COVID-19 Learning Series

SURVEY REPORT











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This document is a part of the ENN COVID-19 Learning Series (www.ennonline.net/C19LearningSeries). This series comprises:

- A survey report outlining the results of a survey collecting information from ENN's network on topics still underrepresented within the available learning regarding the COVID-19 pandemic and nutrition services in low- and middle-income countries (www.ennonline.net/C19LearningSeries/ ScopingSurvey). The results of this survey informed the following work.
- 2. Four case studies and a synthesis document, focusing on the role of entrepreneurs in supporting nutrition and health services during the pandemic.
 - Case study 1: Western Stone Enterprise, a woman-led business that produces peanut paste, sesame paste and other value-added agricultural products in Kenya (www.ennonline.net/C19LearningSeries/CS1).
 Case study 2: Adeck Juice Bar, an all-

C19LearningSeries/CS2).

– Case study 3: Sky Brands, a food
processing company specialising in biofortified

natural smoothie bar run by a young entrepreneur

in Dar es Salaam, Tanzania (www.ennonline.net/

- processing company specialising in biofortified products in Zimbabwe (www.ennonline.net/C19LearningSeries/CS3).
- Case study 4: Solvoz, an open-access digital procurement platform connecting humanitarian organisations and local suppliers (www.ennonline.net/C19LearningSeries/CS4).
- Synthesis report: a short summary of the key learnings from the four case studies relevant for nutrition practitioners (www.ennonline.net/ C19LearningSeries/CS_synthesis).

3. A report of practitioners' experiences of the impact of the COVID-19 pandemic on the number and demographics of people accessing nutrition services in low- and middle-income countries (www.ennonline.net/C19LearningSeries/Practitioner_Survey).

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Introduction

he Emergency Nutrition Network (ENN) is recognised globally as a thought partner and convener in nutrition. We aim to enhance the effectiveness of policy and programming by capturing and exchanging knowledge and experiences, convening actors and networks, and carrying out research to improve knowledge, stimulate learning and build evidence. Our vision is that every individual caught up in a nutritional emergency, or suffering from malnutrition, anywhere in the world, gets the most effective help possible.

Our work is always driven by the needs in the field, and through our collaborations we provide support and encouragement to practitioners and decision-makers involved in nutrition and related interventions.

In 2021 ENN, embarked on a COVID-19 Learning Series that aimed to complement existing COVID-19 learning initiatives within the nutrition sector, including through the Global Nutrition Cluster Technical Alliance, capitalising on ENN's rich network and fora and focusing on field-level experiences of operating within the context of COVID-19. We wanted the series, which comprises a number of case studies and a synthesis of key learning,

to contribute to a better understanding of the impact of COVID-19 on undernutrition and nutrition issues in local communities, as well as the challenges that COVID-19 presents for implementing nutrition services.

In order to ensure we were complementing, rather than replicating, existing learning efforts, and to make sure we were best serving the needs of our network, we first embarked on a survey of needs which we intended to inform the selection of topics and contacts for the case studies. This survey was designed to collect information from our network on the topics that they felt were still underrepresented within available information and learning regarding the COVID-19 pandemic and nutrition programming/services in low- to middle-income countries. We asked our respondents about the experiences they wanted to hear more about and learn from, and whose voices they felt had not yet been heard/represented.

The findings of the survey are outlined in this report. We are sharing these findings because, beyond guiding our work on the Learning Series, we feel they have broader relevance for all stakeholders working on knowledge management and learning in this area.

Methods

he survey questions were designed by members of the ENN team, based on a review of existing learning materials within the sector and with some external input and feedback from networks and working groups. The survey was then created using SurveyMonkey and piloted with a small number of respondents. It is important to note that, based on a review of existing learning materials, we purposively included in the survey areas we felt had been less well covered, though we also included open questions so that respondents could identify additional areas. The survey consisted of a series of demographic questions about the participants, followed by specific questions on how well participants believed different topics on

COVID-19 and nutrition programming had been covered to date within international, regional, or country learning and exchange fora/initiatives. We also asked respondents to identify any groups of people they felt were underrepresented within learning initiatives to date. Finally, we took the opportunity to ask respondents about their preferences for different types of learning materials. A combination of multiple choice and openended questions were used to collect information around specific topics, while still allowing and encouraging participants to share alternative ideas and experiences not already covered in the survey design.

