

INTRODUCTION

Disability-Inclusive Nutrition and Feeding for Infants and Children

Time: 30-45 minutes

Preparation & materials required: Slide Deck, flipchart, markers, training agenda, pre-test activity sheet and answer key.

Objectives: Give an overview of the training and what to expect (and what not to expect) and assess pre-training knowledge.

Activity Summary	Key messages	Slides & Materials
Presentation	n/a	Slides 1-5 Introduction_Handout_Disability-inclusive Nutrition & Feeding_Training Agenda Introduction_Activity Sheet_Disability-inclusive Nutrition & Feeding_Pre-post-test Introduction_Activity Sheet_Disability-inclusive Nutrition & Feeding_Pre-post-test_Answers

Instructions

- Introduce yourself and ask others to introduce themselves and share what they are looking forward to the most in the training.
- Conduct an icebreaker activity or ask local partner to lead activity.
- Introduce the training:
 - Children with disabilities are at increased risk of feeding difficulties and malnutrition. Conditions such as neurological disorders, congenital anomalies, genetic syndromes, and other health issues can further complicate feeding practices.
 - Mothers with disabilities also face significant barriers, including limited access to health information and services, communication challenges, and physical obstacles to reaching care. These factors heighten their vulnerability—particularly when their children are nutritionally at risk.
 - In humanitarian emergencies, delivering adequate services becomes even more challenging. Access to surgical interventions, screening, and diagnosis is often limited, while stigma and discrimination may increase.
 - This training aims to equip frontline health and nutrition workers in *[name of country]* with the knowledge, tools, and practical skills to provide disability-inclusive services for children under five and their mothers.

- Distribute a copy of the handout **agenda** to each participant and run through the agenda for each day of the training. Explain that the training is divided into several modules and topics and that learning objectives will be presented for each topic.
- Distribute the **pre-test** to participants and give them 15-20 minutes to complete the test. Explain that we will repeat the test after the training to be able to see the knowledge attainment, and that the scores will help us to improve the training content and delivery for next time.

Contextualization

- To ensure the training is relevant and meaningful, adapt content to reflect the local context of the country or community where the training is being conducted. This includes:
 - adjusting case studies to better align with local systems, services, and realities—for example, referencing existing referral pathways for children with disabilities, and
 - including national or community-specific support services such as hotlines or specialized care programs.
- When covering topics such as Breast-Milk Substitutes (BMS) or Infant and Young Child Feeding in Emergencies (IYCF-E), briefly mention any relevant national protocols, laws, or standard operating procedures.
- You are also encouraged to integrate common cultural beliefs and social myths related to disability and infant and young child feeding from the local context.
- Real-life barriers should be incorporated into discussions—particularly those affecting care-seeking behaviors, such as lack of accessible transportation in rural areas, limited access to health services, or stigma surrounding disability.
- Referencing national assessments or surveys (e.g., nutrition, health, or disability prevalence studies) can also help ground the training in locally relevant data and support more effective learning and discussion.