Nutrition Reference Guide
CORE Group’s Nutrition Working Group

coregroup  Chemonics  CRS
CATHOLIC RELIEF SERVICES
## INTRODUCTION

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<td>Standardized Monitoring and Assessment of Relief and Transitions</td>
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PREFACE

There are many tools and resources available for designing, implementing, and evaluating nutrition programs. However, CORE Group Nutrition Working Group members did not have one place to go to when determining which nutrition-specific tools and approaches to use for programming and research. Consequently, members expressed an interest in developing a reference guide of nutrition-specific tools and approaches, information on how and when to use them, and special considerations for their use. This reference guide meets this need. It is targeted to program designers and technical staff among CORE Group members, as well as others working in the area of nutrition globally. Its purpose is to guide nutrition actors in selecting the most appropriate design, research, implementation, and evaluation tools, based on their program objectives, context, and available resources.

ACKNOWLEDGMENTS

We are grateful for contributions and reviews from CORE Group Nutrition Working Group members and representatives of organizations whose tools are included in this guide. This document would not have been possible without the leadership and effort of Jennifer Burns (Catholic Relief Services), Mai-Anh Hoang and Camilla Peterson (Chemonics), and Judiann McNulty (independent consultant).

PHOTO CREDITS


Back Cover Photo: © 2013 Krishnas, Courtesy of Photoshare. Local vendor sells vegetables at an outdoor market in Howrah, India.

PHOTO DISCLAIMER

Photographs used are for illustrative purposes only and do not necessarily represent the tools, resources, or approaches documented in this guide or recommended by the CORE Group Nutrition Working Group.

GRAPHIC DESIGN

Holly Collins
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DESCRIPTION, PURPOSE, AND AUDIENCE

The aim of this interactive tool and its associated user guide is to support context assessment for project design — whether creating new projects or amending existing ones. It intends to strengthen the link between agricultural interventions and nutritional outcomes, focusing on how to gather new information on the various components that link agriculture and nutrition. The guide explains the basic steps of context assessment and presents a variety of primary data collection tools. While some parts of the guide are USAID-specific, it is also intended for a broader audience, including local and international NGOs, donors, and multinational organizations that are interested in designing agriculture-nutrition projects.

SPECIFIC OBJECTIVES AND APPLICATIONS

The guide aims to support the process of choosing the most appropriate tool for a given context and design purpose. It explains the basic steps of context assessment and briefly summarizes each featured tool, including content, application, and related resources. Tool summaries are intended to facilitate an informed choice of which tool is most appropriate based on assessment objectives, timing, and available budget.

RESOURCES

The guide is available on the website: Part 1 outlines the basic steps of context assessment and Part 2 focuses on how to gather new information on the various components that link agriculture and nutrition. The website also features an interactive conceptual pathway that guides tool selection. All tools are provided in an online database and downloadable format.

SPECIAL CONSIDERATIONS

The guide does not offer new tools for contextual assessment; rather, it encourages use of existing manuals and handbooks to provide practical guidance on assessing the various factors along the agriculture-nutrition path.

This tool was developed under the SPRING project in 2015. More information can be found at: www.spring-nutrition.org/publications/tools/context-assessment-tool-locator
DESCRIPTION, PURPOSE, AND AUDIENCE

Determining BMI is a cheap, reliable way for health workers to identify malnutrition in clients. The BMI wheel was created to make calculating BMI and BMI-for-age quicker and easier for health workers in developing countries. Using this time-saving tool, health workers can quickly determine BMI and nutritional status without calculations. Results can then be shown to clients and used for counseling.

SPECIFIC OBJECTIVES AND APPLICATIONS

All instructions are printed directly on the wheel. After a client's height and weight are taken, measurements are aligned on the wheel, which displays the BMI (for adults aged 19 years or older) or BMI-for-age (for boys and girls aged five to 18 years). BMI classifications are also printed on the wheel, and are used to determine nutritional status once BMI has been calculated.

RESOURCES

Design files for the BMI wheel are available in English, Spanish, and Portuguese for organizations interested in printing the wheel for their own use. Users can access the files through a sublicense agreement with FHI 360. Interested organizations should review and sign the sublicense agreement available on the website, and email a signed copy to fantamail@fhi360.org. FHI 360 will then provide the design files that can be given to a professional printer to print and assemble the wheels. To ensure accuracy of the wheel, design files cannot be modified other than for translation.

SPECIAL CONSIDERATIONS

This tool is not to be used for children under five years of age or for pregnant or lactating women.

The wheel was developed by the USAID-funded FANTA project and the Boston Children’s Hospital. More information about the BMI Wheel can be found at: www.fantaproject.org/tools/body-mass-index-bmi-wheel
DESCRIPTION, PURPOSE, AND AUDIENCE

This course is designed to provide health workers with the skills needed to support mothers and their children to breastfeed optimally. The course is for health workers who care for mothers, infants, and young children in maternity facilities, hospitals, and health centers. This includes midwives, community health nurses, pediatric nurses, and doctors — particularly those who are working at the first level of health care.

SPECIFIC OBJECTIVES AND APPLICATIONS

The course aims to enable health workers to develop the clinical and interpersonal skills needed to support optimal breastfeeding practices and help mothers to overcome difficulties. It aims to address the urgent need to train maternal and child health workers in all countries on the skills needed to support and protect breastfeeding. The training is for 24 participants and six trainers, and takes 40 hours. It can be conducted intensively over five days or spread out over a longer period. There are 33 sessions, which are structured around four two-hour clinical practice sessions. Training is conducted partly with the whole class together and partly in smaller groups. An additional 40 hours is necessary to prepare trainers; this usually takes place in the week preceding the course for participants.

RESOURCES

The training package is available for download and includes guides for the course director and trainers, a participants’ manual, a booklet with overhead figures, a slide book, checklists, and other annexes. Materials are available in English, French, Russian, and Spanish.

SPECIAL CONSIDERATIONS

Materials are designed to make it possible for all trainers, even those with limited experience of teaching the subject to conduct up-to-date and effective courses.

The course was developed in 1993 by WHO and UNICEF. Course materials are available at: www.who.int/maternal_child_adolescent/documents/who_cdr_93_3/en/
DESCRIPTION, PURPOSE, AND AUDIENCE

C-MAMI gives health workers a format to assess, identify/classify, and manage uncomplicated acute malnutrition in infants under six months of age in the community. Modeled on the Integrated Management of Childhood Illness (IMCI) approach, C-MAMI helps apply the latest World Health Organization (WHO) technical guidance complementary to existing national and international guidance and protocols. C-MAMI informs program design and resource needs, and is a key resource for those designing, implementing, and resourcing care packages for infants under six months in nutrition and health at the national and international level.

