

Kyrgyzstan's school  
meals programme

A Common Results  
Framework for Somalia

Yemen: Strengthening capacity  
for life-saving treatment

# NUTRITION EXCHANGE



**Parliamentarian  
networks in West Africa**

**Stunting in Indonesia: Raising  
sub-national awareness**

**SUN Networks in Fragile and  
Conflict Affected States**



# Contents

## 3 Editorial

## 4 Global Themes

- 4 Shining a light to spur action on nutrition
- 4 Human Capital Index
- 5 Building climate resilience
- 5 Action on the right to food
- 6 Waste not, want not
- 6 What's new at ENN?

## 8 Original Articles

- 8 Stunting prevention in Indonesia: Raising awareness at the sub-national level
- 10 Working together for nutrition: Changes in Kenya's health and agriculture ministries
- 12 Building parliamentary networks for nutrition in West Africa
- 15 Setting up SUN Networks in Fragile and Conflict Affected States
- 18 Scaling up and improving nutrition in Kyrgyzstan's school meals programme
- 20 Developing a Common Results Framework for nutrition in Somalia
- 22 Strengthening sub-national capacity in Yemen to provide life-saving treatment
- 24 Coordinating nutrition in Mali: Interview with the SUN focal point
- 26 Nutrition coordination mechanisms: the whats, whys and wherefores
- 28 UN Decade of Action on nutrition: Brazil, Ecuador and Italy make commitments

## 30 Resources and Updates

- 30 Online tools
- 31 SUN Movement update: New directions for 2019-2020 and beyond

ENN would like to thank the UNICEF West and Central Africa Office in Senegal, UNICEF Latin American and the Caribbean Regional Office in Panama, and UNICEF, Middle East and North Africa Regional Office in Jordan, for making the French, Spanish and Arabic versions of this publication possible.

We would also like to thank members of the ENN KM team for their contributions to this issue, including Regional Knowledge Management Specialists (RKMS) Ambarka Youssoufane, Lillian Karanja, and Charulatha Banerjee, supported by Tui Swinnen and Natalie Sessions (ENN Global KM Coordinators), and on the NEX podcasts Jonah Klein (Digital Content Producer) and Azaria Morgan (Project Assistant).

**Front cover:** A training session for newly arrived internally displaced mothers (IDPs) at Kansale IDP Camp in Dolow; WFP/Kabir Dhanji

**Back cover:** An internally displaced girl at a market in Kabasa IDP Camp in Dolow, Somalia; WFP/Saikat Mojumder.



©Save the Children; Myanmar

### What is Nutrition Exchange?

*Nutrition Exchange* is an ENN publication that contains short, easy-to-read articles on nutrition programme experiences and learning from countries with a high burden of malnutrition and those that are prone to crisis. Articles written by national actors are prioritised for publication. It also provides information on guidance, tools and upcoming trainings. NEX is available in English, French, Arabic and Spanish.

### How often is it produced?

*Nutrition Exchange* is a free, bi-annual publication available in hard copy in English and French, and electronically in English, French, Arabic and Spanish.

### How to subscribe or submit an article

To subscribe to *Nutrition Exchange*, visit [www.ennonline.net/nex](http://www.ennonline.net/nex)

Many people underestimate the value of their individual experiences and how sharing them can benefit others working in similar situations. ENN aims to broaden the range of individuals, agencies and governments that contribute material for publication in *Nutrition Exchange*.

Often the articles you see in *Nutrition Exchange* begin as a few bullet points that authors share with us. The editorial team will help support you in writing up your ideas into an article for publication.

To get started, just email Carmel and Judith ([carmel@ennonline.net](mailto:carmel@ennonline.net) and [Judith.Hodge@ennonline.net](mailto:Judith.Hodge@ennonline.net)) with your ideas. We are now looking for articles for NEX Issue 12 so please be in touch.

This edition of *Nutrition Exchange* was funded by UK aid from the UK Government and Irish Aid. The ideas, opinions and comments herein are entirely the responsibility of its author(s) and do not necessarily represent or reflect UK Government or Irish Aid policy.



# Editorial

Although we had not planned NEX11 to be themed, a common (and recurrent) thread emerges from the country articles: how to achieve effective coordination for nutrition in different contexts, with different stakeholders and through various mechanisms. Clearly, this is an overarching concern of the countries featured, many of whom are part of the Scaling Up Nutrition (SUN) Movement. It is some years since it was first claimed that malnutrition is “everyone’s business and nobody’s responsibility”. We can see from the articles in this issue that a more coordinated response to tackling the problem at all levels – from global to community – is emerging.

Dialogue at the national level can be the starting point to consolidate the position of nutrition in a country’s development agenda. Nowhere is it more critical to work together than in countries facing protracted crisis. The Food and Agriculture Organization of the United Nations *State of Food Security and Nutrition* (2018) report shows that global hunger has risen for the second year in a row; from 804 million people in 2016 to almost 821 million in 2017, with conflict as a key driver in fuelling the increase. There are examples of progress in **Somalia**, with the recent development of a common results framework for nutrition. This involved bringing key stakeholders from multiple sectors together to create a costed national nutrition plan. Very few positive stories are coming out of **Yemen** at the moment, but we report on a collaboration between local partners to deliver life-saving treatment services for children in Al-Hodeida governorate.

The next stage is to cascade higher-level commitments and policies to the level below. Here, countries and governments are seeking examples of successful sub-national implementation of nutrition programmes. In **Indonesia** efforts to accelerate implementation of the integrated nutrition programme have focused on a type of stunting ‘bootcamp’ to advocate for increased spending on nutrition and related sectors in 160 most disadvantaged districts.

The **SUN Movement networks**, such as civil society, the UN and business, are a feature of the Movement’s global and country architecture. Establishing and maintaining SUN networks in a crisis-prone context is highlighted in a report on SUN Network mapping from ENN’s 17 countries of focus. This shows what can be achieved, as well as some of the unique challenges these countries can face.

The SUN country focal point is often the linchpin in the nutrition architecture uniting stakeholders and networks. An interview with **Mali**’s SUN focal point explores both his role and that of the nutrition coordination cell, established following Mali joining SUN.

In **Latin America and the Caribbean** (a region with fewer SUN countries than others), nutrition coordination mechanisms could offer an adaptive vehicle for scaling up efforts to tackle all forms of malnutrition, not just nutrition in emergencies. Cross-sector appointments and mechanisms between **Kenya**’s Ministries of Health and Agriculture, including the creation of an agri-nutrition department in the Ministry of Agriculture and joint technical working groups, signal the government’s efforts to align its activities along multi-sector lines and coordinate more effectively.

In another article from West Africa, interviews with parliamentarians in **Chad** and **Burkina Faso** underline the opportunities in engaging the advocacy efforts of this group of actors. It describes how parliamentarians can offer a direct link to communities via engagement with their constituencies, but political cycles and turnover can limit the impact and sustainability of parliamentary networks. Making progress in nutrition is not a quick political ‘win’, as recognised by long-term initiatives such as the UN’s **Decade of Nutrition Action**, to which countries such as Brazil, Ecuador and Italy have made formal commitments.

Finally, communities lie at the heart of efforts to strengthen and improve the nutrition impact of **Kyrgyzstan**’s school meals programme. Ultimately, these are the people that all those involved in scaling up nutrition are trying to reach through multi-sector policies and programmes.

Happy reading, and please share your stories with us for Issue 12 of *Nutrition Exchange*!

Carmel Dolan, Co-editor, NEX ([carmel@ennonline.net](mailto:carmel@ennonline.net))

Judith Hodge, Co-editor, NEX ([Judith.Hodge@ennonline.net](mailto:Judith.Hodge@ennonline.net))



Natalie Sessions, *Global KM co-ordinator*  
Charulatha Banerjee (*RKMS Asia*)  
Ambarka Youssoufane (*RKMS West Africa*)  
Lillian Karanja (*RKMS East Africa*)



## About ENN

ENN enables nutrition networking and learning to build the evidence base for nutrition programming.

Our focus is on communities in crisis and where undernutrition is a chronic problem.

Our work is guided by what practitioners need to work effectively.

- We capture and exchange experiences of practitioners through our publications and online forum en-net.
- We undertake research and reviews where evidence is weak.
- We broker technical discussion where agreement is lacking.
- We support global-level leadership and stewardship in nutrition.

Follow us on:



@theennonline



@ENNOnline



ENN Online





## Shining a light to spur action on nutrition

**T**he 2018 *Global Nutrition Report* finds that the burden of malnutrition remains unacceptably high and progress

to date has simply not been good enough. Every country in the world is affected, holding back human progress everywhere. However, it also shows that we have never been better equipped to end malnutrition in all its forms.

The data presented in the report is compelling: malnutrition is responsible for more ill health than any other cause. Children under five years of age face multiple burdens: 150.8 million are stunted, 50.5 million are wasted and 38.3 million are overweight. Furthermore, overweight and obesity among adults are at record levels, with 39% of adults overweight or obese, and obesity rates increasing among adolescents.

Yet the report's analysis highlights that significant steps are being made to address malnutrition. Globally, stunting among children has declined and there has been a slight decrease in underweight women. Many countries are on track to achieve at least one of the targets set by the global community to track progress on nutritional status to 2025.

We have reason to be hopeful. The global community and national stakeholders have never been better placed to deliver results on malnutrition. The knowledge we have about what it takes to make progress has never been greater and advances in data are helping to improve our understanding of the nature of the burden of malnutrition. We are equipped better than ever to guide and inspire real change and improve our ability to monitor progress and meet ambitious targets.

The 2018 *Global Nutrition Report* calls for the world to seize urgently a closing window of opportunity to get on track to meet the Sustainable Development Goal target of ending malnutrition in all its forms by 2030. It highlights the need for urgent action in five areas:

1. Break down silos to tackle malnutrition;
2. Prioritise and invest in the data needed and the capacity to use it;
3. Scale up financing for nutrition – diversify and innovate to build on past progress;
4. Galvanise action on healthy diets – engage across countries to address this universal problem; and
5. Make and deliver better commitments to end malnutrition – an ambitious, transformative approach will be required to meet global nutrition targets.

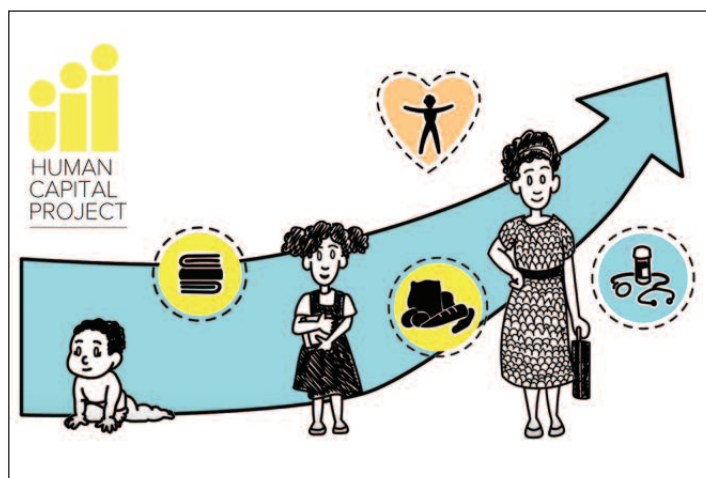
The *Global Nutrition Report* is the world's foremost publication on the status of malnutrition around the world. It acts as a stocktake on the world's nutrition – globally, regionally and country by country – and on efforts to improve it. It tracks progress on global nutrition targets, ranging from diet-related non-communicable diseases to maternal, infant and young child nutrition.

It is a multi-stakeholder initiative, governed by a Stakeholder Group comprising members of government, donor organisations, civil society, multilateral organisations and the business sector. The report content is developed by a 20-strong **Independent Expert Group** responsible for the objectivity, rigour, content and quality of the report.

For more information, visit <http://globalnutritionreport.org/events/>

## Human Capital Index

**T**he World Bank defines human capital as: “the knowledge, skills, and health that people accumulate throughout their lives, enabling them to realize their potential as productive members of society. We can end extreme poverty and create more inclusive societies by developing human capital. This requires investing in people through nutrition, health care, quality education, jobs and skills.” The recently launched Human Capital Index aims to quantify the contribution of nutrition/health and education to the productivity of the next generation, and includes healthy growth (stunting for children under five years old) as one of its five indicators. (The other four indicators are child survival, school enrollment, quality of learning and adult survival). By using the index, countries can calculate how much income they are missing out on due to human capital gaps, and what investments are needed to compete effectively in the global economy.



For more information, visit [www.worldbank.org/en/publication/human-capital](http://www.worldbank.org/en/publication/human-capital)



# Building climate resilience

**F**AO's annual report, *The State of Food Security and Nutrition* (2018), highlights one of the most challenging issues currently facing the world, namely climate change. After a long decline, recent analyses show that global hunger has increased for the second year in a row. In 2017 the number of hungry people increased to nearly 821 million (one person out of every nine in the world), from around 804 million in 2016. While conflict and violence in many parts of the world are still having an effect on global hunger, this report also focuses on the threat to food and nutrition security from climate variability and exposure to more frequent and intense climate extremes. Hunger is highest among those populations who are more dependent on agriculture for their livelihoods and in countries where farming is sensitive to rainfall and temperature variability and severe drought.

National and local governments are facing challenges in trying to identify measures to prevent and reduce risk and

address the effects of increased climate variability. These include defined roles between different ministries, 'siloed' approaches and actions, adaptation and risk management constraints, and a lack of technical capacity and data. Successful climate resilience policies and programmes include cross-cutting factors that affect the whole livelihoods and food system, including: climate risk assessments; dependable, multi-year and large-scale funding for stepping up climate-resilient investments for agriculture (including crop, livestock, fisheries, aquaculture and forestry sub-sectors), food security and nutrition; tools such as risk monitoring and early warning systems; emergency preparedness and response; vulnerability reduction measures, shock-responsive social protection, risk transfers and forecast-based financing; and strengthened governance structures in the environment-food-health nexus.

