WORKSHOP REPORT

LEARNING EXCHANGE WORKSHOP TO PROMOTE MULTI-SECTORAL NUTRITION CAPACITY IN COUNCILS

7–8 February, 2018
Adden Palace Hotel, Illemela MC, Mwanza
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PURPOSE
This report includes key discussion topics and learnings of the workshop held the 7-8 of February 2018 on building multi-sectoral nutrition capacity in councils within participating ASTUTE programme regions. It draws on presentations and subsequent discussions, key points and individuals’ notes from break out groups, information collected on flip charts, as well as participant responses to a workshop evaluation. The workshop agenda is located in Annex 1.

BACKGROUND

The ASTUTE Multi-sectoral Nutrition Initiative
As part of Addressing Stunting in Tanzania Early (ASTUTE), partners convened Regional Nutrition Officers (RNuOs) and ASTUTE Officers to prepare for the ASTUTE Initiative titled, “Strengthening Multi-sectoral Nutrition (MSN) Capacities among Council Officers”. As part of this initiative, RNuOs are asked to provide guidance to a small multi-sectoral team of council officers over several months. By providing tailored support, expertise, and advice to this team, RNuOs will build on existing knowledge of the best practices for promoting MSN collaboration. This initial workshop, with discussions and hands-on activities, served as a professional development opportunity for senior nutrition officers to share their experiences with mentoring, to connect with and learn from each other, and to plan and prioritize practical capacity-building strategies to try at the council level, in line with the Tanzania National Multi-sectoral Nutrition Action Plan.

Participants explored how capacity-building innovations, including mentoring on outreach to stakeholders and use of data for planning, can strengthen MSN collaboration. The workshop connected RNuOs, ASTUTE Officers, and facilitators with MSN mentoring experience. A complete participant list is located in Annex 2.

WORKSHOP LEARNING OBJECTIVES

This workshop was designed so by the end, participants would be prepared to:

1. Grasp the purpose of the initiative and summarize their roles and responsibilities, including documentation of their activities throughout;
2. Plan how to support DSuOs to develop a council MSN team with 3 to 4 council officers to work together to promote MSN action;
3. Share knowledge on the nutrition situation, MSN policies and plans, and nutrition-relevant actions and how to convey knowledge in a motivating way;
4. Plan how to support MSN teams to reach out and build relationships with MSN stakeholders to collaborate on nutrition-relevant activities in the district;
5. Understand the purpose and how to support MSN teams to hold an engagement workshop to plan and connect with stakeholders, create a sustainable MSN network, and develop MSN priorities;
6. Plan how to support MSN teams to present workshop results for MSN advocacy.

Multi-sectoral Nutrition
The Tanzania government has made strong gains in organizing to improve health and nutrition outcomes—yet challenges remain. More than 30% of all children in Tanzania are stunted. These children missed key nutrients when in the womb and during the first two years of life. Because of undernutrition during this key time, these children can have poorer health and cognitive ability compared to their peers. Stunting can affect the ability to learn, work, and earn money, even as adults.
Stunting occurs in a cycle, because it affects not only personal health, but the health of the next generation. The broad and more hidden causes of stunting make it a difficult problem to address and a large threat to country’s workforce capacity.

Although stunting is directly caused by poor nutrition (See UNICEF conceptual framework for undernutrition in Annex 3), it cannot be solved by activities in the health sector alone. Activities to protect health and ensure adequate access to nutritious food require involvement of other sectors and a broad network of partners.

The Tanzanian government released the National Multi-sectoral Nutrition Action Plan (NMNAP) 2016-2021 as guidance to strengthen nutrition-specific and nutrition-sensitive actions (see definitions in box below). National guidance can go a long way, but there are challenges to implementing guidelines in communities. In each district, it is important to learn what works to increase capacity and include nutrition in key sectors.

Workshop participants discussed the difference between nutrition-specific and nutrition-sensitive actions. They acknowledged councils need to focus on common goals for multi-sectoral action and that activities to reach these goals may not always be nutrition-specific.

**What are nutrition-specific interventions?**
- address the immediate causes of undernutrition: inadequate dietary intake and disease management
- address some underlying causes: feeding & care practices; access to food
- often implemented by Ministry of Health

**What are examples in your region?**

**What are nutrition-sensitive interventions?**
- address underlying and basic causes of malnutrition
- incorporate nutrition goals & actions into interventions in wide range of sectors
- can serve as delivery platform (outside of health sector) for nutrition-specific interventions.

**What are examples in your region?**
District Nutrition Officers (DNuOs) are expected to coordinate across sectors and work with the Council MSN Steering Committee. There was discussion of MSN challenges, such as DNuOs being a new cadre, and differing views on whether nutrition should be in health or agriculture. When the budget for nutrition depends on local collections, it is not reliable. This is one reason why policies requiring that Tsh 1,000 per child under 5 years be allocated to nutrition are no guarantee of reliable funding.

