

Strengthening Nutrition Competencies for Nurses A Tool for Updating Pre-Service Training



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A Tool for Updating Pre-Service Training

About USAID Advancing Nutrition

USAID Advancing Nutrition is the Agency's flagship multi-sectoral nutrition project, led by JSI Research & Training Institute, Inc. (JSI), and a diverse group of experienced partners. Launched in September 2018, USAID Advancing Nutrition implements nutrition interventions across sectors and disciplines for USAID and its partners. The project's multi-sectoral approach draws together global nutrition experience to design, implement and evaluate programs that address the root causes of malnutrition. Committed to using a systems approach, USAID Advancing Nutrition strives to sustain positive outcomes by building local capacity, supporting behavior change and strengthening the enabling environment to save lives, improve health, build resilience, increase economic productivity and advance development.

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Introduction

Across the world, frontline workers—nurses, midwives, nutritionists, community health workers, auxiliary workers, and doctors—provide people of all ages with key nutrition and health services. These frontline workers have many nutrition-related responsibilities. They monitor nutritional status; detect and manage malnutrition; track child growth and development; prescribe and administer medicines, vitamins, and supplements; and counsel clients on proper nutrition, feeding, and hygienic practices.

Whereas a range of frontline workers undertake these tasks, nurses play a particularly vital role. Nurses comprise nearly half of the global workforce. There were an estimated 22 million nurses worldwide in 20191 and, in many countries, they are the backbone of the health care system. Nurses and nurse-midwives2 are often the first—and only—points of contact for mothers and children for maternal, newborn, and child health care. Therefore, they must be able to demonstrate a set of key competencies—knowledge, skills, and attitudes—to meet a range of nutrition needs for patients. Ensuring that nurses develop these competencies requires support that begins with pre-service training and spans in-service training, mentorship, and supportive supervision. Quality pre-service training is particularly crucial because it equips health professionals with the competencies required to deliver quality services from their first day on the job, forming the core of their future performance. Unfortunately, nutrition has often received less attention in pre-service training than other topics. By including nutrition in a curriculum of competency-based pre-service training for nurses, governments, nurses' associations, and their partners can help ensure a skilled workforce capable of delivering quality services to patients.



Competencies are a set of measurable, observable, and clearly defined knowledge, attitudes, and skills that are critical to job performance and serve as a basis for assessing, developing, and evaluating people. ¹

I https://www.who.int/docs/default-source/documents/yonm-2020/campaign-toolkit.pdf

² In this document, we refer specifically to nurses and nurse-midwives, but the competencies outlined here can be adapted to pre-service training for other health professionals as well.

Purpose

USAID Advancing Nutrition developed this tool to support the assessment and revision of pre-service training for nurses. To strengthen the nutrition content in the existing pre-service curricula, it articulates a comprehensive set of nutrition competencies and refers to examples of training materials that reflect these competencies. It can be used by a range of individuals and institutions, including professional associations, training institutions/nursing schools/universities, regulatory councils, educators, and government ministries. The tool is broad enough to be applicable for a wide range of nurses, but is particularly relevant to frontline service providers, where nurses are well placed to influence the nutritional status of patients. Similar tools may be needed for different cadres of health service providers who play different roles in the delivery of nutrition services.

Revising Pre-service Training Curricula

The process of reviewing and revising pre-service training curricula can be complex and time consuming. As a result, it is a challenging exercise that requires sustained support and commitment over time. Strong pre-service training is an important step toward increasing availability of and quality nutrition services over the long-term.



Guidance on this process from the World Health Organization (WHO 2001) and several USAID-funded projects—(Schaefer 2002) (MCHIP 2011) (MCSP n.d.) (FANTA 2018)—emphasizes the care and time required. Building on Schaefer's work (2002), key steps in this process include the following:

- **Preparing** for the pre-service curriculum review, which involves clarifying the role and responsibilities of the nurse as articulated in national policies and protocols for service delivery; where and how nurses receive basic education; what and who (persons and groups) influences what is taught to nurses; and the conditions under which pre-service training (both teaching and practice) takes place. It is also a good time to determine nutrition-related priorities and service delivery gaps or weaknesses. Before proceeding with the pre-service curriculum review it may be necessary to update or strengthen policies and protocols. Furthermore, it is important to consider any other factors that may influence pre-service education, including but not limited to entrance requirements, service delivery sites, graduation requirements, licensing requirements, and deployment policies.
- Planning the pre-service curriculum review includes identifying a team and determining "when, where, and how the new/updated content will be taught within an academic program" (Schaefer 2002) at one or more academic institutions. The plan should include "both national-level interventions and those needed at the level of individual teaching institutions for the introduction of new/updated content and strengthened teaching practices". It should delineate a timeline as well as projections of resources (e.g., human, financial) needed to conduct those interventions.
- **Updating** the pre-service curriculum and corresponding training resources "begins with a review of the current job description for the cadre of health care provider whose curriculum is being strengthened" (Schaefer 2002). Based on the responsibilities outlined in the job description, competencies needed can be clearly identified from the list included in this tool. After an accurate set of competencies are identified, the existing curriculum is reviewed to identify how well the competencies are addressed. Based on this assessment, the necessary updates and additions are made to the existing curriculum. For any competency not included in the curriculum, appropriate information is identified to fill the gaps. Updates should specify how the new/updated content will be taught and identify the teaching, learning, and assessment materials needed to implement the strengthened portions of the curriculum. It is also important to note that work must be done within the boundaries of the existing curriculum. For example, when new content is being added to a course, it will not be possible to add time to

- accommodate the new content; rather, other teaching within the course must be adjusted to allow time for the new content.
- Implementing or rolling out the updated pre-service curriculum will involve, at a minimum, orienting decision makers and training teaching staff. It might also include training nurse supervisors and reviewing and revising processes for supervision; mentorship; quality improvement initiatives; and re-certification of nurses, as well as health facilities.
- **Evaluating and reinforcing** the pre-service curriculum updates include assessing changes in trainers' and health professionals' nutrition competency over time. As indicated above, updating any pre-service curriculum should ideally be accompanied by the reinforcement of competencies and strengthening of the enabling environment: training trainers, mentors, and supervisors; organizing practicums; providing post-training support; and equipping training institutions and health facilities with appropriate resources.

Using This Tool

You can use this tool to identify the competencies that align with national job descriptions, policies, and protocols. It may be necessary to revise wording of the competencies listed to reflect your context. Then, as indicated above, this tool can help you determine where in the curriculum each competency should be addressed. Finally, you can use the resources referenced in the tool to update the content of the pre-service training to address the missing competencies. The linked content will help you build out the curriculum content in the preservice training.

The tool includes a comprehensive list of nutrition-related competencies required for nurses to deliver nutrition services at the frontline. They are organized into 11 categories (box I). We reviewed sets of nutrition competencies identified by globally recognized guidance documents, including the WHO's recent Competency verification toolkit: Ensuring competency of direct care providers to implement the Baby-Friendly Hospital Initiative (WHO 2020). A team of experts in each area then reviewed this competency list with wording refined to make each competency distinct and appropriate for inclusion in nursing pre-service training. Alongside each competency is a related resource that can be referenced when updating the pre-service curriculum.

