

Strengthening Counseling through Improved Tools for Health Workers

USAID Advancing Nutrition’s Experiences and Insights from Designing and Implementing Counseling Tools

Introduction

A variety of tools can help counselors recall, explain, and tailor the information they provide caregivers. This brief shares USAID Advancing Nutrition-supported tools and experiences complementing global and local efforts to improve the delivery of quality nutrition, responsive care, and early learning counseling. A companion brief, *Strengthening Counseling Capacity through Supportive Supervision and Mentoring*, presents the project’s efforts to improve counseling through two capacity strengthening approaches: supportive supervision and mentorship.

Background

What is Counseling and How Does it Affect Nutrition and Child Development Outcomes?

Counseling, “a way of working with people so that you understand their feelings and help them to develop confidence and decide what to do,” is a key service to support and improve maternal, infant, and young child nutrition (MIYCN) and child development (WHO and UNICEF 2020, viii).

Trained providers deliver counseling, a form of interpersonal communication, through tailored and interactive discussions that meet clients’ needs by strengthening knowledge, motivation, skills, and/or confidence. Evidence shows that counseling can support clients to improve nutrition, responsive care, and early learning behaviors to improve MIYCN and child development outcomes (Sanghvi et al. 2013; Haroon et al. 2013; Yousafzai et al. 2014; Goudet et al. 2018; WHO, UNICEF, and World Bank Group 2018; UNICEF 2021). However, ensuring the quality of counseling can be challenging. Among several factors, limited technical counseling skills, interpersonal (or soft) counseling skills, and time hinder the quality of counseling providers deliver.

How Do Tools Contribute to Quality Counseling?

Tools, such as job aids, can address some of the barriers to quality counseling by helping to motivate, remind, and focus information for health workers. Evidence shows that using appropriate job aids (both paper-based and digital) can help health workers provide counseling tailored to the situations and needs of the caregiver/child such as age-appropriate guidance and recommendations to address breastfeeding difficulties (Kavle et al. 2019; Billah et al. 2022). Tools can also help counselors make complex



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information more accessible, help counselors build trust with clients, and prioritize children for counseling.

Learnings from USAID Advancing Nutrition Activities

USAID Advancing Nutrition has supported the development and implementation of several counseling tools for nutrition, responsive care, and early learning. These tools help providers overcome three main barriers to quality counseling: 1) limited technical counseling skills, 2) limited interpersonal counseling skills resulting in dissemination of “messages” rather than listening and problem solving, and 3) limited time to counsel (**table 1**).

Table 1. Examples of Tools to Help Health Workers Overcome Barriers to Quality Counseling

Barrier to Quality Counseling	Examples of Tool Based Solutions	USAID Advancing Nutrition Tools
Limited technical counseling skills of service providers	<ul style="list-style-type: none"> • Job aids to simplify processes and make necessary information or protocols quickly accessible • Job aids to help problem-solve based on client needs • Illustrated cards, posters, videos, or other materials to present accessible information to clients 	<ul style="list-style-type: none"> • Responsive Care and Early Learning (RCEL) Addendum • Nourishing Connections • Growth monitoring and promotion (GMP) algorithm
Limited interpersonal counseling skills resulting in dissemination of information and “messages” to educate versus listening and problem solving	<ul style="list-style-type: none"> • Tools with a structured flow to help streamline and tailor counseling • Inclusion of personal questions to build trust and rapport between provider and client • Tools to encourage client engagement in a conversation 	<ul style="list-style-type: none"> • RCEL Addendum • Nourishing Connections • Digital GMP guidance package • GMP algorithm
Limited time to counsel	<ul style="list-style-type: none"> • Tools that make required information easier to find • Digital tools to provide guidance on questions to ask (and not ask) and help identify the way forward based on responses • Algorithm to triage clients so that health workers can spend more time with caregivers of children who need additional support 	<ul style="list-style-type: none"> • GMP algorithm • Digital GMP guidance package

Our learning from developing and testing several tools demonstrates that it is critical to do the following.

Engage Providers Early in the Tool Design Process to Align with Existing Tools

Providers already have several tools they are expected to use with clients. Any new tool should align with existing tools by following their look and feel, fill gaps, and consider provider workload and time constraints. Ensuring that the new tool complements existing tools will help providers use the time they have efficiently, increasing the likelihood of tool uptake.

For example, in Ghana, USAID Advancing Nutrition developed a flowchart for health workers to streamline and tailor counseling on infant and young child feeding (IYCF) and RCEL during GMP sessions (figure 1). Feedback from caregivers, health workers, and managers informed the design of the flowchart, including the suggestion to build the flowchart around the materials that health workers currently use, such as the Maternal and Child Health Record Book and community IYCF and RCEL counseling cards. For future work, testing how effective the new tool is when implemented with existing tools could provide even more insight into feasibility and effectiveness. This might mean that the testing takes place over the course of a week (or month) when providers are likely to use multiple existing tools.

