tr>
<th>#</th>
<th>Title of the service delivery</th>
<th>Acronym in use</th>
<th>Reference</th>
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<tbody>
<tr>
<td>2.</td>
<td>Community-Based Infant and Young Child Feeding Counseling Package</td>
<td>C-IYCF</td>
<td>UNICEF, 2012</td>
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<td>3.</td>
<td>Community-Based Management of Acute Malnutrition Management of At Risk Mothers and Infants</td>
<td>CMAM</td>
<td>FANTA, 2018</td>
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<td></td>
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References


Emergency Nutrition Network (ENN), GOAL, London School of Hygiene and Tropical Medicine (LSHTM), and Save the Children. (2018). C-MAM Tool. Ver. 2. Oxford: ENN.


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Emergency Nutrition Network (ENN), GOAL, London School of Hygiene and Tropical Medicine (LSHTM), and Save the Children. (2018). C-MAM Tool. Ver. 2. Oxford: ENN.


Although breastfeeding counselling is included in almost all of the training packages, guidance on how to deal with breastfeeding challenges was less common. Trainers may wish to look at the MAMI tool (which goes further than other packages) and seek supplemental materials (such as the forthcoming WHO training on breastfeeding counselling and the Global Health Media videos on breastfeeding) to ensure that health workers are adequately trained to tailor the counselling to personal breastfeeding challenges, especially in an emergency context.

Depending on context, additional supplementary training may be required to encourage reductions in the intake of sugar-sweetened beverages, salt, processed meats and high-fat foods with limited nutritional value and increases in the consumption of unprocessed or minimally processed fruit, vegetables, legumes and animal-source foods.

Conclusion

This review has demonstrated the abundance of packages of materials for the delivery of nutrition services for the prevention and treatment of malnutrition – both underweight and overweight – and included the multitude of micronutrient deficiencies. It has also drawn attention to the need to harmonise, sustain, scale and strengthen these in certain critical areas including breastfeeding support, overcoming breastfeeding challenges, responsive care and early learning as well as adaptations needed when working with children with disabilities.

For more information please contact Sascha Lamstein at sascha_lamstein@jsi.com

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