To further support the revision of pre-service training, we provide a list of **relevant resources** that you can use to strengthen or develop pre-service training courses. These

Box I. Categories of Competencies for the Provision of Nutrition Services by Nurses

- 1. Assessment of Nutritional Status
- 2. Management of Wasting
- Management of Micronutrient
 Deficiencies and Other Forms of Malnutrition
- 4. Management of Nutrition-related
 Communicable and Non-communicable
 Disease
- 5. Nutrition Promotion, Communication, and Counseling
- 6. Promotion of Nutrition and Healthy Living
- 7. Promotion of Nutrition, Responsive Care, and Early Learning Practices for Infants and Young Children
- 8. Promotion of Nutrition Practices
 Uniquely for Pregnant and Lactating
 Women
- Promotion of Nutrition Practices Uniquely for Adolescents
- 10. Promotion of Nutrition among People Living with HIV and AIDS
- 11. Management of Nutrition Interventions/Services

come primarily from globally recognized trainings. While they are not necessarily designed for preservice training, we believe the adult learning techniques and the blend of theory and practice that they suggest are appropriate for all capacity strengthening efforts.

Finally, we included optional columns where users can identify if the competency is included as a role or responsibility of nurses in the national policies (sometimes presented as a job description or as qualifications) and record where (in which course) each competency is addressed or built in the existing pre-service training curricula.

A few caveats are included below:

 It is important to review all categories of competencies because competencies in some categories are relevant and sometimes even necessary for competencies in another category.

- 2. To keep the list manageable, we chose to list the higher level competencies. However, more specific competencies, such as how to calibrate a scale or measure the length of a child, are incredibly important for the quality of services. More specific competencies such as these can be found in the referenced resources or training materials.
- 3. Because nurses' roles and responsibilities differ across countries and contexts, not all of the competencies on this list may be relevant to all nurses. Depending on national policies and work requirements, nurses may need to learn some, many, or all these skills.
- 4. It is important to recognize that nurses will likely need many more competencies than those listed here when providing maternal, neonatal, and child health and reproductive health services.

Tool for Updating the Pre-service Training of Nurses

1. Assessment of Nutritional Status and Early Childhood Development Summary: The nurse will be able to conduct nutritional assessment (anthropometric, dietary, biochemical, clinical) that takes into account the health condition of an individual as influenced by food consumption and assimilation and utilization of nutrients. Competencies Resources that Cover these **Optional Workspace** Competencies Official Role Current or Course Responsibility See also treatment, communication, promotion, and management competencies. Knowledge of different methods Resource I, Session 4: Nutritional Status Assessment of Individuals and of nutritional assessment (advantages, disadvantages, and Communities, pp. 26-34 • Resource 9, Session 3: Nutrition challenges with anthropometric measurement, clinical assessment, Assessment, pp. 27-52 growth monitoring, dietary intake • Resource 9, Handouts 3.1: Anthropometric Indicators assessment) 1.2 Ability to assess child growth and • Resource I, Session 2: Growth use growth chart/card to Monitoring, pp. 81-87 accurately monitor growth of • Resource 2, Unit 2, Session 2: infants and young children Anthropometry, p. 71 1.3 Ability to correctly measure Resource 8, Session 2: Nutrition nutritional status of individuals Assessment and Classification pp. 3and populations; determine age; maintain equipment (calibration • Resource 10, Module 6: Protocols of scale); measure height, weight, and Equipment, pp. 158-201 waist circumference, and mid-Resource 9, Session 3: Nutrition upper arm circumference Assessment, pp. 27-52 (MUAC)) • Resource 9. Handouts 3.2 - 3.7 1.4 Ability to manage/maintain Resource 8, Session 2: Nutrition anthropometric equipment Assessment and Classification pp. 3- Resource 10. Module 6: Protocols and Equipment, pp. 158-201 Resource 9, Session 3: Nutrition Assessment, pp. 27-52 • Resource 9, Handouts 3.2 - 3.7 Resource I, Session 2: Growth Ability to use charts, tables, and software to determine and Monitoring, pp. 81-87 classify the nutrition indicators Resource 2, Session 2: for clients of all ages (body mass Anthropometry, p. 71-7

	index (BMI), BMI-for-age, weight- for-age Z score, weight-for- height/length Z score, height/length-for-age Z score)	 Resource 9, Session 3: Nutrition Assessment, pp. 27-52 Resource 9, Handouts 3.1 - 3.8 	
1.6	Ability to assess for clinical signs of malnutrition (bilateral pitting oedema, hair colour changes, baggy skin on buttocks in children)	 Resource 2, Unit 2, Session 1: Nutritional Assessment: Clinical Signs & Dietary Tools, pp. 61 Resource 8, Session 2: Nutrition Assessment and Classification, p. 16-17; 19. Resource 9, Session 3: Nutrition Assessment, pp. 27-52 Resource 9, Handouts 3.9: Clinical Nutrition Assessment Resource 9, Handouts 3.10: Checking for Bilateral Pitting Oedema 	
1.7	Ability to accurately assess dietary/food intake	 Resource 8: Module 2: Nutrition Assessment and Classification: p. 20- 21 Resource 9: Session 3: Nutrition Assessment, p.51-52 Resource 9, Handouts 3.13: Dietary Assessment 	
1.8	Ability to correctly determine if client is anemic based on hemoglobin test results and clinical signs	 Resource 9: Session 3: Nutrition Assessment, p.51-52 Resource 9: Handout 3.12: Biochemical Assessment Resource 23 	
1.9	Ability to accurately assess clients for micronutrient deficiencies through clinical, biochemical, or dietary assessment	 Resource I, Session 4-Nutritional Assessment of Individuals and Communities, pp. 26-34 Resource 9: Session 3: Nutrition Assessment, p.51-52 Resource 9: Handout 3.9: Clinical Nutrition Assessment Resource 9: Handout 3.12: Biochemical Assessment Resource 9: Handout 3.13: Dietary Assessment 	

2. Management of Wasting **Summary:** The nurse will be able to manage wasting in children and adults in the facility and in outpatient settings. Competencies Resources that Cover these **Optional Workspace** Competencies Official Role Current Course or Responsibility See also assessment, communication, and promotion competencies. 2.1 Knowledge of the operational Resource 12, Module 17: Infant and guidance on IYCF-E, including Young Child Feeding relevant sphere or organizationspecific standards and indicators 2.2 Knowledge of the operational Resource 20 guidance on management of SAM Resource 21 • Resource 22 • Resource I, Session on 2.3 Ability to administer therapeutic foods (F-75, F-100, and ready to Pharmacology and Therapeutics, pp. use therapeutic food [RUTF]) 167-170 according to guidelines • Resource I, Sessions 6-7, pp. 39-48 • Resource 9: Session 9: Nutrition Support, p.88-96 • Resource 9: Handout 9.2: Specialized **Food Products** • Resource 9: Handout 9.4: Specialised Food Product Entry, Transition and Exit Criteria Resource 20 Resource 21 Resource 22 2.4 Ability to administer RUSF Resource I, Sessions 6-7, pp. 39-48 according to guidelines Resource 9: Session 9: Nutrition Support, p.88-96 • Resource 9: Handout 9.2: Specialized **Food Products** Resource 9: Handout 9.4: Specialised Food Product Entry, Transition and Exit Criteria Resource I. Session 9: Nutrition 2.5 Ability to counsel clients on Interventions and Policies in Ghana, management and recovery from malnutrition (e.g., the use RUTF pp. 58-63 and RUSF) and when to return Resource 9: Session 9: Nutrition for additional care Support, p.88-96 • Resource 9: Handout 9.5 Counselling Messages on Specialised **Food Products** Resource 20 Resource 21

