



Nutrition information during the COVID-19 pandemic: guidance and experiences from the field

Thursday 30th April 2020 (2-3.30pm, GMT+2, Geneva time)



Technical Rapid Response Team



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Webinar Objectives

1. To give an overview of current NIS recommendations in for COVID-19 context
2. Present country-level experiences on utilization of existing systems and innovative techniques to collecting data
3. Review Nutrition Information Systems innovations
4. Opportunity for practitioners to ask questions on brief and NIS related challenges



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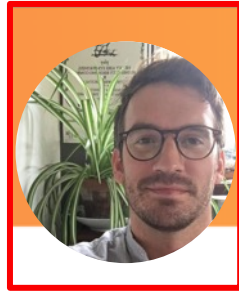
Webinar Agenda

- Objectives and introductions
- Presentation of Nutrition Management, Surveillance and Monitoring in the Context of COVID-19
- Case study from Zimbabwe
- Case study from Kenya
- Presentation of Nutrition Information Systems innovations
- Info on requesting technical support
- Q&A
- Webinar evaluation



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Today's Presenters



Ben Allen

- Deputy Program Director, Technical Rapid Response Team



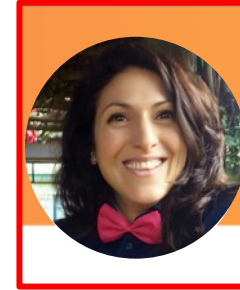
Mathieu Joyeux

- Nutrition Manager, UNICEF Zimbabwe



Louise M Mwirigi

- Nutrition Specialist (Information), Nutrition Section, Programme Division



Alexandra Rutishauser-Perera

- Head of Nutrition, Action Against Hunger UK



Lucy Maina Gathigi

- Nutrition Officer, Information System, UNICEF Kenya



Hassan Ali Ahmed

- Senior Nutrition Advisor and Project Manager SMART, Action Against Hunger Canada,



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Nutrition Information Management, Surveillance and Monitoring in the context of COVID-19

Brief #1, released on April 14th 2020



MAIN OBJECTIVE OF BRIEF

- To provide **broad recommendations** for implementers on how to prepare for and respond to the COVID-19 pandemic
 - To develop our understanding on practical solutions for the sustained collection, interpretation, analysis and management of nutrition-related data for surveillance and monitoring of the nutrition situation and relevant nutrition programmes
 - To document and disseminate lessons learned and emerging evidence as they become available

Key messages and priority actions

1. Maintain physical distancing and use alternative ways for data collection

- Avoid all data collection activities that involve in-person interaction
- Map out existing digital platforms and data systems
- Initiate discussions on the use of remote data collection procedures
- Initiate efforts to train and build capacity of enumerators on remote data collection

Key messages and priority actions

2. Ensure coordination of nutrition information activities

- Maintain a national nutrition information working group or related coordination mechanism
- Continue to ensure participation with existing Nutrition in Emergency fora, meetings, disease surveillance working groups, etc.
- Coordinate with relevant systems (Food, Health, WASH, Education and Social Protection) on the utilization and aggregation of nutrition-related data
- Build on existing nutrition monitoring framework to develop a workplan for the collection, analysis and reporting of additional nutrition indicators related to monitoring COVID-19

Key messages and priority actions

3. Maximize utilization of existing data and information systems and make information reports easily accessible

- Ensure the continued utilization of existing nutrition information available
- Conduct/update nutrition situation analyses with existing data and information
- Increase the use of data from sentinel sites and other relevant routine systems that are already in place
- Limit establishing new indicators that will be neither easy to collect or interpret and build on existing indicators that are already collected
- Adjust reporting frequency as required, make nutrition data easily accessible and shareable for all stakeholders

POTENTIAL ADAPTATIONS TO ROUTINE SYSTEMS

No population mobility restrictions

- Support to HMIS
- Ensure data sharing and its utilization
- Share resources and guidance on secondary data analyses and utilization