SPECIFIC OBJECTIVES AND APPLICATIONS

C-MAMI is designed for managing uncomplicated cases of acute malnutrition. (Complicated cases should be referred for inpatient care per existing national protocols). C-MAMI incorporates assessment and actions considering anthropometry, feeding, clinical factors, and psychosocial factors affecting infants and mothers. The exact location for delivery of C-MAMI services will vary by context and staff capacity.

RESOURCES

A detailed step-by-step C-MAMI tool, organized into assessment and management sections, is available to download as a PDF. A user-friendly checklist and feedback survey, as well as background research, are also available on the website.

SPECIAL CONSIDERATIONS

This tool is a working document and a first step to filling a programming gap in emergency and non-emergency contexts. Piloting and evaluation of C-MAMI is underway. The developers recognize the need for user-friendly program tools to support implementation and map out capacity development and associated training needs. Developers also recognize the need to develop meaningful data collection and monitoring to inform programming and wider learning.

C-MAMI was developed by the Emergency Nutrition Network and the LSHTM, with expert input from programmers funded by the Office of U.S. Foreign Disaster Assistance, Irish Aid, and Save the Children. Access the website and related resources at: www.ennonline.net/c-mami
DESCRIPTION, PURPOSE, AND AUDIENCE

This is a package of generic tools for programming and capacity development on community-based IYCF counseling in diverse country contexts. The package of tools guides local adaptation, design, planning, and implementation of community-based IYCF counseling and support services at scale. It also contains training tools to equip community workers (via an interactive and experiential adult-learning approach) with relevant knowledge and skills on recommended breastfeeding and complementary feeding practices for children up to 24 months; enhance their counseling, problem solving, negotiation, and communication skills; and prepare them to effectively use counseling tools and job aids.

SPECIFIC OBJECTIVES AND APPLICATIONS

The package aims to support community-level IYCF interventions to improve survival, growth, and development of children with equity. It provides information helpful for addressing suboptimal IYCF practices and generating support, counseling, and accurate information for caregivers in the poorest and most vulnerable communities.

RESOURCES

The package includes a planning guide, adaptation guide, and facilitator guide; training aids; participant materials; counseling cards for community workers; a key messages booklet; brochures on how to breastfeed your baby, nutrition during pregnancy and breastfeeding, and how to feed a baby after six months; and a supervision, mentoring, and monitoring module. Materials are available in English and French. Examples of materials and adaptations from selected countries and partners are also available.

SPECIAL CONSIDERATIONS

Package components are living documents and are periodically updated.

This package was developed by UNICEF. Tools are available to download at: www.unicef.org/nutrition/index_58362.html
**DESCRIPTION, PURPOSE, AND AUDIENCE**

This Microsoft Excel-based tool estimates the costs of establishing, maintaining, and/or expanding services for CMAM at national, subnational, and district levels. It helps program managers to determine whether CMAM plans are financially feasible, to identify necessary resources, and to formulate effective implementation plans. The tool is geared toward individuals and organizations responsible for designing and financing CMAM. However, any health and nutrition agency considering starting or strengthening CMAM would benefit from the tool.

**SPECIFIC OBJECTIVES AND APPLICATIONS**

The tool’s objective is to estimate the costs of establishing, maintaining, and/or expanding services for CMAM at national, subnational, and district levels. The tool is essentially a set of linked Excel spreadsheets. Users enter key country-specific data, such as statistics on malnutrition, distances between administration facilities, and prices of goods. The tool automatically processes these (and other data fixed by the tool) to calculate CMAM resource requirements and costs for a geographic region and time defined by the user. Costs are calculated from the quantity of resources (number of units) and the price per unit.

**RESOURCES**

Four documents comprise the complete package: the CMAM Costing Tool, a user’s manual, a case study based on the tool’s application in Ghana, and practical exercise answers. Materials are available in English and French.

**SPECIAL CONSIDERATIONS**

The tool deals only with the management of severe acute malnutrition. It is designed primarily for use at the central level, though it is possible to focus on provinces, regions, districts, or CMAM sites.

*CMAM Costing Tool resources were developed by FHI 360 under the FANTA project with funding from USAID. To access the available resources, visit: [www.fantaproject.org/tools/cmam-costing-tool](http://www.fantaproject.org/tools/cmam-costing-tool)
DESCRIPTION, PURPOSE, AND AUDIENCE

The CMAM Toolkit was designed as a collection of tools needed by emergency nutrition program managers to begin implementation of CMAM programs, either at the onset of a crisis or during a protracted crisis. The toolkit was envisioned as an easy-to-use compilation of existing tools and resources, thus allowing managers to rapidly access needed inputs and begin implementation as soon as possible.

SPECIFIC OBJECTIVES AND APPLICATIONS

CMAM is a method for treating acute malnutrition in young children using a case-finding and triage approach. Using the CMAM method, malnourished children receive treatment suited to their nutritional and medical needs. This toolkit intends to serve as a resource for emergency nutrition personnel responsible for program design, implementation, and management in an emergency context.

RESOURCES

The toolkit guides users through planning, implementation, and assessment of community-based emergency nutrition programs. It includes tools for caseload estimation, reporting form templates, staffing descriptions, supervision checklists, and protocols. Accompanying the CMAM Toolkit is an interactive 30-minute online tutorial that provides a comprehensive introduction to the toolkit, outlines programming tools, provides instructions on estimating caseloads and supplies, and offers directions to tools needed for rapid implementation.

SPECIAL CONSIDERATIONS

The toolkit is not meant to be used as a replacement of national protocols. When starting up any emergency nutrition program, the first resource for program managers is the Ministry of Health. The toolkit was updated in April 2017.

This toolkit was developed by Save the Children, supported by The TOPS Program with USAID funding. Access the toolkit at: https://sites.google.com/site/stcehn/documents/cmam-toolkit
DESCRIPTION, PURPOSE, AND AUDIENCE

Standardized Monitoring and Assessment of Relief and Transitions (SMART) Methodology is a standardized survey method for measuring mortality, nutritional status, and food security in humanitarian and development contexts. SMART assists field workers to conduct surveys, then analyze, interpret, and report on findings to support decision-making. Emergency Nutrition Assessment software is a user-friendly analytical program recommended by SMART. The tool helps ensure SMART nutrition assessments and mortality rate calculations are reliable, standardized, and simple to perform. It focuses on the most important indicators (anthropometric and mortality data), checks plausibility of entered data, and generates automatic reports. The tool is continually updated based on user feedback and emerging best practices.

SPECIFIC OBJECTIVES AND APPLICATIONS

The tool facilitates SMART survey planning, data collection, analysis, and reporting. It has automated functions for sample size calculations, sample selection, quality and plausibility checks, standardization for anthropometric measurements, and report generation with automatic analyses.