Resource 22 3. Management of Micronutrient Deficiencies and Other Forms of Malnutrition Summary: The nurse will be able to prevent and control common micronutrient deficiencies of public health importance. Resources that Cover these **Competencies Optional Workspace** Competencies Official Role Current Course or Responsibility See also assessment, communication, and promotion competencies. Resource I, Session 9: Nutrition Knowledge of proper treatment of micronutrient and iron Interventions and Policies in Ghana, deficiencies, according to national pp. 58-67 guidelines Resource 9: Session 9: Nutrition Support, p.88-96 • Resource 9: Handout 9.1: Recommended Micronutrient Supplements in Zambia • Resource 20 (Vitamin A), pp. 23 Resource 21 (Vitamin A), Resource 22 (Vitamin A), pp. 31-35 3.2 Ability to properly treat anemia Resource I, Session I: Antenatal and micronutrient deficiencies Care, pp. 158-60 (partial) • Resource 2, Session 2: Prevention (e.g., provide deworming medication, iron supplements and Management of Micronutrient according to guidelines, Deficiencies, pp. 109-125 participate in deworming • Resource 9: Session 9: Nutrition campaigns, counsel on Support, p.88-96 • Resource 9: Handout 9.1: deworming and dietary approaches), according to Recommended Micronutrient national guidelines Supplements in Zambia • Resource 20 (Vitamin A), pp. 23 Resource 21 (Vitamin A) Resource 22 (Vitamin A), pp. 31-35 3.3 Ability to counsel clients on Resource 9: Handout 7.3: treatment of micronutrient Counselling Pregnant Women on deficiencies and anemia and when Anaemia • Resource 9: Handout 8.6: Feeding to return for additional care Children Older than 6 Months 3.4 Ability to develop plan for the Resource 1, Session 7: Management management and control of of Overnutrition, pp. 42-48 overweight and obesity

4. N	4. Management of Nutrition-related Communicable and Non-communicable Disease				
	mary: The nurse will be able to ap rition-related non-communicable o	ply nutrition management of common infectiou liseases (NCDs)	s diseases/illnesse	es as well	
Nutr	ition-related Competencies	Resources that Cover these	Optional Wor	kspace	
		Competencies	Official Role or Responsibility	Current Course	
See al	so assessment, promotion, and ma	nagement competencies.			
4.1	Knowledge of the role of nutrition in the prevention and control of infectious diseases or common illnesses	 Resource I, Session I: Nutrition and Health, pp. 10-12 Resource 9, Session 2: Nutrition and Infection, pp24-26 			
4.2	Knowledge of the role of nutrition in the prevention and control of chronic non- communicable diseases (NCDs) such as Type II diabetes	 Resource I, Session 7: Management of Overnutrition, pp. 42-48 			
4.3	Ability to counsel patients on the management of common illnesses (e.g. diarrhea, respiratory infections) through nutrition-related practices	 Resource 9, Session 2: Nutrition and Infection, pp24-26 Resource 9, Session 4: Nutrition Counseling, pp.53-63 			
4.4	Ability to counsel patients on the management of nutrition-related NCDs through nutrition-related practices (healthy diet, physical exercise, and reduction of alcohol consumption and smoking) and according to dietary guidelines	 Resource I, Session 7: Management of Overnutrition, pp. 42-48 Resource 9, Session 4: Nutrition Counseling, pp.53-63 Resource 9, Handout 4.6: Counselling on Maintaining Desired Weight Resource 16 Resource 17 			
5. N	lutrition Promotion, Commun	ication, and Counseling			
		omote nutrition through education, communication and clients			
Com	petencies	Resources that Cover these	Optional Workspace		
		Competencies	Official Role or Responsibility	Current Course	
	so assessment, treatment, and man otion of nutrition-related practices	agement competencies as well as competencie for a variety of populations.	s specifically relat	ed to the	
5.1	Knowledge of the importance of communication, education, and counseling for improved nutrition outcomes	 Resource I, Session 12: Role of the Nurse in Nutrition Education and Counselling, pp. 72-74 			

		Resource 8, Session 3: Nutrition	
		Counselling and Education, pp. 79-89	
5.2	Knowledge of the principles of behavior change as they relate to nutrition	 Resource 3, Session 2: About Social Behavior Change Communication, pp. 22-25 Resource 8, Session 3: Nutrition Counselling and Education, pp. 90-92 	
5.3	Ability to assess and analyze a client's situation to identify the causes for behaviors not practiced and solutions for adopting and sustaining new behaviors	 Resource 8, Session 3: Nutrition Counselling and Education, pp. 128- 127 	
5.4	Ability to effectively conduct nutrition education in a dynamic way, acknowledging the experience that adults bring to every learning engagement.	 Resource I, Session I2: Role of the Nurse in Nutrition Education and Counselling, pp. 72-74 (partial) Resource 8, Session 3: Nutrition Counselling and Education, pp. II0-II (partial) Resource I2, Session I2. Action-oriented Groups, IYCF Support Groups, and Home Visits, pp. I26-I37 Resource 24 Resource 25 	
5.5	Ability to use culturally appropriate, client-centered strategies to counsel clients on nutrition practices	To be identified	
5.6	Ability to use listening and learning skills whenever engaging in a conversation with clients	 Resource 2. Session 2: Counselling in Nutrition, pp. 146-158 Resource 3, Negotiation with Mothers, Fathers, Grandmothers, or Other Caregivers: Women's Nutrition and Breastfeeding practices, pp. 52-58 Resource 8, Session 3: Nutrition Counselling and Education, pp. 93-122 Resource 12, Sessions 4: How to Counsel, Part I, pp 36-43 Resource 12, Session 9: How to Counsel, Part II, pp 99-113 	
5.7	Ability to use skills for building confidence and self-efficacy whenever engaging in a conversation with a mother	 Resource 2. Session 2: Counselling in Nutrition, pp. 146-158 Resource 3, Negotiation with Mothers, Fathers, Grandmothers, or Other Caregivers: Women's 	

5.8 Ability to give support whenever engaging in a conversation with a	Nutrition and Breastfeeding practices, pp. 52-58 Resource 8, Session 3: Nutrition Counselling and Education, pp. 93-122 Resource 12, Sessions 4: How to Counsel, Part I, pp 36-43 Resource 12, Session 9: How to Counsel, Part II, pp 99-113 Resource 2. Session 2: Counselling in Nutrition, pp. 146-158	
mother	 Resource 3, Negotiation with Mothers, Fathers, Grandmothers, or Other Caregivers: Women's Nutrition and Breastfeeding practices, pp. 52-58 Resource 8, Session 3: Nutrition Counselling and Education, pp. 93-122 Resource 12, Sessions 4: How to Counsel, Part I, pp 36-43 Resource 12, Session 9: How to Counsel, Part II, pp 99-113 	
 5.9 Ability to apply best practices when counselling: using active listening and learning (open-ended questions, praise for good practices) skills offering support where necessary praising what client is doing well giving relevant information using simple language giving practical help as needed suggesting small do-able actions giving anticipatory guidance answering questions so that client can understand checking understanding These are sometimes referred to as GALIDRAA (greet, ask, listen, identify, discuss, recommend, agree, and appoint) or GATHER (greet, ask, listen, identify, discuss, recommend, agree, and appoint). They are sometimes 	 Resource I, Session 12: Role of the Nurse in Nutrition Education and Counselling, pp. 72-74 Resource I, Section on Health Promotion, pp. 130-138 Resource 2. Session 2: Counselling in Nutrition, pp. 146-158 Resource 3, Negotiation with Mothers, Fathers, Grandmothers, or Other Caregivers: Women's Nutrition and Breastfeeding practices, pp. 52-58 Resource 8, Session 3: Nutrition Counselling and Education, pp. 93-122 Resource 12, Sessions 4: How to Counsel, Part I, pp 36-43 Resource 9, Session 9: How to Counsel, Part III, pp 99-113 Resource 9, Session 4: Nutrition Counseling, pp. 53-63 Resource 9, Handouts 4.2-4.5 	