Partial/Full restrictions

- Ensure monitoring and tracking of nutrition service delivery
- Identify relevant indicators that have been systematically collected over time
- Continue to support routine systems





POTENTIAL ADAPTATIONS TO SURVEYS/ASSESSMENTS

- **Suspend all household-level/population-based surveys in line with government directives**
- **No population mobility restrictions**
 - Initiate discussions to explore the use of innovative ways to collect data
 - Increase in-country capacity to analyze and utilize secondary data trend and situation analyses
- **Partial/Full restrictions**
 - Explore phone/web-based surveys to collect critical nutrition information

NEXT STEPS

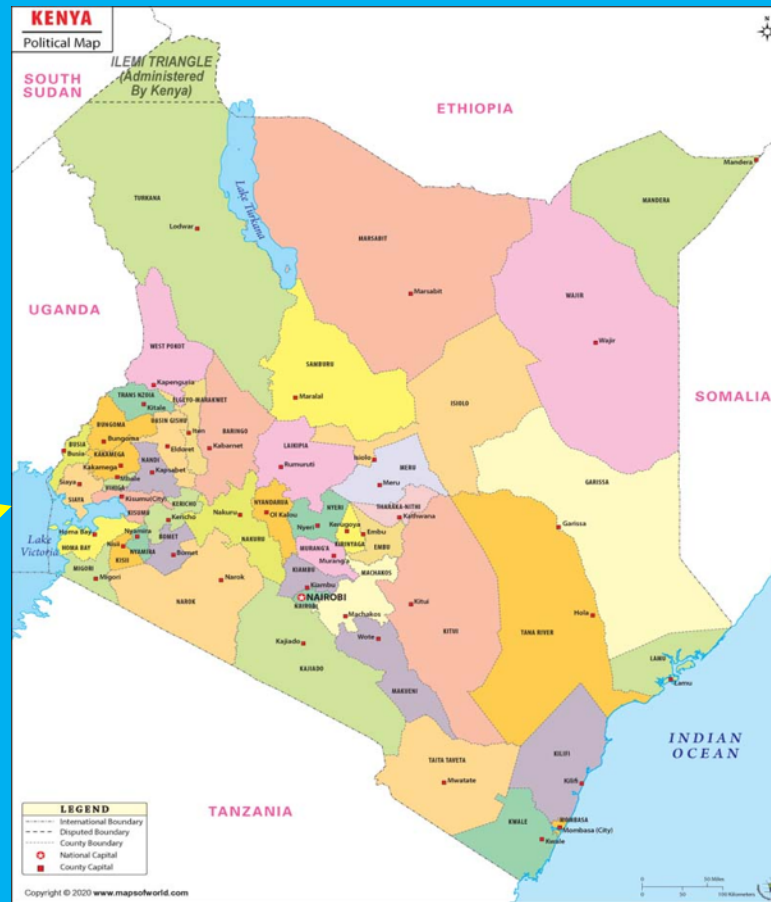
- 1) Practical and innovative approaches to be considered for nutrition information management, monitoring and surveillance in the context of COVID-19
- 2) Identification of priority areas for support and any outstanding issues relating to nutrition information based on feedback from countries
- 3) Consolidate a list of indicators to guide on the nutrition data and information needs during this pandemic
- 4) Dissemination of recommended core set of COVID-19 related indicators to monitor at country-level.

Thank you

Advice | Guidance | Expertise | Learning

A decorative horizontal bar at the bottom of the slide, composed of six colored rectangular segments: gold, blue, orange, red, green, and grey.