An outline of the questions can be found in Table 1.

Table 1: Outline of survey questions

Question number	Focus of question	Question type
1	The region of the word in which the participants work	Multiple choice
2	The type of organisation the participants work for	Multiple choice
3	The nature of the participants' job	Multiple choice
4	The depth of existing coverage of specific topics around COVID-19 and nutrition programming (with the opportunity to identify specific groups of people whose voices were perceived to be underrepresented)	Matrix/rating scale
5	Additional topics on which participants would like more information	Open-ended
6	The preferred format of the learning pieces	Multiple choice
7	The nature of the participants' job	Open-ended

To increase accessibility and reach and to encourage participation from a range of countries and settings, a French version of the survey was also produced. The survey was circulated to contacts within ENN's network and mailing lists. A link to the survey was also posted on en-net and ENN's social media pages (including

Twitter, Facebook and LinkedIn) in both languages, to encourage contributions from participants outside of our immediate network. Finally, staff members shared the link to the survey within their own professional networks and working groups.



A total of 78 people from 39 countries participated in the survey. The level of engagement with the survey varied for each question (as reported below). We provide the results for each survey question below.

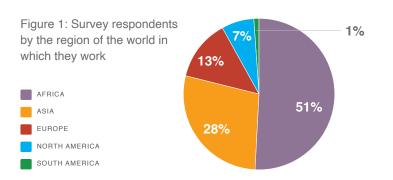
Section 1: Demographic/background questions

Question 1: Region of the world in which participants work

Number of participants who answered the question 72 Number of participants who skipped the question 6

Response rate 92%

As Figure 1 shows, the largest proportion of survey respondents work in Africa (51%), followed by Asia (28%) and then Europe (7%), suggesting strong participation of stakeholders from low- and middleincome countries in the survey. The range of countries in which participants work suggests quite a broad engagement with the survey and has hopefully contributed to diversity in country experiences and opinions feeding into the survey results.



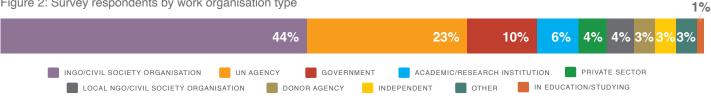
Question 2: Type of organisation respondents work for

Number of participants who answered the question 78 Number of participants who skipped the question 0

Response rate 100%

As Figure 2 shows, a large proportion of survey respondents work for international non-government organisations (INGOs) or civil society organisations, followed by United Nations agencies and then government bodies. These figures reflect the composition of ENN's network and we were pleased to get some uptake by government and local NGOs in particular, given ENN's current drive to strengthen our country networks. However, it is worth noting the predominance of INGO and United Nations participants, which should be considered when interpreting the survey results.

Figure 2: Survey respondents by work organisation type

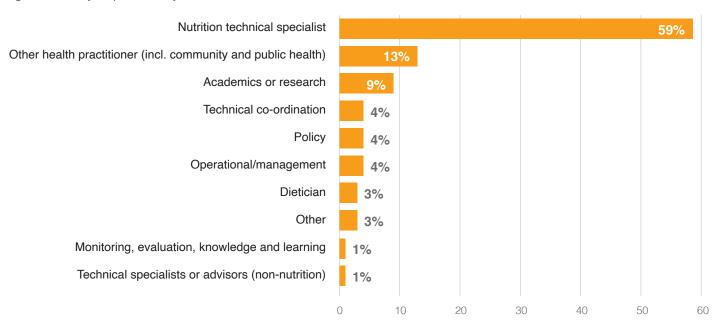


Question 3: Nature of the respondents' role

Number of participants who answered the question 78 Number of participants who skipped the question 0

Response rate 100%

Figure 3: Survey respondents by the nature of their work



The survey participants represented a range of areas of work, as shown in Figure 3. They were predominantly nutrition technical specialists, with a few participants working in other types of health practitioner roles and in academic/research settings. A couple of participants came from policy or technical co-ordination backgrounds, as well as monitoring, evaluation and learning specialisms.

