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1. About this report

This short document reports on the findings and experience of an 8 day online discussion to inform Paper 4 of The Lancet Nutrition Series 2013. This report and the online discussion were produced through a collaboration between Knowledge Services at the Institute of Development Studies (IDS) and the Poverty, Health, and Nutrition Division of the International Food Policy Research Institute (IFPRI).

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2. Background

What is it?

In 2008 *The Lancet* released a special series on undernutrition which served as a catalyst for the Scaling Up Nutrition (SUN) movement. Five years on, Johns Hopkins University are leading on a follow up series to update the evidence on what works, look at what we have learned, and how an enabling environment for nutrition can be created and sustained. As part of this research, the Institute of Development Studies (IDS) and the International Food Policy Research Institute (IFPRI) hosted a closed online expert discussion on the Eldis Communities web platform with 75 invited participants from six countries (Bangladesh, Ethiopia, Indonesia, Kenya, Nepal and Nigeria) to explore:

1. What are the main benefits of joining SUN?
2. What are the main challenges and constraints faced by countries as they attempt to Scale Up Nutrition?
3. What needs to happen going forward for SUN to be effective in reducing undernutrition?

Why is it important?

Over the last five years since *The Lancet's* first nutrition series, the landscape for nutrition has changed quite dramatically. The volume and level of political discourse has increased and led to stated commitments on the part of many national governments, international organisations and donors. SUN has both driven and been driven by this developing momentum. At the end of 2012, we find greater harmonisation among stakeholders with regard both to their understanding of the main causes of malnutrition, as well as the various options for addressing it. Enhancing and expanding the quality and coverage of nutrition specific interventions, and the embedding of nutritional components within more distal ("indirect") interventions, such as agriculture, social protection, water and sanitation etc., are now universally recognised as the main challenges. However, there is a crucial third level of engagement which – like undernutrition itself – has been neglected until now. This third level relates to the environments and processes which underpin and shape political and policy processes.

Paper Four in the new nutrition series focuses on this third level. The core question that the paper will address is: *"how can enabling environments and processes be cultivated, sustained and ultimately translated into impact on the ground?"*. How has high level political momentum been generated? What needs to happen to turn this momentum into results on the ground? How to ensure that high quality, well resourced nutrition-specific interventions are available to those who need them, and agriculture, social protection, water and sanitation systems and programmes are proactively re-oriented to support nutrition goals? This online expert discussion will serve as background material for the paper, which is hoped will further galvanise commitment and action to reduce undernutrition, globally and nationally.

3. Methodology

This closed online expert discussion on the Eldis Communities web platform hosted 75 invited participants from six countries (Bangladesh, Ethiopia, Indonesia, Kenya, Nepal and Nigeria) over 8 days to explore to three themed questions.

Participants were purposefully selected and invited as experts from central and sub-national government; multilateral and bilateral development agencies; national and international non-governmental organisations; civil society organisations; and research institutions – all of whom are working directly or indirectly on nutrition. Participants were identified through existing links with research partners, stakeholders and networks.

Each question was run as a sequential discussion thread. The discussion was facilitated by the lead author with support from a team based at IDS and IFPRI. The facilitator’s role involved framing the discussion with questions and prompts. Facilitation was kept to a minimum to allow participants to share their perspectives and experiences with one another without intervention. Short summaries of the main issues discussed were sent to participants at the end of each thread.

The discussion received 195 contributions in total over the 8 days. Below we distribute participants, as a percentage, by country and sector:

Country	%	Sector	%
Bangladesh	16	Bilateral/Multilateral	28
Ethiopia	20	Business/private	2
Indonesia	8	Government	16
Kenya	22	NGO	36
Nepal	16	Research / Academic	18
Nigeria	18		

4. Headlines from the discussion

Below we summarise the key messages that emerged from the 8 days of discussion. More detailed summaries from the 3 discussion themes can be found in Annexe ???.

Main benefits of joining SUN

Expectations of joining SUN are that it provides a framework and platform for improved coordination and cooperation on nutrition. SUN encourages greater advocacy which has increased the number of stakeholders across sectors who are working towards this common agenda to address undernutrition at all levels. This in turn is hoped to increase leveraging of resources, knowledge sharing and institutional capacity.

Joining SUN is also seen to hold stakeholders (especially the government) accountable, and secure further commitment to improve resource mobilization and allocation.

“SUN is pregnant; the potentials to deliver results that will lift Nigeria from uncomplimentary data to placing the country in an enviable status is finally here” [Participant from Nigeria]

Areas of progress identified include increased awareness and advocacy across sectors. Through the creation of the SUN networks, Ambassadors/Champions for nutrition in various countries at levels from the Prime Minister to the community have pushed nutrition onto the agenda. Policy makers are increasingly aware of nutrition as a development issue, with some countries having created or increased budgets for nutrition programmes and other high impact interventions including water and sanitation, reflecting increased commitment among stakeholders. Progress has been made in areas such as the improvement of treatment and food fortification, the reduction of child mortality and underweight for children under the age of two.

“Major sectors, Agriculture, Public Health, Private sector, Researchers and universities sat on a round table to brainstorm how to move Kenya nutritionally forward.” [Participant from Kenya]

Challenges and constraints

The main challenges and constraints to Scaling Up Nutrition in-country include a lack of coordination and collaboration between (and within) different ministries. Related challenges are to do with lack of clarity and agreed vision on what scaling up means, roles and responsibilities, lack of or ineffective policies and political commitment. Decentralisation issues have been constraints in some countries.