catego	orized as assessing, analyzing, and			
5.10	Ability to help clients identify and achieve their nutrition goals	 Resource 2, Session 2: Counselling in Nutrition, pp. 146-158 (partial) 		
5.11	Demonstrates respect for clients and their social, cultural, and economic differences during nutrition counseling, communication, and education	 Resource 2, Session 2: Counselling in Nutrition, pp. 146-158 (partial) Resource 12, Session 12. Action- oriented Groups, IYCF Support Groups, and Home Visits, pp. 126- 137 		
6. F	Promotion of Nutrition and He	althy Living		
health nutrit	n for all ages and stages of life and b ional wellbeing of ages and stages o	T	lifestyles relevan	t to the
Com	petencies	Resources that Cover these Competencies	Optional Wor	-
			Official Role or Responsibility	Current Course
	so assessment, treatment, and man trition for specific populations.	agement competencies as well as competencie	s related to the p	romotion
6.1	Knowledge of nutrition science (relationship between energy intake and expenditure and body weight, pathways of energy metabolism, digestion and absorption of macro and micronutrients, and consequences of deficiencies and excesses)	 Resource I, Nutrition and Dietetics Session 2: Nutrients, Food Sources, and Functions, pp. 14-19 Resource I, Nutrition and Dietetics Session 3: Nutrition Needs Throughout the Lifecycle, pp. 20-25 Resource 9, Session I: Basic Nutrition, pp.16-23 Resource 9, Handout 2.2: Human Energy and Nutrient Requirements 		
6.2	Knowledge of the nutritional needs - macronutrients (carbohydrates, protein and fat) and micronutrients (vitamins and minerals) - at different ages and stages of life	 Resource I, Session 2: Nutrients, Food Sources, and Functions, pp. 14-19 (partial) Resource I, Session 3: Nutrition Needs Throughout the Lifecycle, pp. 20-25 Resource 2, Unit 3, Session 2: Prevention and Management of Micronutrient Deficiencies, pp. 109-125 Resource 9, Session I: Basic Nutrition, pp.16-23 Resource 9, Handout 2.2: Human Energy and Nutrient Requirements 		
6.3	Knowledge of the unique nutrition challenges common in	Resource 2, Session 5: Nutrition in Emergencies, pp. 178-183		

	the context of emergencies (e.g., limited food available, poor sanitation) and strategies to address them	 Resource 12, Module 15: Priority health interventions that impact nutrition in emergencies 	
6.4	Knowledge of population-level and individual-level strategies for prevention and control of micronutrient deficiencies such as fortification, supplementation, deworming, and micronutrient campaigns	 Resource I, Session 8: Factors that Influence Food Consumption and Habits, pp. 49-57 Resource I, Session 9: Nutrition Interventions and Policies in Ghana, pp. 58-67 	
6.5	Knowledge of dietary sources for micronutrients	 Resource I, Session 2: Nutrients, Food Sources, and Functions, pp. 14- 19 (partial) Resource 2, Unit 3, Session 2: Prevention and Management of Micronutrient Deficiencies, pp. 109- 125 Resource 9, Handout 2.2: Human Energy and Nutrient Requirements 	
6.6	Knowledge of the types of malnutrition (underweight, stunting, wasting, overweight obesity)	 Resource I, Sessions 5-7, pp. 35-48 Resource I, Session 5: Outpatient Management of Acute Malnutrition, pp. 106-117 Resource I, Session 6: Inpatient Management of Severe Acute Malnutrition, pp. 118-125 Resource 9, Session 3: Nutrition Assessment, pp. 27-52 	
6.7	Knowledge of common deficiencies in micronutrients (calcium, folic acid, iodine, phosphorus, vitamin A, vitamin B12, vitamin D, iron, zinc), in terms of signs, symptoms, risk factors, and implications to support clinician diagnosis, treatment, referral, and counseling	 Resource I, Session 4: Nutritional Assessment of Individuals and Communities, pp. 26-34 Resource 2, Unit 3, Session 2: Prevention and Management of Micronutrient Deficiencies, pp. 109- 125 	
6.8	Knowledge of the causes and consequences (short and long term) of malnutrition at different stages of life	 Resource I, Session I: Normal Growth and Development, pp. 76-84 Resource I, Session 3: Nutrition Needs Throughout the Lifecycle, pp. 20-25 Resource I, Session 5: Types of Malnutrition, Causes, and Consequences, pp. 35-41 	

		 Resource 3, Unit 1, Session 3: Nutrition for Women and Children, pp. 26-27 (partial) Resource 9, Session 2: Nutrition and Infection, pp. 24-26 	
6.9	Ability to explain the life-cycle nature of nutritional status	 Resource I, Session I: Normal Growth and Development, pp. 76-84 Resource I, Session 3: Nutrition Needs Throughout the Lifecycle, pp. 20-25 Resource I, Session 5: Types of Malnutrition, Causes, and Consequences, pp. 35-41 Resource 3, Unit I, Session 3: Nutrition for Women and Children, pp. 26-27 (partial) 	
6.10	Ability to counsel clients on how to prevent malnutrition	 Resource I, Session 3: Nutrition Needs Throughout the Lifecycle, pp. 20-25 Resource I, Session 5: Types of Malnutrition, Causes, and Consequences, pp. 35-41 Resource 3, Unit I, Session 3: Nutrition for Women and Children, pp. 26-27 (partial) Resource 9, Session I: Basic Nutrition, pp. 16-23 Resource 9, Handouts I.2-1.6 	
6.11	Ability to counsel clients on how to plan, select, prepare, and manage foods, using food labels when available in accordance with the latest recommendations for nutrition and dietary guidelines	 Resource I, Session 8: Factors that Influence Food Consumption Habits, pp. 49-57 Resource 9, Session I: Basic Nutrition, pp.16-23 Resource 9, Handout I.5: Principles of Meal Planning Resource 9, Session 4: Nutrition Counseling, pp. 53-63 	
6.12	Ability to counsel clients on healthy living (e.g., physical activity, limited alcohol intake, no smoking or drug use) in accordance with the latest recommendations for nutrition and dietary guidelines	 Resource I, Session 8: Factors that Influence Food Consumption Habits, pp. 49-57 Resource 9, Session 4: Nutrition Counseling, pp.53-63 	
6.13	Ability to counsel all populations on the prevention of anemia and other micronutrient deficiencies	 Resource I, Session I: Antenatal Care, pp. 158-60 (partial) 	

