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Strengthening Partnerships, Results,  
and Innovations in Nutrition Globally

# Nutrition Workforce Mapping

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## Toolkit



**August 2014**

The Nutrition Workforce Mapping Toolkit is meant to guide and strengthen nutrition workforce capacity development for effective delivery of nutrition actions.

## **ABOUT SPRING**

The Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) project is a five-year USAID-funded Cooperative Agreement to strengthen global and country efforts to scale up high-impact nutrition practices and policies and improve maternal and child nutrition outcomes. The project is managed by JSI Research & Training Institute, Inc., with partners Helen Keller International, The Manoff Group, Save the Children, and the International Food Policy Research Institute.

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## **DISCLAIMER**

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# Section 1: Introduction to Nutrition Workforce Mapping

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## BACKGROUND

Globally, there has been a rapidly growing recognition of the critical importance of adequate nutrition for maternal and child health, cognitive function and educability, economic growth, and poverty reduction. There is also global consensus on actions that are essential to reduce malnutrition. As underscored in the Lancet series on Maternal and Child Nutrition (2008 and 2013), accelerating progress in reducing malnutrition requires consensus and commitment to deliver nutrition-specific actions through the health sector as well as nutrition-sensitive actions through several other sectors such as gender, agriculture, education, and social protection. These actions highlight the importance of strong national capacity<sup>1</sup> to implement actions that can directly address malnutrition.

Despite the fact that there is global consensus on essential actions to address undernutrition and greater acknowledgement of the critical importance of adequate nutrition for maternal and child health, cognitive function and educability, economic growth, and poverty reduction, malnutrition continues to affect more than two billion people across the world. A robust nutrition workforce<sup>2</sup> is essential<sup>3</sup> to improve maternal and child nutrition, but this workforce is often insufficient and unqualified.

Realizing the gravity of undernutrition problem, the United States Agency for International Development (USAID) recently announced its Multi-Sectoral Nutrition Strategy 2014-25<sup>4</sup> to further strengthen its global efforts aimed at reducing undernutrition and improving health and well-being of people, especially in countries with a high burden of undernutrition. In order to improve maternal and child nutritional outcomes, the strategy has identified provision of nutrition-specific actions (e.g. exclusive breastfeeding, complementary feeding), and a significant increase in the number of professionals and frontline workers, especially women, formally trained and employed in nutrition to meet country needs.”<sup>5</sup>

Most countries with the highest burden of stunting and anemia face a severe shortage of human resources. The World Health Organization’s Nutrition Landscape Information System<sup>6</sup> clearly shows that countries with high burden of undernutrition in West and Sub-Saharan African have low-density

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<sup>1</sup> The SPRING project describes capacity as the ability of individuals, organizations, or societies to set and implement development objectives on a sustainable basis. Strong national capacity for individuals requires both adequate numbers of the right categories, and knowledge and skills of staff.

<sup>2</sup> For the purpose of this document, the term “nutrition workforce” refers to those health workers who are tasked to deliver nutrition-specific actions identified through a consultative process led by an external expert of the SPRING project.

<sup>3</sup> Noreen Mucha and Manisha Tharaney. 2013. Strengthening Human Capacity to Scale-Up Nutrition. Accessed on June 27, 2014 from <http://www.bread.org/event/gathering-2013/international-meeting/pdf/strengthening-human-capacity.pdf>

<sup>4</sup> USAID. 2014. Multi-Sectoral Nutrition Strategy 2014-2025. Washington D.C. Accessed on June 30, 2014 from [http://www.usaid.gov/sites/default/files/documents/1867/USAID\\_Nutrition\\_Strategy\\_5-09\\_508.pdf](http://www.usaid.gov/sites/default/files/documents/1867/USAID_Nutrition_Strategy_5-09_508.pdf)

<sup>5</sup> Ibid.

<sup>6</sup> WHO. Nutrition Landscape Information System. Geneva. Accessed on July 03, 2014 from <http://apps.who.int/nutrition/landscape/report.aspx>

health workforce. Further, there is also lack of data on the number of professionals trained in nutrition.<sup>7</sup>

Though governments acknowledge the importance of capacity-building<sup>8</sup> for delivery of effective nutrition actions, they often lack the capacity and/or resources to map and augment the required workforce for the delivery of nutrition actions at facility and community level. Additionally, there is little consensus on the human resource strategies needed to develop the workforce capable of delivering high-impact nutrition-specific and nutrition-sensitive actions that can reduce undernutrition.

The high-impact actions included in USAID's Multi-Sectoral Nutrition Strategy 2014-25 cut across sectors and systems such as health, agriculture, food, and education.<sup>9</sup> Evidence increasingly suggests that development programs can benefit from holistic and multisectoral "systems thinking"<sup>10</sup> to improve program delivery and outcomes. This idea of multi sectoral "systems thinking" also needs to be embraced in the development of a nutrition workforce that is capable of acting and delivering services across health, agriculture and other social sectors. The many tasks, roles, responsibilities and capabilities of such a workforce within specific sectors need to be defined. The scope of this nutrition workforce assessment toolkit is currently limited to nutrition-specific actions delivered by the health workforce. However the approach could be adapted to nutrition-sensitive actions for a workforce within other relevant sectors as well.

## PURPOSE

Understanding the availability, spread, capacity and role of the nutrition workforce is an essential step to implement and scale up nutrition programs. This requires data collection and analysis that can help develop strategies to strengthen institutional and workforce capacity to support the delivery of nutrition actions effectively.

Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING), has developed a simple and easy-to-use toolkit for mapping the nutrition workforce within the health sector. The purpose of this assessment is to collect data on nutrition-specific actions performed by health workers at different levels with the health care service-delivery system. Data that is gathered includes nutrition workforce size, composition, qualification, availability, gaps, and training status within different levels of the health facility. For example, the toolkit is designed to collect and compare data on various cadres of health workers regarding their training, responsibilities, and tasks. Similarly the tools are designed to calculate ratios of health providers responsible for nutrition actions to the target population.

The toolkit then guides stakeholders in the development of tables and graphs which can be used for identifying training gaps related to nutrition-specific actions, improving planning and delivery of those

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<sup>7</sup> Ibid.

<sup>8</sup> The SPRING project describes capacity as the ability of individuals, organizations, or societies to set and implement development objectives on a sustainable basis. Strong national capacity for individuals requires both adequate numbers of the right categories or staff, as well as the knowledge and skills.

<sup>9</sup> USAID.2014. Multi-Sectoral Nutrition Strategy 2014-2025. Washington D.C. Access on June 30, 2014 from [http://www.usaid.gov/sites/default/files/documents/1867/USAID\\_Nutrition\\_Strategy\\_5-09\\_508.pdf](http://www.usaid.gov/sites/default/files/documents/1867/USAID_Nutrition_Strategy_5-09_508.pdf)

<sup>10</sup> World Health Organization. 2009. Systems thinking for health systems strengthening. Edited by Don de Savigny and Taghreed Adam.

actions, strengthening design and delivery of competency-based training programs; and advocating for nutrition workforce recruitment, deployment, and capacity-building.

## AUDIENCE

This toolkit has been designed for USAID Missions, USAID implementing partners, and Ministries of Health (particularly from USAID priority countries and those that have joined the Scaling Up Nutrition (SUN) movement) to deliver their national nutrition strategies at scale. It targets program managers, human resource managers, capacity building and quality improvement consultants, and technical assistance providers who work to improve delivery of nutrition actions and strengthen human resource capacity.

## STRUCTURE

This toolkit is organized in five sections. The first section provides an introduction to nutrition workforce mapping need and relevance. The second section of the toolkit includes a user's guide that describes the methodology and process for workforce mapping. Section 3 includes the data collection tools, while Section 4 and 5 are job aids for data collection and for data presentation and analysis.

## DEVELOPMENT

SPRING developed a draft nutrition workforce mapping tool with assistance from a human resources expert, who scanned national nutrition action plans and strategies to identify prioritized nutrition-specific and nutrition-sensitive interventions.<sup>11</sup> These interventions were matched with the high-impact interventions outlined in the *Lancet Series on Maternal and Child Nutrition* (2008<sup>12</sup> & 2013<sup>13</sup>) and the *World Health Organization's Essential Nutrition Actions: improving maternal, newborn and infant and young child health and nutrition* (2013).<sup>14</sup> Over the course of two half-day workshops led by the expert, a matrix of the high-impact interventions and the range of providers offering these services at all service delivery levels was created with Microsoft Excel software. The expert collaborated with the SPRING team to come to consensus on the prioritized high-impact nutrition interventions, the associated nutrition-actions for each intervention, and format of the tool.

SPRING pre-tested the draft tool in the department of Artibonite, Haiti. In collaboration with the Ministry for Public Health and Population, the tool was adapted to the Haitian context and formally administered to the Nutrition Focal Point for Artibonite, staff at Providence Hospital in Gonaives, and staff at SSPE Saint Marc. Data on the total numbers of workers of each provider type were also collected from human resources personnel at the departmental and central level. The primary findings of the pre-test include:

- The bulk of nutrition services are provided by auxiliary workers and nurses at the health facility level.

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<sup>11</sup> While the inclusion of nutrition-sensitive interventions was considered during the early phases of tool development, SPRING ultimately decided to separate nutrition-specific and nutrition-sensitive interventions during this phase. Nutrition-sensitive interventions will be targeted at a later date.

<sup>12</sup> <http://www.thelancet.com/series/maternal-and-child-undernutrition>

<sup>13</sup> <http://www.thelancet.com/series/maternal-and-child-nutrition>

<sup>14</sup> [http://apps.who.int/iris/bitstream/10665/84409/1/9789241505550\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/84409/1/9789241505550_eng.pdf)

- Nutrition focal point and facility-level health workers have different perceptions about the nutrition-specific actions of the various types of providers at outpatient and inpatient facilities.
- It is critical to validate data from the health facility level to cross-reference perceptions held by nutritionists and nurses.
- While data on the total number of health provider (by type) was available, these data were not further disaggregated by service delivery level, nor was it not possible to determine how many of these workers had discrete nutrition responsibilities.

Based on the pre-test experience, the tool was revised and now consists of four different data collection instruments for use at national, district, facility, and individual-provider levels. The tools gather data on country nutrition actions under implementation; nutrition workforce tasked with, trained for, and actually delivering nutrition actions; and the nutrition workforce size and composition at national, district, and facility levels. These tools are available as Word documents and Excel spreadsheets to give users the option of paper or digital version. These data collection tools and the user guide constitute the toolkit.

## **LIMITATIONS**

The toolkit has a few important limitations. The tool limits its focus to nutrition actions and does not consider other health functions performed by nutrition workers. Further the toolkit does not capture the personal, demographic, educational, or employment information that is required to facilitate decisions related to professional development, promotion, and transfer of individual nutrition workers. In other words, this toolkit is not meant to serve or create human resource information systems for health since its scope is limited to capturing self-reported data for small sets of providers and managers.

Another important limitation is that this toolkit captures information only on whether a nutrition worker has received pre- and in-service training. It does not gather information about the duration, time, theme, level, quality, training institution or impact of training on performance. The toolkit collects self-reported data on nutrition actions based on respondents' perception and is not validated against service delivery data captured in routine health information system or other data systems.

# Section 2: Nutrition Workforce Mapping User's Guide

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Nutrition Workforce Mapping requires the collection of data obtained through document reviews and key informant interviews by a team of key stakeholders led by government officials. The toolkit is adaptable and a project, program, or country can customize it to its context and needs. This section describes the steps for adaptation of the tools and methodologies as well as the implementation of the mapping exercise. They are meant to guide the nutrition workforce mapping activity. A country may choose to follow the steps in this order or adapt them to its capacity and need. However, we suggest following these steps to ensure that efforts align with national priorities, create continued leadership, improve understanding about inter-linkages between different levels, explain different perceptions about roles and responsibilities, and depict a workforce system strengthening initiative that involves various actors of the health system.

## **STEP 1: IDENTIFY A NATIONAL GOVERNMENT FOCAL PERSON TO LEAD NUTRITION WORKFORCE MAPPING ACTIVITIES**

The first step in the mapping process is to identify a government focal point who can serve as the formal leader for the entire mapping process. This leader will mobilize necessary resources and leadership to anchor the data collection and analysis, and promote its use to strengthen nutrition workforce planning and management. This person may be the national nutrition focal point or national health focal point, or someone designated by such focal points.

## **STEP 2: ADAPT METHODS AND TOOLS**

Countries vary greatly in the types or cadres of health providers they use to provide nutrition services, the names of these providers, and the types of services they provide. Likewise, the reason for conducting nutrition workforce mapping exercise may vary from country to country. Therefore, the objectives and methods must be agreed upon early on in the process.

The sampling methodology will vary and depend on the assessment objectives and the availability of time, funding, and trained human resources as well as specific program coverage and needs. At a minimum, this mapping exercise needs to involve national, district, and facility-level key informants in addition to an individual provider of each type in a district. In order to specify which provider type is delivering nutrition-specific actions at different levels, at least one respondent from each type of provider at all service delivery levels must be included in the respondent sample and complete the assessment in a district.

Similarly, the tools must be adapted to the context of each country before use. The adaptation can happen at the national or sub-national level, depending on the objectives and methodology. Steps for adapting the tools are as follows:

- Review the list and select actions and wording relevant to your country.



- Create a list of health workers (occupational titles) who deliver nutrition-specific interventions in your country by level and type of facility in public health sector. Ensure clarity of occupational titles to avoid confusion and misinterpretation. For example, if these are the occupational titles include skilled birth attendant, traditional birth attendant, and midwife, clarify difference. Use level and facility- specific list of health workers in the related data collection tools. For example, include the facility-level list of providers in the facility-level data collection tool.
- If necessary, modify the language used in the tool (e.g., “approved” may be replaced with a similar word used in each country to identify mandated or authorized).
- Review the data collection tools to ensure that all the adaptations are complete and the tool is properly formatted.