Nutrition Information Management, Surveillance & Monitoring in the context of COVID-19



Kenya COVID-19 Situation		
Confirmed	Recovered	Deaths
374	124	14
As at 28 th April 2020		

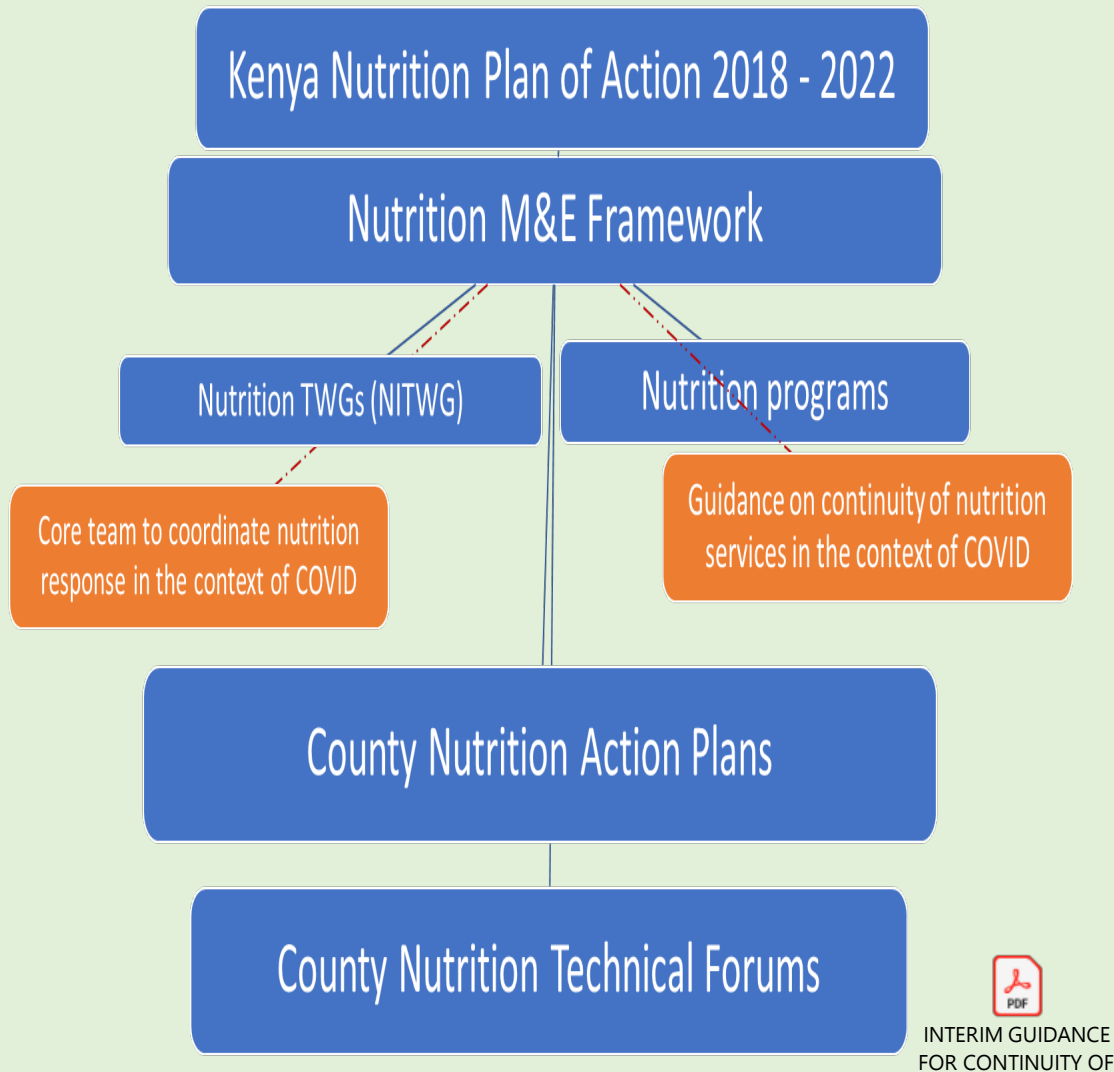
Country Level Experiences: Kenya Case

Nutrition Information and Surveillance in the context of COVID

Outline:

- Planning, standards, guidelines and tools
- Coordination of nutrition information
- Alternative data collection methods in the context of COVID
- Utilization of existing data and information systems
- Next steps

