



What's new at ENN?

Field Exchange

Special issue on wasting in South Asia

Asia is home to half of the world's wasted children (25.9 million) and severely wasted children (8.6 million) and 40% of the world's stunted children (58.7 million).¹ Over 80% of the estimated regional burden of wasting is concentrated in India alone. Uniquely, the prevalence and incidence of wasting in South Asia is often highest at birth and in the first months of life, then declines with age. The majority of wasting after the first year of life occurs among children who experienced wasting in early life. The wasting agenda is inadequately reflected in national health strategies and plans of South Asian countries and financial investments in the wasting agenda are insufficient to deliver services at scale.

There is a need to capture, collate and appraise learning and evidence from programming and research in South Asia to help build the evidence base to inform advocacy, priority actions and research agendas. As a contribution to this effort, Emergency Nutrition Network (ENN) and the United Nations Children's Fund (UNICEF) Regional Office for South Asia (ROSA) have partnered to develop a special issue of *Field Exchange* on wasting in South Asia, to be published in September 2020.

The objective of this special issue is to increase understanding of the huge prevalence and burden of wasting in South Asia and document the current status, gaps, innovative approaches and opportunities in the policy and programme response. Priority content areas include: epidemiology of wasting in South Asia; implementation of models and packages in South Asia; interventions to reduce low birth weight; management of 'at-risk' mothers and infants under six months of age; integration of wasting programmes into health systems and health systems strengthening; experiences of implementing a continuum of care for wasted children; linking humanitarian and development programming to treat wasting; and implications of climate change on the burden of wasting in South Asia.

We are issuing an open call for content with a deadline for submission of 30 April 2020. Please send a short abstract (maximum 400 words) of your proposed article that explains how it will address a priority theme and key learning points to Chloe Angood at chloe@enonline.net

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that it is free to subscribe to *Field Exchange* directly? We will send you an email alert each time a new issue comes out. Print copies are also available free of charge for those who really need them. Manage your subscription at www.enonline.net/subscribe/fex



ENN supported the Scaling Up Nutrition (SUN) Movement² Secretariat at the Global Gathering (GG)³ in November 2019 in Nepal, attended by 1,200 participants from over 100 countries. ENN conducted knowledge capture of the key outcomes of the 25 workshops that ran throughout the three-day gathering, feeding into both the SUN Global Gathering Report and a special SUN GG edition of ENN's publication *Nutrition Exchange* described below.



ENN also published five briefing papers in time for the SUN GG 2019 to distil emerging themes of articles published in *Field Exchange* and *Nutrition Exchange* over the last five years. The syntheses of ENN learning examined over 150 relevant field-level articles and explored the key topics of:

1. Building an enabling environment
2. Utilising SUN mechanisms to catalyse scale-up
3. Scaling up nutrition-sensitive interventions
4. Scaling up nutrition-specific interventions
5. Working in fragile and conflict-affected states.

Download from www.enonline.net/resources/sunscaleupnutsensitive

ENN also developed two country case studies exploring sub-national, multi-sector nutrition programming in the Philippines and Zimbabwe. These accompany six other case studies conducted in Senegal, Niger, Ethiopia, Kenya, Nepal and Bangladesh exploring the same theme. ENN now has a rich body of learning on multi-sector nutrition programming and will publish these reports alongside a synthesis paper in March.

All of these materials can be downloaded from the SUN Knowledge Management section of ENN's website at www.enonline.net/ourwork/knowledgemangement/sunkm



NUTRITION EXCHANGE

Look out for two *Nutrition Exchange* (NEX) publications coming out in 2020! End of March is the release date for *NEX13*, a special edition featuring country stories inspired by the SUN Movement 2019 Global Gathering. These articles capture key workshop themes from the conference, such as: innovative financing, data-driven decision-making, meeting the health and nutrition needs of adolescents, and how business and civil society can work together to improve nutrition – as told by the countries themselves.