Section 2: Coverage of topics related to COVID-19 and nutrition programming

Question 4: The depth of existing coverage of specific topics around COVID-19 and nutrition programming (with the opportunity to identify specific groups of people whose voices were perceived to be underrepresented)

Number of participants who answered the question 54 Number of participants who skipped the question 24

Response rate 69%

Participants were asked to rank how well they thought specific topics related to COVID-19 and nutrition programming had been covered in terms of learning materials and resources produced and shared within their networks that they had been exposed to or aware of so far. Answer choices included "comprehensively covered", "partially covered" and "not covered". A full list of topics and participant responses can be found in Figure 4.

The results show that there is not a single topic which the majority of survey respondents felt had been comprehensively covered, suggesting a gap in learning materials and resources around COVID-19 and nutrition programming across all the topics listed in the survey (or a gap in access to such materials), and suggesting that the team's review of topics for inclusion in the survey was representative of the actual needs. It is worth noting that this result may also reflect there being a plethora of learning materials on the subject of COVID-19 and nutrition in general, and the challenge of keeping up with it. There were, however, some topics which emerged as more covered and less covered by learning materials and resources already produced, and some patterns and themes which can be drawn from this.

The topics which participants felt were the most covered were the following:

- Tailoring international guidance on COVID-19 and nutrition programming to local contexts, and experiences of simplified approaches (programme adaptations to the pandemic) being continued in the long term.
- · Methods used by programme influencers to adapt programmes/services to the pandemic.

In contrast, the topics which respondents felt were least covered, were the following:

- The roles of non-nutrition/non-health stakeholders in strengthening nutrition response/services within the pandemic.
- Insights into how the pandemic has affected the numbers (age/sex profile) and demographics of people accessing nutrition services.
- The impact of the pandemic on exacerbating gender inequalities in access to nutrition services.
- The experience of community health workers (CHWs) in implementing COVID-19 adaptations for nutrition programming.

We noted similarities and a slight overlap in themes between the topics respondents felt were the most and least covered. For example, two of the four topics which participants felt were the least covered centered around the impact of the pandemic on the access of different groups (such as by gender/age category) to nutrition services. This was reinforced by the results in Table 3, which highlights different age categories (infants under six months, adolescents, school-age children and the elderly) as groups that are underrepresented across topic areas more generally. The other two topics (the role of CHWs and non-nutrition/health stakeholders, such as youth groups and entrepreneurs, in maintaining nutrition services during the pandemic) fall under the theme of the role of different stakeholders in the provision of nutrition services during the pandemic.

Similarly, topics which participants felt were the most covered fell under the themes of programmatic adaptions to the pandemic and tailoring international guidance. This could be due to the nature of the roles and organisation types which respondents work for, meaning they have more exposure to programmatic adaptation resources and international guidance compared to some of the other topics.

Figure 4: Percentage coverage of different topics relating to COVID-19 and nutrition programming

How changes in gender inequalities, exacerbated by the pandemic, influence delivery and uptake of nutrition services

Examples of the role of non-nutrition/non-health stakeholders in strengthening the nutrition response/services within the pandemic (e.g., entrepreneurs, youth groups)

The experience of CHWs when implementing COVID-19 adaptations for nutrition programming (e.g., related to resources, support, capacity, knowledge etc)

Insights about how the pandemic has affected numbers and demographics (e.g., age/sex profile) of people accessing nutrition services

Documenting how nutrition programme monitoring was implemented within COVID-19 restrictions

Documenting experiences of how well various guidance on COVID-19 adaptations for nutrition programming was received (e.g., communication style and method, timeliness)

Documenting the challenges for nutrition programmes/services that have not been able to return to normal. (e.g., growth monitoring programmes)