Strategic planning, standards, guidelines and tools



- Functional pre-crisis nutrition information system
- NIS integrated in preparedness and response plan
 - ✓ Process level indicators included to monitor implementation
- Adjusted 2019/2020 Annual Work Plan to include COVID-19 NIS/M&E
- Counties guided to ensure IPC costs related to surveillance are included in costed plans
- Interim guidance for monitoring and surveillance to adapt global guidance
- Review of the Kenya Early Warning System (EWS) for continued surveillance
 - Leveraging on EWS ICT infrastructure

Coordination of nutrition information, surveillance and monitoring

- Virtual NITWG meetings with core group to constantly follow up on key actions
 - Working with stakeholders to address arising information needs
 - Reviewing opportunities and innovative approaches to data collection and reporting
 - Providing technical oversight and drawing on regional and global guidance and partners
 - Maintaining standards and exchange of information
- Participation of NITWG in existing multisectoral and sectoral forums
 - Emergency Nutrition Advisory Group
 - Data and Information Sub-committee of Kenya Food Security Steering Group
 - Other COVID-19 coordination mechanisms
 - Increased frequency of meetings
- Participation of nutrition sector in county level COVID-19 coordination mechanisms



Physical distancing, alternative data collection methods & capacity strengthening

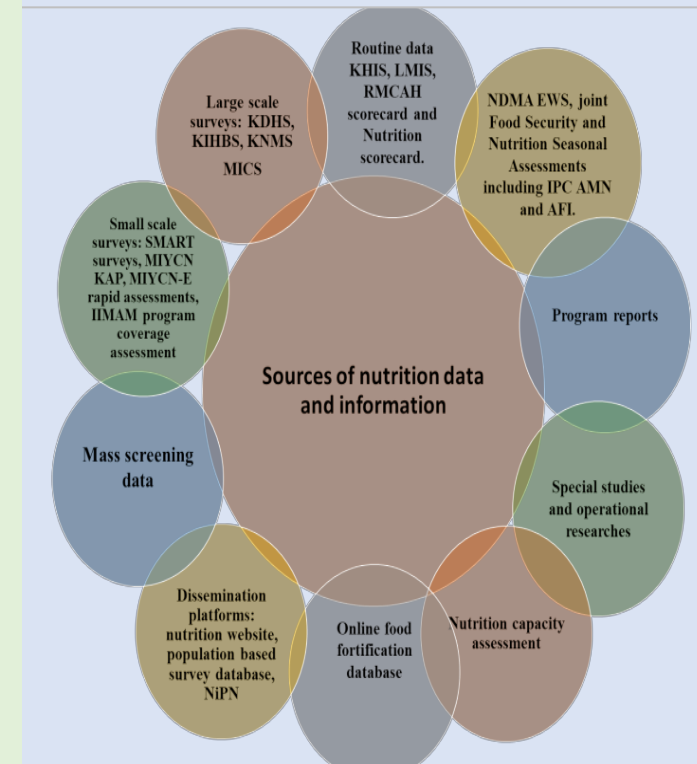
- Interim guidance on nutrition has emphasized adherence to MOH IPC guidance
- Data procedures that involve close contact between individuals discouraged or suspended
 - Mass screenings and population-based surveys suspended
 - Growth monitoring and promotion at health facility only encouraged during scheduled immunization
 - Non touch methods such as family MUAC and use of standing weighing scales
 - UNICEF supporting procurement of family MUAC and PPE to cover gap as supplies are inadequate



- Use of online platforms including emails to facilitate review and validation of data and program performance review
- Working from home modality has ensured continuity of desk level activities and deliverables
- Meetings/sensitizations held virtually e.g. all 47 counties sensitized on interim nutrition guidance, BCP, preparedness and response plan - NIS integrated
 - **Government and partner support to fund virtual meetings required**

Utilization of existing data and information systems

- Data from pre-crisis period availed; has informed planning
- Routine data sources DHIS2, EWS is the main source of data.
- Exploring ways of expanding existing systems such as FEWSNET to collect food prices in additional areas
- EWS being adjusted to collect data remotely: questionnaires shortened, costs estimated, MUAC suspended - family MUAC
- A comprehensive indicator list to be availed to counties
 - Consideration of existing indicators and minimizing new indicators
- Discussion on ways to adjust IMAM Surge Approach in COVID-19 ongoing to analyze changes within facility catchment areas
- Increased frequency of situation reports and updates
- Nutrition information products uploaded in country websites