RESOURCES

Emergency Nutrition Assessment 2011 is available to download free online, along with a software user manual. A SMART manual and capacity building toolbox is also available. The toolbox includes an e-learning series, as well as other training packages. A global pool of SMART master trainers and emergency support is also available.

SPECIAL CONSIDERATIONS

Emergency Nutrition Assessment should be complemented with qualitative information (e.g., discussions with key informants) to provide contextual understanding. It also has limited capacity to analyze additional variables collected and manage data from other programs. A hybrid Emergency Nutrition Assessment/Epi Info software package is available for expanded functionality.

SMART is an interagency initiative launched in 2002 by a network of organizations and humanitarian practitioners. SMART materials were developed by ACF Canada, with financial support from USAID. For further information on SMART, please visit: www.smartmethodology.org. Additional information on ENA software can be found at: www.nutrisurvey.de/ena2011

DESCRIPTION, PURPOSE, AND AUDIENCE

Mentor grandmothers facilitate discussions with their peers to enhance maternal and child health practices. This manual and guide are designed to train grandmothers to serve as dialogue group mentors and to facilitate discussions on family care and maternal and child nutrition.

SPECIFIC OBJECTIVES AND APPLICATIONS

The manual provides step-by-step guidance on facilitating a three-day workshop to train grandmothers as dialogue group mentors. Workshops use group activities, focused discussions, brainstorming, and roleplaying to introduce issues like breastfeeding, complementary feeding, and prevention of mother-to-child transmission of HIV, as well as facilitation skills and practice. After training, grandmothers will be more informed about best health practices and will be able to more successfully engage mothers, children, and fathers toward better feeding and care practices. The guide is designed to provide dialogue group mentors (grandmothers) with key questions to encourage lively discussions around the topics covered in workshops.

RESOURCES

The manual provides a training schedule, a list of necessary materials, lesson plans, handouts, and test materials. The mentor guide covers topics such as mentor responsibilities, preparing for meetings, and setting ground rules, and outlines key discussion points. Both resources are available in English and Portuguese.

These materials were developed under USAID’s Infant & Young Child Nutrition Project, which was implemented by PATH in collaboration with CARE, The Manoff Group, and University Research Co., LLC. They can be downloaded from: www.iycn.org/resource/engaging-grandmothers-to-improve-nutrition-a-training-manual-and-guide-for-dialogue-group-mentors
DESCRIPTION, PURPOSE, AND AUDIENCE

This document provides a consolidated package of 24 WHO guidelines on nutrition interventions targeting the first 1,000 days of life. Focusing on ENA can help policymakers to reduce infant and child mortality, improve physical and mental growth and development, and improve productivity. This approach looks at how to integrate ENA at critical stages in the life cycle of women and children, within commonly available facility and community contact points, to improve the quality of nutrition services and to promote positive changes in family-based feeding and caring behaviors. The document covers different aspects of infant feeding in normal or exceptional circumstances, such as emergencies, HIV infections, and diarrhea, as well as nutrition for women.

SPECIFIC OBJECTIVES AND APPLICATIONS

Part 1 presents the interventions currently recommended by WHO, summarizes the rationale and the evidence for each, and describes the actions required to implement them. Part 2 analyzes community-based interventions aimed at improving nutrition and discusses how to deliver effective, integrated interventions. It also shows how the actions described in Part 1 have been implemented in large-scale programs in various settings and what the outcomes have been.

RESOURCES

The package is available to download in English and Farsi. To provide real-time updates, WHO also launched the electronic Library of Evidence on Nutrition Actions—a simple web-based tool for academics, policymakers, health workers, and development partners containing links to WHO evidence-informed nutrition recommendations.

SPECIAL CONSIDERATIONS

Dissemination of ENA and assistance for policymakers is needed to adapt the guidance to country context. Additional operational tools are often required, including analysis of cost-effectiveness.

This document was produced by WHO. It can be accessed at: [www.who.int/nutrition/publications/infantfeeding/essential_nutrition_actions/en](http://www.who.int/nutrition/publications/infantfeeding/essential_nutrition_actions/en)
DESCRIPTION, PURPOSE, AND AUDIENCE

This framework is a tool for advocacy, planning, training, and delivery of an integrated package of interventions to reach the high coverage (> 90 percent) needed to achieve public health impact. The materials help strengthen the capacity of health workers, nutrition managers, and community workers to deliver and promote evidence-based essential nutrition and hygiene practices. Implementation emphasizes a lifecycle approach, and includes nutrition-specific and nutrition-sensitive platforms, as well as hygiene actions inextricably linked to improved nutrition.

SPECIFIC OBJECTIVES AND APPLICATIONS

The training guide for health workers/nutrition managers introduces key hygiene and nutrition information. The guide applies a participatory approach, emphasizes exercises that improve counseling skills, addresses nutrition for HIV, and links prevention of malnutrition with treatment. It also trains nutrition managers to provide supportive supervision to health and community workers. Its accompanying reference manual provides supporting information that helps improve delivery. The training guide for community workers builds capacity to deliver and promote essential nutrition and hygiene actions. It introduces technical content in hands-on sessions to practice counseling and negotiation, and guides community workers in understanding why and how to integrate messages on nutrition and hygiene into programs. Its accompanying reference manual is a job aid covering key concepts for each practice, as well as ideas on using homestead food production to improve household diet.

RESOURCES

All resources are available online in English and French. Available resources include the training guides and reference manuals for health workers/nutrition managers and community workers; a framework summary document; a flyer summarizing tools; and case studies.

SPECIAL CONSIDERATIONS

Materials were updated in 2014.

*Multiple actors and programs contributed to updating these training materials, with funding provided by USAID. For more information and to access the materials, please visit: [www.coregroup.org/enaeha](http://www.coregroup.org/enaeha)*
DESCRIPTION, PURPOSE, AND AUDIENCE

Formative research builds understanding on different characteristics, interests, and needs in a target population. This guide is primarily targeted to people who are planning programs to improve maternal, infant, and young child nutrition and household food security. It provides the basic information and tools needed to conduct and analyze qualitative research to improve nutrition programming through step-by-step instructions on using tools such as key informant and focus group interviews, community mapping, social network mapping, and food market analysis.

SPECIFIC OBJECTIVES AND APPLICATIONS

This guide focuses on promoting qualitative methods to develop more effective nutrition programming. It aims to define key problems in maternal and child nutrition and feeding practices and local food insecurity; provide an introduction to conducting formative research; familiarize users with qualitative methods; and offer step-by-step instructions on how to plan, conduct, and analyze formative research. Activities in this guide are divided into seven sections: barrier analysis, mapping, time analysis, linkages and relationships, prioritization/quantification, action planning, and experiential. Most activities are highly visual, allowing for participation of people who are illiterate.