Children	 Water Safety and Hygiene, pp.68-71 Resource 9, Handout 6.1. Food- and Water-Borne Illness Resource 9, Handout 6.2. Importance of Food and Water Safety Resource 9, Handout 6.3. Counselling Messages on Food and Water Safety 		are.
		Responsibility	
on also assessment treatment and ma	nagement competencies as well as competencie	or Responsibility	Course

	and development and the prevention and treatment of illness and disease	 Resource 12, Session 2, pp. 20-27 Resource 9, Session 8: Nutrition Care for Infants and Young Children, pp. 78-87 Resource 9, Handouts 8.1-8.6 	
7.2	Knowledge of the specific nutritional requirements of infants and young children, including the small and sick newborn	 Resource I, Session 3: Nutrition Needs Throughout the Lifecycle, pp. 20-25 Resource I, Session 3: Infant and Young Child Feeding, pp. 88-104 Resource 9, Handout 2.2: Human Energy and Nutrient Requirements 	
7.3	Knowledge of infant feeding policies and monitoring systems	Country-specific. To be identified in country.	
7.4	Knowledge of the different types of disabilities and possible effects on children's growth and development, and ability to feed	 Resource 2, Session 4: Nutrition in Children with Disabilities, pp. 174- 177 (only minimal) Resource 19 	
7.5	Knowledge of when to refer children, and their caregivers, for additional support for concerns about the child's growth, health, and development	 Resource 4 Resource 12, Session 3: Common Situations that Can Affect Breastfeeding, pp. 28-35 Resource 12, Session 9: How to Counsel, Part II, pp. 99-113 Resource 12, Session 10: Common Breastfeeding Difficulties, pp. 114-120 Resource 12, Session 15: Feeding the Sick Child, pp. 151-154 Resource 12, Session 16: Infant Feeding in the Context of HIV, pp. 155-170 Resource 9, Session 8: Nutrition Care for Infants and Young Children, pp. 78-87 Resource 19 	
7.6	Ability to counsel mothers and other caregivers on when to seek care (the warning signs of infant undernourishment or dehydration)	Resource 18, Video: Danger Signs in Newborns for Health Workers	
7.7	Ability to counsel mothers and other caregivers based on growth trends	 Resource I, Session 9: Nutrition Interventions and Policies in Ghana, pp. 58-63 Resource I, Session 3: Infant and Young Child Feeding, pp. 88-104 	
7.8	Ability to counsel mother and caregivers on how recognize	 Resource 1, Session 3: Infant and Young Child Feeding, pp. 88-104 	

7.9	feeding cues, practicing active, responsive, developmentally-appropriate, and age-appropriate feeding	 Resource 12, C-MAMI tool, Counseling and Support Actions Booklet, pp. 12-16 Resource 12, Session 2: Why IYCF Matters, pp. 24-27 Resource 12, Session 10: Common Breastfeeding Difficulties, pp. 114- 120 Resource 12, Module 17: Infant and 	
7.9	Ability to assist and support mothers and other caregivers to maintain optimal feeding practices in the context of emergencies	 Resource 12, Module 17: Illiant and young child feeding Resource 12 Resource 13, Session 5.5-5.6, Management of breastfeeding by a malnourished mother; Mother traumatised, in emotional crisis, or rejecting infant, pp. 58-61 Resource 12, C-MAMI tool, Triage Maternal Mental Health Assessment, p.7; Maternal Mental Health Assessment, p. 11 	
7.10	Ability to counsel mothers and other caregivers on feeding the child during and after illness	 Resource 1, Session 3: Infant and Young Child Feeding, pp. 103-104 Resource 12, Session 15: Feeding the Sick Child, pp. 151-154 	
7.11	Ability to develop a feeding plan following recovery of a child from severe acute malnutrition (SAM), therapeutic feeding, or other illness	 Resource I, Session 5-Outpatient Management of Severe Acute Malnutrition, pp. 106-117 	
Brea	stfeeding		
7.12	Knowledge of how to implement the International Code of Marketing of Breast-milk Substitutes products that are covered by the Code ways to protect breastfeeding in practice how to respond if offered information provided by manufacturers and/or distributors of products ways that facilities should ensure that there is no promotion of infant formula, feeding bottles, or teats harm of accepting financial or material inducements that	• Resource I5	

	might be offered by a manufacturer and/or distributor of products		
7.13	Knowledge of ways a birthing facility should support breastfeeding	To be identified.	
7.14	Knowledge of early breastfeeding physiology, colostrum, breastfeeding techniques	To be identified.	
7.15	Knowledge of ways to ensure women continue breastfeeding during and after discharge from a birthing facility	 Resource I, Obstetric Nursing, Session 3: Neonatal Care, pp. 163- 165 	
7.16	Knowledge of contraindications to breastfeeding and medical indications for supplemental feeding of a newborn	 Resource I, Obstetric Nursing, Session 3: Neonatal Care, pp. 163- 165 	
7.17	Knowledge of how to manage artificial feeding in emergency contexts to protect both breastfed and non-breastfed children	• Resource 15	
	Ability to explain to pregnant women, mothers, and caregivers the importance of breastfeeding, based on client's knowledge	 Resource I, Child Health / Pediatric Nursing, Session 3: Infant and Young Child Feeding, pp. 88-104 Resource 3, Session 7: Breastfeeding Advantages, Beliefs, and Myths and the Risks of Formula Feeding, pp. 35-36 Resource 12, Session 3: Common Situations that Can Affect Breastfeeding, pp. 28-35 Resource 12, Session 6: How to Breastfeed, pp. 59-70 Resource 12, Session 10: Common Breastfeeding Difficulties, pp. 114-120 Resource 9, Session 8: Nutrition Care for Infants and Young Children, pp. 78-87 Resource 9, Handout 8.2: Breastfeeding Resource 9, Handout 8.4: Risks and Benefits of Breastfeeding and Not Breastfeeding 	
7.19	Ability to explain to pregnant women, mothers, and caregivers	 Resource I, Child Health / Pediatric Nursing, Session 3: Infant and Young Child Feeding, pp. 88-104 	

how breastfeeding works, based on client's knowledge	 Resource 3, Session 7: Breastfeeding Advantages, Beliefs, and Myths and the Risks of Formula Feeding, pp. 35-36 Resource 12, Session 3: Common Situations that Can Affect Breastfeeding, pp. 28-35 Resource 12, Session 6: How to Breastfeed, pp. 59-70 Resource 12, Session 10: Common Breastfeeding Difficulties, pp. 114-120 Resource 9, Session 8: Nutrition Care for Infants and Young Children, pp. 78-87 Resource 9, Handout 8.2: Breastfeeding Resource 9, Handout 8.4: Risks and Benefits of Breastfeeding and Not Breastfeeding 	
7.20 Ability to facilitate breastfeeding within the first hour, including promoting immediate and uninterrupted skin-to-skin contact and kangaroo mother care (KMC) as well as demonstrating a comfortable and safe position for breastfeeding and helping a mother achieve an effective and comfortable latch	 Resource I, Obstetric Nursing, Session 3: Neonatal Care, pp. 163-165 Resource I, Child Health / Pediatric Nursing, Session 3: Infant and Young Child Feeding, pp. 88-104 Resource 3, Session 7: Breastfeeding Advantages, Beliefs, and Myths and the Risks of Formula Feeding, pp. 35-36 Resource 12, C-MAMI tool, Counseling and Support Actions Booklet, pp. 12-29 Resource 12, Session 3.1.b: Overview of Kangaroo Care Resource 12, Session 3: Common Situations that Can Affect Breastfeeding, pp. 28-35 Resource 12, Session 6: How to Breastfeed, pp. 59-70 Resource 12, Session 10: Common Breastfeeding Difficulties, pp. 114-120 Resource 9, Session 8: Nutrition Care for Infants and Young Children, pp. 78-87 Resource 9, Handout 8.2: Breastfeeding 	

