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Small-Quantity Lipid-Based Nutrient Supplements:

What to Communicate to Program Participants

This brief was developed for the U.S. Agency for International Development (USAID) Bureau for Humanitarian Assistance-managed International Food Relief Partnership. The small-quantity lipid-based nutrient supplements (SQ-LNS) described in this document are intended for children 6–24 months, pregnant women, and breastfeeding women whose diets are nutritionally suboptimal and/or insufficient. SQ-LNS are intended to be consumed in addition to the regular meals pregnant and lactating women and children under age two consume each day. The products are formulated for children and women at risk of nutritional deficiencies to help meet their nutrient needs. They are NOT therapeutic food products. Therefore, SQ-LNS for children 6–24 months are NOT intended for treatment of severe acute malnutrition (severe wasting) or moderate acute malnutrition (moderate wasting). They are also NOT a breast milk replacement. Similarly, SQ-LNS for pregnant and breastfeeding women are NOT intended for treatment of acute malnutrition (wasting).



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Introduction

This technical brief provides information that will help implementing partners develop communication materials to accompany distribution of small-quantity lipid-based nutrient supplements (SQ-LNS) for children 6–24 months of age and pregnant and breastfeeding women. USAID Advancing Nutrition, the Agency’s flagship multisectoral nutrition project, conducted a learning activity with the Bureau for Humanitarian Assistance’s (BHA’s) International Food Relief Partnership (IFRP) implementing partners in Honduras, Niger, and Somalia. The activity showed that information on SQ-LNS and how to use them is not standardized, which may impact the quality and effectiveness of the program (USAID Advancing Nutrition 2022a). Implementing partners and program staff at the distribution point also noted the need for communication materials to effectively share the appropriate use of SQ-LNS with program participants.

USAID Advancing Nutrition developed this brief to fill that need for accurate and standardized information on SQ-LNS. The brief covers the key information program staff can provide participants on distribution day, including job aids (sample counseling cards to use with participants and a separate document with responses to common questions from participants). The job aids align with specific features of the IFRP award (duration and amount) (**box 1**).

BOX 1

Timeline for a Typical IFRP Award

- **Award amount:** based on tonnage of SQ-LNS requested and geographic location of program
- **Award duration:** 24 months
- **SQ-LNS arrive in the country:** six months after award is announced
- **Implementation duration:** dependent on partner need and justification, up to 18 months
- **Geographic context:** emergency (including protracted emergency)

Source: USAID, 2023

Effectiveness of SQ-LNS

SQ-LNS are fortified products intended to fill key nutrient gaps during the complementary feeding period, pregnancy, and while breastfeeding. SQ-LNS provide energy (~110 kcal per sachet), protein, multiple micronutrients, and essential fatty acids. In areas where children and pregnant and breastfeeding women are unable to afford or access a quality diet, SQ-LNS offer several benefits (**box 2**)¹.

Recommendations for Program Design

For SQ-LNS programs to be effective, the program design must be evidence-based, meet the needs of the population, and support appropriate, timely use of SQ-LNS among intended program participants. USAID Advancing Nutrition previously developed a technical brief to support implementation of high-quality SQ-LNS programs:

- **Program design brief:** *Lipid-Based Nutrient Supplements: Evidence and Program Guidance* presents evidence-based considerations for critical program aspects such as entry, exit, and duration of supplementation (USAID Advancing Nutrition 2021). Similar documents (Edesia 2022; UNICEF 2023) and resources on SQ-LNS are also available elsewhere (UC Davis 2023).

SQ-LNS Communication

Communication plan best practices include developing a plan for both community awareness² and participant education (**box 3**) (UNHCR 2011). Ideally, the communication plan is built on formative research³ to understand perceptions of the product, the benefits of use from participants' perspectives, and the factors that prevent or support timely use. However, if resources to conduct formative research are a constraint, implementing partners can pretest ideas with a small group of community members and program participants prior to implementation. They should also refine the information they share as they receive feedback.

- 1 More research is required to understand the impact of SQ-LNS on breastfeeding women.
- 2 Community awareness is defined as increasing knowledge of community members about the program and its benefits. Participant education is defined as presenting general information on a topic, often in groups (FANTA 2016).
- 3 Formative research is usually conducted at the start of a program to design or shape program activities. It can vary in scope, breadth, and depth depending on the context and duration of the program. But it can also be undertaken rapidly using rapid-assessment methods (USAID Advancing Nutrition 2022b).

BOX 2

Benefits of SQ-LNS for Children and Women

- **Children 6–24 months:** SQ-LNS reduce the risk of death and improve growth (height, weight) and brain development (Dewey et al. 2021).
- **Pregnant women:** SQ-LNS help babies in the womb grow well (length, weight) (Das et al. 2018).
- **Breastfeeding women:** Limited evidence to support taking SQ-LNS while breastfeeding.