### **STEP 3: CONSTITUTE AND ORIENT ASSESSMENT TEAMS**

The national government focal point should help constitute a national coordination team that has members from outside the government including development partners and independent consultants. The team should have 4-5 members (including the focal person) with skill and expertise in nutrition/health workforce planning, monitoring and evaluation, and project management. The national focal person, as the team leader, will designate one member to coordinate the workforce mapping activities with the district(s). The national focal person ensures that the team is oriented to the nutrition workforce mapping exercise, which includes information about its purpose, process, implementation, results, and use of results. The national focal person may also decide to seek technical assistance from external agencies and independent consultants.

The designated national team coordinator should ensure that a focal person for each district is identified and a district-level assessment team is formed. The district team composition is similar to the national team, with one member designated as team coordinator. This district team coordinator will work with health facility heads to develop and implement facility-level activities that include reviewing tools, identifying key informants, ensuring data collection and analysis, and initiating appropriate action based on the findings. The district team leader is responsible for the team’s orientation on nutrition workforce mapping.

### **STEP 4: PRE-TEST ADAPTED TOOL**

It is recommended that you plan and pre-test tools to validate them. The national team coordinator will constitute an assessment team in the same way as the actual assessment. The respondents selected for pre-testing the tools will not constitute the sample for the actual assessment. Adapt pre-test recommendations to improve the accuracy and consistency of the tool.

### **STEP 5: IDENTIFY KEY INFORMANTS AND COLLECT DATA**

Each team leader should identify a key informant based on his/her capacity to provide up-to-date information on each module of each tool. A suggested list of possible key informants is mentioned the table. The interviewer will schedule the interview with the informant and inform him/her about the purpose, venue, and time of interview. Primary data are then collected using appropriate interview guides and supported by secondary data wherever applicable.

## **STEP 6: DATA ENTRY, ANALYSIS, AND USE**

The data collected from key informant interviews and secondary sources within a district are consolidated at the district level using the data entry sheets. These data are then cross-referenced with data collected at the national level. If the assessment is conducted in more than one district, data entry can take place at each district or at the national level. This will depend on the purpose of assessment, available human resources and logistical issues. The data are then analyzed to identify gaps in competency, size, and composition of nutrition workforce at different levels. Illustrative tables and analysis are presented in Section 5.

# Section 3: Data Collection Tools

Mapping the workforce involves the completion of a number of data collection tools at various levels of the health system. This section of the toolkit includes all the data collection tools. Each data collection tool (Table 1) is divided into modules, each of which is meant to be administered to a key informant/respondent or used to collect data from secondary sources like government documents, research reports and publications. The tools focus on the numbers – of each provider type allotted to or budgeted for a given facility, of those positions filled, as well as those who are tasked with, trained for, and complete nutrition-specific actions.

**Table 1: Nutrition Workforce Mapping Data Collection Tools.**

Tools	Description	Key informant/respondent (s)
1. National- level interview guide	Module 1: Assess national nutrition workforce size, composition, availability, and gaps	National HR focal person for health or secondary data
	Module 2: Assess required qualification(s) of providers tasked with nutrition actions	National nutrition focal person/secondary data
	Module 3: Assess which nutrition actions each provider type is tasked with (expected to perform)	National nutrition or health focal persons
2. District-level interview guide	Module 1: Assess workforce size (approved and filled positions)	District HR focal person for health secondary data
	Module 2: Assess number of providers have been trained and provided with a job description	District training/capacity-building focal person
	Module 3: Assess which nutrition actions each provider type is tasked with (expected to perform)	District health officer/nutrition focal person
3. Facility- level interview guide	Module 1: Assess workforce size (approved and filled positions)	Head of health facility/facility HR focal person for health or secondary data
	Module 2: Assess number of providers have been trained and provided with a job description	Head of health facility/facility training focal person or secondary data
	Module 3: Assess which nutrition actions each provider type is tasked with (expected to perform), usually performs, and is typically trained to perform	Head of health facility/health center/health post

Tools	Description	Key informant/respondent (s)
4. Individual provider interview guide	Module 1: Assess which nutrition actions each provider is tasked with (expected to perform), usually performs, and is trained to perform	Individual provider (s)
	Module 2: Assess provision of job description	

It is important to note that the tools at the national and district levels do not focus on collecting data about whether a provider performs a nutrition action and is trained to perform it because the facility level is more appropriate for collecting data related to actual action. The tool includes a few open-ended questions focused on provider positions filled by female health workers only. The tool also collects information about how providers perform their role in the absence of a formal written job description.

The tools are designed to facilitate triangulation of data across different levels. The data collected from individual provider(s) can be cross-verified with facility-level data. For example, numbers of each provider type employed at various levels can be cross-referenced with the same data from secondary reports and program documents to ensure accuracy and consistency. Instructions for administering the tool are included in each tool. Furthermore, data related to nutrition actions that a provider is tasked with can be triangulated with the same data collected at district and national levels and also compared with job descriptions collected during the mapping process. Similarly, nutrition workforce size, composition, availability, gaps, and training-related data can be cross-referenced with data from secondary sources and with aggregate data at district and national levels.

The data collection tools are provided in hard (paper-based) and soft formats (electronic, in Microsoft Excel). The latter version has the added advantage of automatically generating a number of useful tables that can be shared with country stakeholders for discussion, planning and advocacy. The Excel version of the data collection tools are in Annex 1 as a separate attachment.

The following data entry and aggregation sheets can be found in Annex 2:

- **Nutrition Action Data Entry Sheet:** Enter nutrition action response data in this data entry sheet *if only one respondent was interviewed for each module of the tools.*
- **Nutrition Action Data Entry Sheet I:** Enter nutrition action response data in this sheet *if more than one respondent was interviewed for one or more modules of the data collection tools.*
- **National Human Resource Gap Data Entry Sheet:** Enter district-wide human resource availability and vacancy data in this data entry sheet.
- **District Human Resource Gap Data Entry Sheet:** Enter facility-wide human resource availability and vacancy data in this data entry sheet.
- **National Consolidated Training Data Entry Sheet:** Enter district-wide provider training data in this data entry sheet.
- **District Consolidated Training Data Entry Sheet:** Enter facility-wide provider training data in this data entry sheet.
- **District Training Data Entry Sheet:** Enter district provider training data in this data entry sheet. Use one sheet per district.
- **Facility Training Data Entry Sheet:** Enter facility provider training data in this data entry sheet. Use one sheet per facility.

## TOOL 1: NATIONAL-LEVEL INTERVIEW GUIDE

This tool consists of two modules. The first module of the tool collects information about number of positions approved and filled for each provider type in districts. The second module is focused on professional requirements for various provider types. The third assesses which tasks are assigned to which provider type.

Each module may have a different primary respondent or only one primary respondent, depending on the expertise and relevance of the person and the organizational structure. Possible respondents for each module include:

- Module 1: National human resources for health focal person
- Module 2 & 3: National health or nutrition focal person

You may also be asked to repeat modules in one more than one department/unit at the national level.

Each time there is a new respondent (for one or more modules), begin by obtaining consent. Record the respondent's occupational title and code as well interviewer's name and code.

THE FOLLOWING INFORMATION IN Q001-003 SHOULD BE FILLED BY THE DATA COLLECTION TEAM PRIOR TO ARRIVAL AT RESPONDENT'S DEPARTMENT/UNIT.

### RESPONDENT INFORMATION

001	RESPONDENT'S OCCUPATIONAL TITLE _____	
	RESPONDENT'S CODE .....	<input type="text"/> <input type="text"/>
	RESPONDENT'S GENDER _____	RESPONDENT'S GENDER CODE..... <input type="text"/> <input type="text"/>
002	DEPARTMENT _____	DEPARTMENT CODE..... <input type="text"/> <input type="text"/>
003	COUNTRY _____	COUNTRY CODE..... <input type="text"/> <input type="text"/>

### INTERVIEW INFORMATION

THE FOLLOWING INFORMATION IN Q004-005 SHOULD BE FILLED IMMEDIATELY BEFORE THE INTERVIEW.

004	INTERVIEW DATE.....Day <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
005	INTERVIEWER NAME _____ INTERVIEWER CODE..... <input type="text"/> <input type="text"/>

## Consent

**READ TO THE RESPONDENT:** Hello. My name is [OBSERVER NAME]. I am here on behalf of [IMPLEMENTING AGENCY]. I am part of a team conducting an assessment to map the nutrition workforce.

The purpose of this assessment is to find ways to strengthen the nutrition workforce and delivery of nutrition actions. In this assessment, 'nutrition workforce' refers to health workers who provide nutrition actions. They are also referred to as 'nutrition action providers' or 'providers.' Nutrition actions are evidence-based interventions that can improve nutritional status of malnourished people if implemented effectively.

Senior government officials have identified you as a respondent for this assessment from your department.

I am going to ask you questions about the number of positions approved and filled for each nutrition action provider position in a district

**AND/OR**

I am going to ask you questions about the essential professional qualification required to be a nutrition action provider

**AND/OR**

I would like to ask you several questions about nutrition action(s) that each provider is tasked with at his/her respective health facility/center/post

Information from this interview is confidential. Neither your name nor that of any other health worker respondents participating in this study will be recorded.

The information acquired during this interview may be used by the Ministry of Health or other organization to improve services, or for research on health services.

The interview will take approximately 60-90 minutes. You may refuse to answer any question or choose to stop the interview at any time. However, we hope you will collaborate with the study. Do you have any questions for me?

Do I have your permission to proceed with the interview?

Provider type \_\_\_\_\_

Interviewer's signature \_\_\_\_\_ Day   Month   Year

(Indicates that informed consent was provided)

006	RECORD WHETHER PERMISSION WAS RECEIVED FROM THE RESPONDENT.	YES.....1 NO.....0	→CONTINUE →END
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## MODULE 1: Assess National Nutrition Workforce Size, Composition, and Availability

Now I am going to ask two questions related to number of approved provider positions and number of provider positions that are filled as of today for each district. Unless indicated otherwise, provide your response by stating the number.

Sl. No.	District	FOR EACH DISTRICT, ASK EACH OF THE FOLLOWING QUESTIONS.														Total	
		1. What is the number of approved [PROVIDER TYPE] in [DISTRICT NAME]? 2. What is the number of filled [PROVIDER TYPE] in [DISTRICT NAME]?  INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR  Approved: A; Filled: F															
		1		2		3		4		5		6		7			
		A	F	A	F	A	F	A	F	A	F	A	F	A	F	A	F
1																	
2																	
3																	
4																	
5																	
	<b>Total</b>																

Please share documents that have information about number of approved and filled provider positions for each district.

**Is there any provider position(s) that can only have female providers? Yes/No.**

**If yes, what are the names of those position(s)?**

## **MODULE 2: Assess Professional Qualification of Nutrition Action Provider(s)**

Now I am going to ask a question about the essential professional qualification for each provider type. Unless indicated otherwise, respond by stating the essential professional qualification required to fulfil each particular position.

<b>Sl. No</b>	<b>Question</b>	<b>Essential professional qualification</b>
1	What is the essential professional qualification for a health volunteer?	
2	What is the essential professional qualification for a community health worker?	
3	What is the essential professional qualification for a midwife?	
4	What is the essential professional qualification for a nurse?	
5	What is the essential professional qualification for a dietician?	
6	What is the essential professional qualification for a nutritionist?	
7	What is the essential professional qualification for a doctor?	



### MODULE 3: Assess Nutrition Action(s) that a Provider is tasked with

Now I am going to read a list of nutrition actions. For each nutrition action I read I am going to ask a question. Unless indicated otherwise, respond by saying **“Yes,” “No,” “Do Not Remember,”** or **“Not Applicable.”** After completing the responses for each nutrition action, I am going to say “question for the next nutrition action.’

Sl. No.	Nutrition action	Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]?						
		INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR.						
		1	2	3	4	5	6	7
1	Implement delayed cord clamping after delivery							
2	Measure and record the length of the newborn							
3	Weigh and record the weight of the newborn							
4	Place the newborn immediately on breast after delivery							
5	Support correct positioning and attachment of the newborn during breastfeeding							
6	Promote exclusive breastfeeding through 6 months							
7	Promote continued breastfeeding through 24 months							
8	Support correct positioning and attachment of the infant and young child during breastfeeding							

Sl. No.	Nutrition action	Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]?						
		INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR.						
		1	2	3	4	5	6	7
9	Ask about and address breastfeeding difficulty							
10	Identify and treat breast problems							
11	Promote the introduction of complementary foods at 6 months to mothers							
12	Counsel an individual mother on complementary feeding							
13	Counsel groups of mothers on complementary feeding							
14	Promote handwashing before food preparation and feeding a young child							
15	Promote fortified complementary foods							
16	Administer vitamin A and deworming medicine once a year if prevalence is 20%							
17	Administer vitamin A and deworming medicine twice a year if prevalence is 50%							
18	Administer zinc with ORS to children with diarrhea							
19	Administer intermittent iron and folic acid to pre-school children							
20	Administer malaria medicine to children with malaria in malaria-endemic							

Sl. No.	Nutrition action	Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]?						
		INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR.						
		1	2	3	4	5	6	7
	countries							
21	Weigh and record the weight of the child on growth chart							
22	Measure and record the height of the child							
23	Measure and record the length of the child							
24	Measure and record the middle upper arm circumference (MUAC) of the child							
25	Identify and/or refer malnourished children							
26	Classify the level of acute malnutrition in the child							
27	Treat a child with moderate acute malnutrition							
28	Treat a child with severe acute malnutrition without complications							
29	Treat a child with severe acute malnutrition with complications							
30	Provide follow-up for the child							
31	Support infant feeding of children born to HIV+ mothers							
32	Assess nutritional status of HIV-infected children							

Sl. No.	Nutrition action	Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]?						
		INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR.						
		1	2	3	4	5	6	7
33	Care for and refer malnourished HIV-infected children							
34	Provide intermittent supplementation of iron and folic acid to non-pregnant and non-lactating women of reproductive age							
35	Provide nutrition counseling to non-pregnant and non-lactating women of reproductive age							
36	Provide iron and folic acid supplementation to pregnant women							
37	Counsel pregnant and lactating women on side effects of iron and folic acid and compliance while taking them							
38	Administer malaria prophylaxis in malaria endemic countries to pregnant women							
39	Promote the use of insecticide-treated nets (ITNs)							
40	Provide ITNs							
41	Administer deworming medicine (where relevant) to pregnant women							
42	Weigh and record the weight of the pregnant woman							
43	Promote healthy nutrition and life style of pregnant and lactating women							

Sl. No.	Nutrition action	Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]?						
		INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR.						
		1	2	3	4	5	6	7
44	Counsel a pregnant or lactating woman on a healthy diet							
45	Administer daily calcium supplementation during pregnancy							

## TOOL 2: DISTRICT-LEVEL INTERVIEW GUIDE

This tool has three modules. The first collects information on number of positions approved and filled for each nutrition action provider in the district. The second collects information on number of nutrition action providers who have received basic nutrition training, refresher nutrition training in last one year, and have a written job description. The third module gathers information about the nutrition actions that each provider is tasked to perform.