For the full report, visit [www.fao.org/3/I9553EN/I9553en.pdf](http://www.fao.org/3/I9553EN/I9553en.pdf)



# Action on the right to food

**T**he right to food is arguably the most violated human right in the world. Hundreds of millions of people (estimates for 2017 stand at 821 million) lack either physical or economic access to sufficient amounts of safe and nutritious food. Many face barriers to having enough income to purchase food to feed families and to acquiring rights and access to the resources – water, land, seeds, biodiversity – necessary to produce food. The root causes of hunger and malnutrition are linked to race, class, gender and access to resources, as well as the increasing influence of corporations at all levels. Those who seek to defend their own right to food, and that of their communities and peoples, often face persecution.

The *Voluntary Guidelines to support the Progressive Realization of the Right to Adequate Food in the Context of National Food Security* (the RTF Guidelines) have played a critical role in establishing consensus on how to implement the right to food since they were adopted by the UN Food and Agriculture Organization (FAO) in 2004. In the years since, the RTF Guidelines have been used to create toolkits and policy guidance to assist states with national implementation. A number of countries (Kenya, Mexico, Nepal, Bolivia, Egypt, Ecuador and others) have enshrined the right to food and/or food sovereignty in their constitutions, providing directives to policy-makers and an opportunity for redress to those whose right to food is violated. However, human rights are under increasing threat from the rise of authoritarian governments and nationalist forces worldwide and the declining authority of public sector policy-making, to the benefit of private-sector interests.

The challenge remains how to turn the right to food, through participatory processes, into concrete actions around the globe. An independent civil society report investigates the use and implementation of the RTF Guidelines, based on consultations with social movements, indigenous peoples, small-scale food producers

and other civil society organisations. Special recognition is given to the rights of indigenous women and girls as central to poverty reduction, food security and nutrition.

For more information, visit [www.csm4cfs.org/wpcontent/uploads/2018/10/EN-CSM-LR-2018-compressed.pdf](http://www.csm4cfs.org/wpcontent/uploads/2018/10/EN-CSM-LR-2018-compressed.pdf)



# Waste not, want not

**E**ach year more than half of all the fruits and vegetables produced globally are lost or wasted, according to a policy brief from the Global Panel on Agriculture and Food Systems for Nutrition (GLOPAN). More than a third of the food we produce never reaches the consumer's plate (including 25% of all meat produced). Seeds, nuts, dairy products and seafood are also highly perishable and susceptible to losses throughout the food system.

In low-income countries food loss happens during harvesting, storage, processing and transportation, whereas in high-income countries food is wasted at the retail and

consumer levels. These food losses directly impact the number of calories and nutrients that are available for consumption. For example, agriculture produces 22% more vitamin A than is needed globally, but after loss and waste, the amount available for human consumption is 11% less than needed. It is argued that policy actions across the entire food system should include: educating stakeholders; focusing on perishable foods; improving public and private infrastructure; encouraging innovation; and closing the data and knowledge gaps on food losses and waste.

For more information, visit [glopan.org/foodwaste](http://glopan.org/foodwaste)



## What's new at ENN?

### Adolescent nutrition

Established in December 2017, the ENN-led Adolescent Interest Group is an informal network of interested researchers and practitioners. Building on the upsurge of attention

surrounding adolescents, the purpose of the group is to create a space where interested parties can share experiences, disseminate research and other developments, and identify future areas of collaboration. Anyone interested in joining the group should contact Emily Mates;

[emily@ennonline.net](mailto:emily@ennonline.net)

ENN has established a thematic area for adolescent nutrition within en-net. Several members of the Interest Group are acting as 'Expert moderators', answering questions or providing information in all areas of adolescent nutrition.

[www.en-net.org/forum/29.aspx](http://www.en-net.org/forum/29.aspx)

### ENN support to the Global Nutrition Cluster (GNC)

The GNC hosted its three-day annual meeting in Amman, Jordan in October 2018, attended by over 100 participants. A special one-day event included presentations from country delegations from Yemen and Sudan highlighting the nutrition challenges in both countries.

ENN provided support for the meeting in developing background papers and presentations for the side event and country presentations for the main meeting from Somalia (expanded criteria for treating acute malnutrition), Yemen (infant and young child feeding), South Sudan (assessment), Bangladesh (preparedness and experiences on continuum of acute malnutrition care in Cox's Bazar), Kenya (scale-up of high-impact nutrition interventions), and Niger (humanitarian development nexus). Meeting reports, PowerPoint presentations and working group outputs are available at: [nutritioncluster.net/what-we-do/events/](http://nutritioncluster.net/what-we-do/events/)

### Field Exchange (FEX)

*Field Exchange* 59 is due out in January 2019. FEX 60, due out in May 2019, will be a special edition on the continuum of acute malnutrition care. Visit: [www.ennonline.net/fex](http://www.ennonline.net/fex)

### Humanitarian Development Nexus (HDN)

ENN's work on the HDN involved a second case study undertaken in Somalia in late 2018. Over a one-week period ENN's technical directors worked in Mogadishu and Dollow with the Nutrition Cluster Coordinator, meeting government, development partners and national agencies responsible for the ongoing and large-scale humanitarian response and longer-term resilience-building efforts. A blog from this visit can be found at: [www.ennonline.net/mediahub/blog/somaliablog](http://www.ennonline.net/mediahub/blog/somaliablog). A full case study report is available at: [www.ennonline.net/attachments/3038/HDN-Report\\_2081\\_20Dec18.pdf](http://www.ennonline.net/attachments/3038/HDN-Report_2081_20Dec18.pdf)

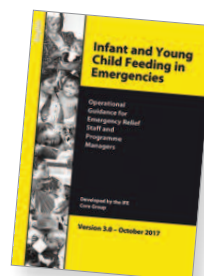
### Infant and young child feeding in emergencies (IFE)

ENN coordinates an interagency collaboration on IFE called the IFE Core Group, which produces guidance and resource material to support appropriate and timely response. The IFE Core Group is developing a new membership structure and way of working which will be shared in early 2019.

The *Operational Guidance on Infant and Young Child Feeding in Emergencies*, produced by the IFE Core Group, is now available in English and French. Arabic, Spanish, Bahasa Kiswahili, Bangla, Hindi and Portuguese language versions will be produced and available in early 2019.

[www.ennonline.net/resources/operationalguidancev32017](http://www.ennonline.net/resources/operationalguidancev32017)

The result of an ENN/UNICEF/WHO collaboration to help apply normative guidance to humanitarian situations, WHO has released guidance on HIV and infant feeding in





emergencies, *HIV and Infant Feeding in Emergencies: Operational Guidance*. Geneva: World Health Organization 2018. [www.who.int/nutrition/publications/hiv-aids/hiv-if-emergencies-guidance/en/](http://www.who.int/nutrition/publications/hiv-aids/hiv-if-emergencies-guidance/en/)

Funded by USAID/OFDA, ENN will undertake a review of complementary feeding in emergencies in the coming months. For more information visit:

[www.enonline.net/ifecoregroup](http://www.enonline.net/ifecoregroup)

### Management of at-risk mothers and infants under six months (MAMI)

Version 2 of a tool for community-based MAMI is now available online: [www.enonline.net/c-mami](http://www.enonline.net/c-mami). The tool has been integrated within the updated FANTA CMAM training resource, also now available. More details of these materials, along with research and experiences in MAMI, are featured in a special section of *Field Exchange 58*, available online at: [www.enonline.net/fex58/mamispecialsection](http://www.enonline.net/fex58/mamispecialsection)

ENN has co-authored several MAMI papers that have been published:

- Arafat Y, Islam MM, Connell N, Mothabbir G, McGrath M, Berkley JA, Ahmed T, Kerac M (2018). *Perceptions of Acute Malnutrition and its Management in Infants Under 6 Months of Age: A Qualitative Study in Rural Bangladesh*. Clinical Medicine Insights: Pediatrics, Volume 12: 1–10 2018. [researchonline.lshtm.ac.uk/4647776/1/Perceptions-of-Acute-Malnutrition-and-its-Management-in-Infants-Under-6-Months-of-Age.pdf](https://researchonline.lshtm.ac.uk/4647776/1/Perceptions-of-Acute-Malnutrition-and-its-Management-in-Infants-Under-6-Months-of-Age.pdf)
- Islam MM, Arafat Y, Connell N, Mothabbir G, McGrath M, Berkley JA, Ahmed T, Kerac M (2018). *Severe malnutrition in infants aged <6 months – Outcomes and risk factors in Bangladesh: A prospective cohort study*. Matern Child Nutr. 2018; e12642. [doi.org/10.1111/mcn.12642](https://doi.org/10.1111/mcn.12642)
- Kerac M, Frison S, Connell N, Page B, McGrath, M. *Informing the management of acute malnutrition in infants aged under 6 months (MAMI): risk factor analysis using nationally representative demographic & health survey secondary data*. Peer J:

[www.enonline.net/ourwork/research/mami](http://www.enonline.net/ourwork/research/mami)



### SUN en-net

The SUN forum area on en-net, [www.en-net.org/forum/26.aspx](http://www.en-net.org/forum/26.aspx), is a space for anyone involved in the SUN Movement, including national ministry and government representatives, civil society organisation representatives working at sub-national level and global network partner representatives, to open discussions, pose questions and engage in debate and sharing around SUN processes and related initiatives.

The forum is supported by technical moderators who are available to contribute to discussions and to direct people to helpful resources. Lynette Neufeld from GAIN and SanSan Myint of UN REACH are the current specialist-appointed moderators.

Recent discussions have included how to calculate and understand the average annual reduction rate (AARR) of stunting, advice on developing a roadmap and strategy for a national SUN Civil Society Alliance, which countries have

strong nutrition information systems, and what features make a good model.

Alongside the forum area dedicated to SUN-focused discussions, participants can access the 19 other en-net forum areas ([www.en-net.org](http://www.en-net.org)), which cover technical nutrition topics, including assessment, prevention and treatment of acute malnutrition, multi-sector nutrition programming, adolescent nutrition and prevention and management of stunting.

Participation from anyone working in nutrition is welcome. If you have a question or are seeking advice on anything you need to know, go to [www.en-net.org](http://www.en-net.org) and use the 'Submit a new question' function.

### SUN Knowledge Management (KM)

The ENN team is working on developing case studies examining multi-sector nutrition programming in Niger, Ethiopia and Bangladesh. This work will focus on documenting learnings around Niger's approach of 'communes de convergence', Ethiopia's Seqota Declaration and Bangladesh's National Plan of Action for Nutrition II. Field work in Niger and Ethiopia was conducted in October and November 2018 and the report will be ready in March/April 2019. The video series summarising lessons from the first round of MSP case studies has now been completed with an update from Senegal:

[www.enonline.net/mediahub/video/senegalmsp](http://www.enonline.net/mediahub/video/senegalmsp)

Work has also focused on mapping SUN networks in ENN's SUN project target countries, documenting experiences and good practice within networks. (See article in this issue on page 15)

### Wasting prevention

ENN is working on a Research Prioritisation (RP) exercise for the UK Department for International Development (DFID) through the MQSUN+ project on the critical subject of wasting prevention. A short document providing information about why this exercise is important and ENN's approach is available here:

[www.enonline.net/chnriwastingprevention](http://www.enonline.net/chnriwastingprevention)

### WaSt

ENN's work on the links between child wasting and stunting (WaSt) has led to two new articles published in late 2018. These are:

- *Improving screening for malnourished children at high risk of death: A study of children aged 6-59 months in rural Senegal* [https://www.enonline.net/attachments/3033/Improving\\_screening\\_for\\_malnourished\\_children\\_at\\_h.pdf](https://www.enonline.net/attachments/3033/Improving_screening_for_malnourished_children_at_h.pdf)
- *Concurrent wasting & stunting among boys and girls aged 6-59 months in Niakhar, Senegal* <https://onlinelibrary.wiley.com/doi/epdf/10.1111/mcn.12736>

Each of these provides us with more information and evidence as we increase our understanding of the linkages and the ways in which we can identify those who are most at risk of mortality. Further work will continue in this area. For more regular updates, visit [www.enonline.net/resources/search?tag=34](http://www.enonline.net/resources/search?tag=34)





# Stunting prevention in Indonesia: Raising awareness at the sub-national level



(From left) **Akim Dharmawan** (PhD) is the SUN Movement secretariat manager at the Ministry of National Development and Planning (Bappenas) in Indonesia. He has worked as a nutritionist and public health practitioner for more than 15 years, with experience in programme planning and management, behaviour change intervention, community development and monitoring and evaluation.

**Pungkas Bahjuri Ali** (PhD) is the Director for Public Health and Nutrition at the Ministry of National Development and Planning (Bappenas), and secretary of the technical team for the SUN Movement Indonesia. He works closely with both national and sub-national governments in aligning health and nutrition programmes.

**Dr Entos Zainal** is the Deputy Director for Community Empowerment and Public Nutrition at the Ministry of National Development and Planning (Bappenas). He is an expert in public health and nutrition programme planning and implementation.

**Ardhianti** has an MSc in public health and is part of the team responsible for the planning and technical coordination of Healthy Lifestyle Community Movement and integrated nutrition intervention for accelerating stunting reduction.

**Evi Nurhidayati** has worked as a programme assistant in the SUN Movement Secretariat of Indonesia at the National Development Planning Agency since 2016.