In a second regional edition, *NEX South Asia* – to be released at the end of June – focuses on country efforts to improve young children's diets. Stories range from the use of evidence to design a national infant and young child feeding strategy in Pakistan to the Government of Nepal's experiences in implementing a social protection intervention ('Child Grant') and regional efforts to address increasing child overweight and obesity. New issues will be available on our website www.enonline.net/nex or subscribe free of charge at www.enonline.net/subscribe/nex



en-net is a free and open resource to help field practitioners have access to prompt technical advice for operational challenges for which answers are not readily accessible. Join *en-net* at www.en-net.org

Over the past six months, 50 questions have been posted on *en-net*, generating 157 responses. The forum area for *Assessment and Surveillance* generated most discussions, followed by the *Prevention and management of severe acute malnutrition* and *Infant and young child feeding intervention* areas. Fifty-two vacancy notices and announcements have been posted and have accumulated 24,526 views on the website.

A question was raised in the *Assessment and Surveillance* area as to whether KoBo Toolbox⁴ for mobile data collection can include a function for SMART survey teams to view a child's z-score immediately during data collection to facilitate prompt referral of cases of severe acute malnutrition. Various technical workarounds were proposed and the United Nations High Commission for Refugees (UNHCR) shared that it is currently developing an algorithm of z-score calculation for incorporation into KoBo/Open Data Kit tool for its Standardised Expanded Nutrition Survey (SENS) methodology.⁵

¹ UNICEF, WHO and World Bank Joint Malnutrition Estimates 2019 <https://data.unicef.org/resources/jme/>

² <https://scalingupnutrition.org/nutrition/>

³ <https://scalingupnutrition.org/sungg2019/>

⁴ www.kobotoolbox.org

⁵ SENS is an approach rooted in SMART used by UNHCR in refugee populations.

A mobile app developed in the Philippines was shared,⁶ the main purpose of which is reporting violations of the Code of Marketing of Breastmilk Substitutes,⁷ although additional modules have been added, including one for growth monitoring. A growth monitoring chart intended for mothers to monitor their child's growth has proven useful for health workers to detect and monitor stunting and wasting in their communities. The growth monitoring module is a simple calculator that can compute the child's weight for height/length, weight for age and height/length for age. Users just enter the child's birth date, weight in kg and height/length in cm. The app can be used offline.

The discussion evolved to consider the use of flags in survey data collection and analysis. Flagged entries during data collection should alert the team to immediately repeat the measurements and verify the age data of the child in question. While flags are meant to highlight 'implausible' values, implausibility does not mean impossibility and there are many reported instances of flagged cases being valid. Excluding them automatically can bias results.

In large surveys, such as Multiple Indicator Cluster Surveys (MICS) or Demographic Health

Surveys (DHS), that collect data from many populations, each population may have different distributions of anthropometric indices and different prevalence of anthropometric indicators. In such cases the mean of the entire survey sample is unlikely to be a suitable reference mean and the assumed standard deviation (i.e., $SD = 1$) will usually be too narrow to set limits that define statistical outliers with the expected probabilities. This will lead to records being flagged incorrectly, likely leading to biased prevalence estimates.

It was proposed that it would be interesting to conduct an analysis of flagged data from multiple data sets and surveys to inform issues around the quality of evidence. The analysis could examine patterns in relation to the timing of measurements being taken, the survey team structure and composition or survey locale. Although participants in the discussion were aware that some analysis of these issues has been done, they were not aware of any systematic global studies.

To read more or join this discussion, go to www.en-net.org/question/3841.aspx

en-net has seen greater uptake by French-speaking users over the past few months, with an

increasing number of posts from French-speaking countries in Africa. These include requests for the national protocol for the management of acute malnutrition in Cameroon (which was subsequently shared), discussion on Ebola virus disease, anthropometry and nutritional care in adults in the Democratic Republic of Congo (www.en-net.org/question/3846.aspx) and a question on thresholds for infant and young child feeding indicators from Cameroon (www.en-net.org/question/3873.aspx)

To join any discussion on *en-net*, share your experience or post a question, visit www.en-net.org.uk or www.fr.en-net.org