7.21 Ability to help a mother manage milk expression	 Resource 9, Handout 8.4: Risks and Benefits of Breastfeeding and Not Breastfeeding Resource 18, Videos: Keeping the Small Baby Warm (for health provider); Continuous Skin-to-Skin Care (for health provider) Resource 18, Videos: Attaching Your Baby at the Breast (for mother), Breastfeeding Attachment (for health provider) Resource 18, Videos: Breastfeeding in the First Hours (for mother); Early Initiation of Breastfeeding (for health provider); How to Express Your First Milk (for mother); Expressing the First Milk (for health provider) Resource 1, Session 3: Infant and Young Child Feeding, pp. 96-97 Resource 12, Session 11: Alternative Methods of Feeding a Baby, pp. 136-144 Resource 12, Counselling Card 10: When you are separated from your baby Resource 18, Videos: How to Express Breastmilk (for mother); Expressing and Storing Breastmilk (for health provider) 	
7.22 Ability to help mothers and caregivers if a mother is not feeding her baby directly at the breast	 Resource 12, C-MAMI tool, Feeding Assessment, p. 9; Counseling and Support Actions Booklet, pp. 24-25 Resource 13, Annex 2, How to Cup Feed, pp.119-120; Annex 3, Hand Expressing Breastmilk, pp. 121 Resource 18, Videos: Cup Feeding (for health providers) 	
7.23 Ability to help a mother to breastfeed a low-birth-weight or sick baby	 Resource 13, Sessions 5.2-5.4, Low-Birth Weight Infants, Babies who are visibly thin or underweight, Babies who refuse the breast, pp. 55-58 Resource 18, Videos: Breastfeeding Your Small Baby (for mothers); Breastfeeding the Small Baby (for health provider) 	
7.24 Ability to work with a mothers / caregivers to develop	Resource 18, Videos: Discharging the Small Baby (for health provider)	

	individualized discharge breastfeeding plans		
7.25	Ability to assist and support mothers to follow optimal breastfeeding practices, including early initiation of breastfeeding, responsive feeding, recognition of hunger cues, exclusive breastfeeding, continued breastfeeding	 Resource I, Obstetric Nursing, Session 3: Neonatal Care, pp. 163-164 Resource I, Session 3: Infant and Young Child Feeding, pp. 88-104 Resource I, Session 9: Nutrition Interventions and Policies in Ghana, pp. 58-63 Resource I2, Session 3: Care of the Baby at the Time of Birth, pp. 19-30 (initiation within one hour of birth) Resource I2, Session 5: Recommended IYCF Practices: Breastfeeding, pp. 44-58 Resource I2, Session 6: How to Breastfeed, pp. 59-70 Resource I2, Session 10: Common Breastfeeding Difficulties, pp. 114-120 Resource I2, Session 16: Infant Feeding in the Context of HIV, pp. 155-170 	
7.26	Ability to assess breastfeeding positioning, latch, and practices	 Resource I, Session 3-Infant and Young Child Feeding, pp. 88-104 Resource I2, C-MAMI tool, Feeding Assessment, pp. 8-10; Counseling and Support Actions Booklet, pp. 12-29 Resource I2, Session 6: How to Breastfeed, pp. 59-70 Resource I2, Session I0: Common Breastfeeding Difficulties, pp. 114-120 Resource I8, Videos: Helping a Breastfeeding Mother (for health provider) 	
7.27	Ability to help a mother prevent and/or address common breastfeeding problems (e.g., sore nipples, breast engorgement and mastitis, breastfeeding challenges faced by working women, latching, difficulty sucking, and insufficient milk)	 Resource 12, C-MAMI tool, pp. 8-10; Counseling and Support Actions Booklet, pp. 15-19 Resource 12, Session 10: Common Breastfeeding Difficulties, pp. 114- 120 Resource 13, Session 5.5: Management of breastfeeding by a malnourished mother, pp. 58 Resource 18, Videos: Is Your Baby Getting Enough Milk (for mothers); 	

		Increasing Your Milk Supply (for mothers); What To Do About Breast Pain (for mothers); What To Do About Nipple Pain (for mothers) Not Enough Milk (for health provider); Nipple Pain (for health provider); Breast Pain (for health provider); Breast Engorgement (for health provider); Making Enough Milk (for health provider)	
7.28	Ability to assist and support mothers and other caregivers to continue breastfeeding and, if needed, use breastmilk substitutes in context of emergencies	 Resource 12, Module 17: Infant and young child feeding Resource 12 Resource 13, Session 5.6: Mother traumatised, in emotional crisis, or rejecting infant, pp. 58-60 Resource 12, C-MAMI tool, Triage Maternal Mental Health Assessment, p.7; Maternal Mental Health Assessment, p. 11 Resource 15 	
Infar	nt and young child feeding		
7.29	Ability to assess complementary feeding practices and challenges	 Resource 1, Session 3-Infant and Young Child Feeding, pp. 88-104 	
7.30	Ability to counsel mothers and other caregivers on optimal complementary feeding practices, including timing of introduction, frequency of feeding, amount and consistency of food provided at each feeding, and feeding a diverse diet and locally available, affordable, nutritious foods, based on nutritional status and/or growth trends and in accordance with guidelines	 Resource I, Session 9: Nutrition Interventions and Policies in Ghana, pp. 58-63 Resource I, Session 3: Infant and Young Child Feeding, pp. 88-104 Resource I2, Session 7: Recommended IYCF Practices: Complementary Feeding, pp. 71-88 Resource I2, Session 8: Complementary Foods, pp. 89-98 Resource I2, Session I6: Infant Feeding in the Context of HIV, pp. 155-170 	
7.31	Ability to help a mother or caregiver prevent, resolve, or refer difficulties with feeding/eating	 Resource 14, Part 3, Chapter 7, Common Feeding Challenges and Solutions Across the Ages, pp. 241- 285; Handout, Appendix 9, Common Feeding Issues and Solutions Quick Charts, pp. 375-385 Resource 19, Module 4: Eating and Drinking, pp. 1-18 	

pi at	oonsive care and early learning ctices			
7.32	Knowledge of optimal early childhood development (ECD), developmental milestones, and the importance of nurturing care, responsive caregiving, and early stimulation	 Resource I, Session 3: Infant and Young Child Feeding, pp. 97-99 (partial) Resource 4, All sessions Resource 20, Appendix 10 		
7.33	Ability to demonstrate responsive caregiving and early childhood stimulation (play and communication activities)	 Resource 4, All sessions Resource 12, Session 2: Why IYCF Matters, pp. 24-27 		
7.34	Ability to counsel mothers and caregivers on promoting early childhood development and nurturing care, monitoring developmental milestones, and noticing warning signs	 Resource I, Session I: Normal Growth and Development, pp. 76-84 (partial) Resource 4, All sessions 		
		es Uniquely for Pregnant and Lactating Volume omote practices for the prevention and control		(macro and
micro	onutrients) during pregnancy and lac	tation.		<u> </u>
Con	npetencies	Resources that Cover these	Optional Worl	
- 011	petericies		Optional Work	kspace
C 011	petencies	Competencies	Official Role or Responsibility	Current Course
See a		Competencies agement competencies as well as competencie	Official Role or Responsibility	Current Course