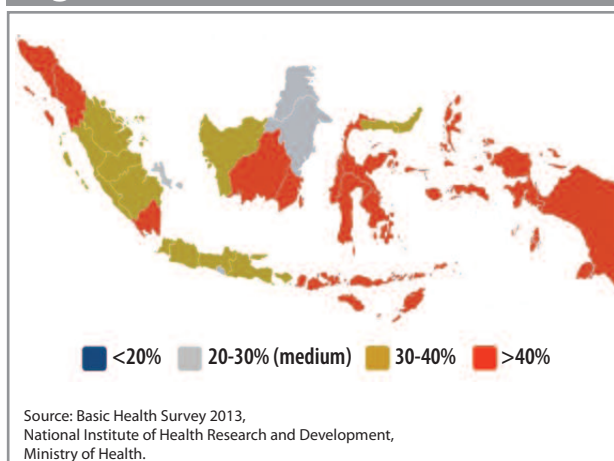
**Nur Akbar Bahar** has worked as a programme assistant in the SUN Movement Secretariat of Indonesia at the National Development Planning Agency since 2016.

## Introduction

Indonesia is a lower-middle income country and the largest economy in Southeast Asia<sup>1</sup>. Rapid economic growth over the past ten years, coupled with government investments in social development, have led to the poverty rate being halved since 1999, to 10.9% in 2016<sup>1</sup>. However, the benefits of economic growth do not align with an improvement of social and health indicators, and 36% of children under five (CU5) are stunted (low height for age), while 14% are affected by wasting (low weight for height)<sup>2</sup>.

The national prevalence of stunting (affecting nearly 9 million children under five) has been slowly decreasing for the last decade. However, the reduction of stunting was less than expected (it was 40% in 2007 and 37.2% in 2013)<sup>3</sup>. Although prevalence is similar across the 34 provinces of Indonesia, east Nusa Tenggara Timur province has a prevalence of 70%, whilst Jambi province has the lowest prevalence at 37.9%<sup>3</sup>. Children affected by stunting are found among both rural and urban populations (42.1% and 32.5%, respectively)<sup>3</sup>. Additionally, almost a third (29%) of CU5 among the wealthiest households are stunted, which suggests that stunting is not heavily influenced by location and economic status.<sup>3</sup>

**Figure 1** Geographical distribution of stunting prevalence in Indonesia



## Coordinating stunting efforts

Stunting prevention efforts have not been effectively implemented for many years, initially because nutrition was only associated with the health sector (Ministry of Health) and nutrition-specific interventions. Failure to address malnutrition may be costing the Indonesian economy an estimated 17.5–26 million USD (260–390 billion IDR) per year of Gross Domestic Product (GDP). Nutrition-specific and sensitive interventions do not appear to be fully coordinated at all levels in terms of planning, budgeting, implementation, and monitoring and evaluation, and this has been recognised

<sup>1</sup> [www.worldbank.org/en/country/indonesia/overview](http://www.worldbank.org/en/country/indonesia/overview)

<sup>2</sup> <https://globalnutritionreport.org/nutrition-profiles/asia/south-eastern-asia/indonesia/>

<sup>3</sup> Basic Health Survey (Risked) 2013, Ministry of Health, Republic of Indonesia



as a key challenge for stunting prevention. Additionally, lack of local capacity at district, sub-district and village levels are constraints that still need to be addressed.

In recognition of the need to tackle stunting, the country launched a national strategy called *Integrated Nutrition Interventions (INI) for Stunting Reduction and Prevention* in August 2017. None of the activities in INI are 'new' activities, but the strategy (backed by the President, Joko Widodo) sets out guidelines for national and sub-national stakeholders to accelerate stunting prevention and reduction. The INI consists of five pillars: 1) commitment and vision of the state's highest leaders; 2) National campaign focusing on behaviour change; 3) Convergence, coordination and consolidation; 4) Food security policy, and 5) Monitoring and evaluation.

To improve the quality of multi-sectoral interventions (such as those involving agriculture, education and social protection), a geographically-focused plan was designed to create awareness and commitment for INI in 100 districts (out of 514 districts in Indonesia) in 34 provinces in 2018. The choice of districts was based on a number of criteria, including number of CU5 and prevalence of stunting and wasting in CU5 and prevalence of poverty. There are plans to expand the coverage to a further 160 districts in 2019.

### Strengthening sub-national action

The first pillar of INI aims to strengthen sub-national government's commitment and capacity and a National Rembuk Stunting event (a type of 'stunting bootcamp' or summit) was held in November 2017 in Jakarta with the active participation of eight districts. Nineteen government ministries/institutions came together for the event, including development partners, civil society, academia and professional organisations, and the media. The event focused on sharing best practices at global and national level, as well as village experiences on how to strengthen coordination between national and local governments for programme effectiveness. A workshop with key leaders from the districts to develop an integrated action plan. The second and third National Rembuk Stunting events were held in March 2018 in Jakarta. In total, 26 districts participated in the second and third Rembuk (with 13 districts at each one).

### Platform for district-level events

Rembuk Stunting has provided a new platform (to which SUN Movement networks have also been invited) for information sharing and learning between national and sub-national governments with a focus on planning and budgeting for INI. The national-level Rembuk Stunting events were followed by similar events at provincial and district level, with funding coming from the government budget and development partners/donors. So far, five districts out of 34 from the national event have conducted district and/or village level Rembuk Stunting. These were attended by local private sector, local academia, professional organisations, and local civil society organisations who have all contributed to discussions on stunting reduction and prevention at the district/village level.

Bappenas, with support from the World Bank, has developed a Rembuk Stunting curriculum along with facilitator guidelines, which includes stunting and other related health data for each district for discussion among district key leaders, a work plan with an activity and timeline template, and a health and nutrition dashboard. District government

President Joko Widodo, seen here visiting a Posyandu (health clinic for women and children) in Sukabumi District in West Java, has called for an integrated action plan, which includes interventions in dietary habits, parenting and sanitation

Communication and Community Service Bureau, Ministry of Health



have learnt how to use and analyse health and nutrition data, developed recommendations with an evidence-based approach, chosen priority actions based on local problem analysis, and ensured adequate budget to fund selected priority actions. Villages have been urged to use Village Funds (from central government) to reduce stunting by investing in infrastructure, such as health clinics and water and sanitation facilities, and there are reports from the Ministry of Villages that health and nutrition activities have increased among focus districts.

### Addressing challenges

It has been noted that capacity gaps between districts need to be properly assessed, with a follow up district planning session performed by either central or provincial government after a Rembuk Stunting event. Local universities/experts also need to be more widely included to provide technical advice for district governments. Coordinating working with sub-national governments is challenging due to lack of staff and heavy workloads at this level. Selecting a focal point for each Dinas (sub-national government organisations for health, education, village development, public work and housing, etc) and setting/agreeing regular meetings is crucial to ensure everyone is on board. Finally, advocacy tools and communication strategy should be developed to ensure the sustainability of the commitment. In addition, specific governor/mayor regulations are needed to justify and sustain the implementation of the INI.

### Lessons learned and next steps

Rembuk Stunting is shaping up to be an effective advocacy tool for sub-national government leaders and has already provided opportunities for direct learning from field visits between focal districts to increase ownership of INI. Moreover, it has built capacity at sub-national level through improved knowledge and skills in planning, coordinating and monitoring INI, and the initial 34 targeted districts have now developed action plans. Further Rembuk Stunting events are planned to cover the remaining focal districts, and the monitoring and evaluation framework (including visits to each village) is being finalised so that progress can be reported.



Veronica Kirogo



Jane Wambugu

# Working together for nutrition: Changes in Kenya's health and agriculture ministries



ENN's **Lillian Karanja** interviewed **Veronica Kirogo**, Deputy Director of Nutrition and Dietetics Services and the Head of the Nutrition and Dietetics Unit housed in the MoH, and **Jane Wambugu**, Deputy Director of Agriculture and Head of the Agri-nutrition Department in the MoA, about their views on how to bring nutrition and agriculture closer together.

## Introduction

The Government of Kenya is committed to improving food and nutrition security, which is a basic right enshrined in the country's constitution. Efforts to strengthen agriculture-nutrition linkages is evident in the various policies and strategies and the realignment of nutrition units in the Ministries of Health (MoH) and Agriculture (MoA). The appointment of a Head of Nutrition MoH who has a background in agriculture and converting the Home Economics department within the MoA into an Agri-nutrition department reaffirms this commitment. One year on from this vision, how are the two sectors working together?

### 1. We understand that there has been an increased focus on nutrition within the MoA. Can you explain how this came about when you were there?

**Veronica (MoH):** I headed the food and nutrition unit in the MoA for five years and later, Home Economics, now known as Agri-nutrition department, which is a policy-level branch. This involved working with the MoH when we realised that there was a missing link between agriculture and nutrition. A food and nutrition linkages technical working group was set up to address this, which falls under the MoH but is chaired by the MoA. This technical working group has been instrumental in developing strategies with increased nutrition focus for the MoA, such as the food composition tables, which were co-published to inform key programming areas cutting across both ministries. We also have the Kenya food recipes, which analyse and compute the nutritive value of local foods to guide households and communities to make informed decisions on food preparation.

The Food Security Policy [launched in 2012] was also key in ensuring that the conversation is not just about food production and access in the MoA, but also that dietary diversity and overall nutrient improvement are considered alongside increased food production. The development of the policy implementation framework has been completed in 2018.

### 2. Tell us about recent changes to upgrade nutrition in the MoA. Why was this necessary and what will it result in?

**Jane (MoA):** We are now calling it the Agri-nutrition Division, which is a transition and elevation from the previous Home

Economics branch, which only considered household consumption and utilisation. With agri-nutrition, every stage of the agricultural value chain from food production to household food consumption is considered. The main implication [of this move] is first within the Ministry itself. A transition to agri-nutrition means the nutrition arm is elevated to a position to influence nutrition considerations within all five departments of the MoA: Fisheries, Livestock, Research, Irrigation and Crops. This also has implications for funding, as we will be able to position agri-nutrition as a project which would then obtain resources that are crucial in enabling us to embed nutrition in the value chain of all five departments in the MoA. Nutritionists, however, are currently only in the Department of Crops under the home economics programme. This is why we changed it to agri-nutrition so that we are able to cut across the other departments. So far we have been able to sensitise some departments, such as livestock and fisheries, where we already have desk officers.

### 3. What are the key policies or frameworks in which these two ministries align around nutrition?

**Veronica:** The key policy document that guides nutrition is the National Food and Nutrition Security Policy, which is the government blueprint in terms of nutrition commitment and strategies. The National Nutrition Action Plan is actually the implementation framework of the nutrition component in that policy. The action plan is not just developed by the MoH, but also by other sectoral ministries (Education, Agriculture, Devolution, Labour and Social Protection) that create enabling environments for nutrition. Through the food and nutrition linkages technical working group, the two ministries have jointly developed strategies such as the National Healthy Diets and Physical Activities Guidelines, Kenya Food Composition Tables and Kenyan Food Recipes.

### 4. Does the closer alignment mean that programmes on the ground will converge or become more integrated, and can you describe how you work with the county level to help them deliver nutrition programmes?

**Veronica:** A recent example is the flour-blending initiative led by the MoA with the Nutrition & Dietetics Unit [in the MoH] in an advisory role on the nutritive value of flour blending. We have been working together to develop flour-



blending standards and discussing how the initiative is going to be implemented.

Considering that both health and agriculture are devolved functions, at national level our mandate is to develop policies, capacity building to the counties and providing technical assistance where needed. At national level, we have been developing several policies and strategies, but in consultation with the counties because that's where implementation happens. Once we launch a strategy [such as the Healthy Diets and Physical Exercise] we do not want it to stay at the national level, so we are mobilising resources to accompany the national launch with dissemination at county level. In terms of capacity building, we have been running capacity assessment to identify the gaps and when we identify the gaps, especially in technical areas, we organise training for trainers so that the county is able to cascade the training to the facility level and to the community.

**Jane:** There is need for a higher-level coordination body to align the joint actions that can actually be done by the ministries mandated to roll out the overarching policy. The 'higher level', structures such as the proposed Food and Nutrition Security Council, look promising, but the roll-out needs to be worked out; for example, around resources and the working modalities.

We have two role model counties, Muranga and Nakuru, that have sensitised [their staff] on the agri-nutrition resource manual with stakeholders such as universities and they have contextualised the key messages to their county needs. They used county resources to conduct the sensitisation. Recently we went on a programme of 'sustainable diets for all' in Nakuru county and the Members of County Assembly were in the forum discussing agri-nutrition improvement because of the sensitisation. Muranga County Executive Committee is very strong and they are discussing policies the national level had not thought of, such as organic agriculture to ensure food safety and security. This is what the national policy can trigger the county to do – domesticate national policies and use it at the county level.

*[Veronica was able to allot more time for the interview, so the following responses outline her thoughts on aspirations for convergence and on the challenges remaining.]*

### 5. Are you seeing an increase in the Government allocation to nutrition in your two ministries? If so, what specifically is the increased budget for?

The MoH has developed a financial tracking tool for the allocation of budgets to nutrition, which is a useful advocacy tool. Finance officers in about eight counties so far have been trained to cost the various activities and interventions. However, we have barely scratched the surface, because there are so many counties that have not been sensitised, but we are currently trying to mobilise resources to roll this out.

### 6. What other gains are you seeing or hoping for in bringing the two sectors to work more closely together?

When looking at the two sectors, nutrition-specific interventions alone cannot contribute to stamping out malnutrition. We require the food security sector to work with us so closer alignment of the two ministries may help us to realise sustainable gains, because the Ministry of Agriculture will ensure that the food is of the right quality and quantity and that it is safe.

### 7. What main challenges still remain?

The main challenge is inadequate funding in both health and agriculture; even more so since the Government recently imposed a budget freeze on all departments. The budget allocation [within MoH] for nutrition is very minimal. The Government has been improving the amount for emergency responses but when it comes to the routine nutrition activities, we are currently mobilising resources, which has also been a challenge because you find that most of the partners we have are based in the areas where crises arise. Over half the counties are underfunded in terms of nutrition improvements and this also includes counties with pockets of high malnutrition. These counties have very high needs for interventions, but due to current budget restraints they do not really receive enough of our current services.