DNuO facilitators talked about problems getting cooperation from other sectors to collaborate on planning or to use budget allocations for nutrition-sensitive activities. Through mentoring, they gained the confidence to sensitize other departments and hold engagement workshops to help people understand how their sectors impact nutrition and how improving nutrition can contribute to achieving their department goals. This greatly improved knowledge and cooperation on MSN actions. In one council, the DED became very enthusiastic about nutrition after sensitization by the DNuO and is now a champion for nutrition activities.

**The Mentoring Approach**

Training improves knowledge and behaviours. However, there is a gap between immediate improvement and long-term outcomes. Mentoring can complement training programs. It is one longer-term strategy which offers continual support and guidance on how to adapt and apply skills learned during training. Mentoring helps address the practical challenges of coordinating across sectors and organizing a MSN response.

DNuOs are at the center of district MSN planning. Mentorship can help DNuOs build a strong MSN action team to plan, deliver, monitor, and report on community activities. Building a team across sectors to tackle common problems requires not only strong coordination, but also leadership, team building, and advocacy skills. Mentoring is an approach that can strengthen these professional skills for MSN action.

Facilitators led a discussion with participants on the meaning of mentoring. Participants felt a mentor is someone that inspires, is experienced and trustworthy, and someone who coaches others.

<table>
<thead>
<tr>
<th>What is mentoring?</th>
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<tbody>
<tr>
<td>• Mentoring is a relationship-based activity with several specific but <em>wide-ranging</em> goals.</td>
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<td>• The mentor is a facilitator who works with an individual (mentee) or group of people (mentees) over an extended time period.</td>
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<tr>
<td>• The agenda is <em>open</em> and continues to <em>evolve</em> over the long term.</td>
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<td>• Mentoring seeks to build wisdom—the ability to <em>apply</em> skills, knowledge, and experience to new situations and processes.</td>
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<td>• The role of mentor is <em>not</em> to solve problems, but to ask how the best solutions might be found.</td>
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“Mentor” as defined by workshop participants (in Swahili):
1. *Ni muongeza ujuzi na maarifa kazini.*
2. *Ni mbadilisha tabia mwenye uwezo au ujuzi zaidi.*
3. *Mtu mwenye kujenga uwezo kwa mtu mwingine aweze kufanya jambo alilokuwa anaogopa kulifanya au hawezi kulifanya.*

And in English:
1. *Is someone who adds skills and knowledge during the course of work.*
2. *Is someone who facilitates behavior change to the mentee(s) and who has more skills and experienced than his/her mentee(s).*
3. *Someone who builds capacity for the mentee(s) so that they feel capable to do things that s/he was previously scared to do or s/he wasn’t able to do.*
Participants discussed the complexity and nuance of mentoring by arranging different characteristics as they pertained to the concept of Friend, Mentor and Teacher. The group discussed how a mentor is in some ways like a combination of a teacher and a friend, but is also different from each of these roles. Participants placed sticky notes, each with a different characteristic, on a continuum of these roles presented at the front of the room (Annex 4). See below for a continuum summarizing characteristics.

The team discussed how a mentor also does not act in the capacity of a supervisor or boss, although a supportive supervisor can also be a strong mentor. Supervisors may make decisions, give orders, enforce behaviours and deadlines, or punish poor performance. Mentors DO NOT do these things or take charge of a situation. Their role is to be supportive and guide the team to set their own goals and make their own decisions. A mentor may connect people with useful information and opportunities in order to build capacity and confidence – mentors provide guidance and ideas but not instruction.

Workshop participants asked:

- “How do we become mentors?”
- “Can all RNuOs become mentors – what if you don’t have the right personality?”
- “Can mentoring be learned or are mentors born, not made?”

Facilitators who were mentors agreed that mentoring CAN be learned. They learned just from the process of being a mentor and listening well to the problems faced by mentees. You do not need to be a certain age or have specific skills to be a mentor. Based on your connections, experience, and regional position, you will bring a perspective that is helpful to action teams. The important thing is to learn from the teams what their goals and challenges are, then to work with them to come up with and implement their own solutions.

One facilitator talked about her first visit with a DNuO and the need to explain that she was NOT a teacher and not evaluating the DNuO’s performance. This fits with the actions discussed in the exercise above. She stressed the importance of asking questions about the mentees’ vision and goals, challenges, and experience with activities like outreach, collaboration, and the MSN Steering committee. “What support is there for MSN activities and what support would the mentee like?” Council team members will have different levels of experience and knowledge so it is important to find out what help they need.

You can:

- Provide relevant materials
- Explain policies and programs
- Suggest training opportunities
- Build confidence
- Support teams to conduct outreach, gather data, and hold engagement workshops.
For example, one facilitator had shared a free online Infant and Young Child Feeding Course with the DNuO in her district: https://nutritionworks.cornell.edu/UNICEF/about/

Facilitators stressed that the first priority is to build rapport, tell each other your stories, and make sure mentees see you as supportive, not intimidating. A participant noted that part of the mentoring, at least for DNuOs, needs to address the psychological effects of “being oppressed” because some DNuOs have not been respected and treated well in their roles in council government.