Design Tools to Improve the Experience of Care for Clients

For a counseling session to be effective, it is important to build trust with the client, and ensure that the counseling addresses their specific needs and local contextual challenges. Involving clients early in the design process can ensure tools improve the experience of care: how clients feel during a counseling session and how well the recommendations they receive meet their unique needs.

For example, using a human-centered design approach Breakthrough ACTION and USAID Advancing Nutrition developed [Nourishing Connections](#), a tool that allows community health workers to build trust with caregivers (e.g., through sharing relevant personal stories to forge a connection) and tailor information-heavy recommendations to caregiver and child situations and needs while counseling on children's dietary diversity (USAID Advancing Nutrition n.d.; USAID Advancing Nutrition and Breakthrough ACTION 2023) (figure 2). Future work may include exploring various ways to build provider-client trust and how well they work in different geographic contexts. It

Figure 1. Flow Chart to Streamline Counseling on IYCF and RCEL during GMP Sessions

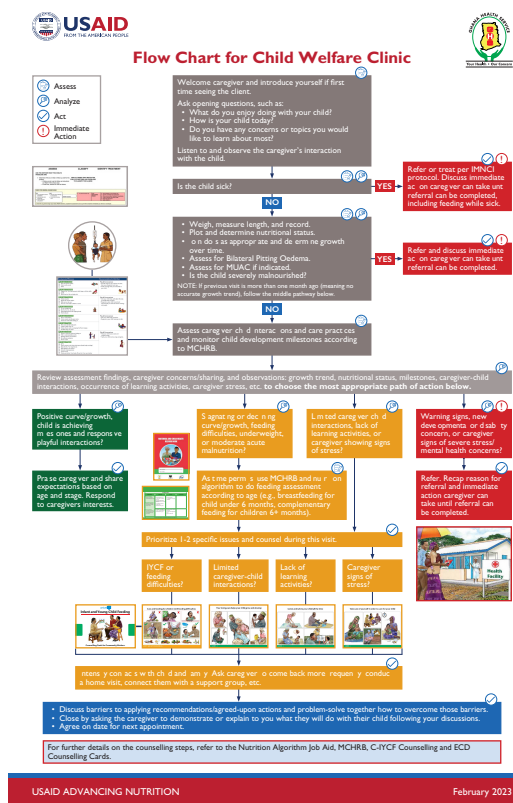
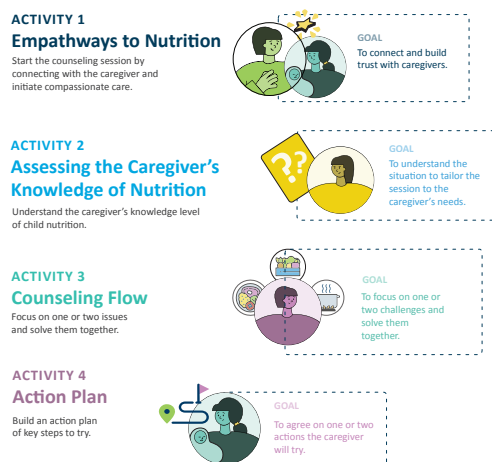


Figure 2. Activities Included in the Nourishing Connections Tool



will also be helpful to understand how to support providers so they can provide locally applicable solutions (e.g., include examples of locally available nutritious foods in the job aid).

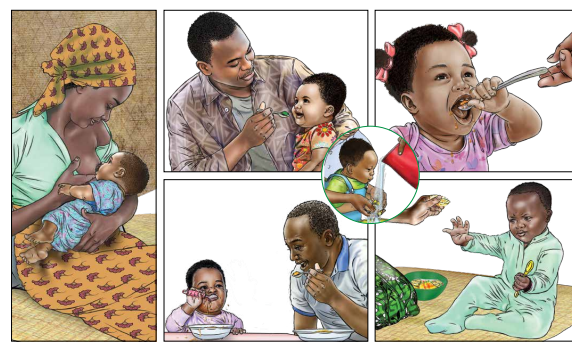
Make Counseling Easier to Do for Providers

One of the key purposes of a job aid is to make information accessible to providers so it is easier to do their job. While providers should spend one-on-one time with all clients, staffing shortages and limited time mean that this is often not possible. During a counseling session, providers need to sift through all the possible topics for discussion and identify the correct information to share and negotiate with the specific client. Job aids can assist providers to decide which client to prioritize, what topics to discuss, and how to structure the counseling session so there is back and forth dialogue between the provider and client.