Each module might have a different primary respondent, depending on the expertise of the person and the organizational structure. Possible respondents for each module include:

- Module 1: District human resources for health focal person
- Module 2: District training/capacity building focal person
- Module 3: District health or nutrition focal person

You may also be asked to repeat modules in one more than one department/unit at the district level.

Each time there is a new respondent (for one or more modules), begin by obtaining consent. Record the respondent's occupational title and code as well interviewer's name and code.

THE FOLLOWING INFORMATION IN Q001-005 SHOULD BE FILLED BY THE DATA COLLECTION TEAM PRIOR TO ARRIVAL AT THE RESPONDENT'S DEPARTMENT/UNIT.

### RESPONDENT INFORMATION

001	RESPONDENT'S OCCUPATIONAL TITLE _____	
	RESPONDENT'S CODE .....	<input type="text"/> <input type="text"/>
	RESPONDENT'S GENDER _____	
	RESPONDENT'S GENDER CODE.....	<input type="text"/> <input type="text"/>
002	NAME OF DEPT/UNIT _____	DEPT. CODE..... <input type="text"/> <input type="text"/>
003	UNIT CODE.....	<input type="text"/> <input type="text"/>
004	DISTRICT _____	DISTRICT CODE..... <input type="text"/> <input type="text"/>
005	COUNTRY _____	COUNTRY CODE..... <input type="text"/> <input type="text"/>

### INTERVIEW INFORMATION

THE FOLLOWING INFORMATION IN Q006-007 SHOULD BE FILLED IMMEDIATELY BEFORE THE INTERVIEW.

006	INTERVIEW DATE .....	Day <input type="text"/> <input type="text"/>	Month <input type="text"/> <input type="text"/>	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
007	INTERVIEWER NAME _____	INTERVIEWER CODE.....	<input type="text"/> <input type="text"/>	

## Consent

**READ TO THE RESPONDENT:** Hello. My name is [OBSERVER NAME]. I am here on behalf of [IMPLEMENTING AGENCY]. I am part of a team conducting an assessment to map the nutrition workforce.

The purpose of this assessment is to find ways to strengthen nutrition workforce and delivery of nutrition actions. In this assessment, 'nutrition workforce' refers to health workers who provide nutrition actions. They are also referred to as 'nutrition action providers' or 'providers.' Nutrition actions are evidence-based interventions that can improve nutritional status of malnourished people if implemented effectively.

In consultation with national health focal person/nutrition focal person, your district is selected for this assessment. As the district health officer/nutrition focal person/training focal person/human resource for health focal person, you are identified as a district respondent.

I am going to ask you questions about the number of positions approved and filled for each nutrition action provider in your district

**AND/OR**

I am going to ask you questions about pre-service and in-service training status of nutrition workers

**AND/OR**

I am going to ask you several questions about nutrition action(s) that each provider is tasked with at his/her respective health facility/center/post

Information from this interview is confidential. Neither your name nor that of any other health worker respondents participating in this study will be recorded.

The information acquired during this interview may be used by the Ministry of Health or other organization to improve services, or for research on health services.

The interview will take approximately 60-90 minutes. You may refuse to answer any question or choose to stop the interview at any time. However, we hope you will collaborate with the study. Do you have any questions for me?

Do I have your permission to proceed with the interview?

\_\_\_\_\_          

Day                      Month                      Year

Interviewer's signature

*(Indicates informed consent was provided)*

008	RECORD WHETHER PERMISSION WAS RECEIVED FROM THE RESPONDENT.	YES.....1 NO.....0	→CONTINUE →END
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## MODULE 1: Assess District Nutrition Workforce Size, Composition, and Availability

Now I am going to ask two questions related to number of approved positions and number of positions that are filled, as of today, for each provider category in your district. Unless indicated otherwise, provide your response by stating the number of providers for each position.

ASK BOTH QUESTIONS FOR EACH PROVIDER TYPE THEN MOVE ON TO THE NEXT PROVIDER TYPE.

Sl. No	Provider type REPLACE WITH LOCAL PROVIDER TYPES.	A. What is the number of approved [PROVIDER TYPE] for your district?	B. What is the number of filled [PROVIDER TYPE] in your district?
1	Health volunteer		
2	Community health worker		
3	Midwife		
4	Nurse		
5	Dietician		
6	Nutritionist		
7	Doctor		

Please share documents that have information about approved and filled provider positions in your district.

**Is there any provider position(s) that can only have female providers? Yes/No.**

**If yes, which position(s)?**



## MODULE 2: Assess District-Level Trained Human Resource for Delivery of Nutrition Action

Now I am going to ask three questions about the number of providers trained and have written job description in your district. Unless indicated otherwise, provide your response by stating the number.

Sl. No	Provider type REPLACE WITH LOCAL PROVIDER TYPES.	A. How many [PROVIDER TYPE] have received pre-service training in the delivery of nutrition services?	B. How many [PROVIDER TYPE] have received in-service training in the delivery of nutrition services in last one year?	C. How many [PROVIDER TYPE] have received written job description?
1	Health volunteer			
2	Community health worker			
3	Midwife			
4	Nurse			
5	Dietician			
6	Nutritionist			
7	Doctor			

### MODULE 3: Assess Nutrition Action(s) a Provider is tasked with

Now I am going to read a list of nutrition actions. For each nutrition action I read I will ask a question. Unless indicated otherwise, respond by saying “Yes,” “No,” “Do Not Remember,” or “Not Applicable.”

ASK WHETHER EACH PROVIDER TYPE IS TASKED WITH A GIVEN NUTRITION ACTION AND THEN MOVE ON TO THE NEXT ROW OR NUTRITION ACTION.’

Sl. No.	Nutrition action	Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]?						
		1	2	3	4	5	6	7
1	Implement delayed cord clamping after delivery							
2	Measure and record the length of the newborn							
3	Weigh and record the weight of the newborn							
4	Place the newborn immediately on breast after delivery							
5	Support correct positioning and attachment of the newborn during breastfeeding							
6	Promote exclusive breastfeeding through 6 months							
7	Promote continued breastfeeding through 24 months							
8	Support correct positioning and attachment of the infant and young child during breastfeeding							
9	Ask about and address breastfeeding difficulty							
10	Identify and treat breast problems							
11	Promote the introduction of complementary foods at 6 months to mothers							

Sl. No.	Nutrition action	Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]?						
		1	2	3	4	5	6	7
		INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR						
12	Counsel an individual mother on complementary feeding							
13	Counsel groups of mothers on complementary feeding							
14	Promote handwashing before food preparation and feeding a young child							
15	Promote fortified complementary foods							
16	Administer vitamin A and deworming medicine once a year if prevalence is 20%							
17	Administer vitamin A and deworming medicine twice a year if prevalence is 50 %							
18	Administer zinc with ORS to children with diarrhea							
19	Administer intermittent iron and folic acid to pre-school children							
20	Administer malaria medicine to children with malaria in malaria endemic countries							
21	Weigh and record the weight of the child on growth chart							
22	Measure and record the height of the child							
23	Measure and record the length of the child							
24	Measure and record the middle upper arm circumference (MUAC) of the child							
25	Identify and/or refer malnourished children							

Sl. No.	Nutrition action	Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]?						
		1	2	3	4	5	6	7
		INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR						
26	Classify the level of acute malnutrition in the child							
27	Treat a child with moderate acute malnutrition							
28	Treat a child with severe acute malnutrition without complications							
29	Treat a child with severe acute malnutrition with complications							
30	Provides follow-up for the child							
31	Support infant feeding of children born to HIV+ mothers							
32	Assess nutritional status of HIV-infected children							
33	Care for and refer malnourished HIV-infected children							
34	Provide intermittent supplementation of iron and folic acid to non-pregnant and non-lactating women of reproductive age							
35	Provide nutrition counseling to non-pregnant and non-lactating women of reproductive age							
36	Provide iron and folic acid supplementation to pregnant women							
37	Counsel pregnant and lactating women on side effects of iron and folic acid and compliance while taking them							
38	Administer malaria prophylaxis in malaria endemic countries to pregnant women							
39	Promote the use of insecticide-treated nets (ITNs)							

Sl. No.	Nutrition action	Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]?						
		1	2	3	4	5	6	7
		INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR						
40	Provide ITNs							
41	Administer deworming medicine (where relevant) to pregnant women							
42	Weigh and record the weight of the pregnant woman							
43	Promote healthy nutrition and life style of pregnant and lactating women							
44	Counsel a pregnant or lactating woman on a healthy diet							
45	Administer daily calcium supplementation during pregnancy							

## TOOL 3: FACILITY-LEVEL INTERVIEW GUIDE

This tool consists of three modules. The first collects information about number of approved and filled provider positions in each district. The second collects information on number of nutrition action providers who have received pre-service training, in-service training, and a written job description. The third module is focused on nutrition actions that each nutrition action provider is tasked with, performs, and is trained to do it.

Each module may have the same or different primary respondent depending on the expertise of the person and the organizational structure. Possible respondents for each module include:

- Module 1: Head of facility or facility human resources for health focal person
- Module 2: Head of facility or facility training focal person
- Module 3: Head of facility

You may also be asked to repeat modules in one more than one department/unit at the facility level.

Each time there is a new respondent for one more modules, begin by obtaining consent. Record the respondent's occupational title and code as well interviewer's name and code.

THE FOLLOWING INFORMATION IN Q001-006 SHOULD BE FILLED BY THE DATA COLLECTION TEAM PRIOR TO ARRIVAL AT THE RESPONDENT'S DEPARTMENT/UNIT.

### RESPONDENT INFORMATION

001	RESPONDENT'S OCCUPATIONAL TITLE _____	
	RESPONDENT'S CODE .....	<input type="text"/> <input type="text"/>
	RESPONDENT'S GENDER _____	RESPONDENT'S GENDER CODE..... <input type="text"/> <input type="text"/>
002	FACILITY/UNIT _____	FACILITY CODE..... <input type="text"/> <input type="text"/>
003	UNIT CODE.....	<input type="text"/> <input type="text"/>
004	FACILITY/UNIT TYPE _____	FACILITY/UNIT TYPE CODE..... <input type="text"/> <input type="text"/>
005	DISTRICT _____	DISTRICT CODE..... <input type="text"/> <input type="text"/>
006	COUNTRY _____	COUNTRY CODE..... <input type="text"/> <input type="text"/>

### INTERVIEW INFORMATION

THE FOLLOWING INFORMATION IN Q007-008 SHOULD BE FILLED IMMEDIATELY BEFORE THE INTERVIEW.

007	INTERVIEW DATE.....Day <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/> Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
008	INTERVIEWER NAME _____ INTERVIEWER CODE..... <input type="text"/> <input type="text"/>

## Consent

**READ TO THE RESPONDENT:** Hello. My name is [OBSERVER NAME]. I am here on behalf of [IMPLEMENTING AGENCY]. I am part of a team conducting an assessment to map nutrition the workforce and delivery of nutrition actions.

The purpose of this assessment is to find ways to strengthen nutrition workforce and delivery of nutrition actions. In this assessment, 'nutrition workforce' refers to health workers who provide nutrition actions. Nutrition actions are a list of evidence-based interventions that can improve nutritional status of malnourished people if implemented effectively.

In consultation with district health officer/nutrition focal person, your facility is selected for this assessment. As the head of this facility/unit you are identified as a respondent.

I am going to ask you questions about the number of positions approved and filled for each provider at your facility

**AND/OR**

I am going to ask you questions about pre-service, in-service and job description of providers

**AND/OR**

I am going to ask you several questions about nutrition action(s) that each provider is tasked with, performs, and is trained for at their respective health facility

Information from this interview is confidential. Neither your name nor that of any other health worker respondents participating in this study will be recorded.

The information acquired during this interview may be used by the Ministry of Health or other organization to improve services, or for research on health services.

The interview will take approximately 60-90 minutes. You may refuse to answer any question or choose to stop the interview at any time. However, we hope you will collaborate with the study. Do you have any questions for me?

Do I have your permission to proceed with the interview?

\_\_\_\_\_     
 Interviewer's signature Day Month Year

*(Indicates informed consent was provided)*

009	RECORD WHETHER PERMISSION WAS RECEIVED FROM THE RESPONDENT.	YES.....1 NO.....0	→CONTINUE →END
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## MODULE 1: Assess Facility Nutrition Workforce Size, Composition, and Availability

Now I am going to ask two questions related to number of approved positions and number of positions that are filled, as of today, for each provider position in your district. Unless indicated otherwise, provide your response by stating the number of providers for each position.

ASK BOTH QUESTIONS FOR EACH PROVIDER TYPE THEN MOVE ON TO THE NEXT PROVIDER TYPE.

Sl. No	Provider type	A. What is the number of approved [PROVIDER TYPE] in your facility?	B. What is the number of filled [PROVIDER TYPE] in your facility?
1	Health volunteer		
2	Community health worker		
3	Midwife		
4	Nurse		
5	Dietician		
6	Nutritionist		
7	Doctor		

Please share documents that have information about approved and filled provider positions in your facility.

**Is there any provider position(s) that can only have female providers? Yes/No.**

**If yes, what is the name of the position(s)?**



## MODULE 2: Assess Facility-Level Trained Human Resource for Delivery of Nutrition Actions

Now I am going to ask three questions focused on number of providers trained and having written job description in your district. Unless indicated otherwise, provide your response by stating the number.

ASK ALL THREE QUESTIONS FOR EACH PROVIDER TYPE THEN MOVE ON TO THE NEXT PROVIDER TYPE.