Participants asked for clarification on what it means to keep information from mentoring confidential, if they will be reporting in data forms and interviews, and maybe communicating with ASTUTE and other staff to get input on mentoring concerns. Any personal information shared by mentees should be confidential and not shared with anyone outside the project, although the researchers also maintain confidentiality so it is okay to include in forms and interviews. However, it is best not to name names. And not to share information with co-workers, other people in the council, etc. If you feel you could help with a challenge by sharing information with superiors that is something to discuss with mentees. See if they could advocate for themselves, first, or if they agree to have you share certain information.

SUGGESTED STEPS FOR THE ASTUTE MSN INITIATIVE

There are many ways you as an RNuO can provide support to selected action teams. Work within the existing government system to strengthen capacity, motivate collaboration, and encourage relationship building. Building capacity works best when a team develops shared goals and works on a series of activities together. Below is a general road map suggesting steps you can take to support council MSN teams. This road map provides one pathway to help council officers organize activities, strengthen capacity, and engage diverse stakeholders on multi-sectoral nutrition planning and action. This map can be used to guide the team, but they may also find other successful paths to follow. Each team can adapt activities to their own context and needs. The road map will also be used to structure this report to answer the following questions:

- What does MSN look like in Tanzania?
- What is the district situation and how can we learn from each other?
- How can we work together to improve nutrition?

Possible Road Map for the ASTUTE MSN Initiative
The timeline below is a suggestion to guide project activities. Dates are approximate and may shift based on the schedules of each council team. Ideally, teams will complete the stakeholder engagement workshop and begin to organize the results by the end of 2018 and share results to key stakeholders and decision makers to advocate for MSN activities by January/February 2019. That’s when this initiative will end but capacity-building and MSN activities will hopefully continue into the future and possibly tried in other councils.

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<th>Feb 2018</th>
<th>Mar</th>
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<tr>
<td>---------</td>
<td>Monthly mentoring visits between RNuOs and council MSN teams ---------</td>
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<tr>
<td>Participate in a Learning Exchange to share MSN knowledge and discuss MSN capacity building in 1 council in each region</td>
<td>Support DNuOs to create an action team led by the DNuO; meet with teams</td>
<td>Help team...</td>
<td>Assist team to...</td>
<td>Prepare team to summarize workshop learnings and recommendations</td>
<td>Encourage team to use workshop results to advocate for MSN</td>
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<td>(Research team consents DNuOs to participate in the initiative and obtains ethical approval from NIMR)</td>
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<td>• Identify and summarize actions in district (nutrition specific and nutrition sensitive)</td>
<td>• Hold a MSN engagement workshop to connect and plan with stakeholders</td>
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<td></td>
<td></td>
<td>• Reach out and build relationships with stakeholders and organizations</td>
<td>• Create networks and maintain communication among sectors, communities, districts</td>
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<td>• Create a profile of nutrition concerns and activities</td>
<td>• Develop MSN priorities and recommendations</td>
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**STEP 1. WHAT DOES MSN IN TANZANIA LOOK LIKE?**

**Understand the District Context**
Workshop participants discussed the current roles of DNuOs, the challenges they face, supports they receive and need, how they are supervised, and how RNuOs and DNuOs interact. Participants shared the following insights on these topics below. During initial meetings with council MSN teams, RNuOs can ask about MSN challenges and opportunities in the district in conversations with MSN council team members and other government officers such as the DMO, DED, and Heads of Department (HOD).

**Roles of DNuOs in ASTUTE regions:**
- Conduct quarterly supportive supervision at the health facility and community level
- Prepare Annual Nutrition work plans and budget
- Coordinate and implement CHNM, DMNSC, World National and District Nutrition events
- Monitor and evaluate nutrition interventions through JNMNR and BNA
- Sensitize stakeholders in other sectors on the relevance of nutrition issues in their work
- Facilitate linkage across stakeholders in other sectors implementing nutrition-relevant activities

**Challenges DNuOs face:**
- Their roles are not recognized by other sectors
- No specific budget allocated for Nutrition activities, apart from Vitamin A supplementation
- The nutrition cadre does not cascade to the community (stops at district level so no clear implementation personnel)
- Lack of adequate data on nutrition indicators at the council level (only facility-based data)
- Delay of disbursement of funds for implementing nutrition activities.
- Low priority of nutrition-sensitive activities from other sectors
- They are overworked and commonly given activities which are not nutrition-focused.

**Support DNuOs receive and/or need:**
- Financial support from other partners
- Capacity building on mentorship and technical issues of planning and budgeting (eg. CHNM)
- Administrative support from DED, DMO, Accountant (eg. signing of FoG)
• Support and interaction with Nutrition stakeholders (eg. CSOs, NGOs)
• Supportive supervision from RNuO and support from DED, DMO and RMO
• Lobbying and advocacy skills

How RNuOs and ASTUTE Regional Advisors interact with DNuOs and other council officers:
• Joint supportive supervision and harmonized supervision checklists
• Information sharing and report writing (Quarterly Reports, CHNW, Score cards, BNA)
• Sharing of resources (eg. transport) whenever possible
• Annual planning and budgeting for nutrition activities
• RNuOs offer technical support to DNuOs during implementation
• Participation in training together or advocacy meetings

Create a Council Multi-sectoral Action Team
Participants brainstormed how to support DNuOs to form a MSN team with 2-3 officers from other departments. This is a catalyst or action team and is NOT the same as the Council MSN Steering Committee. Include staff able to take action and reach out to communities, rather than high-level staff. This team will help the MSN Steering Committee by doing outreach, sensitization and activities to put policies into practice.