RESOURCES

The complete guide is available for download. Activities are organized into modules, and each module contains an activity overview, step-by-step instructions on data collection and using the activity, and instructions on performing basic qualitative data analysis.

SPECIAL CONSIDERATIONS

The guide may be combined with quantitative data collection methods, such as baseline surveys, to provide additional details. Although the methods reviewed in this guide are focused on infant and young child feeding, maternal nutrition, and food security, they can be applied to numerous topics. Research should be planned carefully to ensure only essential data is collected.

This guide was developed by CARE and published in 2014. It can be downloaded from: http://fsnnetwork.org/formative-research-guide-support-collection-and-analysis-qualitative-data-integrated-maternal-and-child-nutrition-program-planning
DESCRIPTION, PURPOSE, AND AUDIENCE

This document offers technical guidance for people working to translate optimal practices into feasible actions and programs for a given country or region. It is intended to increase awareness and understanding of optimal maternal nutrition practices. The document guides the development and design of a formative research process for maternal nutrition programs or interventions.

SPECIFIC OBJECTIVES AND APPLICATIONS

The guidance presents different elements of creating and implementing formative research for maternal nutrition including: understanding the general nutrition context by using all readily available data and information; choosing the best methods and participants; and developing effective research guides and tools.

RESOURCES

The complete guide is available for download. It also includes examples of formative research tools and plans, and offers suggestions for analytical tools and formats.

SPECIAL CONSIDERATIONS

This guidance is not a “how-to” manual for planning and conducting formative research; however, supplementary materials relating to these topics are included in its annexes.

The guide was developed under USAID’s Infant & Young Child Nutrition Project, which was implemented by PATH in collaboration with CARE, The Manoff Group, and University Research Co., LLC. It can be downloaded from: www.iycn.org/resource/guidance-for-formative-research-on-maternal-nutrition
DESCRIPTION, PURPOSE, AND AUDIENCE

This user-friendly reference guide provides up-to-date information on anthropometry and how to use it to assess and understand the nutritional status of individuals and communities. It provides comprehensive information on the importance of good nutrition, common nutrition conditions, anthropometric measurements and indices, and data interpretation, as well as measurement protocols and information on equipment selection. The guide is intended to help development practitioners (who implement or oversee food security, nutrition, or health programs) better collect, understand, and use anthropometric data in their programs.

SPECIFIC OBJECTIVES AND APPLICATIONS

The tool offers guidance that can be used as part of providing regular health services in a clinic or community setting, or for conducting anthropometry as part of a population-based survey. It is also useful for anyone who is engaged in improving or understanding food security, nutrition, or health in developing countries, and wishes to better understand the information provided through anthropometry. The guide provides anthropometric guidance for all age groups from birth to old age.

RESOURCES

The guide is available to download free online. It is organized into six modules: anthropometry basics, children from birth to five years of age, children and adolescents five to 19 years of age, pregnant and postpartum women and girls, adults 18 years and older (non-pregnant, non-postpartum), and measurement protocols and equipment.

SPECIAL CONSIDERATIONS

The guide focuses on anthropometric measurements commonly used in low-resource settings that require affordable and accessible equipment. It does not discuss measurements that require equipment often unavailable in low-resource settings. The guide does not provide information on planning surveys. The guide is not intended to serve as a stand-alone training manual; however, its guidance and protocols can be used as a resource to inform development of training materials.

The guide was developed by FHI 360 under the FANTA project with funding from USAID. The guide can be downloaded at: www.fantaproject.org/tools/anthropometry-guide
DESCRIPTION, PURPOSE, AND AUDIENCE

This package of resources helps orient emergency relief staff, program managers, and technical staff involved in planning for and responding to emergencies at the national and international level.

SPECIFIC OBJECTIVES AND APPLICATIONS

The package supports training and learning related to IYCF-E.

RESOURCES

All materials in the orientation package are available online. Resources include self-paced e-learning lessons, preparation for face-to-face training, or group exercises; training resources such as PowerPoint presentations and practical training exercises; technical notes to support online lesson content and training resources; a bank of other key resources; and an evaluation guide with pre- and post-assessment questions and an evaluation strategy.
DESCRIPTION, PURPOSE, AND AUDIENCE

The Length Mat was designed to raise community awareness of stunting and to facilitate easy stunting detection at the community level. It is a portable mat made from durable plastic that is marked with measurements for boys and girls. Markings denote cutoff lengths for children aged six, 12, and 18 months that indicate stunting (defined as < -2SD of the current WHO standard). Pre-identified demarcations avoid the need for looking up each child’s measurements on a growth table, enabling the status of the child to be quickly and clearly known. The six-month interval between cut-offs allows enough time for children's length to be affected by their diet or health status.

SPECIFIC OBJECTIVES AND APPLICATIONS

The mat provides a visual cue to determine if a child meets normal height-for-age measurements. It aims to overcome difficulties normally associated with collecting anthropometric measurements to improve detection of stunting. By building awareness of stunting at the community level, it enables community health workers and parents to address health and nutrition practices that promote child growth. It also helps identify children needing referrals for additional services and counseling.

RESOURCES

Please contact The Manoff Group for more information.

SPECIAL CONSIDERATIONS

The length mat is a community (non-clinical) tool that requires country adaptation.
DESCRIPTION, PURPOSE, AND AUDIENCE

Link NCA is a structured, participatory, and holistic study based on the UNICEF causal framework that is designed to build evidence-based consensus around the plausible causes of undernutrition in local contexts. It uses a mixed-method approach to identify causes of undernutrition and to support appropriate responses in various environments. Through a sequential process, it collects and triangulates information to determine undernutrition causality. While mostly used by nutrition practitioners, it is available to all organizations involved in the fight against undernutrition or other multisector responses. It works best in local (typically district-level) and stable contexts, when practitioners identify information gaps and situational understanding needs before tailoring programs.

SPECIFIC OBJECTIVES AND APPLICATIONS

Link NCA has six analytical and operational objectives: determine prevalence and severity of wasting and/or stunting; determine prevalence of known risk factors; identify causal pathways of undernutrition; assess changes to stunting and/or wasting and their causes over time, seasonally, or due to recent shocks; identify causal pathways that likely explain most cases of undernutrition; and recommend programming improvements.

RESOURCES

The Link NCA Technical Unit at Action Against Hunger can offer technical and training support to organizations wishing to undertake Link NCA depending on the availability of trainers and funds. An overview and set of guidelines for Link NCA is available in English, French, and Spanish. An indicator guide and pathways module are available on request.