8.3	Knowledge of the importance / benefits of breastfeeding for the health and wellbeing of mothers Knowledge of the effect of maternal nutritional status on nutrient composition of breastmilk (quality and quantity) Ability to counsel pregnant and lactating women on optimal nutrition practices (e.g., increased food intake, diet diversity, consumption of animal-source foods, IFA intake, adequate rest,	 Breastfeeding Women on Anaemia Resource 3, Session 7: Breastfeeding Advantages, Beliefs, and Myths and the Risks of Formula Feeding, pp. 35-36 Resource 12, Session 5: Recommended IYCF Practices: Breastfeeding, pp. 44-58 Resource 12, Session 3: Common Situations that Can Affect Breastfeeding, pp. 28-35 Resource 1, Session 1: Antenatal Care, pp. 158-160 Resource 1, Session 2: Postnatal Care, pp. 161-162 (partial) Resource 3, Session 5: Women's Nutrition: The Malnutrition Cycle 		
	reduced physical labor, and keeping physically active)	 Resource 12, Session 3: Common Situations that Can Affect Breastfeeding, pp. 28-35 Resource 12, Session 5: Recommended IYCF Practices: Breastfeeding, pp. 44-58 Resource 12, Session 6: How to 		
		Breastfeed, pp. 59-70		
	Promotion of Nutrition Practic	Breastfeed, pp. 59-70 es Uniquely for Adolescents		
Sum		Breastfeed, pp. 59-70	d), addressing the	eir unique
Sum nutri	mary: The nurse will be able to pr	Breastfeed, pp. 59-70 es Uniquely for Adolescents comote nutrition of adolescents (10-19 years of the second secon	Optional Wor	kspace
Sum nutri	mary: The nurse will be able to pr tional requirements and challenges.	Breastfeed, pp. 59-70 es Uniquely for Adolescents comote nutrition of adolescents (10-19 years of	,	
Sum nutri Con	mary: The nurse will be able to pr tional requirements and challenges. npetencies	Breastfeed, pp. 59-70 es Uniquely for Adolescents comote nutrition of adolescents (10-19 years of the second terms of the se	Optional Wor Official Role or Responsibility	kspace Current Course

9.2	Knowledge of the unique nutritional needs of pregnant adolescents Ability to counsel adolescents on	 Resource 9, Handout 2.2: Human Energy and Nutrient Requirements Resource 3, Training Guide, Session 5: Women's Nutrition: The Malnutrition Cycle and Strategies to Break It, pp. 32-33 Resource 3, Reference Manual, Documents 10-11 Resource 1, Training Guide, Session 3: Nutrition Needs Throughout the 		
	optimal nutrition practices	Lifecycle, pp. 20-25 (partial) Resource 3, Training Guide, Session 5: Women's Nutrition: The Malnutrition Cycle and Strategies to Break It, p. 32-33		
10. F	Promotion of Nutrition among	People Living with HIV and AIDS		
(PLW the as	(HA) by applying the national guide ssessment and management of case	T	d adults living wit	h HIV in
Com	petencies	Resources that Cover these Competencies	Optional Wor	-
		Competencies	Official Role or Responsibility	Current Course
	lso assessment, treatment, and mar	agement competencies as well as competencie		
prom	otion of nutrition and healthy living		s related to the g	enerai
-	otion of nutrition and healthy living Knowledge of the impact of HIV and AIDS on food security and nutritional status and how nutrition affects disease		s related to the g	eneral
10.1	Knowledge of the impact of HIV and AIDS on food security and nutritional status and how nutrition affects disease progression	 Resource I, Session 2: Nutrition Care and Support in the Context of HIV and/or Tuberculosis, pp. 141-146 	s related to the g	enerai
10.1	Knowledge of the impact of HIV and AIDS on food security and nutritional status and how nutrition affects disease	 Resource I, Session 2: Nutrition Care and Support in the Context of HIV and/or Tuberculosis, pp. 141- 	s related to the g	eneral
10.1	Knowledge of the impact of HIV and AIDS on food security and nutritional status and how nutrition affects disease progression Knowledge of the energy and nutrient requirements of PLWHA, including drug-induced interactions, nutrition implications, and appropriate	 Resource I, Session 2: Nutrition Care and Support in the Context of HIV and/or Tuberculosis, pp. 141- 146 Resource I, Session 2: Nutrition Care and Support in the Context of HIV and/or Tuberculosis, pp. 141- 	s related to the g	eneral
10.1	Knowledge of the impact of HIV and AIDS on food security and nutritional status and how nutrition affects disease progression Knowledge of the energy and nutrient requirements of PLWHA, including drug-induced interactions, nutrition implications, and appropriate dietary responses Knowledge of appropriate nutrition practices in the context	 Resource I, Session 2: Nutrition Care and Support in the Context of HIV and/or Tuberculosis, pp. 141- 146 Resource I, Session 2: Nutrition Care and Support in the Context of HIV and/or Tuberculosis, pp. 141- 146 Resource 3, Session 9: Infant Feeding 	s related to the g	eneral

	supplementary food for the management of acute malnutrition in PLWHA	HIV and/or Tuberculosis, pp. 148- 155 • Resource 2, Session 2: Nutrition in		
10.6	Ability to counsel PLWHA (or their caregivers) on appropriate	 HIV, pp. 167 Resource I, Session 2: Nutrition Care and Support in the Context of 		
	dietary practices, depending on a client's condition in order to prevent weight loss, improve body composition and immunity, and prevent infections	HIV and/or Tuberculosis, pp. 148- 155		
10.7	Ability to counsel mothers and other caregivers on breastfeeding options in the context of HIV and guide the mother to adopt the best option	 Resource 3, Session 9: Infant Feeding and HIV, pp. 41-44 Resource 12, Session 16: Infant Feeding in the Context of HIV, pp. 155-170 		
10.8	Ability to help PLWHA (or their caregivers) develop a nutritional care and support plan	 Resource I, Session 2: Nutrition Care and Support in the Context of HIV and/or Tuberculosis, pp. 148-155 		
10.9	Ability to provide nutritional management of HIV symptoms and drug side effects	 Resource 8, Session 1: Introduction to Nutrition, pp. 36-40 		
11.1	lanagement of Nutrition Inter	ventions/Services		
	mary: The nurse will be able to ov ding mentorship and guidance to C	versee the work of other members of the healt HWs.	h care team, inclu	ding
provi	<u>-</u>	Resources that Cover these	h care team, inclu	
provi	ding mentorship and guidance to C	HWs.		
Com	ding mentorship and guidance to C	HWs. Resources that Cover these Competencies	Optional Worl Official Role or	kspace Current
Com See a	ding mentorship and guidance to C	HWs. Resources that Cover these Competencies	Optional Worl Official Role or	kspace Current
Com See al	ding mentorship and guidance to Copetencies so assessment, treatment, and pro	HWs. Resources that Cover these Competencies	Optional Worl Official Role or	kspace Current
See al	Iso assessment, treatment, and proman resources management Ability to respectfully, constructively, and supportively supervise other facility- and community-based workers and	Resources that Cover these Competencies motion competencies. Resource 3, Reference Manual, Document #56: Supervision	Optional Worl Official Role or	kspace Current

	collaboratively to promote nutrition		
	a collection, management, orting, and use		
11.4	Ability to collect, manage, and report nutrition-related data	 Resource 12, Session 2: Why IYCF Matters, pp. 24-27 Resource 9, Facilitator's Guide, Session 13: NACS Data Collection and Reporting, pp. 109-115 	
11.5	Ability to use data and other information to identify nutrition-related priorities in the community	To be identified	
11.6	Ability to identify/address barriers to provision of effective, high quality, equitable nutrition services, using a QI or other similar approach	To be identified	
Supp	oly chain management		
11.7	Ability to manage the supply chain (project need, order, store) of nutrition supplies	 Resource 9: Handout 9.6: Specialised Food Product Logistics and Supply Chain Management 	