Ideas for steps to identify possible members and help DNuOs to create teams of their peers included:
• Ask the DNuO about MSN challenges in the district and which sectors are critical to involve
• Have the DNUO make suggestions to the DMO and DED based on the challenges they identify
• Request the DED liaise with the heads of relevant departments, or learn if the DNUO can get approval to make these contacts directly
• Consider involving the MSN Steering Committee in the planning and selection
• Prioritize departments/individuals based on council priorities and current working relationships

Talk to the DNUO and ask questions to help you understand their views. DNUOs are in a good position to create the council MSN team; they know how to form relationships and groups depending on the situation in their district. Remember that what works well in one district, could go very differently in another. By asking questions, rather than giving answers, RNuOs can guide DNUOs to make these decisions.

Once MSN action teams are in place, RNuOs and council officers can begin to function as a team, learn from each other and strengthen their professional relationship. By getting to know the council officers, you can become aware of the resources, information, connections or other suggestions that may help them.

Testimonies from Previous Mentors and Mentees
A facilitator with previous experience as a mentor described how she needed to help her DNUO mentee not to feel afraid or intimidated by her. Instead of expecting perfection in the DNUOs’ work, the mentor listened to the DNUO and when things went wrong, she didn’t get frustrated. She stayed positive and tried to understand the DNUOs’ perspective. She used ideas and language that the DNUO could relate to, and supported her through challenges. By being open, genuine, and non-judgmental, the mentor facilitated a trusting relationship.

So, if a team didn’t make much progress since your last check-in, don’t get angry. Try to understand why they are busy, what their schedule is like, and what priorities they have. Listen first to understand the situation and why certain tasks may be challenging.

A DNUO facilitator described wanting to work with someone in agriculture that she knew was active, knowledgeable, and skilled, but the Head of Department said she must work with the nutrition focal point in Agriculture. At first, she felt her request was being ignored. However, after she worked with the nutrition focal point, she found that they worked well together and this person was a good choice. They continued to work on projects together throughout the district.
Share Knowledge and Understand MSN Policies and Plans

Ask about activities your team members are doing and how they think MSN can be strengthened in their district. Share the MSN road map and timeline with teams and have them identify their own goals and best pathways to pursue. Engage team members on what they know, how they use, or what questions they have about key documents and country guidance. Ask team members if they’ve heard of the following key guidelines and discuss as a group the important underlying content:

In the workshop, the TFNC facilitator discussed key components of the National Multi-sectoral Nutrition Action Plan (NMNAP) including definitions of key concepts (e.g., MSN system, multi-sectoral community-centered strategy), impact targets and expected outcomes, the coordinating structure for the plan, and examples of interventions to focus on across sectors. Key NMNAP slides that were discussed are below.

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**Purpose of NMNAP**

- Accelerate scaling up of high impact multi-sectoral nutrition-specific & nutrition-sensitive interventions
- Create an enabling environment for improved nutrition, for a healthy and wealthy nation, focusing on the most vulnerable groups: infants, children under-five years, adolescent girls, pregnant/lactating women and women of reproductive age
- Translate scientific evidence on nutrition into actions; and political will and Government commitment into tangible delivery of services
- Contribute to Tanzania’s vision of eliminating malnutrition as a problem of public health significance by 2030.

**Expected outcomes of the NMNAP**

**Nutrition Specific Outcomes:**

1. Increased proportion of adolescents, pregnant women and mothers/caregivers of children under two years who practice optimal maternal, infant and young child nutrition behaviours;
2. Increased micronutrient consumption by children, adolescents and women of reproductive age (15-49 years);
3. Increased coverage of Integrated Management of Acute Malnutrition (IMAM);
4. Communities in Tanzania are physically more active and eat healthier diet.

**Expected outcomes of the NMNAP**

**Nutrition Sensitive Outcomes:**

1. Agriculture and Food Security;
2. Health and HIV;
3. Water, Sanitation and Hygiene;
4. Education and Early Childhood Development;
5. Social Protection and

**Enabling Environment Outcomes:**

1. Improved effectiveness and efficiency of nutrition Governance (including coordination and leadership) and response across all sectors, actors and administrative levels;
2. Increased access to quality nutrition related information to allow Government of Tanzania and partners to make timely and effective evidence informed decisions.
STEP 2. WHAT IS THE DISTRICT SITUATION AND HOW CAN WE LEARN FROM ONE ANOTHER?

Reach Out to Stakeholders
In ASTUTE, mentoring could help MSN action team members connect with CSOs, understand implementation challenges for CHWs, and help link CHWs with other sectors at the community level. Reaching out to stakeholders is a key step in identifying what nutrition-specific and nutrition-sensitive activities are happening in each district.