Further information: <http://www.health.go.ke/#1585137302557-b337f64d-c55873d1-981a> and <http://www.nutritionhealth.or.ke/>

Next steps



- Finalization of the interim guidance and indicators
- Piloting of reviewed EWS
- Online sensitization on revised early warning system, interim guidance and indicators
- Review of IMAM surge approach in COVID-19 context
- Mapping of data digital platforms and use at national level and across counties
- Continued discussions with stakeholders such as Community Health department, National Drought Management Authority and Kenya Red Cross Society
 - ✓ Identify and utilize available opportunities to collect nutrition data from communities, households and caregivers – Rapid Pro??



Ahsante!

Emergency Data Reporting Using RapidPro

Why RapidPro?

RapidPro is an open source software that can be used to collect any kind of numerical data via SMS, which is available on all types of phones.

Delays in conventional monitoring and tracking systems, as data is collected, aggregated and analyzed, effectively generates static snapshots of the **past**. With RapidSMS, a continuous stream of “living” data that offers unique opportunities to react in real time to changes on the ground.

In Zimbabwe for nutrition data reporting, a scheduled poll system has been set up, sending the data to a short code.

In Zimbabwe, reverse-billing solution is used where all charges incurred sending to the short code are reverse-billed to the source rather than the texter (Village Health Worker), so, users sending messages to this short-code do not incur any charges on their own SIM.

RapidPro set up ZIMBABWE

List of High frequency indicators selected for Zimbabwe

Number of children (6-59months) screened

Number of children with SAM (sex disaggregated)

Number of children with MAM (sex disaggregated)

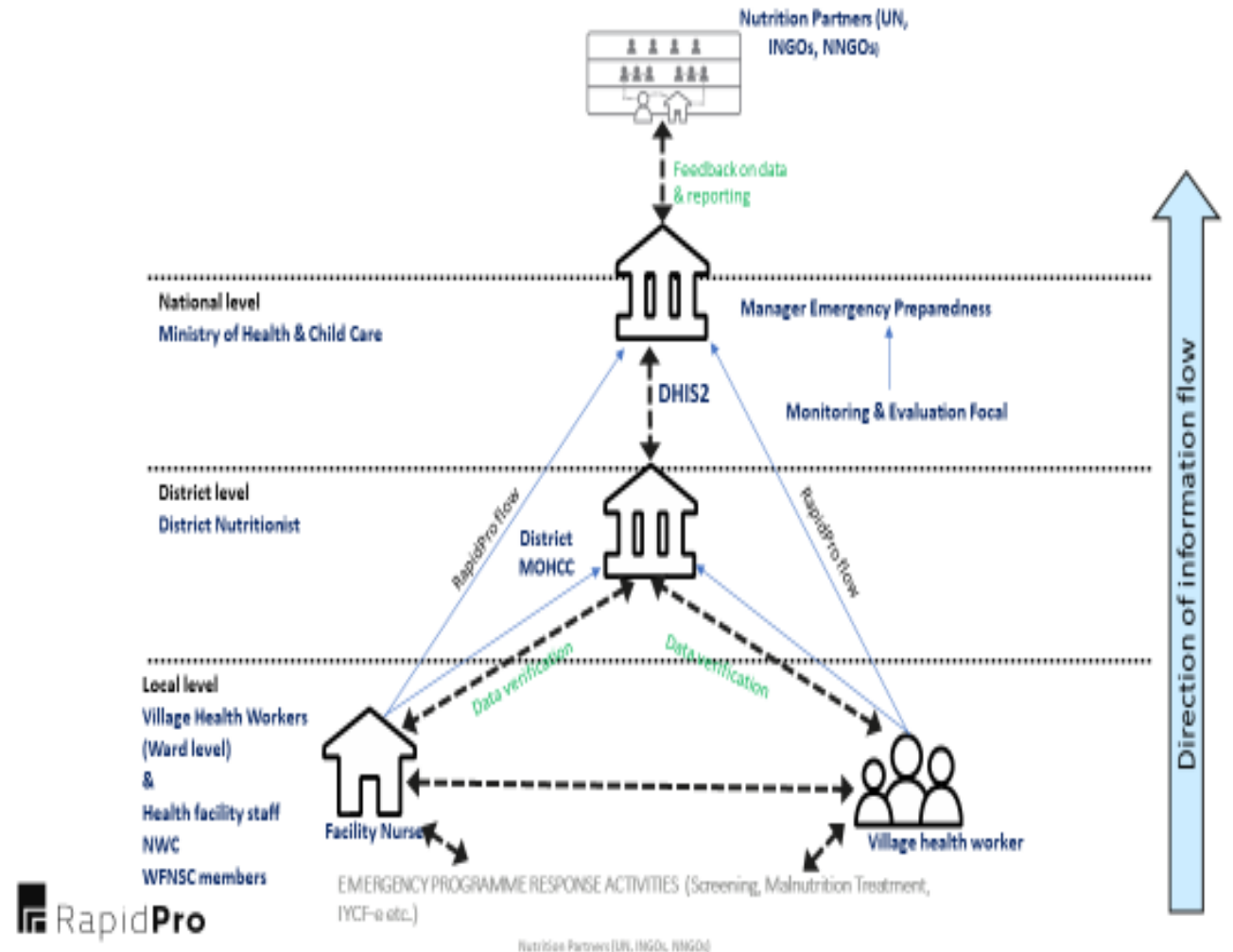
Number of children who received Vitamin A (sex disaggregated)