SPECIAL CONSIDERATIONS

Quantitative data collection follows SMART guidance. All Link NCA final reports should be validated by the Link NCA Technical Unit. Link NCA implemented by partners should be conducted with the Link NCA Unit to ensure correct application of the method and high-quality results. The Link NCA process requires approximately four to five months to complete.

Link NCA was developed by Action Against Hunger, with input from external technical experts. More information is available at: www.linknca.org/index.htm
DESCRIPTION, PURPOSE, AND AUDIENCE

Health workers often lack information on how to counsel pregnant and lactating women on increased nutrient requirements, and on how to meet these through dietary and behavioral changes and other health practices. Health workers also experience uncertainty on how to translate general requirements into individual recommendations. Maternal Nutrition During Pregnancy and Lactation: A Dietary Guide attempts to fill this information gap. The guide informs health workers on how to counsel pregnant and lactating women to enable them to meet increased nutrient requirements.

SPECIFIC OBJECTIVES AND APPLICATIONS

The guide is designed to help ensure women’s nutrient needs are met during pregnancy and lactation. It fills health worker gaps in information on nutrition in pregnancy and lactation, and helps translate general requirements into individual recommendations. It also helps programs develop appropriate protocols and counseling materials on maternal nutrition.

RESOURCES

The guide includes nutrition recommendations and supporting interventions; weight gain recommendations for pregnancy; recommended micronutrient supplementation during pregnancy and lactation; and a summary of increased nutritional needs during pregnancy and lactation, with actionable advice on how to meet them. Links to additional maternal nutrition resources are also provided.

This guide is a joint publication of the LINKAGES Program and the CORE Group Nutrition Working Group. Support for LINKAGES was provided to the Academy for Educational Development by USAID. Find more at: www.coregroup.org/maternal-nutrition
**DESCRIPTION, PURPOSE, AND AUDIENCE**

MDD-W is a global dietary diversity population-level indicator for assessing the quality of women’s diets. It reflects women’s consumption of at least five of 10 food groups throughout the previous day and night. Research has shown that women who consume at least five of the 10 MDD-W food groups over a 24-hour period are more likely to have a diet higher in micronutrient adequacy.

**SPECIFIC OBJECTIVES AND APPLICATIONS**

MDD-W is a dichotomous indicator of whether women 15 to 49 years of age have consumed at least five out of 10 defined food groups the previous day or night. The proportion of women 15 to 49 years of age who reach this minimum in a population can be used as a proxy indicator for higher micronutrient adequacy, which is one important dimension of diet quality.

**RESOURCES**

A quick start guide, plus sampling guidelines, a model questionnaire and suggested adaptations, open recall instructions, and guidance on selection and training of enumerators is provided. Guidance is also provided on tabulation, presentation, and interpretation of results.

**SPECIAL CONSIDERATIONS**

This is a population-level indicator, and should not be used to assess individuals’ diets. The tool should not be used to develop dietary guidance.

*This resource was developed by FAO and FHI 360. It is available at: www.fantaproject.org/monitoring-and-evaluation/minimum-dietary-diversity-women-indicator-mddw*
DESCRIPTION, PURPOSE, AND AUDIENCE

These materials train community leaders — including religious leaders, business leaders, and government officials — on topics related to infant and young child feeding. The materials also guide leaders on sharing learned information in their communities, increasing discussion and reflection on nutrition-related topics, and supporting families to feed their children well.

SPECIFIC OBJECTIVES AND APPLICATIONS

The manual provides instructions for facilitating a one-day workshop to train community leaders on supporting and improving children’s health and well-being through improved infant and young child feeding and maternal dietary practices. The guide is a supplementary resource for leaders, designed to support them in implementing their training.

RESOURCES

The manual includes a training schedule, facilitation tips, background notes, lesson plans, and handouts. The guide provides leaders with supporting information on topics covered by the training course, and includes resources such as work plan templates, strategic planning tools, and reporting forms.

These materials were developed under USAID’s Infant & Young Child Nutrition Project, which was implemented by PATH in collaboration with CARE, The Manoff Group, and University Research Co., LLC. They can be downloaded from: www.iycn.org/resource/mobilizing-communities-for-improved-nutrition-a-training-manual-and-participant-manual-for-community-leaders/
DESCRIPTION, PURPOSE, AND AUDIENCE

These manuals are designed for training mother-to-mother support group facilitators to lead participatory discussions on maternal, infant, and young child nutrition. The manuals provide detailed information on potential support group topics and answers to questions that may arise. Once trained, facilitators bring mothers together to learn about and discuss issues relating to infant and young child nutrition; participants also support each other as they care for children aged under five years.

SPECIFIC OBJECTIVES AND APPLICATIONS

The trainer’s manual provides step-by-step guidance to facilitate a four-day training workshop that uses group activities, focused discussions, brainstorming, and role-playing to train women on best practices in maternal, infant, and young child nutrition, as well as facilitation techniques. The facilitator’s manual provides more detailed background information on possible support group topics for facilitators to use to prepare for meetings, or to do research if mothers have questions that facilitators do not know the answer to.

RESOURCES

The trainer’s manual includes a training schedule, lesson plans, handouts, and test materials. The facilitator’s manual includes general tips on facilitating support groups, discussion guides, background notes, and planning and reporting tools.

SPECIAL CONSIDERATIONS

There are three versions of the manuals. The first is a global version designed to be adapted for an individual country context. There is also a version in English adapted for Ethiopia and a version in Portuguese adapted for Mozambique.
DESCRIPTION, PURPOSE, AND AUDIENCE

These two tools support countries develop context-specific and data-driven approaches to address anemia. The Landscape Analysis Guidance Toolkit informs policymakers and program implementers on gathering, interpreting, and using anemia-related data at the national level. The District Assessment Tool for Anemia (DATA) helps districts assess their current anemia situation. Both tools help stakeholders, including governments, U.N. agencies, technical assistance providers, and NGOs looking to better understand and address anemia. Due to the multifactorial causes of anemia, multiple sectors are encouraged to engage the tools.

SPECIFIC OBJECTIVES AND APPLICATIONS

The Landscape Analysis Guidance Toolkit guides assessment of the national anemia situation, covering prevalence, programming, and policies. Information inputted in the Microsoft Excel-based tool can be used to generate awareness, develop partnerships, and design effective interventions and strategies. DATA is a Microsoft Excel-based tool to create dashboards that visualize the anemia situation based on district-specific data. Used in district workshop settings, DATA helps district managers to determine the factors that cause anemia, identify enablers and barriers to addressing anemia, and identify/prioritize interventions to strengthen anemia-related programming.

RESOURCES

Both toolkits are available in an interactive online format, with materials that are downloadable from SPRING’s website. Each offers general guidance, a user’s guide, and an Excel file. DATA also provides training-of-trainers and facilitator guides, as well as scripted presentations.