WFP/Martin Karim

# Building parliamentary networks for nutrition in West Africa



An increasing number of countries are recognising the potential role that parliamentarians can play in highlighting nutrition. ENN's **Ambarka Youssoufane** interviewed some of the members of parliament (MPs) from Chad and Burkina Faso to find out their thoughts on advocating to improve the nutrition situation within their countries and throughout the region.

## MPs working together at the regional level

A west and central Africa regional parliamentary network for nutrition was set up in 2013 following a nutrition workshop in Brazzaville, Republic of Congo, with initial membership from 10 countries (Burkina Faso, Cameroon, Cape Verde, Chad, Central African Republic, Mali, Mauritania, Niger and Senegal) participating. A number of countries, including Burkina Faso and Chad, initiated country-level parliamentary networks following this meeting, but it has been challenging for countries to take leadership in this and to move the nutrition agenda forward at parliamentary level.

The regional office of Action Against Hunger (ACF) also started supporting countries and the regional network, organising a side event during the 2016 launch of the Global Nutrition Report in west Africa to sensitise parliamentarians on nutrition issues in the region and to encourage advocacy for nutrition. A 2017 joint meeting of parliamentarians from 20 countries (co-hosted by UNICEF, the inter-Parliamentarian Union and Alive & Thrive) focused on four main themes:

1. The significance of nutrition security for development and economic growth;
2. The problems of undernutrition (stunting, wasting and micronutrient deficiencies), the emerging concern of childhood overweight and obesity in the region and examples of success in addressing them;
3. Overcoming structural and environmental barriers to nutrition and how parliaments can leverage their powers

to effect legislative, budgetary and policy advances in the promotion of maternal and child nutrition; and

4. Creating political commitment in taking a pro-nutrition agenda forward.

All participating parliamentarians committed to create or strengthen existing networks in their respective countries and to a set of two or three engagements in each country. To date 11 out of the 20 have set up a national parliamentary network for nutrition. Many of them were able to organise feedback on the regional meeting to their national parliament and some have even organised advocacy activities.

Setting up a parliamentary network is particularly challenging, given that parliamentarians do not have extensive knowledge of nutrition, have a high turnover rate and lack funding to organise themselves or conduct advocacy activities. Partners such as UNICEF, ACF and the SUN civil society networks have carried out some capacity building training, but there is a high turnover rate in parliaments. In Senegal, for example, some of the initial network leaders have not been re-elected. The support of external partners such as UNICEF is crucial to developing a parliamentary network for nutrition. In Senegal, they have produced a guide to action by parliamentarians for nutrition to overcome the challenges of parliamentary turnover and nutrition knowledge.



Participants of the IPU/UNICEF Seminar on investing in nutrition with members of parliament at the Parliamentarian Seminar 2017, Burkina Faso

© The SUN Movement





In Lake Chad, the focus is gradually shifting from emergency relief to strengthening the country's long-term resilience

## Chad



Three MPs who are also members of the country's Parliamentary Network for nutrition (from left Rakis Ahmed Saleh, Selguet Achta Aguidi and Sodja Addjobma Nikamor) attended the first meeting of the West and Central African network in 2013, which prompted them to set up their own country network. This has grown from nine members in 2014 to a current membership of 22 MPs, due in part to information and awareness days for parliamentarians organised by the network.

*"I must admit that, as Chadian parliamentarians, we were ignorant of the problem when we arrived in Brazzaville. It was through the discussions that we became aware of the seriousness of the situation and of the problem that existed in many of our regions. From the presentations, we learned that the situation here was very serious. We had not really been aware of it before. When we got home, we reported the issue to the President of the Assembly, both in writing and in person."* (Rakis Ahmed Saleh)

Network members have been actively involved in the development of the national food and nutrition policy, attending meetings with various government ministries. MPs have also visited nine of the country's 23 regions accompanied by UNICEF, reporting on these missions to the network and the National Assembly on what they describe as the "raging malnutrition problem" in the country. These reports will feed into the nutrition action plan, which is being finalised.

*"We organised a caravan to N'Djamena, visiting the three main hospitals to familiarise ourselves with the situation of hospitalised malnourished children. We were struck by the alarming state of these children on arrival, some suffering from chronic malnutrition and some from moderate or incipient malnutrition. Following these hospital visits, we scheduled some regional visits."* (Selguet Achta Aguidi)

The parliamentarians stressed that these visits were not one-offs: they saw their role as raising awareness among the relevant authorities in each region to take over responsibility for monitoring activities to combat malnutrition, and that the MPs would be following up on such actions. Some regions

already have nutrition committees on the ground, but MPs have a role in awareness raising. Parliamentarians can support or encourage administrators to set up frameworks where they do not already exist.

*"There are focal points at regional, departmental and sub-prefecture levels. We lobby governmental and decentralised authorities. We support government action. We complement it – indeed, we help to raise awareness about this scourge. On the ground we have also seen that we are getting the message out there, the call to tackle malnutrition, in a variety of ways. We also see that the local authorities are somewhat lacking in knowledge, but thanks to us they are learning how serious the situation is. We feel that the message at this level is very important."* (Sodja Addjobma Nikamor)

The MPs stressed the importance of raising awareness about exclusive breastfeeding and nutrition during the first 1,000 days of life; without such an understanding among parents, communities, healthcare and social workers, they felt that "even if we vote for an additional budgetary provision, without awareness that would be a wasted effort." Initiatives such as community radio with broadcasts on nutrition in local dialects can be useful in disseminating education messages.

The network is currently involved in a number of initiatives, including drafting a bill to penalise the import and sale of non-iodised salt; legislation for applying the marketing code for breastmilk substitutes; and legislation for the fortification of foods with iron, folic acid and vitamin A. They have also considered proposing a bill to prohibit the marketing of Plumpy'Nut, the therapeutic food used to treat children with malnutrition, which they have been informed was widely available for sale but being used by adults.



## Burkina Faso

Excerpts from an interview with **Gnoumou Nissan Boureima** (left), a parliamentarian and Mayor of Houndé, a department of the province of Tuy in the Haut-bassin region in the west of the country, who trained as a nutritionist at the University of Constantine in Algeria.

### *What is your role in the parliamentarian network for nutrition of Burkina Faso (BF)? How was it created?*

I am the coordinator of the parliamentarian network for nutrition in Burkina Faso. After graduating from university, I joined the Directorate of Nutrition at the Ministry of Health for seven years. In 2015 I was elected as a parliamentarian in the National Assembly and I thought that the best way to move the nutrition agenda is to create a parliamentarian network for nutrition. The network was created in 2016 and now has 35 members.

### *What is the objective of the BF parliamentarian network for nutrition?*

The network's aim is to promote nutrition and contribute to the fight against malnutrition from the National Assembly perspective. Parliamentarians can make the government fund nutrition interventions to fight malnutrition, in addition to donor funding. Currently, most nutrition interventions in the country are funded by external donors, but this funding is not sustainable and we need to get the government to consider nutrition as a development priority.

### *How is the network working to achieve its objectives? What activities have been organised to date?*

None of the parliamentarians are nutritionists (although some are health professionals), so one of the first activities was to sensitise our fellow parliamentarians about nutrition, with the help of the SUN networks (the UN network, the civil society network and the government focal point). The parliamentarian network has been working to develop and adopt laws on nutrition, such as enforcing the International Code on the Marketing of Breastmilk Substitutes and measures to exclude the raw materials for producing ready-to-use therapeutic food from taxes. We have also succeeded

in adopting a nutrition budget line for nutrition under the 2016 finance law, which started with one billion CFA (US\$1.75 million) and is planned to increase to three billion CFA (US\$5.25 million) in 2020.

### *Is the parliamentarian network part of the SUN Movement in BF?*

Yes, we participate in the SUN multi-sector platform activities, including developing the national multi-sector nutrition action plan and the food security policy. I personally take part in the SUN country call with the SUN focal point and other network coordinators.

### *What relationship do you have with other parliamentarians outside BF?*

In west and central Africa we have created a regional network for nutrition and we held an event here in BF to bring together parliamentarians from 20 countries. We have also had discussions with Peru, where parliamentarians were able to make the government reduce the rate of malnutrition through ambitious nutrition interventions.

### *As a network, do you have external support?*

Yes, we have support from the SUN civil society network, which provided information and financial support to participate in international workshops. The SUN UN network also supported us in organising the parliamentarians' sensitisation workshop in BF.

### *Is the cause of nutrition heard by government? By parliament?*

In parliament we are heard very well, but within the government it's just starting. I came from the government side and joined parliament, so I know that nutrition is diluted within the health sector. Nutrition is just starting to be heard by the government, because, for example in the Ministry of Health, a budget line has been created for nutrition and was even mobilised. However, it remains for us to create a budget line for each nutrition-sensitive ministry, such as agriculture, etc.

### *What are the factors that allowed for the creation of a budget line for nutrition?*

The advocacy conducted by the SUN civil society network and supported by the parliamentarian network was able to convince some parliamentarians to support the idea. There was also a favourable environment due to the fact that a new development plan was adopted in BF, one of the objectives of which was to develop human capital in the country. So, we started by saying there is no way the government can develop human capital without fighting malnutrition. This logic was understood by the government, which accepted to create a budget at least at the Ministry of Health level. We will need to use other tools to get the government to create nutrition budget lines in other nutrition-sensitive ministries.



Mid upper arm circumference (MUAC) measurements being taken at a clinic in Burkina Faso to assess nutritional status

©The SUN Movement



# Setting up SUN Networks in Fragile and Conflict Affected States

ENN's SUN Knowledge Management team



The SUN Movement is “a collection of national movements led by governments committed to scaling up nutrition impact and results, along with partners who are aligned to support their goals” (SUN Road Map 2016-2020). A unique characteristic of the SUN Movement model is the SUN Networks devised to formalise the multi-stakeholder approach of the Movement. At a country level, four networks are recommended – a Civil Society Network, a Business Network, a UN Network and a Donor Network – to bring together key actors who are able to influence nutrition outcomes. Having networks aligned behind government is seen as critical to institutionalising, funding and supporting government commitments on nutrition. The Movement has taken root in diverse country contexts; thus, the Networks are also operating differently, and to differing degrees in these widely varying settings. In addition to country-level chapters of the SUN Networks, there is a global support structure with host organisation(s) for each of the four Networks.

Between March and June 2018, ENN completed a Network Mapping exercise, led by ENN's team of regional knowledge management (KM) Specialists in the 17 SUN countries in which ENN works under the Technical Assistance for Nutrition (TAN) programme. Work was carried out through discussions with the Network leads and others working at a country level, utilising ENN's existing networks in SUN at country level. Around 50 people (mainly Network convenors, but also other key stakeholders) from the 17 countries were interviewed about the progress of Networks on the ground to obtain examples of success and good practice, as well as an overall picture of how the Networks are evolving across all the countries. ENN's focus in its TAN work is on 17 fragile and/or conflict affected states (FCAS), as it is not yet clear how well the SUN Movement architecture can meet FCAS needs, and work in tandem with the humanitarian architecture to achieve longer-term nutrition gains.

## The Civil Society Alliance (CSA) network in Myanmar: Making strides

In 2014-15, the CSA in Myanmar was formalised with support from Save the Children. The Network was set up with a steering committee of 10 members, seven of whom are international non-governmental organisations (INGOs) and three local NGOs. The SUN CSA is run with three dedicated staff based in Save the Children's country offices, whose main focus is on the CSA work. Activities have included: supporting the Government to develop the Multi-sectoral National Plan of Action on Nutrition and promoting the International Code of Marketing of Breast-milk Substitutes and reporting 'Code' violations.

An important recent development of the CSA is the establishment of the first subnational chapter in the Ayeyarwady (Delta) region. This sub-national CSA platform has brought together not only different nutrition-implementing NGOs in this district, but also the regional government, parliamentarians and other high-level officers working in nutrition.

According to the CSA convenor, a key learning from their experience at both national and sub-national level is the power of speaking with one voice as a stakeholder group, which gets listened to and taken seriously in a way that any individual agency would not. This has been a great incentive for many of the CSAs to continue to be involved.



## The Academia and Research Network in Pakistan: Clarifying roles

The Academia and Research Network, formed in May 2016, aimed to harmonise research on nutrition and bridge the gap between academia and policy formulators and practitioners. Initially, organisations were reluctant to engage with the platform as their role was not clear. However, this concern was reduced through meetings with the SUN Academic Network coordinator, who detailed how the platform would connect research and academic bodies at a country and global level. As a result, 40 academic institutions and research organisations signed up and developed an operational plan.

Work has included: national research prioritisation exercise; securing funding for research (for example, the Higher Education Commission in Pakistan also provided funding for 104 different research studies); developing activities jointly with the SUN Business Network (for example, in Peshawar where a fortified noodles programme led by a university has been linked to the one of Pakistan's largest food manufactures (Knorr)); and conducting trainings on nutrition research. A knowledge management centre is planned, where all studies and relevant documents will be archived and accessible through a web portal.