Number of children who received MNPs (sex disaggregated)

Number of caregivers of children under 2 who were reached with IYCF messages.

Number of sachets of RUTF left in stock

MOHCC Nutrition Emergency RapidPro & DHIS2 Reporting



Key considerations to start up a real time reporting system

1. Map what existing system in-country can be used/upscaled to report near real time information.
2. MoHCC, UNICEF and partners to decide on gaps in the systems and indicators to be monitored to address the gaps.
3. Obtain Short Code from the telecommunications regulator (Communications Commission).
4. Negotiate prices with Mobile Network Operators and sign contracts (respective, depending on the number covering the target districts)
5. Contract a data aggregation company (UNICEF has LTAs for this purpose, or otherwise depending on country situation).
6. Engage a visual analytics company (if needed) to display data results with spatial extend (including maps). Can also provide a quick data access and management platform.
7. MoHCC cadres, Nutrition and Health Information Officers oriented on RapidPro.
8. Job Aids developed for both District Nutritionist & Village Health Worker on RapidPro.
9. RapidPro training to be cascaded to all provinces and districts.
10. System is set to receive data.
11. Data collection begins.
12. Follow ups done to correct errors in reporting.
13. Data collected is downloaded in excel files and analysed.

Key lessons learned and /or areas for improvement prior to further scale up

- 1. Map existing real time system already existing and seek for integration when possible**
- 2. Include the RapidPro process into annual activity plans with the line ministry.**
- 3. Seek to engage beyond MoH nutrition with HMIS and planning and monitoring departments key stakeholders**
4. Plan for joint orientations (Nutritionists & Health Information Officers) at National, Provincial and District Levels to create momentum.
5. Develop job aids to be used by Nutritionists & Health Information Officers (HIO), & Village Health Workers.
6. Arrange for sensitization of Village Health Workers considering context and prevailing health situation.