Sl. No	Provider Type	A. How many [PROVIDER TYPE] have received pre-service training in the delivery of nutrition services??	B. How many [PROVIDER TYPE] have received in-service training in the delivery of nutrition services in last one year?	C. How many [PROVIDER TYPE] have received written job description?
1	Health volunteer			
2	Community health worker			
3	Midwife			
4	Nurse			
5	Dietician			
6	Nutritionist			
7	Doctor			

### MODULE 3: Assess Nutrition Actions a Provider is tasked With, Performs, and is Trained to Perform

#### Which PROVIDER TYPES in your facility usually perform which nutrition actions?

Now I am going to ask three questions for each nutrition action provider. These questions are related to whether a provider is tasked, usually performs and is trained for a particular nutrition action. Unless indicated otherwise for each question, indicate your response by saying **“Yes,” “No,” “Do Not Remember,” or “Not Applicable.”** 1.

ASK ALL THREE QUESTIONS FOR EACH NUTRITION ACTION THEN MOVE ON TO THE NEXT NUTRITION ACTION.

Sl.No.	Nutrition action	A. Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							B. Does [PROVIDER TYPE] usually [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							C. Is [PROVIDER TYPE] typically trained to [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR						
		1	2	3	4	5	6	7	1	2	3	4	5	6	7	1	2	3	4	5	6	7
1	Implement delayed cord clamping after delivery																					
2	Measure and record the length of the newborn																					
3	Weigh and record the weight of the newborn																					
4	Place the newborn immediately on breast after delivery																					
5	Support correct positioning and attachment of the newborn during breastfeeding																					

SI.No.	Nutrition action	A. Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							B. Does [PROVIDER TYPE] usually [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							C. Is [PROVIDER TYPE] typically trained to [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR								
		1	2	3	4	5	6	7	1	2	3	4	5	6	7	1	2	3	4	5	6	7		
6	Promote exclusive breastfeeding through 6 months																							
7	Promote continued breastfeeding through 24 months																							
8	Support correct positioning and attachment of the infant and young child during breastfeeding																							
9	Ask about and addresses breastfeeding difficulty																							
10	Identify and treat breast problems																							
11	Promote the introduction of complementary foods at 6 months to mothers																							
12	Counsel an individual mother on complementary feeding																							
13	Counsel groups of mothers on complementary feeding																							

SI.No.	Nutrition action	A. Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]?							B. Does [PROVIDER TYPE] usually [NUTRITION ACTION]?							C. Is [PROVIDER TYPE] typically trained to [NUTRITION ACTION]?						
		INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR						
		1	2	3	4	5	6	7	1	2	3	4	5	6	7	1	2	3	4	5	6	7
14	Promote handwashing before food preparation and feeding a young child																					
15	Promote fortified complementary foods																					
16	Administer vitamin A and deworming medicine once a year if prevalence is 20%																					
17	Administer vitamin A and deworming medicine twice a year if prevalence is 50%																					
18	Administer zinc with ORS to children with diarrhea																					
19	Administer intermittent iron and folic acid to pre-school children																					
20	Administer malaria medicine to children with malaria in malaria-endemic countries																					
21	Weigh and record the weight of the child on growth chart																					

SI.No.	Nutrition action	A. Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]?							B. Does [PROVIDER TYPE] usually [NUTRITION ACTION]?							C. Is [PROVIDER TYPE] typically trained to [NUTRITION ACTION]?						
		INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR						
		1	2	3	4	5	6	7	1	2	3	4	5	6	7	1	2	3	4	5	6	7
22	Measure and record the height of the child																					
23	Measure and record the length of the child																					
24	Measure and record the middle upper arm circumference (MUAC) of the child																					
25	Identify and/or refer malnourished children																					
26	Classify the level of acute malnutrition in the child																					
27	Treat a child with moderate acute malnutrition																					
28	Treat a child with severe acute malnutrition without complications																					
29	Treat a child with severe acute malnutrition with complications																					

SI.No.	Nutrition action	A. Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							B. Does [PROVIDER TYPE] usually [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							C. Is [PROVIDER TYPE] typically trained to [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR						
		1	2	3	4	5	6	7	1	2	3	4	5	6	7	1	2	3	4	5	6	7
30	Provide follow-up for the child																					
31	Support infant feeding of children born to HIV+ mothers																					
32	Assess nutritional status of HIV-infected children																					
33	Care for and refer malnourished HIV-infected children																					
34	Provide intermittent supplementation of iron and folic acid to non-pregnant and non-lactating women of reproductive age																					
35	Provide nutrition counseling to non-pregnant and non-lactating women of reproductive age																					
36	Provide iron and folic acid supplementation to pregnant women																					
37	Counsel pregnant and lactating women on side																					

SI.No.	Nutrition action	A. Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							B. Does [PROVIDER TYPE] usually [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							C. Is [PROVIDER TYPE] typically trained to [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR								
		1	2	3	4	5	6	7	1	2	3	4	5	6	7	1	2	3	4	5	6	7		
	effects of iron and folic acid and compliance while taking them																							
38	Administer malaria prophylaxis in malaria endemic countries to pregnant women																							
39	Promote the use of insecticide-treated nets (ITNs)																							
40	Provide ITNs																							
41	Administer deworming medicine (where relevant) to pregnant women																							
42	Weigh and record the weight of the pregnant woman																							
43	Promote healthy nutrition and life style of pregnant and lactating women																							
44	Counsel a pregnant or lactating woman on a healthy diet																							

SI.No.	Nutrition action	A. Is [PROVIDER TYPE] tasked to [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							B. Does [PROVIDER TYPE] usually [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							C. Is [PROVIDER TYPE] typically trained to [NUTRITION ACTION]? INSERT PROVIDER TYPES HERE. FOR EXAMPLE: 1 HEALTH VOLUNTEER, 2 COMMUNITY HEALTH WORKER, 3 MIDWIFE, 4 NURSE, 5 DIETICIAN, 6 NUTRITIONIST, 7 DOCTOR							
		1	2	3	4	5	6	7	1	2	3	4	5	6	7	1	2	3	4	5	6	7	
45	Administer daily calcium supplementation during pregnancy																						



## TOOL 4: INDIVIDUAL PROVIDER INTERVIEW GUIDE

This tool has two modules. The first is focused on nutrition action(s) that a nutrition action provider is tasked with, performs, and is trained to perform. The second module is related to job description of nutrition action provider.

The primary respondent is a nutrition action provider. Depending on the size and structure of the health facility, more than one respondent may be identified.

You may also be asked to repeat modules of the tool with more than one provider.

Each time there is a new respondent (for one or more modules), begin by obtaining consent. Record the respondent's occupational title and code as well interviewer's name and code.

THE FOLLOWING INFORMATION IN Q001-007 SHOULD BE FILLED BY THE DATA COLLECTION TEAM BEFORE ARRIVAL AT THE RESPONDENT'S FACILITY/UNIT.

### RESPONDENT INFORMATION

001	RESPONDENT'S OCCUPATIONAL TITLE_____	
	RESPONDENT'S CODE.....	<input type="text"/> <input type="text"/>
	RESPONDENT'S SEX_____	RESPONDENT'S SEX CODE..... <input type="text"/> <input type="text"/>
002	NAME OF FACILITY/UNIT_____	FACILITY CODE..... <input type="text"/> <input type="text"/>
003	UNIT CODE.....	<input type="text"/> <input type="text"/>
004	TYPE OF FACILITY_____	TYPE OF FACILITY CODE..... <input type="text"/> <input type="text"/>
005	DISTRICT_____	DISTRICT CODE..... <input type="text"/> <input type="text"/>
006	COUNTY_____	COUNTY CODE..... <input type="text"/> <input type="text"/>
007	SUBCOUNTY_____	SUBCOUNTY CODE..... <input type="text"/> <input type="text"/>

### INTERVIEW INFORMATION

THE FOLLOWING INFORMATION IN Q008-009 SHOULD BE FILLED IMMEDIATELY BEFORE THE INTERVIEW.

008	INTERVIEW DATE .....	Day <input type="text"/> <input type="text"/>	Month <input type="text"/> <input type="text"/>	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
009	INTERVIEWER NAME_____	INTERVIEWER CODE.....	<input type="text"/> <input type="text"/>	

## Consent

**READ TO THE RESPONDENT:** Hello. My name is [OBSERVER NAME]. I am here on behalf of [IMPLEMENTING AGENCY]. I am part of a team conducting an assessment to identify nutrition action providers, which nutrition actions they perform, and which nutrition actions they have been trained to perform nutrition actions. The assessment also captures information whether a provider has received a written job description.

The purpose of this assessment is to find ways to strengthen the nutrition workforce and delivery of nutrition actions. In this assessment, nutrition workforce refers to health workers who provide nutrition actions. Nutrition actions are evidence-based interventions that can improve nutritional status of malnourished people if implemented effectively.

In consultation with national and district health officials/nutrition focal points, your facility is selected to participate in this assessment. You are identified as a respondent for this assessment from your facility in deliberation with the head of your [HEALTH FACILITY/CENTER/POST NAME].

I am going to ask you several questions about the nutrition actions you are tasked with, perform and are trained to do it at [FACILITY/UNIT NAME]. I am also going to ask question related to your job description.

Information from this interview is confidential. Neither your name nor that of any other health worker respondents participating in this study will be recorded.

The information acquired during this interview may be used by the Ministry of Health or other organization to improve services, or for research on health services.

The interview will take 60-90 minutes. You may refuse to answer any question or choose to stop the interview at any time. However, we hope you will collaborate with the study. Do you have any questions for me?

Do I have your permission to proceed with the interview?

\_\_\_\_\_

Interviewer's signature

Day

Month

Year

*(Indicates informed consent was provided)*

010	RECORD WHETHER PERMISSION WAS RECEIVED FROM THE RESPONDENT.	YES.....1 NO.....0	→CONTINUE →END
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## MODULE 1: Assess Nutrition Actions a Provider is Tasked with, Trained for, and Usually Performs

Now I am going to read a list of nutrition actions. For each nutrition action I read I am going to ask three questions. Unless indicated otherwise, indicate your response by saying **“Yes,” “No,” “Do Not Remember,” or “Not Applicable.”**

ASK ALL THREE QUESTIONS FOR EACH NUTRITION ACTION THEN MOVE ON TO THE NEXT NUTRITION ACTION.

Sl.No.	Nutrition action	A. Are you tasked to [NAME OF NUTRITION ACTION]?	B. Do you usually [NAME OF NUTRITION ACTION]?	C. Are you trained to [NAME OF NUTRITION ACTION]?
1	Implement delayed cord clamping after delivery			
2	Measure and record the length of the newborn			
3	Weigh and record the weight of the newborn			
4	Place the newborn immediately on breast after delivery			
5	Support correct positioning and attachment of the newborn during breastfeeding			
6	Promote exclusive breastfeeding through 6 months			
7	Promote continued breastfeeding through 24 months			
8	Support correct positioning and attachment of the infant and young child during breastfeeding			
9	Ask about and addresses breastfeeding difficulty			
10	Identify and treat breast problems			
11	Promote the introduction of complementary foods at 6 months to mothers			
12	Counsel an individual mother on complementary feeding			
13	Counsel groups of mothers on complementary feeding			
14	Promote handwashing before food preparation and feeding a young child			

<b>Sl.No.</b>	<b>Nutrition action</b>	<b>A. Are you tasked to [NAME OF NUTRITION ACTION]?</b>	<b>B. Do you usually [NAME OF NUTRITION ACTION]?</b>	<b>C. Are you trained to [NAME OF NUTRITION ACTION]?</b>
15	Promote fortified complementary foods			
16	Administer vitamin A and deworming medicine once a year if prevalence is 20%			
17	Administer vitamin A and deworming medicine twice a year if prevalence is 50%			
18	Administer zinc with ORS to children with diarrhea			
19	Administer intermittent iron and folic acid to pre-school children			
20	Administer malaria medicine to children with malaria in malaria-endemic countries			
21	Weigh and record the weight of the child on growth chart			
22	Measure and record the height of the child			
23	Measure and record the length of the child			
24	Measure and record the middle upper arm circumference (MUAC) of the child			
25	Identify and/or refer malnourished children			
26	Classify the level of acute malnutrition in the child			
27	Treat a child with moderate acute malnutrition			
28	Treat a child with severe acute malnutrition without complications			
29	Treat a child with severe acute malnutrition with complications			
30	Provides follow-up for the child			
31	Support infant feeding of children born to HIV+ mothers			
32	Assess nutritional status of HIV-infected children			

Sl.No.	Nutrition action	A. Are you tasked to [NAME OF NUTRITION ACTION]?	B. Do you usually [NAME OF NUTRITION ACTION]?	C. Are you trained to [NAME OF NUTRITION ACTION]?
33	Care for and refer malnourished HIV-infected children			
34	Provide intermittent supplementation of iron and folic acid to non-pregnant and non-lactating women of reproductive age			
35	Provide nutrition counseling to non-pregnant and non-lactating women of reproductive age			
36	Provide iron and folic acid supplementation to pregnant women			
37	Counsel pregnant and lactating women on side effects of iron and folic acid and compliance while taking them			
38	Administer malaria prophylaxis in malaria endemic countries to pregnant women			
39	Promote the use of insecticide-treated nets (ITNs)			
40	Provide ITNs			
41	Administer deworming medicine (where relevant) to pregnant women			
42	Weigh and record the weight of the pregnant woman			
43	Promote healthy nutrition and life style of pregnant and lactating women			
44	Counsel a pregnant or lactating woman on a healthy diet			
45	Administer daily calcium supplementation during pregnancy			

**Which other nutrition action providers are performing nutrition actions at your facility?**

## **MODULE 2: Assess Provision of Job Description**

Now I am going to ask you a question about your job description. Unless otherwise indicated, provide a **“Yes”** or **“No.”**

### **Did you receive a written job description?**

- If yes, can you share a copy of your job description?
- If no, if you did not receive a written job description, explain how you prioritize nutrition actions you perform.

# Section 4: Job Aid for Data Collection and Entry

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This job aid is aimed to facilitate completion of the data collection, data entry, and ensure data quality. This job aid has five key units.