BOX 3

Key Principles to Designing SQ-LNS-Related Communication

- Be culturally sensitive and grounded in local knowledge and practices about nutrition.
- Show clear benefits to using SQ-LNS.
- Help participants understand what to expect and what not to expect after using SQ-LNS.
- Provide three to five key points on—
 - whom SQ-LNS are intended for
 - why SQ-LNS should be used
 - how and when to take SQ-LNS
 - how to manage potential side effects.

Source: UNHCR 2011

Community Awareness

The success of any program depends on whether the participating community is aware of—

- the program
- who is eligible for it
- what it is and is not intended for
- the benefits of participating in it
- how to support it even if one is not a direct participant.

During community awareness activities, it is critical to involve local leaders for support and leverage existing community groups to engage participants.

Participant Education

The two SQ-LNS products are designed to cover the most nutritionally vulnerable period from conception to a child's second birthday (the first 1,000 days). At the individual level, it is important for pregnant and breastfeeding women and caregivers of children 6–24 months to understand broadly that these products are intended to support their and their children's nutrition from conception until a child turns two. More specifically, they should understand how to appropriately use SQ-LNS so they may benefit from consuming the products. This requires determining who will deliver this information to program participants, how they will deliver it, and what they will say.

Who will deliver: Implementing partners can mobilize paid staff and/or volunteers engaged in SQ-LNS delivery to communicate information about the products and its use with program participants.

How to deliver: Paid staff and/or volunteers can provide individual or group education/discussion on SQ-LNS, maternal nutrition, infant and young child feeding (IYCF), and hygiene either at the beginning or end on distribution day (see **box 4** for examples). Since SQ-LNS complement existing diets, it is critical for programs to encourage and support optimal dietary and hygiene practices.

If a site is distributing SQ-LNS for children and pregnant and breastfeeding women on the same day, implementing partners can consider creating separate groups by product. They can encourage participants to contact staff and volunteers to problem-solve individual concerns, which may not be addressed in a group. One way to ensure participants have more time with staff and volunteers is to manage the volume of participants on a given day. For example, in Niger, the IFRP partner met with participants on different days depending on how far they lived from the distribution point, while the IFRP partner in Honduras met participants every month but distributed SQ-LNS every three months (USAID Advancing Nutrition 2022a).

BOX 4

Group Education in Honduras and Niger



Honduras: Volunteers provided group education (on SQ-LNS) after distributing SQ-LNS.

Niger: Volunteers provided group education (on SQ-LNS, health, and nutrition) and took anthropometric measurements for the first two hours. Then staff and volunteers distributed SQ-LNS.

Source: USAID Advancing Nutrition 2022a

What to communicate during each participant-provider interaction: On each distribution day, program staff can communicate three to five key points on SQ-LNS (**table 1**). Program staff can also ask if there are questions or concerns on use of the product and should attempt to probe how it is being used currently. Then staff can discuss a key behavior related to maternal nutrition, IYCF, or hygiene. During this discussion, staff can try to elicit peer-to-peer sharing and problem solving, asking participants what they know about the topic, what makes it challenging, and their own solutions. Before people depart, staff can ask each participant for a commitment to use the SQ-LNS as agreed, focusing on one small action. For example, this might be asking a caregiver to commit to feeding the intended child the whole sachet each day after discussing why it is important not to share the sachet. This public commitment to one action helps participants remember and follow up on what was discussed.

Table 1. Example of Information Program Staff Can Communicate with SQ-LNS Program Participants by Product (Child 6–24 Months vs. Pregnant and Breastfeeding Women)

	 Caregivers of Children 6–24 Months	 Pregnant and Breastfeeding Women
Target Group	<ul style="list-style-type: none"> • SQ-LNS are only for children 6–24 months of age. 	<ul style="list-style-type: none"> • SQ-LNS are for pregnant women and women who are breastfeeding children up to 6 months of age.
Benefit	<ul style="list-style-type: none"> • SQ-LNS help your child grow well and stay healthy. 	<ul style="list-style-type: none"> • When you eat this product during pregnancy, it will help the child developing inside of you to grow well. • When you eat this product while breastfeeding, it will help you to stay healthy.
How to Use	<ul style="list-style-type: none"> • Feed one sachet only of SQ-LNS per day to your child. • You can give SQ-LNS directly from the sachet or mix the product with food. • Breastfeed your child and do not forget to give your child other foods, such as meat, fish, eggs, fruits, and vegetables, whenever you can because your child still needs these foods. 	<ul style="list-style-type: none"> • Eat one sachet only of SQ-LNS per day. • You can eat SQ-LNS directly from the sachet or mix the product with food. • Do not forget to eat meat, fish, eggs, fruits, and vegetables whenever you can because you still need these foods even as you take SQ-LNS.
Side Effects	<ul style="list-style-type: none"> • After your child eats SQ-LNS, his or her stool might change in color or consistency for the first few days; if you are concerned about this, consult a health worker. • If your child develops rashes or experiences difficulty breathing after eating SQ-LNS, immediately stop feeding the product and consult a health worker. 	<ul style="list-style-type: none"> • If you experience any side effects, such as rashes or difficulty breathing, after eating SQ-LNS, immediately stop eating the product and consult a health worker.