Participants used the Sphere of Influence Framework to think about which stakeholders might be most influential. First, they listed potential outcomes, then considered who would need to be influenced to achieve those outcomes, and finally what steps action teams could take. Participant ideas are listed in the table below. The Sphere of Influence could also be used when working with MSN action teams. Teams can fill out the framework based on their own goals and outcomes.
A DNuO facilitator described how he identified CSOs that were important community stakeholders in his district, but now some no longer work in the district and other new CSOs have begun. It’s challenging to sustain connections with stakeholders and so district teams need to keep updated on changes among stakeholders and stay in touch to keep relationships strong.

Create a District Data Profile

Participants each received sample data profiles of their regions and discussed the possibility of working with teams to develop district-level profiles. Consider having teams create their own data profile if they find the approach useful. A data profile can provide an overview of nutrition-relevant information at the district level. Completed profiles may be used for advocacy.

Profiles may include:
- Data from existing sources (e.g. Nutrition score cards, quarterly reports, facility-based data).
- Information gathered from the action teams, including stakeholder information.
- Different types of information (e.g. Graphs, tables or comparisons of district and national statistics).
- Current MSN programmes and activities in the district.

Participants discussed the value of district data profiles. Action teams may use profiles to:
- Strengthen confidence, capacitate the team, and provide a project to collaborate on together.
- Advocate persuasively for priority actions (and funding allocation).
- Describe the district nutrition situation in a way that is easy to communicate and to understand.
- Inform key leaders who the stakeholders are, what they do, and the populations they reach.
- Describe best practices, interventions, and innovations (and the relevant gaps).
- Show relevant economic activities (e.g. animal source foods, consumption patterns, etc.).
- Focus on the most vulnerable populations, e.g. children under 5 years.
- Develop additional questions leading to the collection of more data, and partnering with stakeholders to learn more (e.g. why did district stunting rates increase or decrease over time?).
Participants noted the need to strengthen advocacy and presentation skills among action teams; having data is not itself enough. They role played using regional data profiles to discuss the nutrition situation at the regional level. They felt profiles make it easier to understand the nutrition situation and make decisions, and build confidence about advocating for nutrition. Electronic versions of the regional profiles were shared with participants so they may edit them and use them with council teams to create district profiles.

**STEPS 3 AND 4. HOW DO WE WORK TOGETHER TO IMPROVE NUTRITION?**

**Hold a Stakeholder Engagement Workshop**

Workshops are one way to engage stakeholders—those affected by, have a direct interest in, or are involved with nutrition-related activities. Workshops can obtain stakeholder input on the multi-sectoral nutrition situation, strengthen collaboration, and achieve consensus on goals and future actions. Workshops can:

- Cultivate an environment of enthusiasm and commitment for nutrition
- Encourage stakeholders to share knowledge, strengthen networks, identify district priorities, and increase implementation effectiveness
- Clarify individual’s and sector’s roles in strengthening multi-sectoral nutrition actions to improve malnutrition in their district

RNuOs discussed how they can prepare action teams to facilitate workshops, first by identifying the difference between a facilitator and a lecturer. Lecturing is a transfer of knowledge from the lecturer (a person who has knowledge and expertise) to the participants. In contrast, facilitators encourage learning through participation and exchange of knowledge and expertise among participants. Facilitators create opportunities to share, brainstorm, and make decisions.

![Key Differences between Facilitating and Lecturing](image)

Small group discussions to identify challenges or successes, make plans, or set goals and then report back to the group are the kinds of activities that build relationships and give a sense of ownership. One useful exercise is to ask groups to list how a sector (or a nutrition-sensitive program) contributes to improving nutrition and how improved nutrition helps that sector.

To ensure the people attending the workshop feel engaged, facilitate workshops in ways that attendees:

- have a voice
- engage in hands-on activities and connect with others
- have their efforts and experiences recognized
- discuss future plans that fit their goals
During workshops, action teams can new share information in compelling ways to get stakeholder input. Talk with teams about the benefit of holding workshops in ASTUTE regions. For example, stakeholders can:

- learn from each other (and what others are doing)
- exchange ideas on priorities, strategies, and next steps
- set their own joint goals and activities
- own what is discussed and be accountable for future action
- strengthen a district MSN working group

Facilitators described the impact of district workshops on collaboration, understanding of nutrition problems, and enthusiasm for MSN action. DNuO mentees learned how to organize and lead a workshop, with their mentor’s support. In some workshops, they discovered that stakeholders did not understand the nutrition situation and the importance of problems like stunting. By working across sectors and organizations stakeholders learned to speak each other’s “language” and understand their goals. Workshops are recommended because they build enthusiasm and relationships, and can be a “success experience” that helps the team move forward with collaborative planning and action to improve nutrition.

Outcomes of previous workshops led by DNuO mentees included:

- Participants became motivated by nutrition information and enthusiastic about working together.
- Participants better understood each department’s role, the synergies across departments, and the ways they can collaborate to improve nutrition.
- DNuOs became knowledgeable about nutrition-sensitive actions conducted by others in the district and shared this knowledge with other departments.
- DNuOs learned how to better collaborate with CSOs and CHWs to understand what works locally.
- Stakeholders documented challenges and possible solutions to strengthen MSN activities.
- Post-workshop, other departments began to involve the DNuO in the field when they were implementing activities, relying on DNuO expertise to improve the quality of nutrition components.