- **Unit 1: Data Collection Tools** provides an outline of the four data collection tools.
- **Unit 2: Key Terms** explains the key terms used in these tools.
- **Unit 3: Nutrition Action Category** explains various categories of nutrition actions and three related questions.
- **Unit 4: Instructions to Fill Interviewer and Respondent-Related Data Fields in the Paper Form** provides instructions for completing interviewer and respondent-related data fields in the paper form.
- **Unit 5: Instructions for Spreadsheet Version of Nutrition Workforce Mapping Tool** provides instructions for data entry, editing/modifying and creating copy of the excel version of the workforce mapping tools.

## UNIT 1: DATA COLLECTION TOOLS

- Tool 1: National-Level Interview Guide
- Tool 2: District-Level Interview Guide
- Tool 3: Facility-Level Interview Guide
- Tool 4: Individual Provider Interview Guide

## UNIT 2: KEY TERMS

<b>Nutrition Action</b>	Evidence-based nutrition interventions delivered through the health system e.g., implementing delayed cord clamping after delivery.
<b>NUTRITION ACTION PROVIDER Or PROVIDER</b>	Health workers who provide one or more of the 47 nutrition actions listed in the data collection tool at any level of service delivery, e.g., health volunteer, community health worker, midwife, nurse, dietician, nutritionist, doctor.
<b>Nutrition Workforce Size</b>	Total number of nutrition actions providers working in a health system. For the purpose of this tool, it includes public health system staff only.
<b>Nutrition Workforce Composition</b>	Total number of nutrition actions providers of each type (e.g., doctor, nurse, midwives) working in a health system. For the purpose of this tool, it includes public health system staff only.
<b>Nutrition Workforce Availability</b>	Total number of provider positions currently filled by a by a nutrition worker.
<b>Nutrition Workforce Gap</b>	Total number of provider positions currently vacant due to pending recruitment, retirement, or termination of employment.
<b>Approved Provider Position</b>	A health worker position created by the written order of appropriate government authority, e.g., the pediatric nurse position created by the order of Ministry of Health of a country.
<b>Filled Provider Position</b>	When a health worker is recruited for an approved position and is (or will soon be) discharging his/her duties. (e.g., a pediatric nurse is recruited for a clinic by designated government authority following due process and is performing her duties at the clinic).
<b>Professional Qualification</b>	Essential qualification(s) required in a candidate to being recruited as a nutrition action provider (e.g., a midwife position requires a candidate to have completed 18 months academic training).
<b>Pre-Service Training</b>	Formal classroom based training prior to joining a job position (e.g., 18-eighteen month midwifery course).
<b>In-Service Training</b>	Formal classroom training provided to improve knowledge and skill in a current job (e.g., 6-week skilled birth attendance training for midwives at rural health posts).
<b>Job Description</b>	A formal, written document that specifies role and responsibility of a health worker and is approved by designated government authority.



## UNIT 3: NUTRITION ACTION QUESTIONS AND CATEGORIES

Nutrition actions can be grouped into four categories as follows.

Category	Description	
<b>NEONATES (0-28 DAYS)</b>	These nutrition actions focus on <b>neonates (0-28 days)</b> and are further sub-categorized as follows for analysis purpose:	
	Nutrition action no.	Sub-category
	1	Delayed cord clamping after delivery
	2-3	Nutritional assessment
	4-5	Breastfeeding
<b>INFANT AND CHILD (0-59 MONTHS)</b>	These nutrition actions focus on <b>infant and child (0-59 months)</b> and are sub-categorized as follows for analysis purpose:	
	Nutrition action no.	Sub-category
	6-10	Breastfeeding
	11-15	Complementary feeding
	16-17	Vitamin A and deworming
	18	Zinc treatment for diarrhea
	19-20	Anemia treatment
	21-25	Nutritional assessment
	26-30	Management of acute malnutrition
	31-33	Child nutrition in the context of HIV (where relevant)
<b>WOMEN OF REPRODUCTIVE AGE (NON-PREGNANT AND NON-LACTATING)</b>	These nutrition actions focus on <b>women of reproductive age (non-pregnant and non-lactating)</b> and are sub-categorized as follows for analysis purpose:	
	Nutrition action no.	Sub-category
	34	Micronutrient supplementation
	35	Nutrition education
<b>PREGNANT AND LACTATING WOMEN</b>	Focus on <b>pregnant and lactating women</b> and sub-categorized as follows for the analysis purpose:	
	Nutrition action no.	Sub-category
	36-41	Anemia prevention and treatment
	42	Nutritional assessment
	43-44	Nutrition education
	45	Calcium supplementation

## Nutrition Action Questions

The three types of questions asked in different tools are briefly explained.

Question	Description
<p><b>Are you tasked to [NUTRITION ACTION]?</b> (Text field)</p> <p>(e.g., are you tasked to implement delayed cord clamping after delivery?)</p>	<p>This question asks if you are <b>expected to complete a nutrition action by the virtue of being in the current provider position</b> (of nurse, community health worker, nutritionist, dietician, doctor, or other).</p> <p>Please respond by saying 'Yes,' 'No,' 'Do Not Remember,' or 'Not Applicable.'</p> <p>(e.g., if expected to <i>implement delayed cord clamping after delivery</i> because of your current provider).</p>
<p><b>Do you [NUTRITION ACTION]?</b> (Text field)</p> <p>(e.g., do you [implement delayed cord clamping after delivery])?</p>	<p>This question asks if you <b>currently perform or deliver a nutrition action whether or not you are tasked in your current provider position</b> (of nurse, community health worker, nutritionist, dietician, doctor, or other) to do it</p> <p>Please respond by saying 'Yes,' 'No,' 'Do Not Remember,' or 'Not Applicable.'</p> <p>(e.g., This question asks if you <i>currently implement delayed cord clamping after delivery</i> whether or not you are tasked in your current provider position to do it).</p>
<p><b>Are you trained to [NUTRITION ACTION]?</b> (e.g., Are you trained to [implement delayed cord clamping after delivery])?</p>	<p>This question asks if you have <b>formal training whether pre-service, in-service, or both</b> to perform a nutrition action.</p> <p>Please respond by saying 'Yes,' 'No,' 'Do Not Remember,' or 'Not Applicable.'</p> <p>This question asks if you have received formal training whether pre-service, in-service, or both to <i>implement delayed cord clamping after delivery</i>.</p>

## UNIT 4: INTERVIEWER AND RESPONDENT RELATED DATA FIELD IN THE PAPER FORM

Field Name and Type	Instructions				
<b>RESPONDENT'S OCCUPATIONAL TITLE</b> (Text field)	A formal job title that indicates job profile and hierarchy in an organization. *Please write the job title in full. Use capital letters. Do not abbreviate. (e.g., AUXILIARY NURSE-MIDWIFE)				
<b>RESPONDENT'S CODE</b> (Numerical field)	Respondent's code is a numerical value assigned to each key informant in the order that data is collected. e.g., First respondent's code is <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td><td>1</td></tr></table> Second respondent's code is <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td><td>2</td></tr></table>	0	1	0	2
0	1				
0	2				
<b>RESPONDENT'S GENDER</b> (Text field)	This refers to if the respondent is a 'male' or a 'female.'				
<b>RESPONDENT'S GENDER CODE</b> (Numerical field)	This is asking to write code for each gender. For 'male' it is 01 and for female it is '00.'				
<b>NAME OF FACILITY/UNIT</b> (Text field)	Name of health facility/unit where the respondent is currently performing his/her formal duties. *Please write facility name only. Use capital letters. Do not abbreviate. E.g.: AREON In case of a health unit, go to the unit code data field.				
<b>FACILITY CODE</b> (Numerical field)	Facility code is a numerical value assigned to a facility where respondent is currently performing his/her formal duties in the order data is collected for different facilities. Facility code remains the same for all the respondents of one facility. e.g., facility code for first respondent from AREON facility is <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td><td>1</td></tr></table> Facility code for second respondent from AREON facility is <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td><td>1</td></tr></table>	0	1	0	1
0	1				
0	1				
<b>UNIT CODE</b> (Numerical field)	Unit code is a numerical value assigned to a facility where respondent is currently performing his/her formal duties in the order data is collected for different facilities. Facility code remains the same for all the respondents of one facility. e.g., unit code for first respondent from AREON Pediatric Unit is <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td><td>1</td></tr></table> Unit code for second respondent from AREON Pediatric Unit is <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td><td>1</td></tr></table>	0	1	0	1
0	1				
0	1				

Field Name and Type	Instructions				
<b>DISTRICT</b> (Text field)	e.g., RAKAI *Please write only the name of the district. Use capital letters. Do not abbreviate.				
<b>DISTRICT CODE</b> (Numerical field)	District code is a numerical value assigned to a district where data collection is taking place. District code remains the same for all the respondents working within the health jurisdiction of the concerned district. 'District' refers to the name of the district assigned for administrative purposes by a government. e.g., district code for all the respondents within RAKAI is <table border="1" data-bbox="1193 651 1305 712"><tr><td>0</td><td>1</td></tr></table> District code for all the respondents within BUIKWE is <table border="1" data-bbox="1193 712 1305 772"><tr><td>0</td><td>2</td></tr></table> District code remains the same for all the respondents from that district irrespective of the date of data collection.	0	1	0	2
0	1				
0	2				
<b>COUNTY</b> (Text field)	'County' refers to the administrative unit that a district is comprised of and is below the district in the administrative hierarchy. *Please write only the name of the county. Use capital letters. Do not abbreviate. e.g., KABULA				
<b>COUNTY CODE</b> (Numerical field)	County code is a numerical value assigned to a county in which data collection is taking place. County code remains the same for all the respondents working within the health jurisdiction of the concerned county. All counties within a district are coded in the order of data collection from those counties. e.g., county code for all the respondents within KABULA COUNTY is <table border="1" data-bbox="1114 1361 1225 1422"><tr><td>0</td><td>1</td></tr></table> County code for all the respondents within BUIKWE COUNTY is <table border="1" data-bbox="1114 1440 1225 1500"><tr><td>0</td><td>2</td></tr></table> County code remains the same for all the respondents from that county irrespective of the date of data collection.	0	1	0	2
0	1				
0	2				
<b>SUBCOUNTY</b> (Text field)	'Subcounty' refers to the administrative unit that a county is comprised of and is below the county in the administrative hierarchy. *Please write only the name of the subcounty. Use capital letters. Do not abbreviate. e.g., KASAGAMA SUBCOUNTY				

Field Name and Type	Instructions															
<p><b>SUBCOUNTY CODE</b> (Numerical field)</p>	<p>Subcounty code is a numerical value assigned to a county in which data collection is taking place. County code remains the same for all the respondents working within the health jurisdiction of the concerned county.</p> <p>All the counties within a district are coded in the order of data collection from those counties.</p> <p>e.g., subcounty code for all the respondents within BUIKWE SUBCOUNTY is <table border="1" data-bbox="1158 539 1270 595"><tr><td>0</td><td>1</td></tr></table></p> <p>Subcounty code for all the respondents within KASAGAMA SUBCOUNTY is <table border="1" data-bbox="1158 613 1270 669"><tr><td>0</td><td>2</td></tr></table></p> <p>Subcounty code remains the same for all the respondents from that subcounty, irrespective of the date and order of data collection from respondents.</p>	0	1	0	2											
0	1															
0	2															
<p><b>TYPE OF FACILITY</b> (Text field)</p>	<p>'Type of facility' refers to a category of health facility tasked to provide specific range of health care services.</p> <p>Please write the type of facility. Use capital letters. Do not abbreviate.</p> <p>e.g., health post, health center, clinic, primary hospital or district hospital</p> <p>type of facility code is a numerical value assigned to each type of facility within the health jurisdiction of a district. Start with 01 code for the lowest level of type of facility, whether or not data is collected from that type of facility.</p>															
<p><b>TYPE OF FACILITY CODE</b> (Numerical field)</p>	<table data-bbox="596 1189 999 1458"> <tr> <td>e.g., Health post</td> <td>0</td> <td>1</td> </tr> <tr> <td>Health center</td> <td>0</td> <td>2</td> </tr> <tr> <td>Primary hospital</td> <td>0</td> <td>3</td> </tr> <tr> <td>County hospital</td> <td>0</td> <td>4</td> </tr> <tr> <td>District hospital</td> <td>0</td> <td>5</td> </tr> </table>	e.g., Health post	0	1	Health center	0	2	Primary hospital	0	3	County hospital	0	4	District hospital	0	5
e.g., Health post	0	1														
Health center	0	2														
Primary hospital	0	3														
County hospital	0	4														
District hospital	0	5														
<p><b>INTERVIEWER NAME</b> (Text field)</p>	<p>'Interviewer name' refers to the given name of the interviewer that includes FIRST, MIDDLE, and LAST NAME in that order.</p> <p>Please write the full name in capital letters. Do not abbreviate. Write 'Not applicable' if required.</p> <p>e.g., JOHN KELE BROADMAN</p>															

Field Name and Type	Instructions								
<p><b>INTERVIEWER CODE</b> (Numerical field)</p>	<p>'Interviewer code' refers to the unique numerical value assigned to each interviewer in a data collection team. This code is fixed for each individual interviewer.</p> <p>Please use numerical value to fill each code.</p> <p>e.g., FIRST INTERVIEWER CODE <table border="1" data-bbox="951 456 1061 510"><tr><td>0</td><td>1</td></tr></table></p> <p>SECOND INTERVIEWER CODE <table border="1" data-bbox="951 510 1061 564"><tr><td>0</td><td>2</td></tr></table></p>	0	1	0	2				
0	1								
0	2								
<p><b>INTERVIEW DATE</b> (DD/MM/YYYY) (Numerical field)</p>	<p>'Interview date' refers to the day on which interview is completed.</p> <p>Please write the date in dd/mm/yyyy format using numerical values only.</p> <p>e.g., <table border="1" data-bbox="676 766 786 819"><tr><td>1</td><td>2</td></tr></table> <table border="1" data-bbox="828 766 938 819"><tr><td>0</td><td>2</td></tr></table> <table border="1" data-bbox="995 766 1214 819"><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table></p> <p style="text-align: center;">Day                      Month                      Year</p>	1	2	0	2	2	0	0	9
1	2								
0	2								
2	0	0	9						
<p><b>INTERVIEWER SIGNATURE</b> (Text field; May include special characters like full-stop, hyphen)</p>	<p>Interviewer signature refers to the distinctive hand-written name of the interviewer as a form of identification.</p> <p>*Please ensure signature is clear and legible.</p>								
<p><b>DATE</b> (DD/MM/YYYY) (NUMERICAL FIELD)</p>	<p>Date refers to the day on which the interview guide was signed by the interviewer.</p> <p>Please write the date in dd/mm/yyyy format using numerical values only.</p> <p>e.g., <table border="1" data-bbox="676 1326 786 1379"><tr><td>1</td><td>2</td></tr></table> <table border="1" data-bbox="828 1326 938 1379"><tr><td>0</td><td>2</td></tr></table> <table border="1" data-bbox="1018 1326 1236 1379"><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table></p> <p style="text-align: center;">Day                      Month                      Year</p>	1	2	0	2	2	0	0	9
1	2								
0	2								
2	0	0	9						

## UNIT 5: INSTRUCTIONS FOR SPREADSHEET VERSION OF NUTRITION WORKFORCE MAPPING TOOL

### 5.1. How to enter data in individual data collection spreadsheet

You can record respondent’s response directly into the spreadsheet or you can enter data from a filled paper form. Follow the instructions below in either case.