ZIMBABWE
NUTRITION TEAM

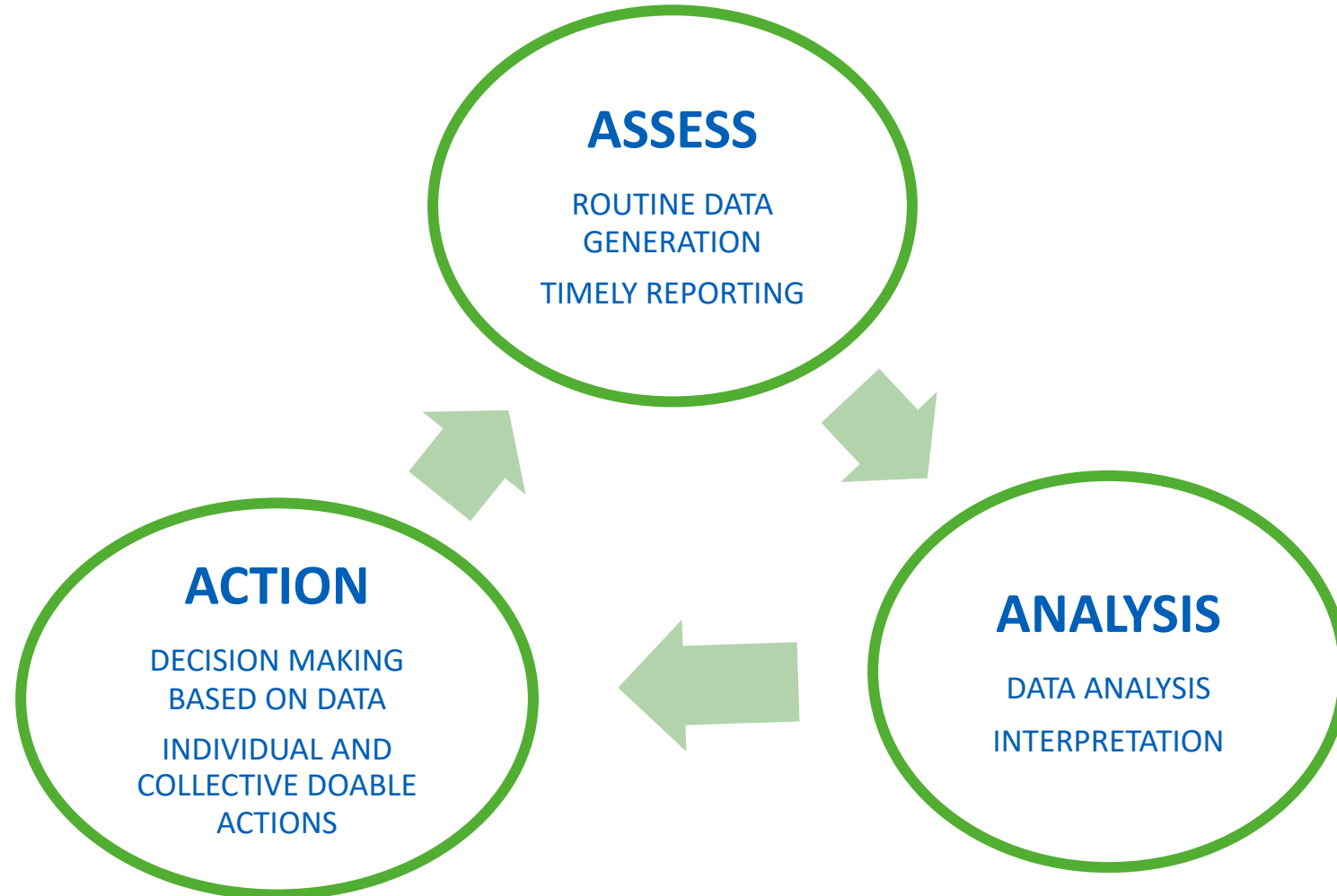
Thank you



INNOVATIONS IN NUTRITION INFORMATION SYSTEMS



Nutrition information systems: A triple A cycle



Making sense of all the innovations

NUTRITION AND HEALTH-SPECIFIC TOOLS

- **COMMCARE**
- **DEVINFO**
- **DHARMA**
- **DISTRICT HEALTH INFORMATION SYSTEM 2**
- **FAMINE EARLY WARNING SYSTEMS NETWORK**
- **ENA**
- **NATIONAL INFORMATION PLATFORMS FOR NUTRITION**
- **NUTRITION LANDSCAPE INFORMATION SYSTEM**
- **SCOPE CONDITIONAL ON-DEMAND ASSISTANCE**
- **SMARTPLUS**
- **THE STATE OF ACUTE MALNUTRITION**
- **VITAMIN AND MINERAL NUTRITION INFORMATION SYSTEM**
- **WORLD HEALTH ORGANIZATION ANTHRO SURVEY ANALYSER**