For example, USAID Advancing Nutrition’s (2023b) RCEL Addendum counseling cards have illustrations on the front and key information on the back of the card along with prompts to guide the provider to follow counseling steps (e.g., greet, assess, analyze, act, summarize) (figure 3) (USAID Advancing Nutrition 2023b). Similarly, digital tools also have the potential to support providers during counseling—helping to make necessary information easier to find and by providing prompts to encourage tailored discussion. USAID Advancing Nutrition’s (2023a) *Guidance Package for Developing Digital Tracking and Decision Support Tools for Growth Monitoring and Promotion Services* guides digital application developers to include a series of questions that health workers ask the client, so the application can suggest counseling topics appropriate for the child’s age and circumstances (USAID Advancing Nutrition 2023a). Future work may involve better understanding how well these tools work for the provider and the client.

Figure 3. Front (Top) and Back (Bottom) of an RCEL Counseling Card

Teach your child to eat with love, patience, and good humor



Card 2: Responsive Feeding

Steps 1-3 After you have welcomed caregiver(s), assessed, and analyzed, you are ready to act!

Step 4 Act

Introduce today's topic using the Key Messages:

- Practice responsive care during feeding times with your child to show support and love. This means listening and watching for cues that your child is hungry or full and responding appropriately to those cues.
- Responsive feeding helps make feeding a time of love and learning. It helps you and your child develop a strong bond and encourages good eating habits in your child as she grows.

Practise, demonstrate, and practice with the Practical Tip:

All children:

- Minimize distractions during mealtimes. Face your child so you can focus on each other and on eating.
- Pay attention to your child's cues of hunger and fullness to be sure she is getting enough food but you are not overfeeding her. Never force a child to eat and never use food as a reward.
- Be patient and give your child time to eat. If your child shows signs of fullness, slow down or pause. Try offering another bite after a minute or two. End the feeding if he again indicates he is full.

<p>Cues your baby is hungry</p> <ul style="list-style-type: none"> Wakes and fusses; sucks on fist (before 3 months); cries or fusses <p>Cues your child is hungry</p> <ul style="list-style-type: none"> Opens mouth while feeding to show wanting more; smiles, gazes at caregiver or coos during feeding to show wanting more; moves head toward food or tries to wedge food toward mouth; reaches or points for spoon or food 	<p>Cues your baby is full</p> <ul style="list-style-type: none"> Closes mouth or lips shut; turns head away; decreases or stops sucking; spits out the nipple or falls asleep when full <p>Cues your child is full</p> <ul style="list-style-type: none"> Slows down or stops eating; pushes food away; shakes head to say "no more"
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Step 5 Summarize and close

- Summarize the session by asking the caregiver(s) to demonstrate or explain what they will go home and do with their child. Ask if the caregiver(s) see any barriers and problem solve together how to overcome those barriers.
- If appropriate, agree on the next meeting date.

Birth up to 6 months:

- Breast milk is all your baby needs for nutrition up to 6 months of age. Breastfeeding also stimulates loving feelings between mother and baby. It helps your baby to feel safe and comforted.
- During breastfeeding, a baby is learning how to control his appetite and soothe himself. He is determining how much milk he needs and how much he wants to suck to comfort himself.

6 up to 9 months:

- Slowly move the food in front of your baby's eyes. When she begins to follow and reach for the food, respond by offering the food to eat.

9 up to 12 months:

- Your baby may be interested in starting to use utensils or drinking water from a clean, open cup. Put some food on a spoon and let her try to feed herself. Give her a small cup with just a little bit of water to start and help her hold it. There will be spills, but encourage her. She will get better with practice!

12 up to 24 months:

- You can start to provide small, cut-up bites of family foods for your child, as his chewing skills are stronger now. Encourage him to feed himself—he will get better and better at coordinating how to scoop up food and bring it to his mouth.

Ensure Tools Make Information Accessible to Clients

During a counseling session, clients may have a lot on their mind, so it is critical to make information clear and easy to understand, helping clients focus on the conversation with their provider and comprehend the information shared. Illustrated counseling cards, videos, or other audio/visual materials can help do this. While practitioners have used counseling cards extensively to support MIYCN, further work is necessary to better understand how to make this information accessible to the client outside of the counseling session; possible approaches could include take-home materials or digital applications.

Finally, while tools can be an important part of supporting quality counseling, tools alone are insufficient to make counseling sessions effective—health system factors such as staffing and workload, health worker compensation, and appropriate venues for counseling are equally important.

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Recommended Citation

USAID Advancing Nutrition. 2023. *Strengthening Counseling Capacity through Improved Tools for Health Workers*. Arlington, VA: USAID Advancing Nutrition.



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August 2023

USAID Advancing Nutrition is the Agency's flagship multi-sectoral nutrition project, addressing the root causes of malnutrition to save lives and enhance long-term health and development.

This document is made possible by the generous support of the American people through the U. S. Agency for International Development. It was prepared under the terms of contract 7200AA18C00070 awarded to JSI Research & Training Institute, Inc. The contents are the responsibility of JSI and do not necessarily reflect the views of USAID or the U.S. Government.