Nutritional product development in Pakistan is a model for other countries and plays an important role in decreasing child malnutrition throughout the region

WFP/Rein Skallerud

The Network mapping exercise revealed a number of areas that are useful to consider when setting up Networks in FCAS, including:

1. *Ensure government support for Networks:* Stakeholders noted that government support and leadership of the Networks is essential. Networks do not simply grow organically; rather, government support is needed to support the initial set-up and bedding in of new Networks. As a first step in this, governments need to be convinced of the 'value add' of Networks. Furthermore, it is important that Networks can maintain independence to promote accountability. The most effective network-

government relationships observed seemed to be where there is a constructively critical relationship and strong communication around activities and priorities. The findings reflect those noted in the 2015 Independent and Comprehensive Evaluation (ICE) of the SUN Movement report, which stated: "... country level ownership and leadership are the single most important determinants of success: buy in... by governments... was critical for ensuring the higher prioritisation of nutrition, a clear commitment to results and enhances capacity to deliver." It is down to governments to ensure that the Networks get 'a seat at the table', with the government-appointed



A farmer at a WFP-FAO project in Tshikapa, Democratic Republic of Congo

WFP/Marco Fattini

## The UN Network in Democratic Republic of Congo (DRC): Improving alignment and working together

The UN Network in the DRC brought together eight UN agencies working on nutrition in the country (namely FAO, WHO, UNFPA, UNICEF, UNOPS, UNDP and UNHCR). It initially aimed to develop a joint multi-sector strategy on nutrition in the most vulnerable regions of the country. During a network retreat in 2016, agencies spent time considering their individual and collective role in tackling malnutrition in the country, and finalised a Road Map that aimed at increasing the coherence of actions and support joint planning around nutrition.

Work subsequently focussed on conducting a nutrition inventory in which UN nutrition interventions were mapped – in places where more than one agency was present, the UN Network group examined complementarity, gaps, opportunities for improved collaboration and optimisation of delivery mechanisms. This was seen as a useful tool by the Government as it provided visibility on nutrition programming beyond the work of the cluster in the country. Additional activities included: developing a common narrative for nutrition, developing joint funding proposals, conducting a policy review and supporting provincial nutrition committees, and the development of three provincial-level nutrition plans. Many factors have facilitated the success of the DRC UN Network, such as: ensuring all actors had a thorough understanding of using a multi-sector lens for nutrition, having strong technical people at all levels and having a good facilitation process.



SUN Focal Point playing a critical role as the formal leader of the SUN Movement in each country.

2. *Build on what is already existing in country:* One essential difference between Networks is those that bring stakeholders together for the first time, compared to those that are built into or on existing coordination structures and nutrition architecture that is already active. In many FCAS countries there is already a vibrant Nutrition Cluster Coordination Mechanism that can be adapted to SUN. Where there weren't already active coordination platforms in place, SUN is viewed as having brought something new to the country (for example, in Chad and Myanmar). However, in some countries where there were existing mechanisms in place, the Networks were sometimes seen as duplicative, and therefore not adding value. In other cases, SUN Networks have effectively built on existing mechanisms including humanitarian architecture (for example, Somalia and South Sudan).
3. *Avoid stop-start Networks:* It was noted by multiple interviewees that a lack of continuity of Networks at country level has limited the ability of Networks to become established players within the national nutrition architecture and to deliver on plans. As a result, a number of countries have been in a state of 'getting Networks

off the ground' for several years, rather than being able to reach an implementation phase to meet their goals and objectives. Changeover of leadership, stop-start funding, and "double hatting" of convenors with a full-time job were all reasons cited for this challenge around continuity. Stakeholders recommended additional funding for FCAS countries to ensure dedicated Network convenors and resources to ensure success and continuity. The example of Pakistan also shows the value of an initial investment and set-up period to embed and establish Networks and secure government buy-in.

4. *Take lessons from the Civil Society Network (CSN) mechanisms:* The CSN appears to be the most visible and most established of the SUN Networks in the 17 countries of focus. The mapping exercise revealed that the CSN in FCAS countries is often impressive in the size and range of membership, with robust processes of governance. Other Networks, it was noted, could take lessons from the CSN on how to establish themselves.
5. *No one size fits all:* Across the 17 FCAS countries there is enormous variation between Networks, while at global level a "blueprint" exists for how Networks operate; it is probably more appropriate for countries to base Network set-up and implementation on a mapping of existing mechanisms in-country and through a contextual analysis.

A mother feeds her young son in Cox's Bazar, Bangladesh



WFP/Shehzad Noorani

# Scaling up and improving nutrition in Kyrgyzstan's school meals programme



**Emma Khachatryan** (left) manages the school meals programme for the World Food Programme (WFP) in the Kyrgyz Republic. She has around 10 years' experience working in development programmes for young people, children and refugees.

**Nurshaim Tilenbaeva** (right) is a public health specialist and formerly worked as the Programme Policy Officer for Nutrition at the WFP country office in the Kyrgyz Republic.

## Introduction

The Kyrgyz Republic (KR) is a landlocked country in central Asia with a population of 6.2 million people. The country's nutrition situation has been steadily improving over the last decade, with a reduction in the prevalence of iron-deficiency anaemia in women of reproductive age and children aged 0-5 years (CU5), as well as a decrease in CU5 stunting from 23% in 2009 to 13% in 2014<sup>1</sup>. However, high levels of micronutrient deficiency (particularly anaemia and iodine deficiency) persist, pockets of high stunting prevalence remain in some regions (for example; 21% in Djalal-Abad and 16.4% in Naryn provinces) and there is an emerging problem of overweight in CU5 (7% in 2014)<sup>1</sup>. Wasting is relatively low, estimated at 2.8% in 2014. It is also estimated that 43% of school-aged children in KR have iodine deficiency and 32% are affected by vitamin A deficiency<sup>1</sup>.

Despite gradual improvements in the economy and a fall in poverty rates, poverty still affects a quarter of the population, especially in rural areas and among women and children. Poverty is linked to the low level of food security as the poor spend 68% of their budget on food. Food insecurity in the country is seasonal; it also correlates with poverty affecting 25% of the general population and 32% of children.<sup>1</sup> Dependency on food imports is also increasing, which makes domestic food prices susceptible to international price fluctuations.

## Optimising the school meals' programme

Since 2013, WFP has worked with the Kyrgyz government and multi-sector partners to improve the national school meals programme (SMP), in line with international quality standards, with the support from the Russian Federation and technical assistance of the Russian NGO Social and Industrial Food Service Institute. To date, 450 pilot schools have introduced improved school meals, representing 15% of schools and reaching 113,000 primary school children across the country's seven provinces. Under WFP, Kyrgyzstan's new Country Strategic Plan (2018-2022) will see 350 more schools receive financial and technical support to improve their meals.

Such support includes: providing technical assistance to schools, including assistance in the reconstruction and re-

equipment of school kitchens/canteens and the water and sanitation infrastructure; introduction of new nutritious menus; training of staff (management and cooks); and follow-up on daily menus. Partners have worked to develop national policy on school nutrition, as well as developing national capacity for the effective management of the SMP. The programme supports the replication and institutionalisation of diverse and nutritious meals in all primary schools for grades 1-4 (children aged 6-9 years old).

One of the main improvements to school meals has involved replacing the traditional 'bun and cup of tea' with a wide range of recipes and menus that meet nutrient requirements, including hot porridges, soups and salads. Fortified wheat flour is also provided for making baked goods. School cooks have been given training in meal preparation.

## Financing school meals

Despite the limitations of the state budget, KR has allocated funds for organising meals for students at a rate of 7-10 Kyrgyz soms (US\$0.10-0.15) per child per day since 2006, a total allocation of 620,000,000 soms (US\$10,000,000). The government also covers the salaries of the cooks and kitchen assistants (total spend on the SMP amounts to 2% of the state education budget).

The interest in and prioritisation of child nutrition in KR has also resulted in significant support from local authorities for the programme, such as funds for renovation, maintenance and other costs related to the operation of the canteens. The Kyrgyz programme is unique in its integrated approach and joint effort by the state, WFP and the local communities, whereby communities/parents not only contribute to the organisation of meals, but also closely monitor and manage the process. Parents and local businesses participate in menu design, cooking, food procurement, spending tracking, monitoring food quality and sanitary requirements, as well as raising and following up issues that arise.

## Working with multiple sectors

The programme recognises the need to work with other sectors, such as water, sanitation and hygiene (WASH), to

<sup>1</sup> Multiple Indicator Cluster Survey (MICS) Kyrgyzstan, 2014.



maximise nutrition gains. Improvements to infrastructure include cold and hot water, sewage systems and toilets. School kitchens are provided with modern kitchen equipment in order to prepare hot meals and food is prepared and consumed in hygienic conditions, in compliance with national sanitary norms. Training in sanitary practices is provided for all members of the school community, including interactive games for children on nutrition and hygiene.

Agriculture, or more specifically a 'farm-to-school' approach, is another important component of the programme. Promoting and supporting school farms and gardens to grow food helps to reduce the cost of school meals and to better control the quality of incoming agricultural produce. At present, around 85 schools have farms and gardens that not only are of benefit to meals, making them cheaper and more diverse, but in some cases are also a source of income to help address additional school needs. Furthermore, this system allows enhancement of local economies by creating job opportunities for farmers, strengthening the local market and allowing business opportunities for local communities.

### Community involvement

The involvement of the local communities (and sometimes village committees) as well as parents and grandparents in the programme is a crucial component. Daily monitoring and follow-up, involvement in the management of the meals (such as collection of funds and purchase of additional products), daily overseeing of the quality of the food, and support to the daily running of the SMP are an indispensable part of the process and a key success factor for programme sustainability.

Parental and community engagement is also a critical instrument in advocating for the importance of the school meals with government and potential donors. Parents are also best placed to provide arguments on the benefit of their children's right to healthy nutrition.

### Programme challenges

The main challenge for implementing improved school meals are the high costs of the programme, particularly the initial investments such as refurbishment. Around 25% of the schools lack proper infrastructure, including adequate water supply, sanitation and buildings, to organise meals on a daily basis. Renovation and equipment of the schools require large financial investments. Even with the involvement and commitment of the local government, delays and restrictions in the allocation of the funds are often observed. WFP and local communities address these issues by lobbying and supporting administrative processes for budget allocations and by seeking alternative funding sources, such as private donors, local entrepreneurs and non-governmental organisations.

The state allocations for meals are not high enough to provide nutritious and varied food. The WFP-supported diversified menu, while taking into account locally available ingredients and prices to make the best use of available funds, still requires additional contributions from parents, usually around 4 soms (US\$0.05) a day per child in cash or in-kind (fruits and vegetables of a family's own production, or transfers). The process of collection and management of the funds is not always smooth and equally well accepted. Working with the parents and local communities is essential



WFP, Kyrgyzstan

not only for generating support for funding, but also for the practical organisation and management of collecting funds and budget-keeping.

### Lessons learned and next steps

The implementation of optimised school meals involves a number of laws and regulations relating to nutrition requirements, food safety and hygiene standards, procurement regulations, construction and engineering requirements, and many other requirements. As the work has unfolded, many gaps and inconsistencies have been revealed as many of these documents have not been updated for years or did not exist before. Revising such essential policy and normative frameworks is time-consuming and work-intensive. This is the challenge of leading a programme in two parallel directions – implementation and policy support. Regular follow-up is a crucial aspect of successful implementation and the school meals programme needs effective coordination to make sure that all stakeholders are in line with programme developments and participate accordingly.

Next steps are for the Ministry of Education, with support from WFP, to develop alternative models of school meal organisation and cost efficiency for those schools that lack the infrastructure to provide hot meals – around 500 schools across the country.



WFP, Kyrgyzstan

# Developing a Common Results Framework for nutrition in Somalia



**Dr Mohamed Abdi Farah** (left) is the Special Adviser on Health and National Nutrition coordinator (SUN focal point) for the Scaling Up Nutrition Movement.

**Mohamed Abdi Hasan** (centre) is the Social and Human Development advisor at the Office of the Prime Minister in the Federal Government of Somalia.

**Job Gichuki** (right) is a Public Health Nutritionist specialising in emergency nutrition, surveillance and research, currently working with the Horn Population Research and Development (HPRD).

## Background

Somalia, in the Horn of Africa, has experienced changes and shifts in governance, security, development and the humanitarian environment over the past two decades. The estimated population is around 12.3 million, with 2.8 Somalis living in rural areas and 5.2 million (about 42% of the total population) living in urban areas. Around a quarter of the population are nomadic. Estimates from the United Nations High Commissioner for Refugees (UNHCR) indicate that over 1.1 million Somalis are internally displaced.

The country has been on a humanitarian crisis footing since the 1990s when war broke out and is one of the most complex and long-standing emergencies in the world<sup>1</sup>. It is characterised by sustained high rates of mortality, child

malnutrition, severe basic services shortfalls and large-scale population movement. The prevalence of acute malnutrition in children under five years old (CU5) is over 15%, which is above the emergency threshold, and the prevalence of stunting is estimated at 23.5%<sup>2</sup>. The health status of Somalis is critical, with the country registering among the poorest health and mortality indicators globally, including mortality rates of 136 per 1,000 live births and maternal mortality at 732 per 100,000 live births<sup>2</sup>.

There have been very large humanitarian investments and actions in the country, but these have not been matched by investments in more resilience-building and development efforts, resulting in a recurring pattern of annual crises response. Efforts to establish a Common Results Framework (CRF) for nutrition aim to 'shift the dial' towards more sustainable developmental approaches.

Somalia joined the SUN Movement in 2014. At that time, it had developed a National Nutrition Strategy, Micronutrient Strategy and Infant and Young Child Feeding (IYCF) Strategy. It was decided that a costed plan of action for nutrition – to act as a CRF – was needed as an over-arching strategic document to improve the nutritional status of the population through the strengthening and building of multi-sector and integrated systems (workforce, supplies, finance and governance) and by bringing multi-disciplinary ideas into actionable programmes.

## Stakeholder mapping

The first step was to map key stakeholders who would significantly contribute to the development and implementation of the CRF. Between 30 to 40 government, private sector, development and humanitarian partners participated in a sensitisation event held in Kenya in May 2018. The process is being supported by MQSUN+, so more than five international consultants and four national experts



A child is weighed at an outpatient therapeutic centre in Kabasa IDP Camp in Dolow

WFP/Georgina Goodwin

<sup>1</sup> Somalia Humanitarian Response Plan 2018.