MOBILE HEALTH OR MHEALTH

- **CHILD GROWTH MONITOR**
- **MOBENZI**
- **MOBILE VULNERABILITY ANALYSIS AND MAPPING**
- **SAM PHOTO DIAGNOSIS APP**



ICONS LEGEND

OTHER INFORMATION TOOLS USED OR THAT COULD BE USED IN NUTRITION

- **KOBO TOOLBOX**
- **NOMADEEC**
- **OPEN DATA KIT (ODK) ECOSYSTEM**



STANDARDIZED MONITORING AND ASSESSMENT OF RELIEF AND TRANSITIONS PLUS (SMARTPLUS) <https://smartmethodology.org/>



WHAT THE TOOL IS

SMART+ is an integrated digital infrastructure that will combine the use of a mobile 3D diagnostic application for field staff with a synchronized global data dashboard and aggregator for analysts and policy makers. The core innovation of SMART+ is the provision of a complete end-to-end digital infrastructure that incorporates the entire data collection and reporting chain³¹.

HOW IT WORKS

Surveys are first created in the survey management tool and sent to the mobile data collection apps. Data is then collected in the field via the apps and synchronized with the survey tool. Results will then be analyzed and quality-controlled where subsequent data is then shared with a central database, and summary statistics are visualized on a dashboard. The entire process takes only a few days. By managing the entire data collection process in a single

digital system, the new method increases speed, transparency, data quality, and reduces cost.

USE OF THE TOOL

SMART+ is currently being developed and is expected to be ready in 2021: It uses 3D scans to provide fast, cheap and accurate child body measurements, analyzes incoming data and assures quality on a survey management tool, aggregates data into a central database, and visualizes results on a public dashboard down to sub-regional level³².

WHAT THIS TOOL BRINGS TO NUTRITION INFORMATION

SMART+ provides a more accurate, streamlined approach to the previous analogue methods of malnutrition diagnosis and surveillance data collection. It is an innovative approach to addressing many of the gaps that currently exist within the data collection process such as reducing child

distress, time, resources, and necessary staff. It automates data aggregation and provides visualization of malnutrition status and mortality rates for large populations using the SMART methodology. There is currently no platform for aggregated data within nutrition assessment at the subnational scale. Although versions of digital dashboards exist, they still require manual entry, lack sub-national data, and are not always publicly available. SMARTplus would address these issues through its automated, streamlined, and standardized approach while feeding into larger, multi-sectoral databases that apply machine learning for early warning.

Next version: Please contribute

If your tool is mentioned, contact us if you need the text to be updated

If your tool is not mentioned, contact me at A.rutishauserperera@actionagainsthunger.org.uk to add it to the next version.





Thank you !

How can I get support?

	Type of supported needed	Provider
1	I want remote or in-country technical support	Technical Rapid Response Team or others through the GTAM
2	I want to hire a consultant directly	GTAM Consultant Rosters
3	I want quick technical advice	GNC HelpDesk

In all cases please go to:

<https://www.nutritioncluster.net>

and you will be supported from there



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Q&A



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Child wasting programming in response and preparation to the COVID-19 pandemic: experiences from the field

Thursday 9th April 2020



Protecting, promoting and supporting IYCF during the COVID-19 pandemic: reflections and recommendations

Monday 6th April 2020

Thank you!

Please fill out the webinar evaluation,
it will take less than 10 minutes:

https://www.surveymonkey.com/r/TechRRT_Webinar_Evaluation

For more information contact:

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