To feed back on the site, please write to post@en-net.org

Contributions

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⁶ <https://apps.apple.com/us/app/mbf-ph/id1260502250>
<https://play.google.com/store/apps/details?id=org.mtherbabyfriendlyphilippines.android>
<https://play.google.com/store/apps/details?id=com.mtherbabyfriendlyphilippines.eopt>

⁷ www.who.int/nutrition/publications/code_english.pdf

Guidance for nutrition in emergencies practitioners on COVID-19

The Global Technical Assistance Mechanism for Nutrition (GTAM) has released a technical brief for Nutrition in Emergencies (NiE) practitioners on COVID-19,¹ in response to requests from country-level teams. The brief provides an overview of available guidance and tools to inform the integration of COVID-19 preparedness and response into humanitarian nutrition responses. Guidance and capacity-building resources are listed with online links in the following areas: preparedness; health and nutrition facility and systems management; management of wasting; nutritional support for patients with COVID-19; infant and young child feeding; workplace precautions and research.

Key considerations for emergency settings are summarised where applicable guidance is currently available. The brief emphasises the need for preparedness actions to ensure comprehensive medical, nutritional and psychosocial care for those with COVID-19. In terms of health systems management, The World Health Organization (WHO) recommends that facilities and nutrition centres apply standard precautions (such as respiratory and hand hygiene measures) for all patients and additional precautions (contact, droplet and airborne) for suspected COVID-19 cases. Administrative controls and policies are also recommended for the prevention and control of transmission of the virus and recommendations

are made on the rational use of personal protective equipment in light of expected global supply chain disruptions.

In terms of the management of wasting, it is recognised that, during an influenza pandemic, levels of malnutrition may increase. To prevent malnutrition, key family practices and treatment of common illness should be encouraged and the health and food security sectors closely linked. Programmes may need to be adjusted (for example, to avoid mass gatherings and decrease frequency of follow-up visits at health facilities). Existing community-based management of acute malnutrition (CMAM) programmes should continue if possible, but new CMAM programmes are not recommended during an influenza pandemic. Supplementary feeding programmes should continue if possible, as should inpatient therapeutic feeding programmes, with separate isolation areas for patients with suspected influenza.

There is currently no guidance for the nutritional support of COVID-19 patients. However, Centers for Disease Control (CDC), United Nations Children's Fund (UNICEF), WHO and other agencies have issued clear statements about COVID-19 and breastfeeding. Based on the known benefits of breastfeeding and limited evidence that the COVID-19 virus is not present in breastmilk, continuation of breastfeeding is advised, regardless

of COVID-19 status. The main risk of transmission between a caregiver and their child is through close contact (respiratory air droplets). For caregivers with suspected or confirmed COVID-19 infection, precautions to prevent transmission, such as frequent handwashing, are recommended when feeding infants and young children. Breastfeeding mothers should not be separated from their newborns, although breastfeeding mothers with suspected or confirmed COVID-19 infection can consider asking someone who is well to feed the infant; for example with expressed breastmilk from a spoon or cup. Breastfed children of patients who are too unwell to breastfeed or who have died may require replacement feeding with a nutritionally adequate diet; for example, donor human milk through wet nursing or with a breastmilk substitute. With regard to feeding children expressed breastmilk, as per the Operational Guidance on Infant and Young Child Feeding in Emergencies (OG-IFE),² the use of breast pumps should only be considered when their use is vital and where it is possible to clean them adequately, such as in clinical settings. The use of feeding bottles and teats is discouraged due to high risk of contamination and difficulty in cleaning. The use of cups without spouts should be supported from birth. General guidance on IYCF in the context of infectious disease outbreaks can be found in the OG-IFE.

Given the rapidly evolving situation, this brief will be updated every two weeks until further notice. Visit the GNC website to view the latest version at <http://nutritioncluster.net>

¹ <http://nutritioncluster.net/resources/gtam-covid19-nutrition-technical-brief-20200313-final/>

² www.enonline.net/operationalguidance-v3-2017