SPECIAL CONSIDERATIONS

Use of these toolkits may require support from technical experts. The tools are most effective when the availability of relevant data is high. In cases where data is scarce, stakeholders can leverage qualitative knowledge to identify data gaps and build capacity for the better collection and use of data.

Both tools were developed by SPRING, with funding from USAID. Information on the tools can be found at: www.spring-nutrition.org/publications/series/national-and-district-tools-guide-anemia-programming
DESCRIPTION, PURPOSE, AND AUDIENCE

NACS is a client-centered programmatic approach for integrating a set of priority nutrition interventions into health services and strengthening health systems. NACS covers prevention, detection, and treatment of malnutrition, as well as maintenance of improved nutritional status. This training package helps facilitators to train trainers or facility-based health providers in NACS to strengthen integration of standardized nutrition care and treatment into routine health services. Ultimately, it equips health providers with the knowledge and skills to improve their clients’ nutritional status and quality of life.

SPECIFIC OBJECTIVES AND APPLICATIONS

This training package supports facilitators to train participants to advocate for and discuss the role of nutrition in routine health services; assess clients’ nutritional status; design nutrition care plans for clients; counsel clients on issues identified during nutrition assessments; communicate critical nutrition actions for people with chronic infections; prescribe and monitor specialized food products to treat acute malnutrition; manage NACS services in the workplace; and collect information to monitor and report on NACS services.

RESOURCES

Available materials include a facilitator’s guide, participant handouts, and a PowerPoint presentation that can be customized for the local context and for integration into a range of health services, including maternal and child health and infectious disease care. The training course is divided into 12 modules that can be taught separately or combined into a five-day package as needed. The training complements information in NACS: A User’s Guide, on the following page. See also: REF-NACS.

SPECIAL CONSIDERATIONS

The training package was based on experiences in 10 countries in sub-Saharan Africa. Materials should be customized for the local context.

This training package was developed by FHI 360 under the FANTA project, which is funded by USAID. The training package is available at: www.fantaproject.org/tools/nutrition-assessment-counseling-and-support-nacs-training-package-facility-based-service
DESCRIPTION, PURPOSE, AND AUDIENCE

NACS is a client-centered programmatic approach for integrating a set of priority nutrition interventions into health services and strengthening health systems. NACS covers prevention, detection, and treatment of malnutrition, as well as maintenance of improved nutritional status. The NACS User’s Guide is a series of modules that provide program managers and implementers with a package of essential information and resources related to NACS.

SPECIFIC OBJECTIVES AND APPLICATIONS

Three current modules cover what NACS is, nutrition assessment and classification, and nutrition education and counseling. Further modules on nutrition support, monitoring and evaluation of NACS services, and NACS planning are forthcoming.

RESOURCES

The NACS User’s Guide and its modules is available to download free online. A glossary, crossword puzzle, and related resources are also provided.

SPECIAL CONSIDERATIONS

NACS modules are living documents and will be updated as appropriate when new evidence, guidelines, or field experience emerges; the latest update was April 2016.

This guide was developed by FHI 360 under the FANTA project, which is funded by USAID. To download the modules, please visit: www.fantaproject.org/tools/NACS-users-guide-modules-nutrition-assessment-counseling-support
DESCRIPTION, PURPOSE, AND AUDIENCE

NIPP was designed as a preventive nutrition approach, but has also proved to have significant impact on reducing rates of acute malnutrition. NIPP comes with a comprehensive toolkit to support the planning, implementation, and evaluation of multisectoral programming (e.g., nutrition, health, WASH, and livelihoods) to manage malnutrition by tackling contributory factors to poor nutritional outcomes. The toolkit aims to meet the needs of ministries of health and other organizations’ nutrition program managers, coordinators, and advisors who wish to implement a multisectoral nutrition approach to tackle malnutrition.

SPECIFIC OBJECTIVES AND APPLICATIONS

NIPP aims to reduce rates of malnutrition by triggering behavior change and using locally available and sustainable multisectoral solutions. The NIPP toolkit facilitates nutrition program planning, rollout, implementation, monitoring and evaluation, and costing. The approach and accompanying toolkit are agile, and can be adapted to any setting with a basic level of food security and access.

RESOURCES

A comprehensive guideline and toolkit is available to download from the NIPP website. This includes planning tools, implementation materials, monitoring and evaluation forms, guidance on cooking demonstrations and micro-gardening, and methods for behavior change counseling.

SPECIAL CONSIDERATIONS

In countries with existing national protocols for treating acute malnutrition and preventing chronic malnutrition, this toolkit should be adapted to align with and support existing policies. NIPP is most suited to locations with basic food security.

NIPP was developed by GOAL in 2012, and to date has been tested in five countries in east and southern Africa. Following extensive testing, in 2017 GOAL launched NIPP for use by other organizations. More information on NIPP can be found at: www.goalglobal.org/nipp
NPDA helps program planners design or improve nutrition components of community-based development programs and select appropriate community-based nutrition approaches for target areas. It focuses on preventive program design for areas with a high prevalence of stunting or underweight in children. NPDA also provides guidance on incorporating recuperative approaches in preventive programs in areas with a high prevalence of acute malnutrition and a very high prevalence of underweight in children. It is best used in collaboration with ministry staff, community leaders, local organizations, and other stakeholders.

SPECIFIC OBJECTIVES AND APPLICATIONS

NPDA provides a framework for analyzing the nutrition situation in a target area and guides selection of the most appropriate nutrition approaches based on context and need. Drawing on evidence and expert guidance, NPDA supports development of nutrition programs and Theory of Change. Focusing primarily on preventive programs that address stunting and underweight, it applies a food utilization/consumption lens to nutrition and health. NPDA emphasizes community participation and ownership in program design, and facilitates discussion, communication, and decision-making among many stakeholders.

RESOURCES

The tool has two components: a reference guide for understanding the nutrition situation and identifying and selecting program approaches, and a workbook that helps users systematically record information, make decisions, and think through decision-making rationale. The workbook includes an Excel file with adaptable templates for data collection and developing a logical framework.

SPECIAL CONSIDERATIONS

NPDA requires dedicated time and attention, and might take place in a multiple-day program design workshop. It is helpful to have situation analysis data available prior to use. It is intended for development contexts and is not appropriate for emergency conditions.

NPDA creation was a highly collaborative effort coordinated by FANTA, Save the Children, and the CORE Group’s Nutrition Working Group. Access resources at: www.coregroup.org/npda
DESCRIPTION, PURPOSE, AND AUDIENCE

Optifood provides scientific evidence on how to enrich people’s diets with locally available foods at the lowest possible cost. It identifies nutrient gaps, and recommends locally available foods to fill these. It also helps identify options (e.g., fortified foods or micronutrient powders) to plug any gaps that local foods cannot fill. Optifood uses software based on linear programming analysis — a mathematical optimization process that selects the best diets from among all possible food combinations given model parameters. It is useful for designing programs and informing policy decisions to improve the diet of specific population groups. Key audiences include public health professionals, governments, NGOs, academic institutions, international organizations, program managers, and researchers.