Resources

No.	Resource
1	Nutrition Technical Update for Nursing and Midwifery Tutors in Ghana: Tutors' Teaching Aids (2013)
2	Nutrition Facilitator's Manual (2017)
	https://ecsahc.org/wp-content/uploads/2017/05/HF_FM_FINAL.compressed.pdf
3	Essential Nutrition Actions and Essential Hygiene Actions Framework Facilitator Guide (2017)
	https://coregroup.org/wp-content/uploads/media-backup/documents/Resources/Tools/ENA_EHA/ENA_EHA_Training_Guide_Health_Workers.pdf
	Essential Nutrition Actions and Essential Hygiene Actions Framework Reference Manual(2017)
	https://coregroup.org/wp-c ontent/uploads/media-backup/documents/Resources/Tools/ENA_EHA/ENA_EHA_Reference_Manual_Health_Work ers_Nutrition.pdf
4	Care for Child Development Package (2012)
	https://www.unicef.org/earlychildhood/index_68195.html
5	Community Based Infant and Young Child Feeding Counselling Package: Facilitator Guide (2013)
	https://www.unicef.org/nutrition/files/Facilitator_Guide_September_2013.pdf
6	Community Management of At-risk Mothers and Infants under six months of age (C-MAMI) (2018)
	https://www.ennonline.net/ourwork/research/mami
7	Essential newborn care course (2010)
	https://www.who.int/maternal_child_adolescent/documents/newborncare_course/en/
8	Malawi Nutrition Care, Support, and Treatment for Adolescents and Adults: Training Materials for Facility-Based Service Providers (2017)
	https://www.fantaproject.org/tools/malawi-nutrition-care-support-and-treatment-adolescents-and-adults-training-materials-facility

	Zambia Nutrition Assessment Commelling and Supress (NACS) Turbining
9	Zambia Nutrition Assessment, Counselling and Support (NACS) Training Materials for Facility-Based Providers: Facilitators' Guide (2017)
	https://www.fantaproject.org/tools/zambia-nutrition-assessment-counselling-and-support-nacs-training-materials-facility-based
	Zambia Nutrition Assessment, Counselling and Support (NACS) Training Materials for Facility-Based Providers: Participant Handouts (2017)
	https://www.fantaproject.org/tools/zambia-nutrition-assessment-counselling-and-support-nacs-training-materials-facility-based
10	Guide to Anthropometry: A Practical Tool for Program Planners, Managers, and Implementers (2018)
	https://www.fantaproject.org/tools/anthropometry-guide
11	Harmonized Training Package on Nutrition in Emergencies (NiE) (2011)
	https://www.ennonline.net/resources/htpversion2
12	IYCF-E Toolkit: Rapid start-up for emergency nutrition personnel (2017)
	https://resourcecentre.savethechildren.net/library/infant-and-young-child-feeding-emergencies-iycf-e-toolkit-rapid-start-emergency-nutrition
13	Infant Feeding in Emergencies for health and nutrition workers in emergency situations. Module 2 Version 1.1 (2007)
	https://www.ennonline.net/attachments/141/module-2-v1-1-core-manual-english.pdf
	See also the IFE interactive lessons
	https://lessons.ennonline.net/
14	Holt International's Feeding and Position Manual: Guidelines for Working with Babies and Children (2019)
	https://www.holtinternational.org/about/child-nutrition/feeding-and-positioning-manual/
15	Infant and young Child Feeding Practices: Standard Operating Procedures for the Handling of Breastmilk Substitutes (BMS) in Refugee Situations for Children 0-23 Months (2015)
	https://www.ennonline.net/attachments/2413/UNHCR_BMS-SOP-LAY2-MAINFILE-D-(1).pdf
	https://www.ennonline.net/attachments/2414/UNHCR_BMS-SOP-LAY2-ANNEXES-D-(1).pdf
16	NCD Training Modules (2013)
	https://www.cdc.gov/globalhealth/healthprotection/fetp/ncd_modules.htm
17	Virtual Courses - Diabetes Self-Management Support Course (ND)
	1

	https://www.paho.org/hq/index.php?option=com_content&view=article&id=12811:virtual-courses&Itemid=42225⟨=en
18	Global Health Media Videos (ND)
	https://globalhealthmedia.org/videos/
19	Eating and Drinking Module of the AbANA Early Intervention Program (LSHTM) (ND)
	https://www.ubuntu-hub.org/resources/abaana/
20	WHO Guidelines for the Inpatient Treatment of Severely Malnourished Children (2003)
	https://apps.who.int/iris/bitstream/handle/10665/42724/9241546093.pdf?sequence=1
21	WHO Training Course on the Management of Severe Malnutrition (2002)
	https://apps.who.int/iris/handle/10665/70449
22	Guideline: Updates on the Management of Severe Acute Malnutrition in Infants and Children (2013)
	http://www.who.int/nutrition/publications/guidelines/updates_management_SAM_infantandchild ren/en/
23	WHO Haemoglobin Concentrations for the Diagnosis Of Anaemia and Assessment of Severity. Vitamin and Mineral Nutrition Information System. (2011)
	https://www.who.int/vmnis/indicators/haemoglobin.pdf
24	Adult Learning Theories in Context: A Quick Guide for Healthcare Professional Educators
	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6458658/
25	The Wellness Network. 2018. Applying Adult Learning Theories for Effective Patient Education
	https://www.thewellnessnetwork.net/health-news-and-insights/blog/applying-adult-learning-theories/

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- Maternal and Child Health Improvement Project (MCHIP). 2011. PROGRAM ROADMAP: Pre-service Education.

 Baltimore: Jhpiego Corporation.

 http://resources.jhpiego.org/system/files/resources/MCHIP_PSE_Roadmap_En.pdf
- Maternal and Child Survival Program (MCSP). 2016. Operational Guidance for Maternal and Child Survival Country Programs: Pre-Service Education Current Evidence and Recommendations to Support Design and Implementation of Pre-Service Education Programs. Washington, DC: MCSP. https://www.mcsprogram.org/wp-content/uploads/2016/10/MCSP-ISToperatonal-guidance.pdf
- Schaefer, L., ed. 2002. Preservice Implementation Guide: A process for strengthening preservice education. Baltimore: JHPIEGO. http://reprolineplus.org/system/files/resources/preserviceimplementationguide.pdf
- World Health Organization (WHO). 2001. *IMCI: Planning, Implementing and Evaluating Pre-Service Training*. Geneva: WHO. https://www.who.int/maternal_child_adolescent/documents/planning_implementing_evaluating/en/
- World Health Organization (WHO) and the United Nations Children's Fund (UNICEF). 2020. Competency verification toolkit: Ensuring competency of direct care providers to implement the Baby-Friendly Hospital Initiative. Geneva: WHO. https://www.who.int/publications/i/item/9789240008854



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