Use Workshop Results to Advocate for MSN

During workshops, a lot of information is shared and learned. Documenting workshop discussions is important so key learnings can be captured and written up. After workshops are over, who could benefit from the conversations and knowledge learned? You can encourage action teams to share key learnings back to the participants to help them maintain contact and continue the process of exchanging information and developing relationships. Key learnings can also be shared with the Heads of Department, nutrition focal points, or at a MSN Steering Committee meeting. This lets council leaders learn about the activities of the MSN action team. Teams can use workshop learnings to advocate for priority MSN areas of interest and continued ability to network and collaborate with key stakeholders to improve nutrition-sensitive activities.

ADAPT THE MENTORING APPROACH TO ASTUTE REGIONS

Feasibility and Anticipated Challenges

RNuOs considered the following activities feasible:

- Following-up with action teams over the course of several months
- Providing technical support; giving advice and solving problems
- Providing access to nutrition relevant materials
- Being open for communication (phone & email)
- Supporting identification of stakeholders
- Building capacity of the team; creating strong relationships and a friendly, productive environment
**RNuOs anticipated the following possible challenges:**

- Transport to visit MSN council teams (e.g., fuel, transport, issues hindering frequent visits)
- Scarcity of human resources and time resources
- RNuO monthly visits to councils are possible but may not be feasible every month; mobile calls, email, and WhatsApp are additional tools to keep in touch with the council teams.
- DNuO have many tasks and roles to play, including multiple responsibilities
- “Green pastures” or engaging in activities which offer more benefits (e.g., per diem); how to motivate people to participate in MSN initiatives if not compensated.
- Possible low commitment of DNuOs or turnover in council officer positions
- Lack of equipment, tools, or knowledge
- Uncertainty about how to help team with unexpected challenges that may come up

**Possible indicators of successful mentoring:**

Workshop participants identified a number of indicators. You might consider the following ones:

- Improved performance of DNuOs (looking at the outcomes)
- Increased allocation of resource for Nutrition (changes to budget allocation)
- Accomplishment of planned goals and activities
- Feedback and questions received from mentees
- Following activities overtime and documenting progress

**RESEARCH ON THE MSN INITIATIVE**

**Key Objectives:**

1. Understand how mentorship impacts council officers’ motivation and skills needed to:
   - identify and strengthen strategic MSN partnerships,
   - coordinate with and build the capacity of frontline implementation staff, and
   - lead a district engagement workshop on MSN planning and action.
2. Explore how district engagement workshops affect MSN knowledge, collaboration, and motivation to prioritize MSN action among stakeholders
3. Identify the most effective, feasible, and sustainable strategies to build capacity for MSN action – and how to implement these approaches in other districts.

Research on the MSN Initiative is designed to capture the following through in-depth interviews:

- what happens (over time)
- opinions and feelings about what happens (you, and also mentees)
- response of others (council, stakeholders, etc.)
- challenges and strategies to overcome challenges
- successes (and reasons for success)
- how all of the above vary for different individuals, teams, districts, regions
- suggestions for improving the process and the outcomes
- how to improve this workshop and support for mentors

**Research Steps:**

- Selection of district in each region
- Ethical approval (Cornell, NIMR) & informed consent (everyone interviewed)
- Interviews and other data collection
- Data analysis of interview transcripts
- Putting all data together to tell the “MSN story” in each region
- Internal sharing of preliminary results / checking interpretation
- Preparing reports and recommendations
- Share findings on the most acceptable, feasible, and high impact strategies – to government, ASTUTE, stakeholders, and global community
KEY WORKSHOP LEARNINGS

• Lived challenges and success from other districts in their efforts to build a strong MSN network
• MSN collaboration and action is possible; what is needed is commitment
• Differences between a supervisor and a mentor
• Districts face challenges with MSN Steering Committees, but it is possible to move forward and take action steps regardless of how these committees function
• Learned how to be a good mentor and how mentorship can be applied in practice
• Consensus that a mentorship approach would be useful in all councils
• The importance of multi-sectoral collaboration for nutrition
• Shift the thinking: Nutrition is not only Health, it can and should be implemented in other sectors
• Importance of continued collaboration with DMO and RMO throughout study activities
• ASTUTE officers can offer support and mentorship to the RNuOs by working closely with them; Since RNuOs are in the long term role, they should be the key mentor of council officers

WORKSHOP EVALUATION RESULTS

Participant evaluations of the workshop (n=18) yielded overwhelmingly positive results. Participants reported the most useful parts of the workshop were discussions of mentoring (n=12), specifically the differences between a mentor and roles such as a supervisor, teacher, and coach (n=7); steps in creating council multi-sectoral nutrition (MSN) teams (n=7); and hearing from experienced DNuOs and RNuOs (n=3). When asked what parts of the workshop were least useful, most participants (n=11) reported none, two participants mentioned discussions around demeanor during mentoring visits including “friendliness” and “humbleness”, and one participant reported MSN as they were previously aware of the topic.

