Despite widespread understanding of the importance of human resources for delivering on national nutrition action plans (NNAPs), many countries have found it difficult to create sustainable improvements in the nutrition workforce. The USAID-funded SPRING project produced evidence on why this challenge exists in two countries, Uganda and Nepal.

Methods:
As part of SPRING’s Pathways to Better Nutrition case studies, qualitative data were collected in Uganda and Nepal over two years (2013–2015 and 2014–2016, respectively). Six stakeholder groups, six nutrition-related sectors, and three levels of government were studied through key informant interviews, direct observation, and news content analysis. These data were analyzed in NVivo to identify common themes.

Results:
Several nutrition workforce issues were mentioned as constraints to successful implementation of Uganda and Nepal’s NNAPs:

• High turnover in key government, donor, and United Nations nutrition positions. Turnover was regularly cited as the reason why planning and spending stalled for nutrition activities.
• Ad-hoc funding for nutrition coordination positions, which may have encouraged transience.
• Lack of nutrition training for implementing staff trained in nutrition, especially in non-health sectors.
• Few available district and sub-district nutrition staff. Barriers to increasing implementation-level nutrition staff were lack of mentoring and recruitment for district nutritionists (Uganda) and difficulties recruiting for hard-to-reach areas (Nepal).

Conclusions:
Our recommendations for overcoming these constraints include:
1. improving handover protocol for nutrition focal positions
2. securing funding for nutrition positions
3. including nutrition in civil service curricula
4. creating incentives for staff in hard-to-reach areas.

Recognizing the universality of this challenge, SPRING has developed several resources to help strengthen the nutrition workforce. Our Workforce Mapping Toolkit is designed to identify gaps in training, recruitment, and planning for nutrition services. Our Community Health Worker Advocacy Toolkit can also be used to advocate for increased nutrition workforce training and recruitment.

Keywords:
Nutrition, human resources, workforce, policy, governance

Conflict of Interest:
The authors declare no conflicts of interest.