**Step 1:** Open a data collection spreadsheet. Follow these instructions to fill interviewer and respondent-related data fields. Check for ‘Dropdown List,’ ‘Text Field,’ or ‘Number Field’ input message once you select a cell. Select correct response from dropdown list.

Data Field	Instructions
RESPONDENT’S OCCUPATIONAL TITLE	A formal job title that indicates job profile and hierarchy in an organization. <ul style="list-style-type: none"> <li>Please select correct option from dropdown list. <i>Example: nurse.</i></li> </ul>
RESPONDENT’S CODE	Respondent’s code is a numerical value assigned to each key informant in the order data is collected. <ul style="list-style-type: none"> <li>Please select corresponding* option from dropdown list. <i>Example: 01.</i></li> </ul>
RESPONDENT’S GENDER	This refers to if the respondent is a ‘male’ or a ‘female’. <ul style="list-style-type: none"> <li>Please select correct option from dropdown list. <i>Example: male.</i></li> </ul>
RESPONDENT’S GENDER CODE	This is asking to write code for each gender. For ‘male’ it is 1 and for female it is ‘0.’ <ul style="list-style-type: none"> <li>Please select corresponding option from dropdown list. <i>Example: 1.</i></li> </ul>
NAME OF FACILITY/UNIT	Name of health facility/unit where the respondent is currently performing his/her formal duties. <ul style="list-style-type: none"> <li>Please select correct option from dropdown list. <i>Example: Kampala.</i></li> </ul>
FACILITY CODE	Facility code is a numerical value assigned to a facility where respondent is currently performing his/her formal duties in the order data is collected for different facilities. Facility code remains the same for all the respondents of one facility. <ul style="list-style-type: none"> <li>Please select corresponding facility code from the dropdown list.</li> </ul> <p><i>In case of a health unit, go to the unit code data field.</i></p>

Data Field	Instructions
UNIT CODE	<p>Unit code is a numerical value assigned to a facility where respondent is currently performing his/her formal duties in the order data is collected for different facilities. Facility code remains the same for all the respondents of one facility.</p> <ul style="list-style-type: none"> <li>• Please select corresponding unit code from the dropdown list.</li> </ul>
DISTRICT	<p>'District' refers to the name of the district assigned for administrative purposes by a government.</p> <ul style="list-style-type: none"> <li>• Please select correct option from the dropdown list.</li> </ul>
DISTRICT CODE	<p>District code is a numerical value assigned to a district where data collection is taking place. District code remains the same for all the respondents working within the health jurisdiction of a district.</p> <ul style="list-style-type: none"> <li>• Please select corresponding district code from the dropdown list.</li> </ul> <p><i>District code remains the same for all the respondents from that district irrespective of the date of data collection.</i></p>
COUNTY	<p>'County' refers to the administrative unit that a district is comprised of and is below the district in the administrative hierarchy.</p> <ul style="list-style-type: none"> <li>• Please select correct option from the dropdown list</li> </ul> <p><i>County code remains the same for all the respondents from that county, regardless of data collection date.</i></p>
COUNTY CODE	<p>County code is a numerical value assigned to a county where data collection is taking place. County code remains the same for all the respondents working within the health jurisdiction of a county.</p> <ul style="list-style-type: none"> <li>• Please select corresponding county code from the dropdown list.</li> </ul> <p><i>All the counties within a district are coded in the order of data collection from those counties</i></p>
SUBCOUNTY	<p>'Subcounty' refers to the administrative unit that a county is comprised of and is below the county in the administrative hierarchy.</p> <ul style="list-style-type: none"> <li>• Please select correct option from the dropdown list</li> </ul>



Data Field	Instructions																
SUBCOUNTY CODE	<p>Subcounty code is a numerical value assigned to a county where data collection is taking place. County code remains the same for all the respondents working within the health jurisdiction of the concerned county.</p> <ul style="list-style-type: none"> <li>• Please select corresponding subcounty code from the dropdown list.</li> </ul> <p><i>Subcounty code remains the same for all the respondents from that subcounty irrespective of the date and order of data collection.</i></p>																
TYPE OF FACILITY	<p>'Type of facility' refers to a category of health facility tasked to provide specific range of health care services.</p> <ul style="list-style-type: none"> <li>• Please select correct option from the dropdown list.</li> </ul>																
TYPE OF FACILITY CODE	<p>'Type of facility code' is a numerical value assigned to each type of facility within the health jurisdiction of a district. The code starts with 01 for the lowest level of type of facility, regardless of whether data is collected from that type of facility.</p> <ul style="list-style-type: none"> <li>• Please select corresponding facility code from the dropdown list.</li> </ul>																
INTERVIEWER NAME	<p>'Interviewer name' refers to the given name of the interviewer that includes FIRST, MIDDLE, AND LAST NAME in that order.</p> <ul style="list-style-type: none"> <li>• Please write the full name in upper-case letters. Do not abbreviate. Write 'Not applicable' if required. <i>Example: JOHN KELE BROADMAN</i></li> </ul>																
INTERVIEWER CODE	<p>'Interviewer code' refers to the unique numerical value assigned to each interviewer on a data-collection team. This code is fixed for each individual interviewer.</p> <ul style="list-style-type: none"> <li>• Please select correct option from the dropdown list.</li> </ul>																
INTERVIEW DATE (DD/MM/YYYY)	<p>The date on which interview is completed.</p> <ul style="list-style-type: none"> <li>• Please complete the date in dd/mm/yyyy format by selecting correct options from dropdown list.</li> </ul> <p><i>Example:</i></p> <table border="1" data-bbox="624 1720 1145 1816"> <tr> <td>1</td> <td>2</td> <td>0</td> <td>2</td> <td>2</td> <td>0</td> <td>0</td> <td>9</td> </tr> <tr> <td colspan="2">Day</td> <td colspan="2">Month</td> <td colspan="4">Year</td> </tr> </table>	1	2	0	2	2	0	0	9	Day		Month		Year			
1	2	0	2	2	0	0	9										
Day		Month		Year													

Data Field	Instructions																
INTERVIEWER SIGNATURE (Text field; may include special characters like full-stop or hyphen)	INTERVIEWER SIGNATURE refers to the name of the interviewer handwritten in a distinctive way as a form of identification. *Please ensure signature is clear and legible.																
DATE (DD/MM/YYYY) (Numerical field)	DATE refers to the DATE on which the interview guide was signed by the INTERVIEWER. <ul style="list-style-type: none"> <li>Please complete the date in dd/mm/yyyy format by selecting correct options from dropdown list.</li> </ul> <i>Example:</i> <table border="1" data-bbox="624 763 1142 857"> <tr> <td>1</td><td>2</td><td>0</td><td>2</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> <tr> <td colspan="2">Day</td> <td colspan="2">Month</td> <td colspan="4">Year</td> </tr> </table>	1	2	0	2	2	0	0	9	Day		Month		Year			
1	2	0	2	2	0	0	9										
Day		Month		Year													

\* Check dropdown list sheet for corresponding codes.

**Step 2: Provider position and occupational title**

2.1 Enter number of provider position (approved or filled) for each provider category in the appropriate cell. These data fields take numerical values. Do not enter your response in words.

**Number Field**  
Enter Correct Number in Each Cell.

1	2	0	2	2	0	0	9
Day		Month		Year			

2.2 List occupational title of provider positions that are filled only by female nutrition workers. Enter response in words only.

**Text Field**  
Enter Response in Word Only.

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### Step 3: Provider training and job description

3.1 Enter number of provider trained (pre-service and in-service) for each category in the appropriate cell. Also mention the number of providers who have received written job descriptions. These data fields take numerical values. Do not enter your response in words.

**Number Field**  
Enter Correct  
Number in Each  
Cell.

1000

### Step 4: Professional qualification

Click on the arrow icon of each cell to select correct response option from the dropdown list.

**Dropdown List**  
Select Correct  
Option from  
Dropdown List.

Mid-wifery certificate  
BSc Nursing  
BSc Nursing-Pediatric  
Master of Social Work  
Master of Science (Nutrition)  
Certified Dietician  
Master in Public Health and Nutrition  
MD-Pediatric

### Step 5: Nutrition action

Click on the arrow icon of each cell to select correct response from the dropdown list.

**Dropdown List**  
Select Correct  
Option from  
Dropdown List.

Yes  
No  
Do Not Remember  
Not Applicable

## 5.2. How to Enter Data in Aggregate Data Collection Spreadsheet

**Step 1:** Open an aggregate data entry spreadsheet. You do not need to fill interviewer or respondent related-data fields.

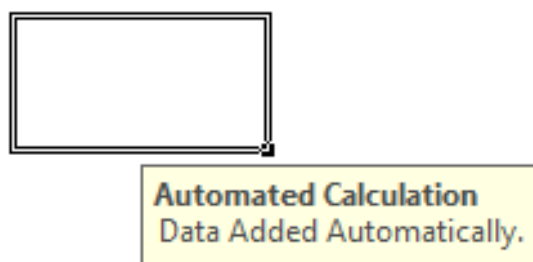
Select correct level of interviewee to enter responses. For example, national-level interviewee responses for nutrition actions are entered in the columns below that level.

Lifecyle stage	Nutrition Action	National Level; N= Number of Respondents																				
		Health Volunteer			CHW			Midwife			Nurse			Dietician			Nutritionist			Doctor		
		Tasked	Performs	Trained	Tasked	Performs	Trained	Tasked	Performs	Trained	Tasked	Performs	Trained	Tasked	Performs	Trained	Tasked	Performs	Trained	Tasked	Performs	Trained

To enter response for each question select appropriate cell. Check for 'Dropdown List,' 'Text Field,' or 'Number Field' input message once you select a cell. Select correct response from dropdown list. Follow Step 5 of sub-section 5.1.

To enter responses for provider position and training questions select correct data entry spreadsheet and identify level of interviewee. Follow Steps 2 and 3 of sub-section 5.1.

**Step 2:** Do not enter data in cells that shows input message "Automated Calculation." These cells have formulas to fill data in.



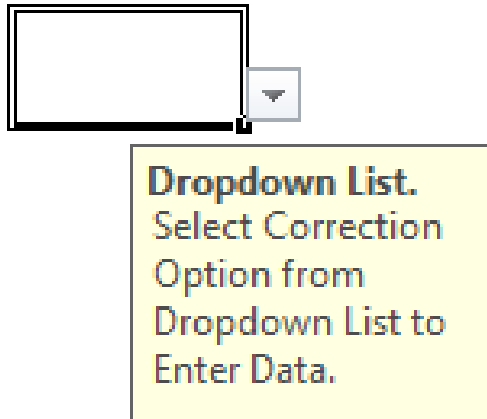
## 5.3 How to create dropdown list spreadsheet and dropdown list to a cell

**Step 1:** Open a separate sheet in the same worksheet that includes data entry forms. Select a column for each of the dropdown lists. Add appropriate title to each column. See example below.

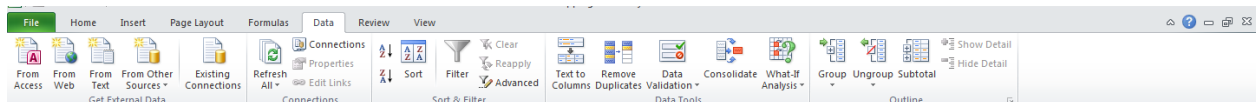
Numbers	Binary Response	Day	Month	Year	Country	Country Code	District	District Code	County	County Code	Sub-County	Sub-County Code
00	Yes	01	01	2014	Burkina Faso	01	Buikew	01	Buikew	01	Buikew	01
01	No	02	02	2015	Kyrgyzstan	02	Kampala	02	Kampala	02	Buikew	02
02	Do Not Remember	03	03	2016	Ghana	03		03		03		03
03	Not Applicable	04	04	2017	Guatemala	04		04		04		04
04		05	05	2018	Malawi	05		05		05		05
05		06	06	2019	Nigeria	06						
06		07	07	2020	Uganda	07						
07		08	08	2021								
08		09	09	2022								
09		10	10	2023								
10		11	11	2024								
11		12	12	2025								
12		13		2026								
13		14		2027								
14		15		2028								
15		16										
16		17										
17		18										
18		19										
19		20										
20		21										
21		22										

## 5.4 How to Edit/Modify Dropdown List in a Cell (Or Range of Cells)

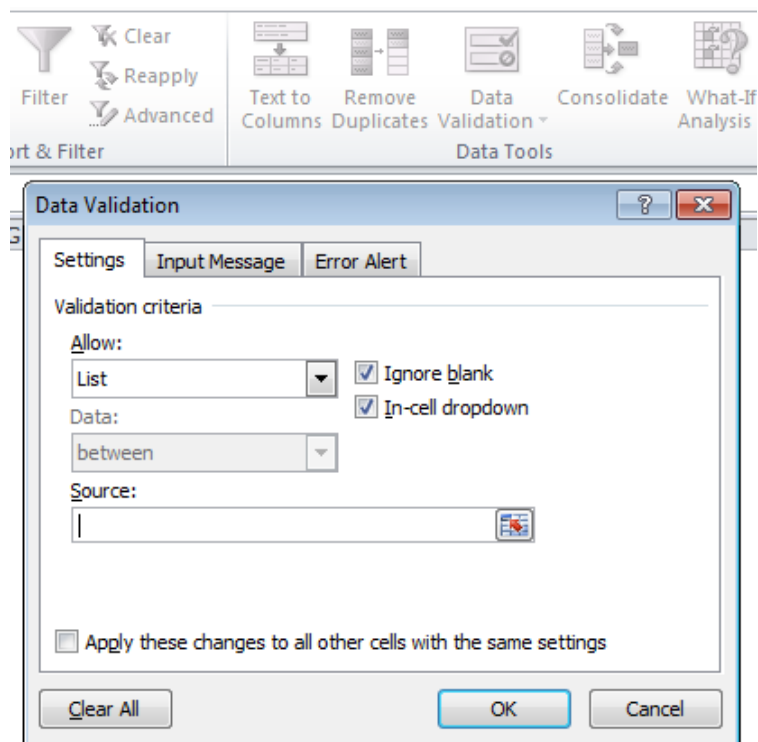
**Step 1:** Select the cell you want to edit/modify.