<sup>2</sup> [scalingupnutrition.org/sun-countries/somalia/](http://scalingupnutrition.org/sun-countries/somalia/)





Women and children carry water in Somalia, where lack of rain and other environmental factors are causing a drought affecting millions in the country

WFP/Georgina Goodwin

were involved in the technical development of the CRF. Prior to this, there had been three state-level consultation forums held in Jubaland state, South West state and Puntland, and sector-level interviews were conducted with different government, agency and institutional stakeholders. SUN networks for Academia, Business and Civil Society were also established in this period as these will have a role in the implementation of the CRF. Under the CRF implementation plan, it is expected that the existing UN-led platforms; i.e. national and regional Nutrition Clusters, will be used for advocacy, development and validation of assessments, and support in collating indicators.

### Results-based approach

The CRF structure was developed using a results-based approach whereby intermediate results feed into strategic results. The overall objective of the CRF is to contribute to the reduction of malnutrition by 30% in the next five years in Somalia, as well as to control the fluctuating rates, establishing a more predictable and stable pattern of nutritional status. The plan has seven strategic objectives, including: building an enabling environment; multi-sector coordination; development of human resources; comprehensive package of nutrition interventions; optimal use of nutrition-sensitive programmes; and addressing social and cultural issues that hinder equity.

### Building nutrition resilience

The vision of the CRF is an entire paradigm shift in the interpretation, implementation and integration of both nutrition-sensitive and nutrition-specific programmes. In Somalia nutrition-specific programmes and projects have over many years underutilised opportunities such as funding and training presented by integrating with longer-term, sustainable, nutrition-sensitive programming. There are existing efforts to increase the levels of integration of activities through the humanitarian response plan, which ensures no funding is provided to nutrition actors if they do not demonstrate a minimum level of health, nutrition and

water, sanitation and hygiene (WASH) integration. The largest hoped-for impact of the CRF is the activation of the entire nutrition causal framework (i.e. immediate, underlying and basic causes of malnutrition), with an intentional approach to ensure convergence of policies, sector plans and execution of programmes at scale.

### Challenges

Multi-sector and multi-stakeholder collaborations have their share of challenges. One of these is the lack of a common understanding on nutrition, which was addressed to some extent by developing consensus among participants by conveying key nutrition information while at the same time introducing the idea of integrating nutrition concerns into their sectoral systems. As the CRF covers all causal factors of malnutrition, the process of agreeing new indicators, including baseline figures and targets, was a challenge and involved much discussion, particularly on the use of data that is more than five years old for some of the key indicators.

### Lessons learned

Key among the lessons learned during the process was recognising that, although the importance and concept of a CRF has existed for some time, it had not been converted into a standard approach and enshrined in the national system of nutrition coordination. Individual sectors now feel the need to adopt the common approach, giving an indication of commitment for the process. Political commitment from the Office of the Prime Minister and clarity of objectives has provided the process of developing the CRF with much-needed support from various sectors.

The final costed CRF document will be launched at a high-level meeting that brings together key stakeholders and actors to secure commitment to implementation.



Listen to an interview with the authors on the ENN podcast channel:

<https://www.ennonline.net/mediahub/podcast/somaliacrff>

# Strengthening sub-national capacity in Yemen to provide life-saving treatment



**Majid Hammed Alhaj** (left) is head of the Taybah Foundation for Development's Hodeida office, Yemen.

**Dr Rasha Ali Al-ardhi** (centre) is a nutrition specialist in UNICEF Yemen's country office and a medical doctor with over 16 years' experience in maternal and child health and nutrition.

**Dr Karanveer Singh** (right) is a nutrition manager with UNICEF Yemen and a paediatrician with over 28 years' experience in child health and nutrition.

## Background

Since the escalation of the armed conflict in 2015, Yemen has been facing a massive humanitarian crisis, characterised by widespread insecurity, large-scale population displacement, chronic food shortages and the collapse of basic services. Since October 2016, half of the health facilities in the country have been partially functional or are closed, and health staff at all levels have either not received regular (or in many cases, any) salaries. The nutrition situation is alarming, with 16% of children under five years old (CU5) suffering from acute malnutrition, of which 5.2% fall into the severe life-threatening category (severe acute malnutrition (SAM)). The prevalence of stunting is at 47%, while in a few governorates it is above 70%<sup>1</sup>.

Al Hodeida Governorate is on the western coast of the country bordering the Red Sea and has a population of 2.61 million. It has the highest burden of acute malnutrition in Yemen, with 27% prevalence among CU5 including 6.2% prevalence of SAM<sup>1</sup>. The latest estimates show approximately 484,000 CU5 are at risk of suffering from acute malnutrition, of which 98,000 are affected by SAM<sup>2</sup>. Some of these children have SAM with medical complications and therefore need to be admitted to specialised stabilisation centres (SCs). These centres are the focus of this article.

## Managing scale-up in a fragile context

Although Yemen joined the Scaling Up Nutrition (SUN) Movement in 2012, its SUN platform networks are currently not fully active due to the conflict, although some networks are involved in preparing an updated multi-sector plan of action for 2019–2021. Most nutrition activities are being coordinated by the humanitarian-focused Inter-Agency Standing Committee (IASC) Nutrition Cluster<sup>3</sup> and development investments are limited, with the focus of government and its partners on emergency response for the time being.

District-level stabilisation centres were established as part of the scaling up of nutrition-specific interventions in Al

Hodeida, intended to ease the access and minimise the transportation burden that was preventing many caregivers from bringing their children to the main SC in the city. This was done by mobilising and strengthening the Nutrition Cluster partners as the Governorate Health Office (GHO) in Al Hodeida was not able to take the lead in activating some of the SCs at district level due to operating difficulties. Such facilities (rural hospitals and main health centres) lacked the additional financial and human resources to secure fuel for generators/electricity and to provide the daily close monitoring and follow-up required for the 24-hour services.

## Partnering with a local non-governmental organisation (NGO)

In 2014, four SCs were being operated by an international non-governmental organisation (INGO); however, the INGO decided to stop working in the SC area and focus on other interventions. It was therefore crucial to look for other possible and sustainable options closer to home to ensure the reactivation of the SCs. It was critical to reactivate these non-functional SCs so that children with SAM with medical complications were provided with this crucial lifesaving intervention.

At that time Taybah, a local NGO, was running health centres and medical campaigns as well as conducting awareness-raising campaigns as a C4D (communication for development) partner in Al Hodeida. UNICEF identified Taybah as a potential partner to reactivate two SCs in the second half of 2015, with full cooperation from governorate and district health offices.

UNICEF played an important role in building the local NGO's capacity on SC-related issues at both technical and operational levels, as it was the first time that Taybah was

<sup>1</sup> 2018 HNO based on EFSANA & SMART surveys data

<sup>2</sup> As per 2018 Yemen Humanitarian Response Plan

<sup>3</sup> Nutrition Clusters at the country level are crucial networks that coordinate nutrition in emergencies work, bringing partners together to ensure priority needs are identified and met.



starting to work in the area of SAM management. The UNICEF team worked closely with Taybah to provide the support necessary to ensure that the SCs were functioning to the required standards and quality. In the first six months of operation nearly 250 children with SAM children with complications were treated and Taybah reports indicate an average cure rate of 77%.<sup>4</sup>

### Negotiating with the military

The district of Zaidia had one non-functional SC as the building was occupied by military forces; after several rounds of failed negotiations by the civil government and other agencies with the military authorities to vacate the building, UNICEF approached Taybah to solve this issue. Taybah undertook vigorous negotiations with the local and military authorities and succeeded in convincing the military to leave the SC facility. Taybah rehabilitated the centre and the SC started functioning again in March 2017.

Due to the deterioration in the security situation and subsequent movement of internally displaced people (IDPs), a fifth centre was established in April 2017 in Jarahi district.

In 2017 about 1,690 SAM children with complications were treated across these five SCs, with an average cure rate of 86%, and between January and August 2018, 1,570 SAM children with complications were treated, with an average cure rate of 70%.<sup>4</sup> The uneven cure rate has been attributed to the significant deterioration in the security situation in Al Hodeida in 2017-2018. This affected programme performance as some parents left the SC with their children before completing treatment and some SCs were closed temporarily when air strikes and active fighting were happening in the SC areas. This was also reflected in the trend of defaulter rates, that doubled from 14% in 2017 to 28% in 2018.<sup>4</sup> Death rates have been consistent at around 1% since 2016. Sixty-two children had relapsed in 2017, while 56 children relapsed in 2018.<sup>4</sup> All relapsed cases were readmitted to the programme.

### Expanding services

The five SCs (four reactivated and one new) have been able to provide good-quality life-saving services, not only to those in the targeted districts but also those from neighbouring districts and governorates. Meals and transportation costs are provided to the caregivers to ensure that the children are treated in the SC until they stabilise. Covering such costs to caregivers has contributed to demand creation and increased service utilisation.

In each of the centres a trained female cadre (midwife) is providing Infant and Young Child Feeding (IYCF) counselling services to mothers on the importance of breast feeding and complementary feeding. Early Child Development activities, including toys and areas for play, are also being provided to contribute to the development of cognitive, emotional and social skills of the children being treated.

### Challenges encountered

The capacity gap was an issue at the beginning of the project, so Taybah, UNICEF and the GHO team conducted a series of training courses for health workers at SCs, as well as regular supportive supervision to improve service providers' capacity and skills. Taybah was engaging for the first time in the SAM management field, building their own team's capacity and equipping their staff with technical and



UNICEF/Yemen

administrative/ operational knowledge to be able to provide quality services and scale them up in a short time period. Although Taybah was working with the full coordination and support of GHO and DHO, this was challenging in the beginning, as it was necessary to build the mutual trust and to highlight clear roles and responsibilities for both Taybah and the government cadre.

The security situation in the country has affected many aspects of implementation, including programme defaulter rates and bed capacity of SCs, with more children admitted than planned for, so that some had to be referred to other facilities. The fuel crisis and currency fluctuations have led to increased SAM management costs, which have risen from \$US132 (cost of treatment of children with SAM until cure) pre-conflict (2014) to approximately \$US200 in 2018. The Government is facing serious challenges regarding provision of operational costs for health and nutrition services and it is difficult to talk about a timeframe for the Government to resume funding, since the security situation in Yemen is so unpredictable and infrastructure is seriously affected. However, to prevent systems from collapsing, UNICEF is supporting the strengthening of service provision (for example, health worker training, outreach services and monitoring) within the existing government structure.

### Lessons learned

Capacity development and resourcing a local NGO has proved a sustainable and scalable approach to the provision of life-saving interventions. With time, the Taybah team was able to develop new ideas to improve the performances at SCs and to link this to other ongoing activities and related interventions. Taybah was able to deliver good quality services while working under very difficult circumstances amidst a deteriorated security situation, at the same time strengthening its internal infrastructure and recruiting new staff for monitoring and evaluation purposes. The success of this partnership is also largely due to the positive and supportive attitude of the government authorities, their honesty in expressing their inability to support the SCs and their willingness to partner with a local NGO. The Al Hodeida experience (successful collaboration between local NGO Taybah, Government and UNICEF) is being used as an example by other local NGOs to replicate in other governorates in Yemen.

<sup>4</sup> Figures from CMAM official data base, verified by Ministry of Health, Nutrition Cluster and UNICEF.



Dr Djibril Bagayoko

## Coordinating nutrition in Mali: Interview with the SUN focal point



Mali is facing high levels of malnutrition (including 38.5% stunting prevalence and 15.3% wasting among children under five years old<sup>1</sup>), driven by factors such as climate change and conflict. This has triggered an increase in political momentum within the country and Mali has made progress in strengthening nutrition governance since joining the Scaling Up Nutrition (SUN) Movement in 2011, particularly with the creation of a Nutrition Coordination Cell (Cellule de Coordination).

ENN's **Ambarka Youssoufane** interviewed **Dr Djibril Bagayoko**, Head of the Nutrition Coordination Cell (housed in the Mali Ministry of Health (MoH) since 2016) and the country's SUN focal point, on the country's progress in nutrition governance and coordination. Dr Bagayoko has over 20 years' experience in the health sector, especially in programme management and system development and strengthening.

### 1. Has there been a change in how nutrition is coordinated in Mali since the country joined the SUN Movement?

Joining the SUN Movement has been very important for Mali, as it has motivated the government to develop a multi-sector nutrition policy and action plans with cost and performance indicators, with institutional responsibility for each sector. The Coordination Cell fills an important gap in terms of multi-sector coordination of nutrition actors and interventions. Before this unit was set up there was a nutrition counsellor at the MoH (without the convening power for multi-sector coordination or a dedicated team) and a SUN focal point. The new Coordination Cell is under the Prime Minister's authority but hosted in the MoH, making it easier to strengthen the multi-sector nutrition agenda in the country.

### 2. Have SUN Movement networks been set up in Mali?

Mali has been [dealing] with the SUN Movement since 2011, and the SUN architecture works quite well within the institutional arrangements set up. The civil society, academic and research, donor and private sector networks are all operational. The parliamentary network has worked with us to integrate the right to food and nutrition into the constitution. The Coordination Cell oversees the performance of all SUN networks and submits quarterly reports to the government. All of these networks have annual plans and each of them has developed an institution to organise nutrition activities. However, difficulties remain, notably the overlap of SUN networks with a number of other existing coordination frameworks, such as the food security coordination framework, etc.

### 3. Are there any key nutrition platforms or stakeholders outside the SUN Movement architecture (i.e. nutrition cluster, other emergency-focused platforms, agriculture platforms, etc)?

There are a number of other frameworks that exist outside the government's networks, notably the cluster networks set up by UN agencies such as those for nutrition, food security and health, or for emergency response. Even though these additional coordination frameworks are sometimes set up for specific purposes or themes, there is also duplication with SUN networks, since they are coordinating the same institutions. The government is trying to bring all the institutions under the same coordination framework to avoid duplication and ensure multi-sectoriality. It makes my role more challenging to have different levels of coordination and I have advocated for greater alignment, particularly with UN partners.