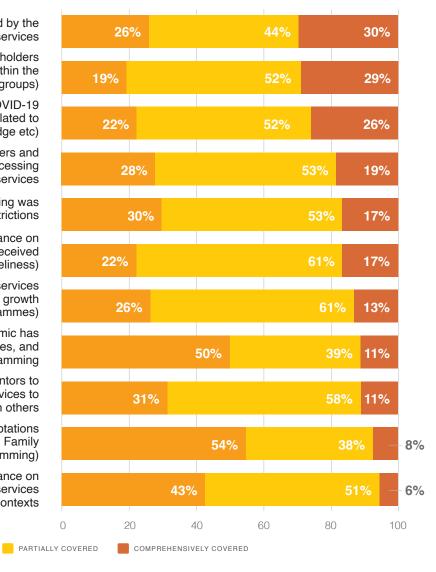
Experiences related to how the COVID-19 pandemic has impacted supplies, human and financial resources, and resulting implications for nutrition programming

Examples of methods used by programme implementors to share their experiences of adapting programmes/services to the pandemic with others

Experiences of simplified approaches (programme adaptations to the pandemic) being continued longer term (e.g., Family MUAC, MUAC-alone programming)

Experiences of tailoring international guidance on COVID-19 adaptations for nutrition programming/services to local contexts

NOT COVERED



Question 5: Additional topics on which participants would like more information

Number of participants who answered the question 33 Number of participants who skipped the question 45

Response rate 42%

Participants were asked to identify additional topic areas which they would like to see covered as part of the Learning Series. These topic areas have been grouped by themes and are listed in Table 2.

Table 2: Additional topics which participants suggested for inclusion in the Learning Series

Technology/data gathering/monitoring

Coverage surveys

Documentation of SMART surveys and other nutrition surveys

Nutrition information systems

Technology for development (T4D)

Age groups

Children

COVID-19 and nutrition for adults

Adolescents

Adolescents: How COVID-19 restrictions have affected their nutrition status and dietary intake at household level and at school level

Impact of the COVID-19 pandemic on the health and nutrition of the elderly and people with disability

Breast-feeding

Wet nursing, relactation, human milk sharing

Hazards for babies of breast-feeding by COVID-19-positive mothers

Food chain/supplies

Changes in food consumption during the pandemic

Indirect impact of COVID-19 on nutrition situation (e.g., increased food insecurity)

Information on the impact of the pandemic on food systems, nutrition supply chains, markets and those reliant on the agricultural sector for income and food

Food systems/market systems approaches for improved nutrition within the COVID-19 landscape

Other

The impact on the burden of different forms of malnutrition, at the global, regional and country levels. This would really help advocacy colleagues in the sector to raise awareness of the needs in the nutrition sector, and to fundraise

How the COVID-19 context affects the human resources who work on nutrition programs, as many of them are deployed to support surveillance and the management of COVID-19 cases, and to support COVID-19 vaccination, which adds an extra burden to programs

How the donor community has invested in nutrition responses during COVID-19

Exacerbation of other inequities; e.g. disability and access to services

There were a cluster of ideas suggested by respondents around technology and data gathering. Similar to question 4, the impact of the pandemic on the nutrition of different groups – such as age groups and breast-feeding status – was suggested. There was also a lot of interest around how COVID-19 has impacted nutrition through its wider impact on the food system, further supporting the need suggested in question 4 for more learning materials around the role of non-nutrition and health stakeholders.

Section 3: Underrepresented groups

For each topic, participants were also asked to highlight any groups which they felt were underrepresented in each topic area. Their answers can be found listed in Table 3. In general, the groups highlighted reflect those that are often highlighted as underrepresented in general within nutrition policy and programming.