Participants overwhelmingly reported something new they learned included the importance of mentoring, how to apply it, and its ability to strengthen MSN (n=13). Others reported the creation of nutrition MSN teams (n=1); how to collaborate with nutrition stakeholders within the council (n=1); and how to address nutrition problems through multiple sectors (n=1).

When asked, “What concerns do you have about serving in a mentoring role for council officers?” responses included balancing time and roles (n=4); resources (n=1); transportation to the council (n=2); prioritizing/committing to mentoring (n=2); helping DNuOs create a successful MSN team (n=2), coordination/next steps (n=2); and working closely with the ASTUTE team (n=1).

When asked what they most looked forward to in their new role, some responded the opportunity to mentor and help DNuOs succeed (n=4), create and build capacity of a MSN council team (n=4), strengthen MSN in councils (n=2), and strengthen own capacity to change people’s attitudes on nutrition (n=1).

Seven participants reported there was no additional knowledge they needed to prepare for their mentoring role. Other responses included support for mentoring (n=8) including more materials/job aids, guidance or plan for the process, common setbacks and how to overcome them, common characteristics of a mentor, and vivid testimonies. One participant felt it would be helpful to work closely with an experienced mentor. Two other participants reported it would be helpful if workshops were repeated.

Participants (n=4) suggested they could have benefited from a longer workshop and would appreciate more capacity building opportunities. Others (n=4) felt very confident in embarking upon their new role and provided positive comments including “keep it up”, “the workshop was very beneficial” and “the workshop was exciting and well-conducted”. Two participants suggested expanding the approach to other geographic regions outside of ASTUTE to receive more evidence and make it sustainable. One participant expressed a desire to keep in touch with the facilitators in order to help build confident and competent mentees.

Quantitative evaluation results can be found in Annex 5.
## ANNEX 1. WORKSHOP AGENDA

### Wednesday 7 of February

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.30 am</td>
<td>Arrival and registration</td>
</tr>
<tr>
<td>9.00 am</td>
<td><strong>WELCOME AND INTRODUCTIONS</strong></td>
</tr>
<tr>
<td>9.30 am</td>
<td>What is the ASTUTE Multi-sectoral Nutrition (MSN) Initiative?</td>
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<tr>
<td>10.00 am</td>
<td>Workshop expectations and objectives</td>
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<tr>
<td>10.30 am</td>
<td><strong>OFFICIAL WORKSHOP OPENING</strong></td>
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<tr>
<td></td>
<td>Mwanza RAS, RMO, and Senior TFNC Nutrition Officer</td>
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<tr>
<td>10.45 am</td>
<td>Session 1*. The Multi-sectoral Nutrition Approach</td>
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<tr>
<td></td>
<td>• What is the nutrition situation?</td>
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<td></td>
<td>• What evidence-based solutions exist?</td>
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<td></td>
<td>• What do the Tanzania National Guidelines say?</td>
</tr>
<tr>
<td>1:00-2.00 pm</td>
<td><strong>LUNCH FOR WORKSHOP PARTICIPANTS</strong></td>
</tr>
<tr>
<td>2.00-5.00 pm</td>
<td>Session 2. Enabling Environments for Multi-sectoral Nutrition Work</td>
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<td></td>
<td>• What do mentors do?</td>
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<td></td>
<td>• What steps can we take to support MSN at the district level?</td>
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<tr>
<td></td>
<td>• Step 1: Getting started – helping DNuOs create a MSN team</td>
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### Thursday 8 of February

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.45 am</td>
<td>Arrival and Registration</td>
</tr>
<tr>
<td>9.00-1.00 pm</td>
<td>Session 3. Steps to Promote Multi-sectoral Nutrition Capacity</td>
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<td>• Step 2: Reaching out to stakeholders</td>
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<td>• Step 3: Working together – engagement workshops and networking</td>
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<td></td>
<td>• Step 4: Moving toward action – identifying MSN priorities and goals</td>
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<tr>
<td>1.00-2.00 pm</td>
<td><strong>LUNCH FOR WORKSHOP PARTICIPANTS</strong></td>
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<tr>
<td>2.00-4.00 pm</td>
<td>Session 4. Planning for Multi-sectoral Nutrition Capacity Building in Councils</td>
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<tr>
<td></td>
<td>• Planning: why, what, who, where, when, and how</td>
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<td></td>
<td>• Tailored plans for MSN capacity building in ASTUTE councils</td>
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<td></td>
<td>• Pilot study data collection</td>
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<tr>
<td>4.15 pm</td>
<td>Workshop conclusions, feedback, and evaluation.</td>
</tr>
<tr>
<td>4.45 pm</td>
<td>Workshop Certificate Ceremony</td>
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<tr>
<td>5.00 pm</td>
<td><strong>CLOSING REMARKS AND WORDS OF THANKS</strong></td>
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<td></td>
<td>PANITA, Executive Director and Kagera RNuO</td>
</tr>
</tbody>
</table>