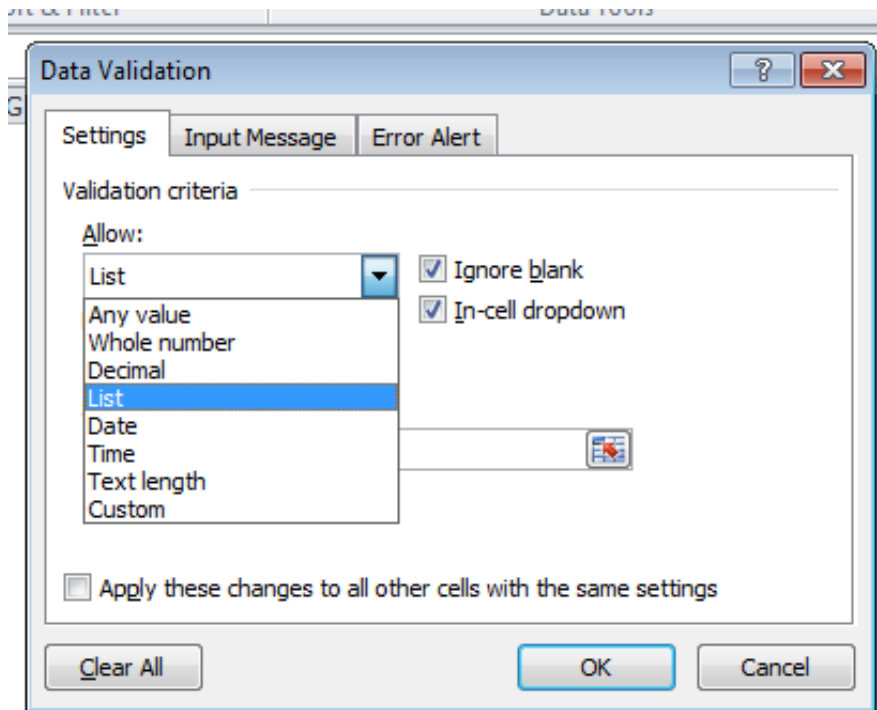
**Step 2:** Click on 'Data' tab of the top menu bar.



**Step 3:** Click on 'Data Validation' icon. Click on 'Setting' tab of 'Data Validation'.

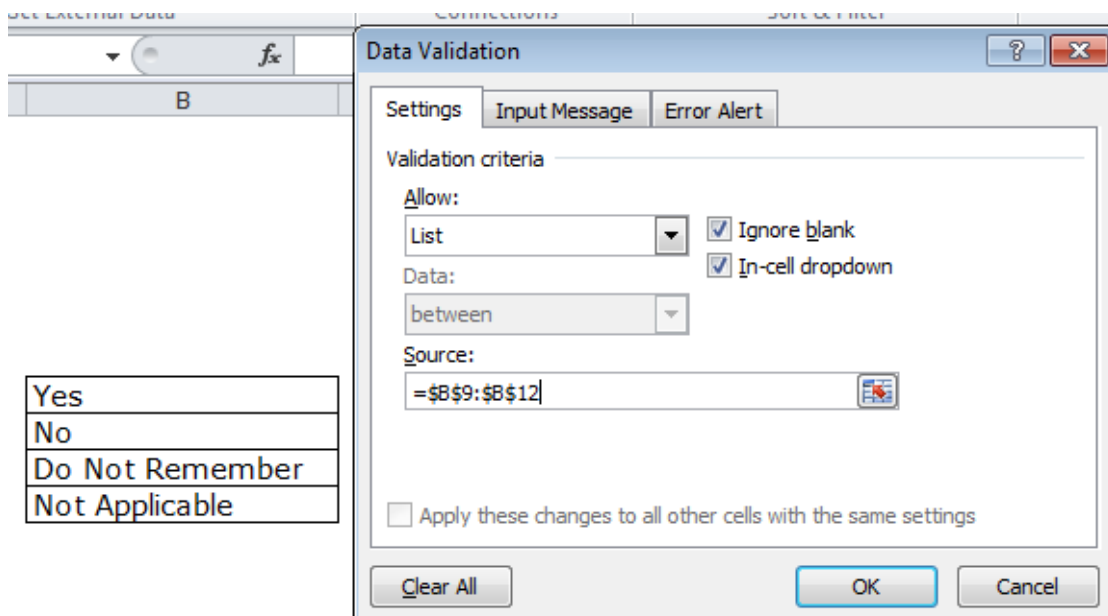


**Step 4:** Select 'List' option from the dropdown menu options under 'Allow' data field to add a dropdown list. Check 'Ignore blank' and 'In-cell dropdown' boxes next to the list dropdown.



To add dropdown list values to other related cells, check the 'Apply these changes to all other cells with the same settings' box. You can also copy/drag a cell with dropdown list and paste/drag it to all other cells that require the same dropdown list values.

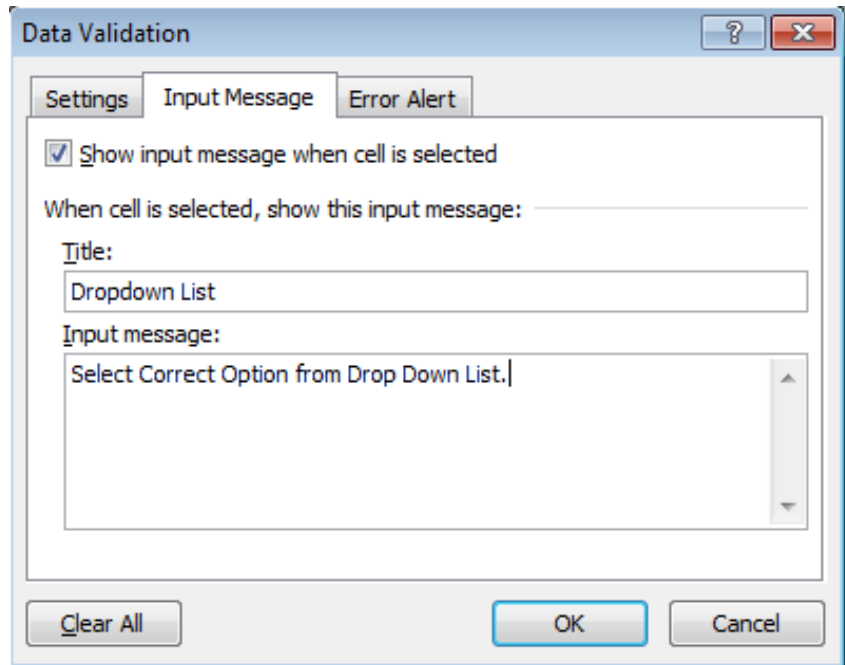
**Step 5:** Click in the 'Source' box. Select range of values to add to the dropdown list. Keep dropdown text/values on a separate sheet with one column for each type of dropdown values.



**Step 6:** Click on 'Input Message' tab. Check the box 'Show input message when cell is selected.' Add appropriate title and text in 'Input Message' box. Example:

Title- Dropdown List

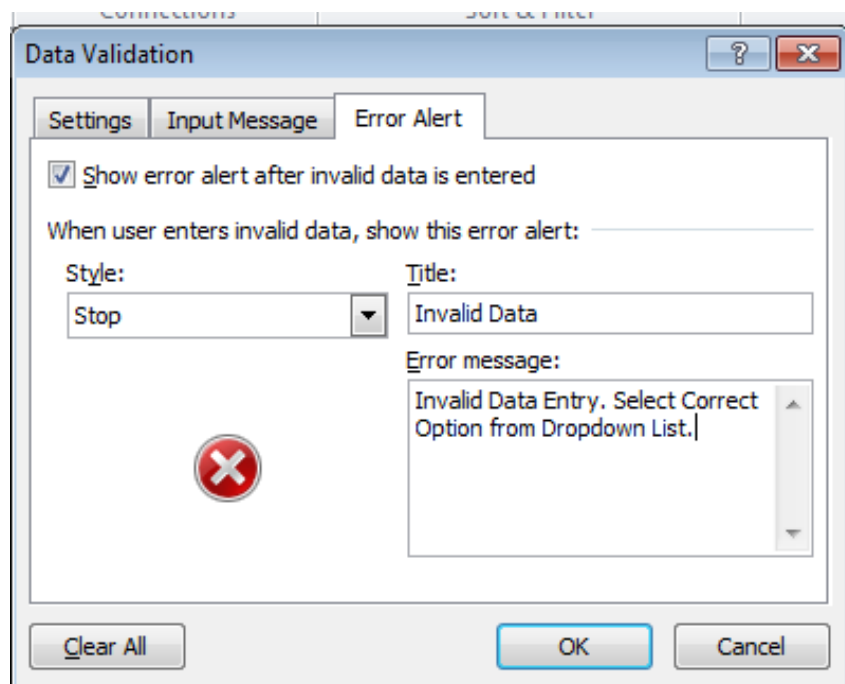
Input Message- Select correct option from dropdown list.



**Step 7:** Click on 'Error Alert' tab. Check the box 'Show error alert after invalid data is entered.' Add appropriate title and text in 'Error Message.' Example:

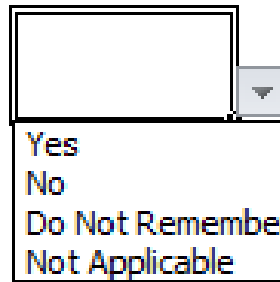
Title- Invalid data

Error Message- Invalid data entry—select correct option from dropdown list.



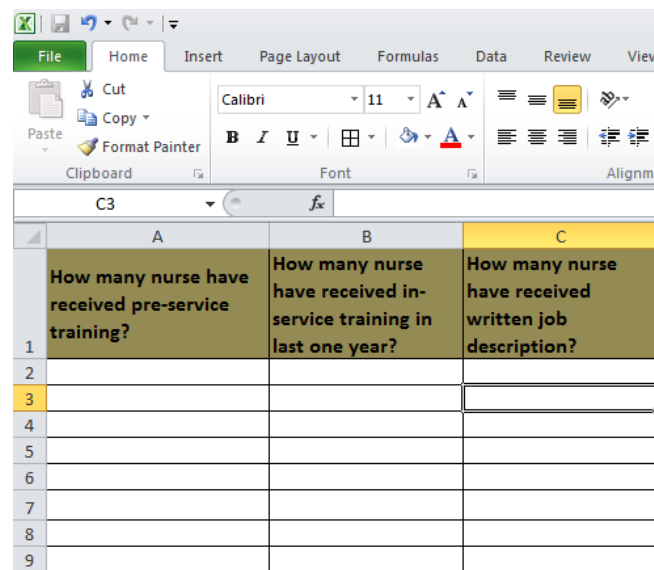
**Step 8:** Click 'OK.' Select cell to confirm input message. Click on arrow icon in the cell to verify dropdown list.

Dropdown List  
Select Correct  
Option from  
Dropdown List.