### 4. When and how was the coordination unit set up? Does this function as the main multi-stakeholder platform in the country? What are its main responsibilities? How is it being funded?

The Coordination Cell was created in March 2015 to take over



The village of Koundougou in Mali where humanitarian assistance is provided to address urgent needs during the lean season, along with resilience building activities for long-term food security

WFP/Cecilia Aspe

<sup>1</sup> SMART survey (2017).



the role filled by REACH following its closure. Its mandate is to strengthen governance around nutrition. This is done with four levers: communicate with all the sector groups; facilitate coordination around the political vision; facilitate collaboration by activating multi-stakeholder, multi-sector platforms; and monitor the implementation of the national nutrition plan.

The Cell acts as the government's focal point for all networks at the central level. At the decentralised level, we also have a mandate to facilitate the activity of three different coordination frameworks operating at the regional, department and commune level (see Figure 1). Operating costs are mostly funded by the government, but the Cell is also being supported by the World Food Programme for four years.

**5. What are the key activities in which the coordination unit and the SUN networks have been involved? What activities are planned for the next year?**

We have four to five permanent staff, but the Cell is also composed of nutrition focal points in all relevant ministries (18-20 line ministries) and we organise capacity building via training on the basic concepts of nutrition, etc. The Cell doesn't have programmes of its own, but we are involved in integrating nutrition in all relevant policies. For example, the Cell is part of the group revising the national water policy and we are lobbying to make it more nutrition-sensitive. Key activities highlighted in the unit's own action plan are to operationalise coordination meetings between different platforms, continue capacity building of government nutrition focal points and strengthening of the country SUN networks.

**6. What have been the challenges in operating the Cell?**

One of the difficulties with this unit is that it has an atypical structure because it's organised by the Prime Minister's office but delegated to the level of the Ministry of Health, which makes it less powerful than it's supposed to be. It also lacks

adequate funding to play its role; for example, to motivate staff on civil servant wages.

Coordination at the sub-national level is one of the most important challenges the Cell is facing. National-level and even regional-level meetings are organised regularly, but coordination meetings are not being held at the operational (commune) level. In order to make these coordination frameworks work we need to provide them with simple tools for self-assessment of their needs (these tools are being developed at the Cell level) – but we need support for this.

**7. Can you share some lessons learned in your role as nutrition and focal point coordinator?**

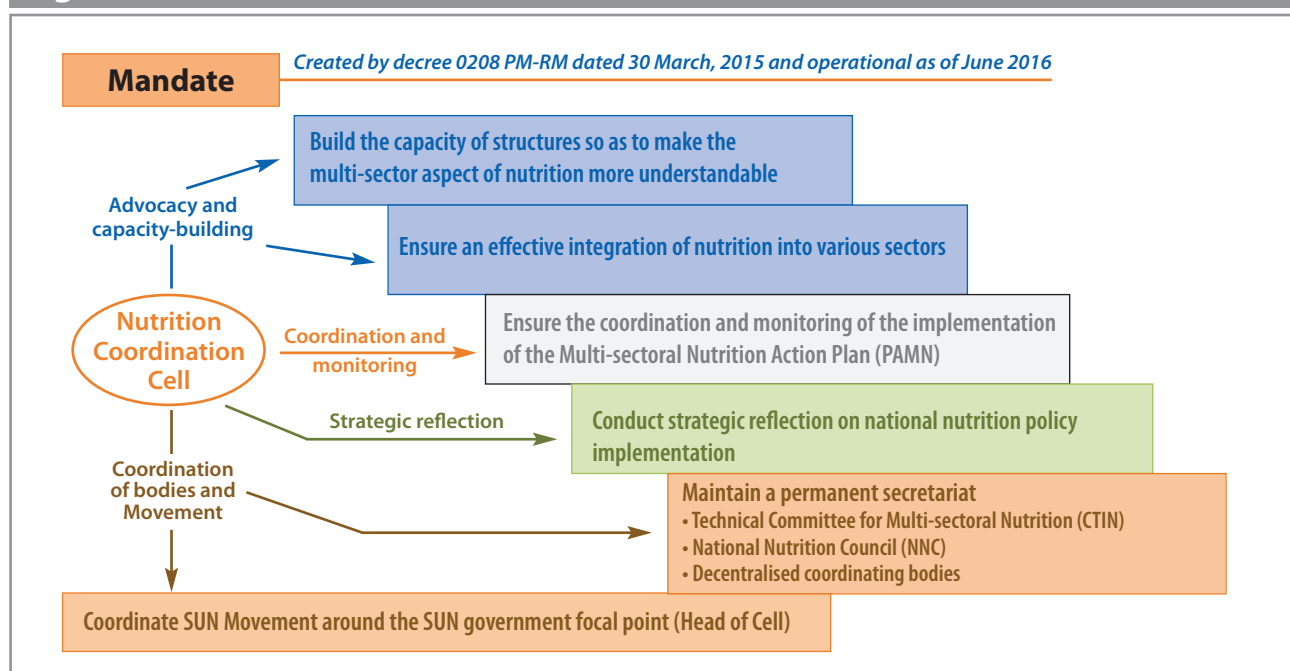
The main lesson learned from running the unit is that it needs three types of leadership: political leadership; institutional leadership; and staff leadership. The most important thing to change in terms of Mali is data availability. Implementing functional monitoring systems would allow us to [obtain] data from the lowest level – and this will allow for better coordination and [better] programme management to eventually change the nutrition situation in Mali.

**8. In your opinion, has the SUN Movement been a source of significant energy and change in the country, or was the country already taking on a long-term, multi-sector agenda in nutrition?**

Joining the SUN Movement has been very important for Mali. It has motivated the country to develop a multi-sector nutrition policy which is also budgeted. The SUN movement has supported experience-sharing through participation in various meetings.

At the country level, SUN stakeholders including donors and UN agencies have met with Mali's Secretary General to advocate for putting nutrition at a higher institutional level. This kind of advocacy cannot be done by lower institutions, but only by partners.

**Figure 1** Nutrition Coordination Cell



# Nutrition coordination mechanisms: the whats, whys and wherefores



**Stefano Fedele**, UNICEF Regional Nutrition Specialist for Latin America and the Caribbean (LAC), is the coordinator of GRIN-LAC (Grupo de Resiliencia Integrada de Nutrición), a regional coordination and technical support platform aimed at strengthening emergency nutrition preparedness and response. The interview is based on a GRIN-LAC webinar, prepared by Yvette Fautsch Macias, consultant on Nutrition in Emergencies with UNICEF LAC region.



## 1. What is a coordination mechanism and why is it needed?

A nutrition coordination mechanism is a group of organisations/stakeholders committed and willing to support nutrition by jointly coordinating their activities to achieve better nutrition results.

Historically, coordination mechanisms in the Latin America and Caribbean region (as elsewhere) have been related to emergencies, based on the 'Cluster' approach used in a humanitarian response. However, despite having drastically reduced undernutrition in the LAC region, the persistence of stunting and anaemia in some areas and groups and the generalised increase in overweight and obesity mean that malnutrition remains a national priority in all countries and scaling up of national efforts may be strongly facilitated by a dedicated sectoral table, led by national authorities and open to all key stakeholders.

An ongoing and inclusive nutrition-specific sectoral table may be very important to improve the effectiveness, efficiency and timeliness of national nutrition programmes, for most countries in LAC; and in areas more prone to crisis,

an ongoing mechanism can also strengthen the humanitarian-development nexus with short-term needs linked to medium and longer-term goals, plans and funding. To make the coordination mechanism functional, it is important to find different ways of working together, define ways to communicate and have a mechanism to follow up actions, such as regular meetings. Also, when initiatives are backed up by a wider consensus among key stakeholders, they have greater weight in terms of advocacy, helping to raise nutrition at the highest levels of national political agendas.

## 2. Is there usually a single nutrition coordination mechanism at country level or can there be many of them?

There are different models but frequently there is a general nutrition group that can host specific sub-groups that work on specific nutrition issues, such as: micronutrient deficiencies, care of acute malnutrition, prevention of overweight and obesity in schools, etc. and refer back to the main group. Nutrition coordination mechanisms at sub-national levels (e.g. regional, state, department or district level) may also be very useful in ensuring that work focuses on the most prevalent nutrition issues at the local level and encompasses community engagement and ownership, to achieve stronger and longer lasting impact.

## 3. In some countries nutrition is part of food security coordination mechanisms. Is that sufficient to tackle nutrition problems?

As undernutrition persists in many vulnerable areas or groups, child overweight is rising in almost all countries and natural disasters continue to increase in frequency, severity, and unpredictability. It may make more sense to consider a nutrition-specific coordination mechanism to give greater time and inclusiveness to initiatives specific to nutrition, and then use the broader consensus achieved to carry the agenda in wider intersectoral fora.

If the transition from a coordination mechanism, which combines nutrition with food security or health to a specific nutrition mechanism, is too politically controversial to achieve in the short term, it may be easier to create a separate, less formal technical group specific to nutrition, which then reports its work to the wider sectoral group, while at the same time strengthening the advocacy to establish a more formal nutrition mechanism. Improvement

Drought resilience activities in San Antonio del Sur, Cuba



WFP/Mariela González





A family buying food with a cash-based transfer in the form of a voucher at a point of sale in Esmeraldas, Ecuador

in nutrition results may then strengthen the argument for transitioning to a more formal mechanism status.

#### 4. *When is the best time to establish a coordination mechanism in order to prepare a nutrition response in emergencies?*

It takes time to create a coordination mechanism from scratch when a major disaster is taking place, e.g. identifying the key stakeholders, developing coordinating tools and defining the various roles and responsibilities. Any delay has a cost in financial terms but also in human suffering. It may be more cost effective to raise the minimum programmatic and coordinating capacity to address the more regular development issues, which can then be more easily scaled-up at times of emergency. Key preparedness actions include the establishment of an inclusive and functional coordination mechanism at the national and sub-national level, and the development of a nutrition response plan in emergency situations.

#### 5. *Who should be leading at country level?*

National authorities have the primary responsibility to ensure the wellbeing of their population and as such, the leadership of a nutrition coordination mechanism should lie with the highest nutrition institution to ensure full ownership of both the determinants of malnutrition and of the potential solutions. It is important to ensure that representatives of the nutrition mechanism also actively participate in the sectoral platforms of other key sectors such as health, water and sanitation and hygiene (WASH) and food security.

#### 6. *How can you maintain a nutrition coordination mechanism when governments change?*

If addressing malnutrition is seen as a state issue, rather than a government one, a dedicated coordination mechanism may facilitate the transfer of key initiatives across subsequent governments. To ensure continuity it is important to include civil society organisations, representatives of communities, UN agencies etc, for example, in Guatemala, when there is a change in government, the nutrition coordination mechanism sends a letter to the new government authorities giving the background of the mechanism, their objectives and current activities, while inviting them to take a leadership role.

#### 7. *What should the private sector role be in such mechanisms?*

The private sector may play an important role in preventing malnutrition in the production of fortified staple foods, ready-to-use therapeutic food (RUTF) and ensuring access to healthier foods at a reasonable cost. However, an important aspect to consider is the potential for conflict of interest. While engagement of the food and beverage industry may be needed to carry out wider reaching advocacy, it may be important to ensure that the development of public health policies is guided firstly by the national interest and secondly by private financial gain. WHO has developed guidelines for this purpose<sup>1</sup>.

#### 8. *Are Terms of Reference (TORs) necessary?*

On the one hand, having defined TORs can make the group's work more systematic, and support greater understanding and formal recognition by those outside the process. On the other hand, care should be taken since TORs can sometimes be inflexible and create a barrier or challenge rather than a facilitator to coordination. The lack of TORs should not prevent nutrition stakeholders from meeting, having discussions or finding ways to work together. In other words, it is recommended to develop TORs but not to let the process slow down progress.

#### 9. *Do you have any final recommendations for countries?*

There are no set rules for establishing such mechanisms, but it is important to have discussions in an open space for policy development with different nutrition stakeholders at the country level. Small groups can be created to do the work and report back to the general nutrition coordination mechanism, but this will depend on whether countries decide if they are needed or not. Also, in order to have a more timely, efficient and effective impact in emergency situations, the coordination mechanism should be in place beforehand.

GRIN-LAC support is available at: [yfautsch@unicef.org](mailto:yfautsch@unicef.org)

<sup>1</sup> WHO. 2016. Addressing and managing conflicts of interest in the planning and delivery of nutrition programmes at country level: [www.who.int/nutrition/events/2015\\_conflictsofinterest\\_nut\\_programmes/en/](http://www.who.int/nutrition/events/2015_conflictsofinterest_nut_programmes/en/)  
WHO. 2017. Safeguarding against possible conflicts of interest in nutrition programmes [www.who.int/nutrition/consultation-doi/comments/en/](http://www.who.int/nutrition/consultation-doi/comments/en/)

# UN Decade of Action on Nutrition: Brazil, Ecuador and Italy make commitments



(From left) **Trudy Wijnhoven** is a Nutrition Officer and the technical focal point for the UN Decade of Action on Nutrition at FAO, Rome, Italy.

**Michele Lessa de Oliveira** is the General Coordinator for Food and Nutrition at the Ministry of Health of Brazil.

**Angélica D. Tutasi-Lozada**, Internal Management Coordinator for Promotion of Nutrition, Safety and Food Sovereignty, Ministry of Public Health of Ecuador.

**Giuseppe Ruocco** is the Secretary-General at the Ministry of Health of Italy and the President of the National Working Group "Ita Decade".

**Lina Mahy** is a Technical Officer at the Department of Nutrition for Health and Development, WHO, Geneva, Switzerland

The authors alone are responsible for the views expressed in this article and they do not necessarily represent the views, decisions or policies of the institutions with which they are affiliated.

