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Abbreviations and Acronyms

ACC Administrative Committee on Coordination
AFASS Acceptable, feasible, affordable, sustainable, and safe
AIDS Acquired immune deficiency syndrome
ANC Antenatal care
ART Antiretroviral therapy
ARV Antiretroviral drug
BMI Body mass index
BMR Basal metabolic rate
CDC Centers for Disease Control and Prevention
ECSA-HC East, Central and Southern African Health Community
EIA Enzyme immune assay
ELISA Enzyme linked immunosorbent assay
FANTA Food and Nutrition Technical Assistance Project
FAO Food and Agriculture Organization of the United Nations
HAART Highly active antiretroviral therapy
HIV Human immunodeficiency virus
IATT Interagency Task Force
IDD Iodine deficiency disorder
IMR Infant mortality rate
LBW Low birth weight
MUAC Mid-upper arm circumference
MTCT Mother-to-child transmission of HIV
NRTI Nucleoside reverse transcriptase inhibitor
NNRTI Neo-nucleoside reverse transcriptase inhibitor
OI Opportunistic infection
PCR Polymerase chain reaction
PEM Protein energy malnutrition
PLHIV People living with HIV
PMTCT Prevention of mother-to-child transmission of HIV
PI Protease inhibitor
RCQHC Regional Centre for Quality of Health Care
RDA Recommended daily allowance
ROI Reactive oxygen intermediate
STI Sexually transmitted infection
UNAIDS Joint United Nations Program on HIV/AIDS
UNGASS United Nations General Assembly Special Session
UNICEF United Nations Children’s Fund
UNU United Nations University
USAID United States Agency for International Development
VAD Vitamin A deficiency
VCT Voluntary counseling and testing
Introduction

Many people living with HIV (PLHIV) in Africa report that food is their most urgent need. Even among populations in the region not affected by HIV, food insecurity and malnutrition are common. HIV worsens the situation through a vicious cycle in which HIV causes or exacerbates malnutrition and food insecurity, and malnutrition and food insecurity limit capacity to cope with the disease and its impacts.

Nutrition interventions can help break this cycle by strengthening immune response, promoting response to treatment, supporting management of symptoms, and improving functioning and quality of life. Nutrition interventions are therefore a critical component of comprehensive HIV care and treatment. USAID/East Africa has worked with the Regional Centre for Quality of Health Care (RCQHC), the East, Central and Southern African Health Community (ECSA-HC), the Food and Nutrition Technical Assistance (FANTA) Project, the LINKAGES Project, and the Africa’s Health in 2010 Project to strengthen the capacity of health care providers in sub-Saharan Africa to integrate nutrition interventions into HIV care and treatment services.

As front-line care providers, nurses play a critical role in HIV care and often have regular opportunities to provide counseling and other support to PLHIV. Equipping nurses with nutrition and HIV knowledge and skills enables them to provide effective nutrition care and support, but nursing school curricula in the region include limited information on this subject. This training manual is designed to address that gap by providing materials for nursing school instructors to use to equip nursing students with knowledge of nutrition and HIV and skills to provide nutrition care and support to PLHIV.

The manual is based on Nutrition and HIV/AIDS: A Training Manual (2003), developed by RCQHC, FANTA, and LINKAGES with funding from USAID/East Africa and used by medical schools, nutrition departments, ministries of health, and others for pre-service and in-service training of health care providers. This manual updates the 2003 manual with recent evidence and approaches and includes additional sessions and information relevant to nurses, such as nutrition care for people nurses support at various contact points.

Purpose. The purpose of the manual is to support nursing instructors and trainers in training nursing students to provide effective nutrition care and support to PLHIV. To achieve this purpose, the manual includes a range of training materials with extensive information on nutrition and HIV topics.

Audience. The primary users of the manual will be nursing school instructors, although others, including in-service trainers of nurses and other health care providers, may also use the manual as a reference and training guide. Users of the manual are expected to have experience training adults, including using participatory training techniques; basic knowledge of nutrition, HIV, food security, and maternal and child health; and familiarity with the health care systems where nurses work.

Use. The manual is designed to be incorporated into existing pre-service nurse training curricula, but it can also be used for in-service training of nurses or other health care providers. Each session contains lecture notes with detailed information about the session’s topic; a presentation that can be used as a PowerPoint, as overhead slides, or as handouts; exercises, case studies, and/or role plays for students; handouts for students; and references and suggested reading materials.
Depending on time availability and relevance, instructors can use all of the sessions or select individual sessions that are most relevant. Sessions can be incorporated into a larger curriculum throughout a course or taught together in sequence.

**Organization.** The twelve sessions are organized into three parts. Part I includes three introductory sessions with basic information about HIV and nutrition and the links between the two. Part II aims to build the technical knowledge of nurses in nutrition management of symptoms, nutrition implications of HIV therapy, infant feeding and prevention of mother-to-child transmission, and food security constraints to nutrition care and support. Part III provides guidance on nutrition care for different clients living with HIV. Because nurses see different types of patients at different contact points, these sessions are organized based on a life cycle approach, with separate information on caring for adults, pregnant and lactating women, infants and young children, children 2–9 years old, and adolescents living with HIV.