SPECIFIC OBJECTIVES AND APPLICATIONS

Optifood provides low-cost, evidence-based dietary recommendations for target groups in a specified area. Considering the local food supply and dietary patterns, the software identifies diets that meet (or come as close as possible to meeting) nutrient needs of target groups. It can test and compare dietary recommendations based on nutrient level and cost, identify nutrient requirements that are difficult or expensive to meet, and determine the lowest and highest cost nutrients. For example, it can assess if a food-based strategy alone can ensure dietary adequacy; develop or evaluate food recommendations; and inform nutrition-sensitive value chain initiatives, cash transfer programs, and micronutrient interventions.

RESOURCES

Optifood software is available free of charge upon request. Please contact: elaine.ferguson@LSHTM.ac.uk

SPECIAL CONSIDERATIONS

Application of Optifood requires training.

Optifood was developed jointly by WHO, LSHTM, the FANTA project, and Blue-Infinity, with support from USAID. For more information, please visit: www.fantaproject.org/tools/optifood
DESCRIPTION, PURPOSE, AND AUDIENCE

Positive Deviance/Hearth is a home- and neighborhood-based nutrition program for children at risk of malnutrition. Using a strengths-based philosophy, the positive deviance approach identifies beneficial practices used by caregivers of well-nourished children from impoverished families. It then spreads these practices and behaviors to their neighbors (who share the same resources and face the same risks) via small group rehabilitation sessions known as hearths. Participants bring locally available nutritious foods to cook and feed their children during hearths, and learn complementary health practices. This guide helps program managers interested in mobilizing communities to sustainably rehabilitate malnourished children.

SPECIFIC OBJECTIVES AND APPLICATIONS

The approach is designed for use in communities where moderate or severe malnutrition affects 30 percent or more of the local population. There are 14 key elements for implementing a positive deviance program, which must be included to assure effectiveness. It focuses on maximizing existing resources, skills, and strategies to overcome a problem, and uses participatory methods and processes. As such, it is important to have strong community buy-in. As the approach requires availability of local and affordable food, it is not recommended if the community is reliant on food aid.

RESOURCES

The guide explains step-by-step how to identify at-risk children; conduct a positive deviance inquiry; conduct hearth sessions; and set up a monitoring and evaluation system. Specific field examples, case studies, and useful tools are provided. A detailed training guide for facilitators of positive deviance programs is also available (see Training of Facilitators for Positive Deviance/Hearth).

SPECIAL CONSIDERATIONS

There are several essential elements that must be included to maintain the effectiveness of the approach. However, the approach requires local adaptation, and many implementation steps are flexible.

The resource guide was produced by CORE Group, with support from USAID. For further information, visit: www.coregroup.org/positive-deviance-hearth-resource-guide
DESCRIPTION, PURPOSE, AND AUDIENCE

ProPAN was developed to provide ministries of health, NGOs, researchers, and international organizations a tool to develop, implement, and evaluate interventions and programs to improve infant and young child feeding and diet. It outlines a process for identifying specific breastfeeding and complementary feeding problems and defining the context in which these problems occur.

SPECIFIC OBJECTIVES AND APPLICATIONS

ProPAN provides a process for identifying and contextualizing specific breastfeeding and complementary feeding problems based on 12 ideal practices; quantitative and qualitative research techniques for joint analysis of these practices; software for standardized input/output of anthropometric, diet, and feeding information; a method for formulating, ranking, and selecting dietary and feeding recommendations that are practical, feasible, and acceptable to caregivers and health providers; and guidance on how to use the resulting information in programming and for monitoring and evaluation.

RESOURCES

ProPAN includes a field manual with step-by-step guidelines on how to apply quantitative and qualitative research methods. It has four modules: assessment, testing recommendations and recipes, developing the intervention plan, and designing a monitoring and evaluation system. Each module has two components: an overview of purpose, products, steps, and concepts and research techniques, and an annex of custom tools and instructions for analysis of dietary and feeding problems. ProPAN also offers an Epi Info-based software program for data entry and analysis, and a software user guide. ProPAN is available at no cost in English, Spanish, and French. Online video training tools are also available.

SPECIAL CONSIDERATIONS

ProPAN modules can be used individually or as a comprehensive exercise, depending on users’ needs. Modules I and II can also be used to train nutritionists in quantitative and qualitative research methods.

ProPAN was developed jointly by PAHO and UNICEF. The U.S. Centers for Disease Control and Prevention, Emory University, and the FANTA project also contributed to the effort. The updated version of this tool was funded in part by the Global Alliance for Improved Nutrition. To access the tool, visit: www.paho.org/propan
DESCRIPTION, PURPOSE, AND AUDIENCE

The School Garden Manual is based on experiences and best practices from setting up and running school gardens worldwide. It details each step of planning a garden project: deciding what your garden is for, planning how to get help, and learning how to prepare the site. Classroom lessons link to practical learning in the garden about the environment, food production and marketing, food processing and preparation, and healthy food choices. The manual is for anyone who is interested in starting or improving a school garden — especially for growing good food or learning how to market garden products. This includes teachers, garden managers, parents, and community members from one or multiple schools.

SPECIFIC OBJECTIVES AND APPLICATIONS

The manual aims to improve the nutrition and education of children and their families in rural and urban areas. It provides a platform for learning about nutrition and food production. It promotes the environmental, social, and physical well-being of the school community, while fostering a better understanding of the natural world. Schools are encouraged to create learning gardens of moderate size, which can be easily managed by students, teachers, and parents. Gardens include a variety of nutritious vegetables and fruits, and occasionally small-scale livestock such as chickens or rabbits.

RESOURCES

The manual provides a step-by-step guide for creating and maintaining a school garden. It includes sections on organizing and implementing the work, lesson plans, nutrition factsheets, and horticultural notes.

This manual was developed by FAO. For more information, visit: [www.fao.org/docrep/009/a0218e/A0218E00.htm](http://www.fao.org/docrep/009/a0218e/A0218E00.htm)
The Basics: Planning for Formative Research for Infant and Young Child Feeding Practices

DESCRIPTION, PURPOSE, AND AUDIENCE

This guide is intended to assist researchers, who are familiar with formative research methods, in conducting formative assessments for infant and young child feeding programs. It aims to address the challenge of choosing from the multiple methods and approaches to conducting formative research for infant and young child feeding. It also aims to complete knowledge gaps for people contracted to conduct formative research; as often they are either not subject matter experts in infant and young child feeding or have limited formative research experience.