Using, adapting, and pretesting the materials: For SQ-LNS, implementing partners may develop their own set of communication materials or adapt and/or use the sample counseling cards in annex 1. If a partner is interested in developing its own counseling cards, the USAID Advancing Nutrition and UNICEF IYCF Image Bank <https://iycf.advancingnutrition.org/> is a good place to start, as this resource offers IYCF, maternal nutrition, and hygiene illustrations (including ones that depict SQ-LNS) for different geographic areas and provides instructions on how to modify the illustrations. Whether using the materials provided in annex I or developing new materials, implementing partners must pretest the materials to adapt them to their program context, ensuring the information provided is comprehensible and that program participants can relate to the content and images. Pretesting with a small group of participants (e.g., 6 to 12 individuals or 3 to 5 group discussions with 6 people per group) will help programs discover if most participants understand and can relate to the materials (i.e., is it for me?) and recognize a clear “call to action.” In other words, what action do they think they should take after seeing the material? Pretesting should also assess user experiences (e.g., did the health worker find it easy to use).

For key information and materials about IYCF and hygiene, implementing partners can refer to the United Nations Children’s Fund’s (UNICEF’s) *Community Infant and Young Child Feeding Counselling Package* (C-IYCF) to provide nutrition counseling by the age and stage of the child. Implementing partners can consider having one copy each of the SQ-LNS counseling cards, IYCF counseling cards, and maternal nutrition counseling cards (where the partner is distributing SQ-LNS for pregnant and breastfeeding women) on hand at each distribution site. As appropriate, the text in these documents should be translated into the local language that staff and volunteers will use to communicate with program participants. The UNICEF C-IYCF package also includes content and materials for maternal nutrition.

Resources for Staff

Implementing partners will need to train paid staff and/or volunteers on SQ-LNS logistics (storing, managing, distributing, and tracking supplies) as well as what and how to communicate about SQ-LNS prior to program implementation. Communication materials with information on SQ-LNS, such as the material in **annex I**, can be supplemented with a document staff and volunteers can refer to when answering frequently asked questions (FAQ) about the product, such as questions about the size, eligibility criteria, and dosage (one sachet per day) of SQ-LNS (see an example in **annex II** that can be adapted to different settings). Additionally, staff and volunteers also need to understand why and how a preventive product such as SQ-LNS differs from therapeutic feeding products such as ready-to-use foods for treatment of moderate and severe wasting. This FAQ document provides some of the key information staff and volunteers should communicate to participants. Implementing partners can give each staff person and volunteer one copy of this document during training and keep one on hand at each distribution site.

Implementing partners may also wish to add or remove questions as relevant to their context. For example, in Honduras, several pregnant women disliked the taste of SQ-LNS, so staff and volunteers suggested ways to make the product more palatable (e.g., eat small amounts throughout the day or eat SQ-LNS after a meal [USAID Advancing Nutrition 2022a]). However, pregnant women in Somalia did not voice this concern. In Honduras, the FAQ document might include what to do if the participant dislikes the taste of the product, while this question may be excluded from the FAQ document in Somalia.

Conclusions

SQ-LNS are effective; however, participants must use them appropriately and consistently. Effective communication from program staff and volunteers on why and how to use the product, along with strategies to problem solve and overcome challenges, will support participants in using the product as intended. This brief provides examples of counseling cards and an FAQ document to support program staff and volunteers. These materials will need to be adapted to the context in which they will be used. This will help ensure that SQ-LNS improves the diet quality of children 6–24 months and pregnant and breastfeeding women for improved nutrition outcomes.

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Annex I.

Counseling Cards

Small-Quantity Lipid-Based Nutrient Supplements

[SQ-LNS] help your child grow healthy

Card 1

[SQ-LNS] help your child grow healthy

- [Local name of SQ-LNS] help your child grow healthy.
- You can give [local name] directly from the sachet or mix [local name] with food.
- [Local name] are only for children 6 months to 24 months of age.
- Feed one sachet only of [local name] per day to your child.
- After your child eats [local name], his or her stool might change in color or consistency for the first few days; if you are concerned about this, consult a health worker.
- If your child develops rashes or experiences difficulty breathing after eating [local name], immediately stop feeding the product and consult a health worker.