* Each session includes group discussions and a tea break
ANNEX 2. WORKSHOP PARTICIPANTS AND FACILITATORS

1. **Tumaini Mikindo**, Executive Director, Partnership for Nutrition in Tanzania (PANITA)
2. **Magreth Paul**, Program Officer, Partnership for Nutrition in Tanzania (PANITA)
3. **Mwita Waibe**, PO-RALG Nutritionist *(Invited)*
4. **Clodwing Mtweve**, Regional Administrative Secretary (RAS), Mwanza *(Invited)*
5. **Leonard Subi**, Regional Medical Officer (RMO), Mwanza
6. **Sophia Lugome**, Regional Nutrition Officer (RNuO), Mwanza
7. **Frank Moshi**, Regional Community-Based Health Coordinator *(Representing Tibeizuka Mapesa, RNuO, Geita)*
8. **Dennis Madeleke**, Regional Nutrition Officer (RNuO), Shinyanga
9. **Paul Makali**, Regional Nutrition Officer (RNuO), Kagera
10. **Siyaaleo Shilambele**, Regional Nutrition Officer (RNuO), Kigoma
11. **Godfrey Mbaruku**, ASTUTE Regional SBCC Officer, Mwanza
12. **Gaudencia Gibay**, ASTUTE Regional Nutrition Officer, Geita
13. **Edson Raymond**, ASTUTE Regional SBCC Officer, Geita
14. **Teddy Mamboleo**, ASTUTE Regional Nutrition Officer, Shinyanga
15. **Adelaide Nkya**, ASTUTE Regional SBCC Officer, Shinyanga
16. **Idda Katigula**, ASTUTE Regional Nutrition Officer, Kagera
17. **Margaret Ishengoma**, ASTUTE Regional SBCC Officer, Kagera
18. **Zidikheri Mziray**, ASTUTE Regional Nutrition Officer, Kigoma
19. **Godwin Bernard**, ASTUTE Regional SBCC Officer, Kigoma
20. **Kirk Dearden**, IMA World Health, Dar
22. **Aidan Kazoba**, IMA World Health, Mwanza
23. **Luitfrid Nnally**, Tanzania Food and Nutrition Centre (TFNC)
24. **Haikael Martin**, Nelson Mandela African Institution of Science and Technology
25. **Clara Mollay**, Nelson Mandela African Institution of Science and Technology
26. **Akwilina Mwanri**, Sokoine University of Agriculture
27. **Rehema Kirungi**, District Nutrition Officer (DNuO), Morogoro Region
28. **Jonas Kira**, District Nutrition Officer (DNuO), Kilimanjaro Region
29. **Katherine Dickin**, Cornell University, Division of Nutritional Sciences
ANNEX 3. THE UNICEF CONCEPTUAL FRAMEWORK FOR UNDERNUTRITION
ANNEX 4. DIFFERENCES ON THE CONTINUUM FROM FRIEND TO MENTOR TO TEACHER
## ANNEX 5. QUANTITATIVE WORKSHOP EVALUATION RESULTS

<table>
<thead>
<tr>
<th>Question</th>
<th>Somewhat disagree</th>
<th>Somewhat agree</th>
<th>Agree</th>
<th>Strongly Agree</th>
<th>Missing</th>
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</thead>
<tbody>
<tr>
<td>Q1. The workshop objectives were clear to me.</td>
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<td>Q2. The workshop made it easy for participants to share ideas and expertise with each other.</td>
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<td>Q3. The workshop activities were engaging and stimulated my thinking.</td>
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<td>Q4. The workshop met my expectations.</td>
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<td>Q5. The content of this workshop is relevant to my job.</td>
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<td>Q6. I understand the purpose of this project, the Multisectoral Nutrition initiative, including my role and responsibilities.</td>
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<td>Q7. I can describe nutrition statistics, the nutrition situation, and multisectoral action in a motivating way.</td>
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<td>Q8. The discussions and activities in this workshop motivated me to strengthen my involvement and commitment to multi-sectoral...</td>
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<td>Q9. I will be able to use and apply what I learned in this workshop.</td>
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<td>Q10. I will be able to help DNuOs develop a MSN council team of 3-4 officers to work together to promote multisectoral nutrition.</td>
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<td>Q11. I can help council officers understand the key components of the National Multi-sectoral Nutrition Action Plan (NMNAP).</td>
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<td>Q12. The workshop sessions were well facilitated.</td>
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<td>Q13. I learned how to mentor council officers to strengthen their capacity for multisectoral nutrition.</td>
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<td>Q14. I am confident in my ability to support council teams to reach out to stakeholders.</td>
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<td>Q15. It is essential for health, agriculture, education, and community development to work together to improve nutrition.</td>
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<td>Q16. During the workshop, I felt I was able to be heard and express my opinion.</td>
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<tr>
<td>Q17. I am confident in my ability to support council teams to hold engagement workshops with stakeholders.</td>
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<tr>
<td>Q18. I feel ready to begin meeting with a multi-sectoral team of council officers to discuss ways to strengthen MSN.</td>
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