Table 3: Groups which survey respondents thought were underrepresented in topic areas

Groups which survey respondents felt were underrepresented in topic areas	
Adolescents	
Elderly	
Infants under six months	
Prisoners	
Schoolchildren	
Wet nurses and breast-feeding women	

Section 4: Preferred format of learning materials

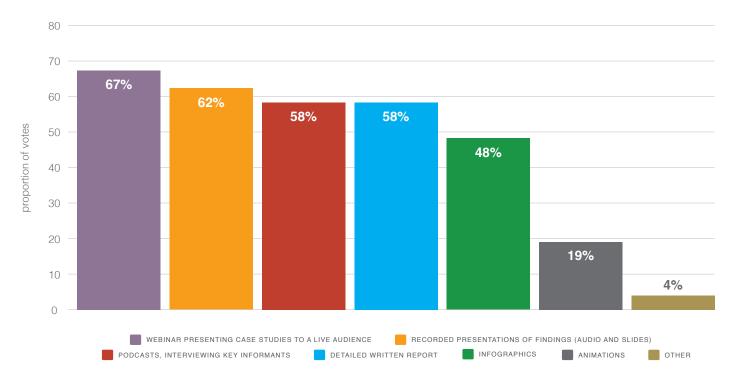
Question 6: The preferred format of the learning pieces

Number of participants who answered the question 52 Number of participants who skipped the question 26

Response rate 67%

Participants were asked to choose their preferred format for learning materials related to the areas where they had identified learning gaps. We were hoping this would help us to tailor materials to meet the needs of our network; however, Figure 5 shows that there was no strong preference regarding the format of learning pieces, and that a variety of different forms would be popular. The least popular choice was animations. Although animations can be helpful for simplifying content in a digestible way, this response likely reflects the profile of the respondents and their desire for more detailed learning content.

Figure 5: Preferred format of the learning pieces which will be derived from the survey results



Conclusion

he findings from the survey provide useful insights into where members of our networks feel there are gaps in learning and resources around COVID-19 and nutrition programming, and where efforts to build additional learning and resources could focus.

Generally, there seems to be a reasonable consensus within the results, with agreement across topics and some specific themes emerging as areas of interest that can be taken forward into the generation of learning content – in particular, a gap in knowledge of, and strong interest in learning more about, the role and experiences of wider nutrition and health stakeholders in delivering/maintaining nutrition services within the context of COVID-19, and specifically CHWs, and non-nutrition and health stakeholders (entrepreneurs, youth groups).

There also seems to be a gap in evidence and learning around the impact of the pandemic on different age groups, which seemed quite prominent throughout the survey results, with multiple age categories listed as underrepresented groups across all topics in question 4 and reiterated again as groups respondents would like to know more about, in their answers to question 5 (infants under six months, school-age children, adolescents and the elderly in particular).

It should be noted that these results are only representative of the views and experiences of a select number of people who participated in this survey, and not the wider global nutrition community. It is also likely that the survey results and some of the patterns which emerged were influenced by the backgrounds of the respondents – largely nutrition technical specialists working for INGOs or United Nations agencies, and therefore likely to have had exposure to similar experiences and learning resources on the topics included. Furthermore, if respondents felt that topics were not well covered, it may not necessarily mean that materials are not available: it may also be a case of supporting people to access the materials that are already there but potentially less accessible than they need to be.

Nonetheless, the findings of this survey have proved extremely useful in guiding the scope and focus of ENN's subsequent exploration and development of learning materials in collaboration with our network. The practice of checking with the ENN network prior to starting the case studies provides confidence that the outputs will be useful and not duplicative. Going forwards, this type of engagement with the ENN network to inform learning is something we would like to explore more, and particularly how to facilitate more real-time forms of feedback on the content and utility of learning pieces.

Next steps from ENN

ENN has embarked on the following activities as part of the Learning Series, based on the top two priority topics from the survey:

- 1. A series of four case studies that share experiences of how social entrepreneurs have worked to deliver nutrition services during the pandemic (www.ennonline.net/C19LearningSeries).
- A survey of nutrition practitioners and clinicians regarding whether they have seen changes to caseload and the demographics (e.g., age, sex) of people accessing nutrition services during the pandemic (www.ennonline.net/ C19LearningSeries/Practitioner_Survey).

As can be seen from the survey results, the above activities are just the starting point as regards addressing the perceived gaps in learning from our network. We invite others to use these survey results to guide their own complementary learning pieces to further improve the understanding of research gaps and best practices regarding nutrition programming in the COVID-19 pandemic.



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