UNITED NATIONS DECADE OF  
**ACTION ON NUTRITION**  
2016–2025

## Background

By proclaiming 2016–2025 as the Decade of Action on Nutrition ("Nutrition Decade"), the United Nations (UN) General Assembly in April 2016 committed Member States to ten years of sustained and coherent nutrition action.<sup>1</sup> The Nutrition Decade not only gives a unique time-bound justification for countries and their partners to advance the global nutrition agenda (this includes the World Health Assembly global targets on maternal, infant and young child

nutrition and the nutrition and food security targets in the Sustainable Development Goals), but also aims to keep improved nutrition on the agenda of policy-makers at the highest international and national levels. The Nutrition Decade is a vehicle to advocate for policy and programme implementation, increased nutrition investments and reinforcement and alignment of existing efforts to ensure populations have access to healthy diets.

Country commitments for action are key to the Nutrition Decade's support in leveraging government policy development, investments and actions on the ground. Countries are encouraged to set SMART – specific, measurable, achievable, relevant and time-bound – commitments, which help all stakeholders understand what action is intended and to improve tracking (e.g. the Scaling Up Nutrition (SUN) Movement is engaged to work with the 60 SUN countries on SMARTening their existing commitments). These commitments, formally submitted to the Nutrition Decade's Secretariat<sup>2</sup>, are tracked on a regular basis by country self-assessments. During the World Health Assembly in 2017, Brazil and Ecuador were the first two countries that formally made ambitious, concrete commitments for action, followed by the Government of Italy (a number of other governments have made commitments, for example, to increase domestic funding for nutrition, but have yet to send a formal letter of confirmation). The three countries give a summary of how these commitments have been translated into action, as well as some of the challenges they face.



A child eating "caju fruit" or cashew, common in local markets in Brazil

©FAO-Giuseppe Bizzarri

<sup>1</sup> Resolution adopted by the General Assembly on 1 April 2016, 70/259, United Nations Decade of Action on Nutrition (2016–2025). A/RES/70/259 - <https://undocs.org/A/RES/70/259>.

<sup>2</sup> Through resolution A/RES/70/259, the UN General Assembly mandated FAO and WHO to act as the Secretariat of the Nutrition Decade.



## Brazil

The Government of Brazil made a set of 38 commitments, grouping them under the six action areas of the Nutrition Decade, and outlined specific policy measures it will undertake to achieve the goals set. These commitments are part of the country's *National Food and Nutrition Security Plan 2016-2019*, which has guidelines, targets, resources and tools for evaluation and monitoring, involving different sectors of the government and society, with a common goal for adequate and healthy diets.

Brazil's multisectoral coordination is carried out by the Inter-Ministerial Chamber of Food and Nutrition Security, formed of 20 ministries and special secretariats, whereas its monitoring is done by the National Council of Food and Nutrition Security, which, by law, is made up of two thirds civil society representatives (including, for example, small farmers and indigenous groups), and one third government stakeholders in order to ensure meaningful social participation.

The Brazilian priority within the Nutrition Decade is to make progress on the reduction of risk factors and health promotion for the prevention and control of noncommunicable diseases (NCDs), as declared in the National Plans for Tackling NCDs and for Food and Nutrition Security. The Nutrition Decade has increased political support for the nutrition agenda in Brazil as evidenced by the creation of a new programme to prevent and control childhood obesity. The budget for nutrition actions (under the Ministry of Health) has also increased by over 40% in the last four years, and the regulatory agenda in obesity prevention is a current public health priority.

## Ecuador

For Ecuador, the commitments taken on under the umbrella of the Nutrition Decade have contributed to the Government of Ecuador reaffirming its responsibility to fight all forms of malnutrition throughout the life cycle, and to generate actions that address the determinants of health and nutrition.

The Government worked with a wide range of actors from public and private institutions, civil society organisations and the general public to produce Ecuador's *Multisectoral Food and Nutrition Plan 2018–2025*. The process of developing the plan involved identifying the limitations and strengths envisaged for the implementation of the actions by each of the co-responsible actors. After having gone through this process of awareness and recognition of the local context and thanks to the strong political commitment of the highest authorities, the first phase of the plan is currently being implemented. This translates into the delivery of a prioritised service package of interventions in health, education and social welfare, including strengthening regulations and strategies to promote a healthy diet and physical activity, as well as concrete actions to favour health during the first thousand days of life.

## Italy

Italy started working on the Nutrition Decade by launching a "National Working Group Tavolo Italia Decade per la nutrizione (NWG – Ita Decade)" in July 2017. The NWG-Ita Decade, with a multisectoral and multistakeholder composition, has implemented a "Meta-Project" with a national and an international dimension.

© FAO-Alessia Pierdomenico



As a first national action, the country launched a 'Decade of Nutrition' platform in July 2018 on the Ministry of Health's website to share information on nutrition and healthy diets produced by national research institutes and ministries involved in the NWG-Ita Decade. The next steps will focus on developing a new protocol, following the Government's 2015 agreement<sup>3</sup> with the food industry on 'processed food', to identify several product categories (baked goods, cereals, sweets, non-alcoholic drinks, etc.) for which the food industry commits to reducing sugar, saturated fat, trans fats and salt, together with a constant effort to modify serving sizes and provide additional information on labels.

As part of international action, the country aims to launch a "Nutritional Diet Template", as an example of sustainable and local diets that respect the communities and their specific geographical, socio-economic and cultural characteristics. The template will be informed by discussions between different countries, on traditional and sustainable healthy diets, such as the Mediterranean Diet, as a tool to effectively counteract all forms of malnutrition (including obesity and overweight, and micronutrient deficiencies).

## Conclusion

The UN Secretary-General, in his first report on the implementation of the Nutrition Decade, stresses the need for implementation to be scaled up, investments for nutrition to be increased, policy coherence to be enhanced and the number of national commitments to be raised (the Decade of Nutrition itself does not have additional funding, but encourages countries themselves to accelerate efforts). Affordable solutions exist to reduce all forms of malnutrition, but they require greater global ambition and action than is being given at present. With only three countries having put forward in a formal way their commitments, it is hoped that more countries will follow, contributing to the achievement of the global nutrition and diet-related NCD targets and the Sustainable Development Goals.

<sup>3</sup> [www.salute.gov.it/imgs/C\\_17\\_pubblicazioni\\_2426\\_ulterioriallegati\\_ulteriorereallegato\\_0\\_alleg.pdf](http://www.salute.gov.it/imgs/C_17_pubblicazioni_2426_ulterioriallegati_ulteriorereallegato_0_alleg.pdf)

## References

- Implementation of the United Nations Decade of Action on Nutrition (2016–2025)*. Report of the Secretary-General [undocs.org/A/72/829](http://undocs.org/A/72/829)
- Strengthening Nutrition Action: A resource guide for countries based on the policy recommendations of the Second International Conference on Nutrition (ICN2)*. (FAO & WHO) [www.fao.org/3/ca1505en/CA1505EN.pdf](http://www.fao.org/3/ca1505en/CA1505EN.pdf)





A community school garden in Senegal



Farmers sell produce at Farchana town market in Chad

## Online tools

### Nutrition-sensitive extension library

The Global Forum for Rural Advisory Services' online library contains a wealth of useful information from a variety of sources for anyone working to better link agriculture and nutrition. Materials include activities and fact sheets, training resources (such as the New Extension Learning Kit (NELK), designed for self-directed or face-to-face learning), tools and case studies. [www.g-fras.org/en/home-nwg-library.html](http://www.g-fras.org/en/home-nwg-library.html) [nelk.g-fras.org/index.php/en/](http://nelk.g-fras.org/index.php/en/)



### Sharing South-South rural development solutions

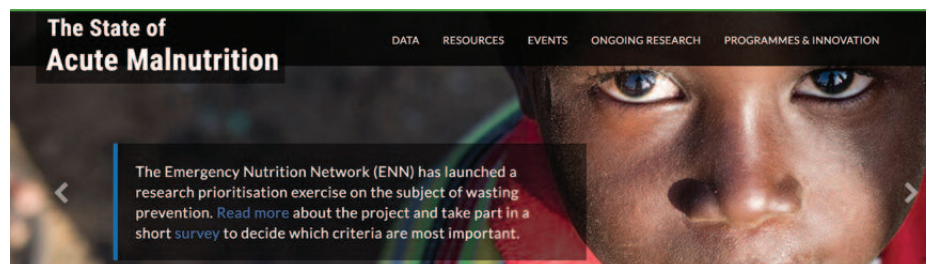
The International Fund for Agricultural Development (IFAD) has developed a Rural Solutions Portal, a web-based platform that leverages South-South learning to share innovations, technologies, processes and methodologies between countries and regions, including solutions for improving nutrition outcomes. [www.ruralsolutionsportal.org/](http://www.ruralsolutionsportal.org/)



### Updated State of Acute Malnutrition website

This website (in English and French) now contains more than 1,800 resources, including information on upcoming events and national and sub-national coverage data from the 2016 UNICEF NutriDash and the WHO-World Bank-UNICEF Joint Child Malnutrition Estimates.

[www.acutemalnutrition.org](http://www.acutemalnutrition.org)



### Campaign for girls

One year on from the launch of its global campaign *With Good Nutrition She'll Grow Into It*, Nutrition International is launching the next phase, with new social media tools for girls to spread the message and become their own nutrition champions. Of the 600 million adolescent girls in the world today, 90% live in developing countries and face additional obstacles to reach their full potential. Good nutrition is fundamental to a girl's education, which in turn is critical to preparing her for her future career.

[www.nutritionintl.org/shellgrowintoit/](http://www.nutritionintl.org/shellgrowintoit/)



### Making community videos

Since 2008, Digital Green has collaborated with grassroots partners and smallholder farmers to produce more than 6,000 locally relevant videos in more than 50 languages. This form of video-based knowledge sharing covers topics such as the importance of handwashing, and their videos on breastfeeding are shared among rural communities in India to improve infant and young child feeding practices. Once information gaps are identified, the development organisation picks people from the community to train them in video production.

[www.digitalgreen.org/videos/](http://www.digitalgreen.org/videos/)







## New directions for 2019-2020 and beyond: Outcomes from the SUN Movement annual Lead Group meeting

**T**he **SUN Movement Lead Group**, comprised of 29 nutrition champions, gathered for its annual meeting during the 73rd UN General Assembly in New York in 2018. Marking the mid-term period of the **SUN Movement's Strategy and Roadmap 2016-2020**, the Lead Group reflected on the preliminary findings of a mid-term review of the SUN Movement. Based on the recommendations, the Lead Group gave the **SUN Executive Committee** the mandate to take forward the findings and to commission an independent evaluation of the SUN Movement for 2020.

During the meeting the SUN Lead Group committed to the following actions and encouraged SUN countries and the **SUN Support system** to do the same:

1. *Protect, promote and strengthen the focus on scaling up nutrition during the 1,000-day window from a mother's pregnancy to her child's second birthday.*  
The group affirmed that a rights-based approach focusing on girls' and women's nutrition across the lifecycle – including a focus on adolescence as the second window of opportunity – needs to be at the centre of national nutrition strategies. Adolescent girls should be empowered as agents of change for improved nutrition (for example, preventing adolescent pregnancy) and young people should be engaged as nutrition champions. The SUN Movement has grown as a platform for learning, sharing and collaborating; for example, through the annual Progress Report, monthly newsletters, in-practice briefs, toolkits, case studies, webinars and peer-to-peer exchange visits, but this can be strengthened to support countries in applying innovation and learning in practice and by focusing on countries most at risk of falling behind.
2. *Preserve and strengthen the SUN Movement's approach as a multi-stakeholder, multi-sector political movement for nutrition impact and results.*  
The group called for higher-level commitment and greater institutional alignment from the membership of the SUN Networks. All stakeholders in the Movement need to fight against a 'silo' mentality and foster stronger cross-network linkages in support of government leadership for nutrition, including coordinating development and humanitarian

plans and programmes in fragile contexts to build long-term resilience. All stakeholders need to help build capacity to coordinate and implement nutrition plans in SUN countries.

3. *Secure the highest-possible level of national ownership and prioritisation for improving nutrition.*  
It was emphasised that national governments must be in the driver's seat; commitment to developing one vision, one plan and one budget to achieve their goals was agreed. The political placement of SUN Government Focal Points is essential in supporting this as they need the mandate to convene sectors and stakeholders and ensure nutrition is a key priority. The engagement of parliamentarians should also be scaled up and should focus more on political commitment to build human capital by investing in the nutrition, health and education of its citizens and to empower women and girls.
4. *Gender equality and the socio-economic empowerment of women and girls should be made top priorities and be mainstreamed in the SUN Movement approach and in SUN countries.*  
The Lead Group will support the SUN Movement Secretariat to develop guidance for SUN countries on how to practically scale up gender equality and the empowerment of women and girls for nutrition results. The guidance will be disseminated in 2019.
5. *SUN countries are encouraged to integrate a food-systems approach within national nutrition plans, taking into account the entire food value chain from farm to fork, and to develop a systems approach to nutrition encompassing health, food and social protection systems.*  
The Lead Group called for more proactive and substantial engagement with the private sector, including smallholder farmers and small and medium enterprises, and highlighted the importance of leveraging the SUN Business Network to do this.

The guidance provided by the SUN Lead Group will help shape the strategic direction of the Movement in 2019 and beyond and aims to inspire action across SUN countries and the SUN support system.





**ENN**

32, Leopold Street, Oxford, OX4 1TW, UK

Tel: +44 (0)1 865 324996 Email: [office@enonline.net](mailto:office@enonline.net)

Charity registration no: 1115156. Company registration no: 4889844

To register for *Nutrition Exchange* go to  
[www.enonline.net/nex](http://www.enonline.net/nex)



@theenonline



@ENNOnline



ENN Online