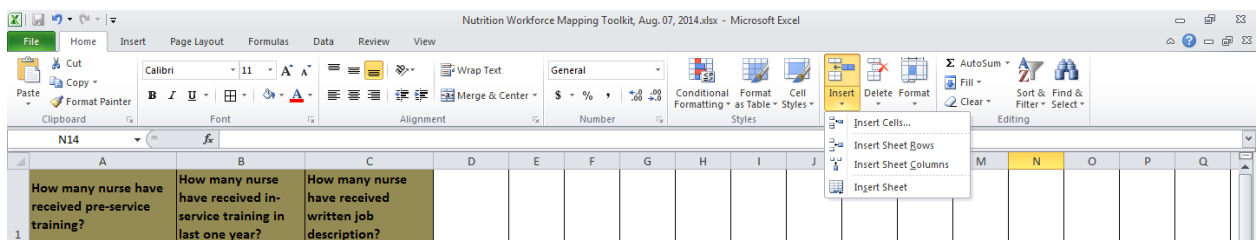


## 5.5 How to Add Columns/Rows to Data Entry Sheet

**Step 1:** Open a data entry sheet. Select the column (row) before (above) which you want to insert a new column (row).

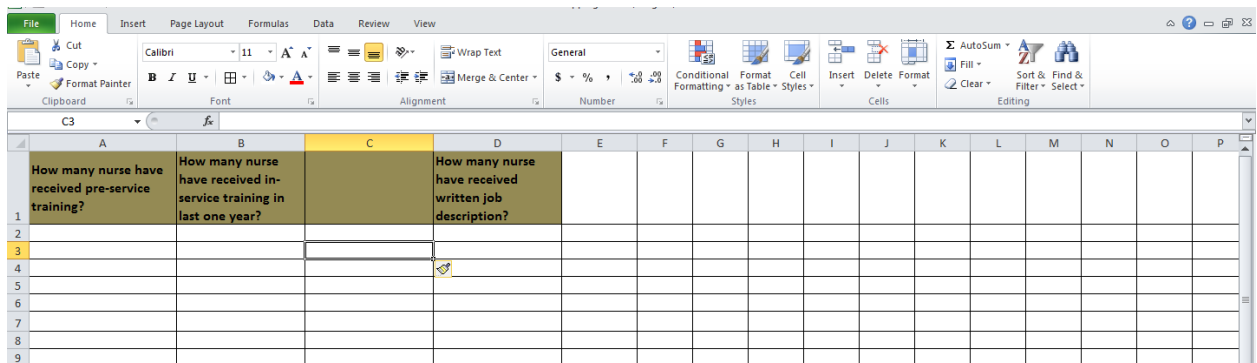


**Step 2:** Click on Insert Icon of home tab on the menu bar.

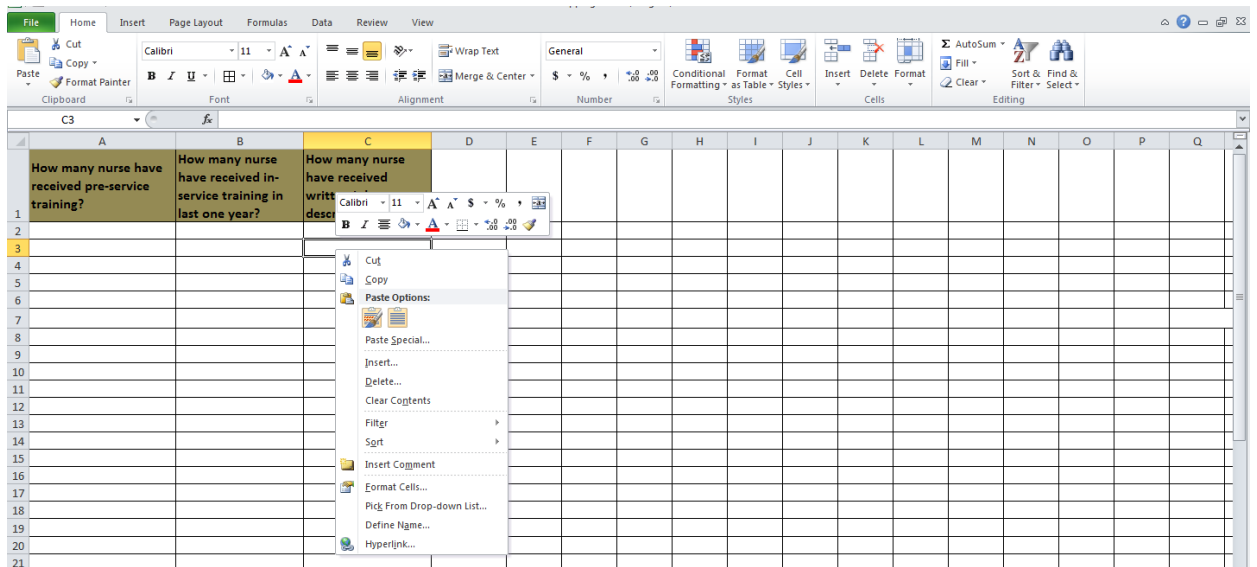




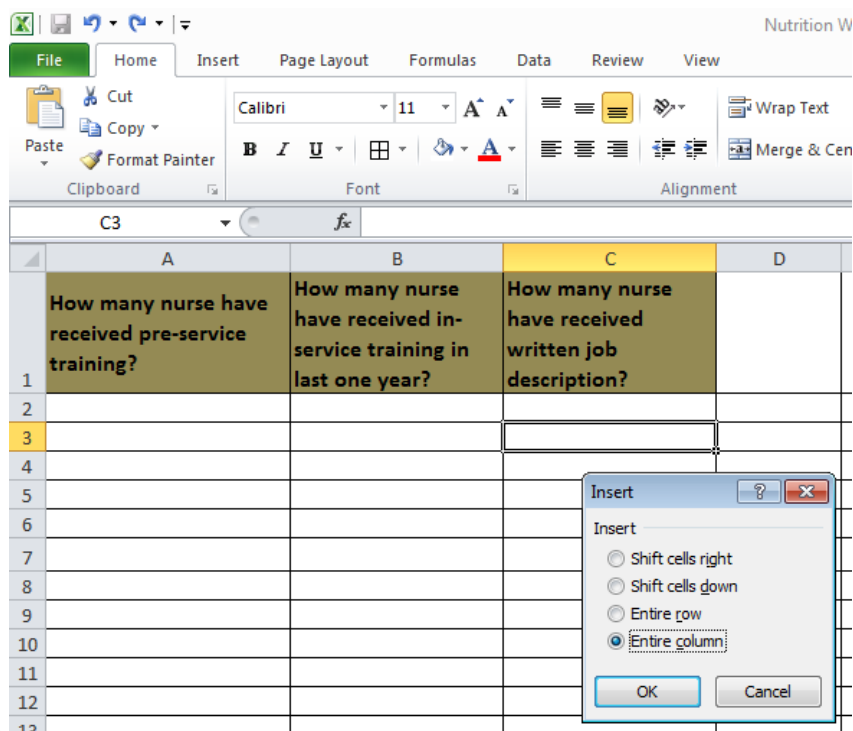
**Step 3:** Click on Insert Sheet Column (or rows). A new column (or row) is added.



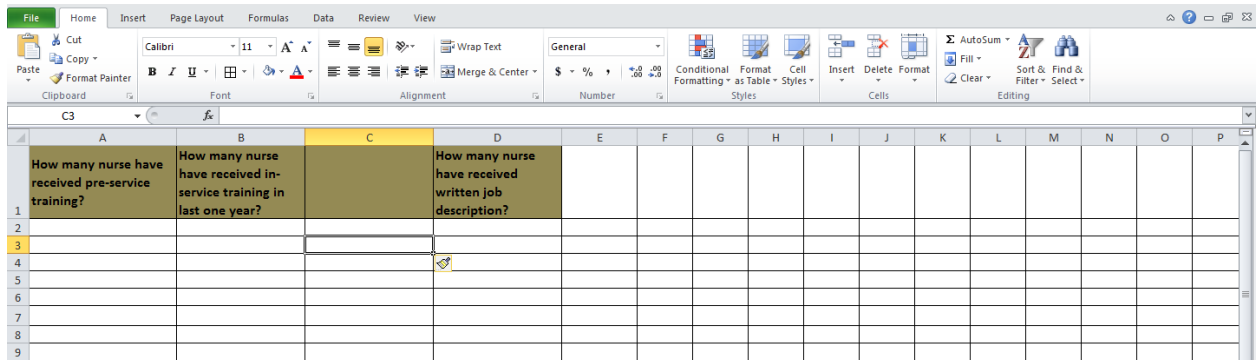
Or right click on your computer mouse. Click on Insert option.



Select 'Entire column' (row) option. Click 'OK' button

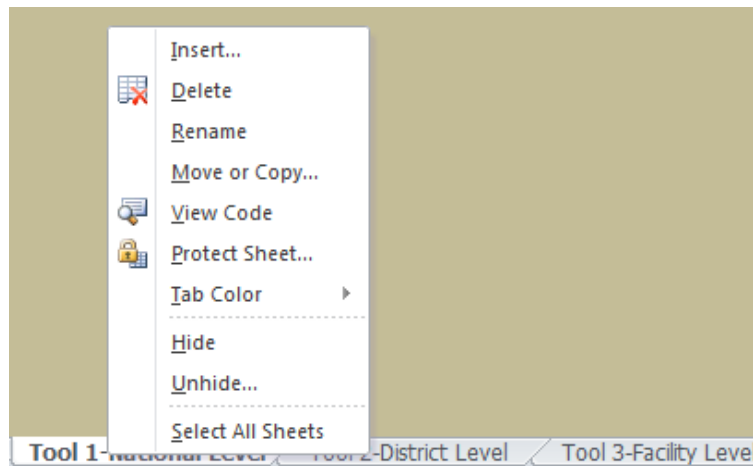


A new column (row) is added.

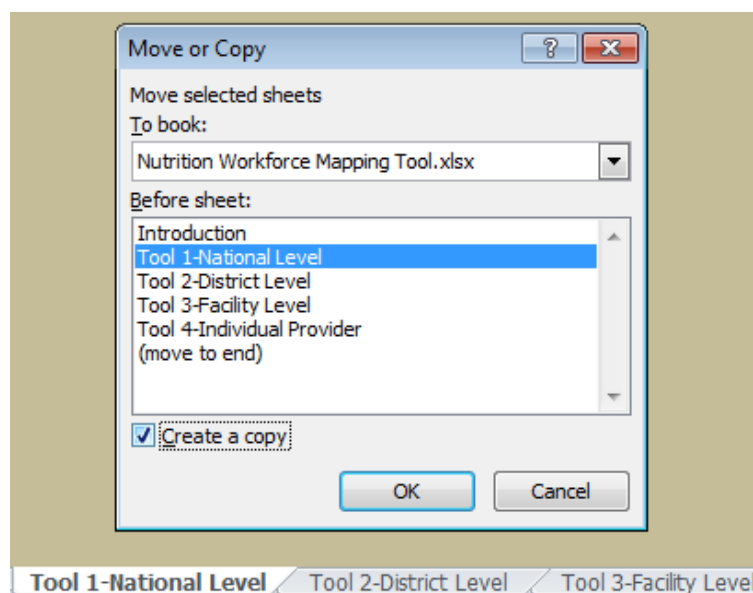


## 5.6 How to Create a Copy of an Existing Sheet

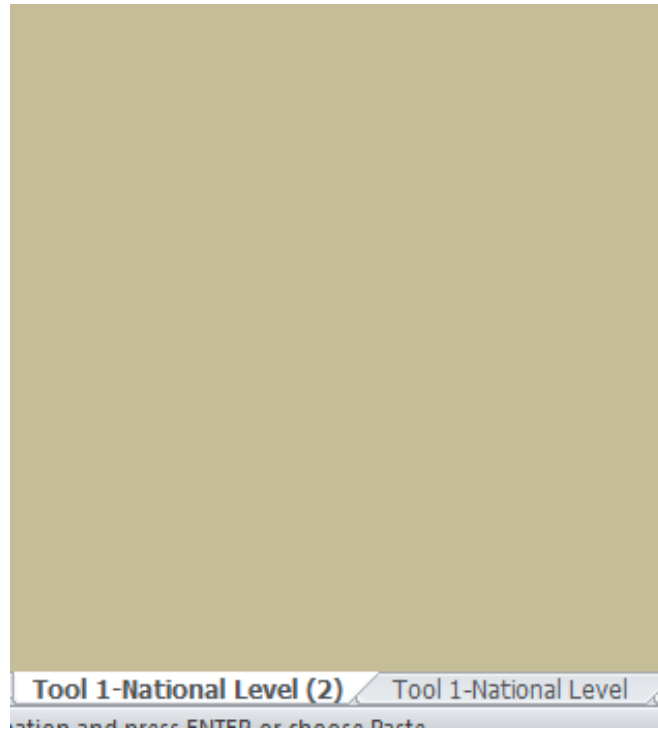
**Step 1:** Keep your computer mouse cursor on the data entry sheet of the Excel workbook you want to copy. Right-click on your computer mouse.



**Step 2:** Click on Move or Copy option. Select the sheet you want to copy (example: Tool 1-National Level). Check 'Create a copy' box at the bottom. Click on 'OK' button.



**Step 3:** A copy of the selected sheet is created (example: Tool 1-National Level (2)).



You can modify the name of the sheet to suit your purpose by right clicking or double clicking on the worksheet title.

# Section 5: Job Aid for Data Presentation and Analysis

This job aid is aimed to facilitate data presentation, interpretation, analysis, and use. The following are illustrative tables and possible analysis/interpretation of the data presented in each. Data presented are fictitious and are only for the purposes of demonstration.

Table 1 highlights the difference in stakeholder perceptions of number of nutrition actions that various providers are tasked with. Such differences can adversely influence program planning, coordination, and delivery of nutrition actions.

**Table 1: Perception of Responsibility for Nutrition Actions (illustrative)**

Perception of...	Number of Nutrition Actions for which Provider is Responsible, by Provider Type			
	CHW	Midwife	Nurse	Doctor
National nutrition focal point	32	38	39	8
District health officer	26	35	42	12
Facility head	47	39	27	5
Individual provider	20	31	38	18

Table 2 provides insights into the different perceptions of head of facility and individual providers on the nutrition actions that the each provider type is tasked with, trained for, and typically performs. The consistency in what is reported by various respondents has implications for delivery of nutrition actions and may highlight the need for a review or revision of job descriptions. Such data can also shed light on competencies (or lack thereof) and service-quality gaps. Gaps in performance and training presented in this table can help health staff and program managers prioritize trainings on particular topics and/or particular provider type(s). The data may also be used advocate or strengthen supportive supervision.

**Table 2: Perception of Responsibility, Performance, and Training for Nutrition Actions (illustrative)**

Perception of...	Number of nutrition actions a [PROVIDER TYPE] is...		
	Responsible for Performing	Performs	Trained to Perform
Facility head	47	39	27
Individual provider	20	31	38

Tables 3 and 4 show workforce size, composition, and training status. Understanding this is critical to delivery of high-quality services as they can shed light on gaps in human resource number and capacity for delivery of priority nutrition actions.

**Table 3: Total Number of Health Providers, by Type of Provider and District (illustrative)**

District Name	Number of Providers, by Type					
	Health volunteers	TBA	Auxiliaries	Nurses	Midwives	Doctors
District 1	76	No data	195	77	5	73
District 2	351	No data	1973	1532	76	1090

**Table 4: Number of Trained Providers by Type of Provider and District (illustrative)**

Sl. No.	District Name	Number of Trained Providers							
		Health Volunteer		Community Health Worker		Midwife		Nurse	
		Pre-Service	In-Service	Pre-Service	In-Service	Pre-Service	In-Service	Pre-Service	In-Service
1	Kampala	0	0	0	0	150	120	75	5
2		0	0	0	0	0	0	0	
3		0	0	0	0	0	0	0	
4		0	0	0	0	0	0	0	
5		0	0	0	0	0	0	0	
6		0	0	0	0	0	0	0	
7		0	0	0	0	0	0	0	
8		0	0	0	0	0	0	0	
9		0	0	0	0	0	0	0	
10		0	0	0	0	0	0	0	
11		0	0	0	0	0	0	0	
12		0	0	0	0	0	0	0	



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