SPECIFIC OBJECTIVES AND APPLICATIONS

The guide orients users to infant and young child feeding; describes major formative research methods and techniques that can be applied to nutrition; outlines a process for determining the appropriate formative research approach; and provides guidance for analyzing the information collected.

RESOURCES

The complete guide is available to download. It also includes examples of formative research tools and plans, and offers suggestions for analytical tools and formats.

SPECIAL CONSIDERATIONS

The guide is intended to fill knowledge gaps for those who have some of the knowledge and skills, but lack the specific experience in formative research for infant and young child feeding.

This guide was developed under USAID’s Infant & Young Child Nutrition Project, which was implemented by PATH in collaboration with CARE, The Manoff Group, and University Reserach Co., LLC. It can be downloaded from: www.iycn.org/resource/the-basics-planning-for-formative-research-for-infant-and-young-child-feeding-practices
DESCRIPTION, PURPOSE, AND AUDIENCE

REF-NACS is a generic tool that helps gather information on the capacity of health facilities to implement NACS for pregnant women, children, and people with HIV. It is designed to help countries plan for integration of NACS through a method that stimulates discussion, facilitates an analytic process, and helps plan for strengthening and integrating NACS services. REF-NACS can determine whether the minimum elements required to implement the NACS approach are in place, help identify gaps in service delivery, and highlight priorities for integrating and improving NACS services. It can be used prior to or during program implementation, and can be implemented in a sample of health facilities or in all facilities where a program is intending to work.

SPECIFIC OBJECTIVES AND APPLICATIONS

REF-NACS results will help government policymakers, donors, program managers, service providers, and even clients to understand current services provided and human resource capacity to implement high-quality NACS services; identify gaps in services provided; identify weaknesses in the health system for implementing a continuum of comprehensive NACS services; and prioritize interventions and identify actions to strengthen NACS-related programming.

RESOURCES

PDF and Microsoft Word versions of REF-NACS are available to download from the website. The guide includes a background section describing the NACS approach; indicators measured by the tool; steps for using the tool; and the tool itself. See also: NACS: A User's Guide and NACS Training Package for Facility-Based Service Providers.

SPECIAL CONSIDERATIONS

In addition to planning for NACS integration into a health system, the tool can be used for regular assessment of the quality of implementation of NACS services.
DESCRIPTION, PURPOSE, AND AUDIENCE

This training guide is designed for health care managers and health care providers who manage, supervise, and implement CMAM programs in emergency and non-emergency contexts. This includes health providers who are involved in health outreach activities; ministry of health officials at the national, regional, and district levels; and health and nutrition program managers for NGOs.

SPECIFIC OBJECTIVES AND APPLICATIONS

This training guide focuses on the community-based management of severe acute malnutrition in children under 5 years old. It is designed to increase participants’ knowledge of and build practical skills to implement CMAM. The guide complements WHO protocols for the management of SAM and the WHO training modules for inpatient management of severely malnourished children. The full course takes about 10.5 days.

RESOURCES

Trainer guidance and information are provided. The training package includes eight modules, with objectives, handouts, a list of necessary materials, and suggested activities provided for each. A packet for participants with handouts for each module is also provided.

SPECIAL CONSIDERATIONS

The developer recommends consulting the latest WHO guidelines, and adapting these materials to take latest WHO guidance, as well as national guidelines and local considerations, into account.

The CMAM training guide was produced in 2008 by the FANTA project in collaboration with Concern Worldwide, Valid International, and UNICEF, with technical input and review from USAID, WHO, and numerous NGOs working to reduce the impact of severe acute malnutrition on children. For more information, visit: www.fantaproject.org/focus-areas/nutrition-emergencies-mam/cmam-training
DESCRIPTION, PURPOSE, AND AUDIENCE

Orientation and training for the design and implementation of a positive deviance/hearth program is a 2.5 day workshop to enable managers to better design, implement, and support sustainable community-based nutrition initiatives. Program managers include headquarters, regional, and country-level staff of NGOs; ministry and district health officials; and others who manage nutrition programs. It is designed to complement the CORE Group’s Positive Deviance/Hearth: Resource Guide for Sustainably Rehabilitating Malnourished Children.

SPECIFIC OBJECTIVES AND APPLICATIONS

This workshop is designed to provide program managers with a solid understanding of the principles of and criteria for a successful positive deviance/hearth program, as laid out in the resource guide. It may help programmers to determine whether to pursue a positive deviance/hearth approach and clarify essential considerations for successful programming.

RESOURCES

The 2.5 day workshop consists of 25 sessions, which follow the nine-step process outlined in the resource guide. A detailed workshop session and materials guide is provided, along with individual session plans. For each session, objectives, timing, exercises, handouts, and other resources are outlined.

SPECIAL CONSIDERATIONS

Lesson plans and materials in this manual are designed to be used in conjunction with Positive Deviance/Hearth: A Resource Guide for Sustainably Rehabilitating Malnourished Children.
DESCRIPTION, PURPOSE, AND AUDIENCE

TIPs is a human-centered, client-driven, qualitative formative research and design technique for behavior-centered programming. It focuses on what people do, rather than what people know or believe, and uses trials to gauge acceptability of a practice or product and to identify the best ways of promoting it. The method combines the advertising-design idea of concept testing with product testing to modify a practice or product before it is introduced into the market. Thus, TIPs allows program planners to pre-test the actual practices or products a program will promote. A small sample of target beneficiaries are engaged to try out proposed practices or products, and their experiences and opinions are used to inform programming. TIPs gives program planners an in-depth understanding of participants’ preferences and capabilities, the obstacles they face in improving their health, and their motivations in trying new behaviors and practices. Key audiences for this tool include ministries of health, NGOs, program managers, and researchers.

SPECIFIC OBJECTIVES AND APPLICATIONS

Although first used to improve nutrition programming, TIPs has been applied to many other public health issues. It aims to test families’ response to recommendations for improving infant and child feeding, WASH, or other desired practices, and to determine which are the most feasible and acceptable. It also investigates constraints on families’ willingness to change feeding patterns or other routines, and their motivations for trying and sustaining new practices or products.

RESOURCES

The resource page includes an overview of the method and a bank of TIPs studies.

SPECIAL CONSIDERATIONS

Some behaviors are difficult or impossible to test with TIPs, including behaviors that stretch over long time periods, unpredictable or rare behaviors, behaviors with major external barriers, and behaviors requiring approval of many peers, colleagues, or supervisors.

TIPs was developed by The Manoff Group, and was first used in the 1970s. To learn more, visit: www.manoffgroup.com/approach_developing.html