How to feed [SQ-LNS] with your child's diet

Card 2

How to feed [SQ-LNS] with your child's diet

- While feeding [local name] to your child, continue to breastfeed and give your child a variety of nutritious foods.
- Wash your hands with soap and water before feeding your child [local name] and other food.
- Wash your child's hands with soap and water before giving you child [local name] or other food to eat.

[SQ-LNS] for the pregnant or breastfeeding woman

Card 3

[SQ-LNS] for the pregnant or breastfeeding woman

[Local name] are for pregnant women and women who are breastfeeding children up to six months of age. Say this to women taking SQ-LNS:

- When you eat [local name] during pregnancy, they will help your child grow healthy.
- When you eat [local name] while breastfeeding, they will support your health.
- You can eat [local name] directly from the sachet or mix [local name] with food.
- While eating [local name], remember to continue eating nutritious foods.
- Eat one sachet only of [local name] per day.
- If you experience any side effects such as rashes or difficulty breathing, after eating [local name], immediately stop eating the product and consult a health worker.

Annex II.

Frequently Asked Questions

Small-Quantity Lipid-Based Nutrient Supplements

SQ-LNS for Prevention



Large-Quantity LNS for Treatment



1. Question: Why is the size so small?

Answer: Small-quantity lipid-based nutrient supplements (SQ-LNS) are a preventive product that enhances the quality of a child's diet and is not a replacement for food. This product contains vitamins, minerals, and essential fats. The small size makes it possible for children 6–24 months to consume an entire sachet each day while also drinking breast milk and eating nutritious foods (e.g., meat, fish, poultry, eggs, fruits, and vegetables).

2. Question: How is this product different from other lipid-based nutrient supplements?

Answer: This is a preventive product and not for wasting treatment like ready-to-use therapeutic food for severe wasting or ready-to-use supplementary food for moderate wasting. The product's purpose is to provide vitamins, minerals, and essential fats to the child who eats it, to protect and promote the child's nutritional status.

3. Question: Can I give my child more than one sachet of SQ-LNS per day?

Answer: You should give your child one sachet only per day because your child also needs to drink breast milk and eat nutritious foods. Also, one sachet of SQ-LNS contains all the vitamins, minerals, and essential fats needed per day for a child 6–24 months to grow and develop well. If you give more than one sachet per day, your child may consume too much of certain vitamins.

4. Question: Why can't I give SQ-LNS to my child after he/she is two years old?

Answer: This product is made for children 6–24 months because that is an important time for their growth and development. Before six months, children should have only breast milk. At six months, they should start eating nutritious foods (e.g., meat, fish, poultry, eggs, fruits, and vegetables) along with SQ-LNS. Starting close to six months gives them the most benefit.

5. Question: Can I share SQ-LNS with other children?

Answer: You should give SQ-LNS to only the child it is intended for. The intended child needs to eat the whole sachet every day for the recommended time to get the most benefit from it. Sharing with other children might not give them enough of the vitamins, minerals, and essential fats they need.

SQ-LNS for Pregnant and Lactating Women

SQ-LNS for Prevention



Iron and Folic Acid



1. Question: Why is the size of SQ-LNS so small?

Answer: This is a preventive product that enhances the quality of a pregnant or breastfeeding woman's diet and is not a replacement for food. The purpose of the product is to provide vitamins, minerals, and essential fats to the woman who eats it, to protect and promote her nutritional status. The small size makes it possible for pregnant and breastfeeding women to consume an entire sachet each day while eating nutritious foods (e.g., meat, fish, poultry, eggs, fruits, and vegetables).

2. Question: Can I take iron and folic acid (IFA) with SQ-LNS?

Answer: Yes, it is safe to take SQ-LNS with IFA.

3. Question: Can I eat more than one sachet of SQ-LNS per day?

Answer: You should eat one sachet only per day because one sachet contains all the vitamins, minerals, and essential fats required for pregnant and breastfeeding women per day. If you eat more than one sachet per day, you may consume too much of certain vitamins.

4. Question: I don't feel like eating SQ-LNS, what should I do?

Answer: Some women have found that they are able to eat SQ-LNS by mixing the product with food, consuming it after a meal, or taking it in smaller portions throughout the day. The vitamins, minerals, and essential fats in SQ-LNS help strengthen the body, so finding a way to consume the entire sachet daily provides the most benefit.



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