“Multi-sectoral cooperation looks fine on paper, but not that easy to coordinate and lead.” [Participant from Bangladesh]

There is limited understanding and awareness of the movement at various levels, including the local/community levels, and hence there is limited community/grass-roots participation. Lack of capacity (Institutional, organisational and human resource) was raised numerous times with challenges including inadequate qualified personnel (doctors, nurse, etc.) and community and extension workers (frontline workers, health volunteers, etc.) in remote areas and high turnover.

“District and Village level Food Security and Nutrition coordination committees are formed however we have great challenges to find technical personnel of nutrition to conduct the program with the sensitivity”. [Participant from Nepal]

Financial resources are often unsustainable and unpredictable with funding for nutrition interventions largely donor driven. Funding is seen as insufficient for scaling up and there are issues around budgetary allocation (emphasis on treatment over prevention) and coordination.

Lack of quality data and inadequate monitoring affects evaluation of and clarity on effective interventions, weakens advocacy strategies and is seen to jeopardise funding.

“A major threat to nutrition in Nigeria is the absence of up to date data. Planning in nutrition is still based in 2003 food consumption survey and 2008 DHS.” [Participant Nigeria]

There were mixed views on engaging with the private sector and suspicion around motivations. Private sector involvement is seen as essential by many participants but requires close regulation and a framework within which to engage.

What needs to happen going forward for SUN to be effective in reducing undernutrition?

Financial resources are recognised as a limiting factor in SUN and so identifying multiple funding sources rather than relying on donors could help scale up and create a more sustainable model.

Resources and efforts need to be prioritised towards areas identified as limiting scaling up: improving governance, capacity building of community and extension workers, community social mobilisation, reaching the unreached populations, nutrition education, collecting quality data, strengthening M&E and developing the evidence base for effective interventions through research.

Sustaining the momentum gained through advocacy and ambassadors/champions for nutrition to increase awareness amongst policy makers, NGOs, private sector, the media and community leaders.

“We need passion. Passion for nutrition. We need to find amongst us, strong advocates and ambassadors for nutrition. They can be media personalities, politicians, school teachers, nurses, activists, name it - who are tired of seeing children dying of malnutrition. There are people who can speak to different audiences and influence a wave of change.” [Participant from Kenya]

Although SUN is seen to have provided a framework for coordination, there is a need to ensure this translates into improved coordination at national, state and community levels across all related sectors. Identifying and mapping stakeholders, appointing a focal point within each ministry and convening regular stakeholder events were all suggested, as was the creation of a standing committee on nutrition to sit within parliament, regardless of the ruling political party.

Clarity is needed on what Scaling up Nutrition means in practice. The development and agreement on a common vision is required, with nutrition indicators incorporated into national and state level plans.

To improve scalability and sustainability, interventions should be integrated into existing systems in country. An audit of existing service delivery systems should be conducted.

Annex 1: Summaries of discussion themes

Theme 1 summary: main benefits of joining SUN (27 to 28 November)

Expectations and motivations

Countries have joined SUN because nutrition needs more (financial and political) attention. The SUN movement provides countries with a platform for improved coordination and cooperation on nutrition between various stakeholders from different sectors; a platform to harmonize thoughts, strategies and plans for better service delivery. SUN provides a framework for these stakeholders to work towards a common goal according to common indicators, to raise awareness, track progress, secure further commitment on nutrition, as well as mobilize resources. In general, countries expect greater advocacy, increased leveraging of resources, as well as policy and technical support. SUN provides opportunities for sharing knowledge, experiences, and best practices across countries and between sectors, and collaboration on advocacy, monitoring, governance and coordination. SUN may lead to enhancement of institutional capacity, and there is potential for influencing vertical and horizontal integration of nutrition actors in-country to produce clear guidelines and harmonized protocols for service delivery. Furthermore, SUN is expected to refocus attention to prevention in certain countries, and allow for the development of cost-effective nutrition-sensitive development plans.

SUN 'networks' have already helped increase the number of stakeholders (e.g. from agriculture, public health, academia, and the private sector) involved in Kenya, and have facilitated their mobilization to finalize Kenya's national Plan of Action for nutrition. Such networks will also allow for improved abilities to address nutrition at the community level through better collaboration between stakeholders, improved sharing of knowledge, and increased awareness of effective nutrition interventions and their potential for scale up (Kenya). It is also expected that the SUN movement will be joined up with other initiatives such as the call to action on Child Survival, and that it will contribute to ensuring the inclusion of nutrition targets in future development plans (Indonesia).

Joining SUN publicly demonstrates countries' commitments to reducing malnutrition, and therefore it also provides opportunities to hold stakeholders accountable, secure further commitment from key individuals and organizations, and improve resource mobilization and allocation. In Kenya, joining SUN has helped gain high level political commitment for addressing malnutrition and related threats (for example, the Public Health Minister committed to elevate the Nutrition Division into a Department, widening the nutrition mandate), and it is expected that SUN will lead to increased government commitment to implementing Kenya's Food and Nutrition Security Policy as well as secure funding for the 5 year Plan of Action (2012-2017). In Indonesia, joining SUN has led to increased momentum and high level support for nutrition (e.g. the Nutrition Awareness Movement for the first 1,000 days).

Areas of progress and impact

Policymakers are increasingly becoming aware that nutrition is a development issue. Advocacy is taking place at subnational levels (Nigeria), and nutrition policies are being revised to be more holistic or multi-sectoral thanks to sharing of knowledge and best practice (Ethiopia; Nigeria). Some countries have created or increased budgets for nutrition programs, reflecting increased commitment by stakeholders. For example, Nepal's budget for direct nutrition interventions increased by about 300 percent this year. The SUN movement is helping align stakeholders towards a common agenda, and governments are scaling up activities, including adding nutrition components to agriculture projects (e.g. in Nigeria,

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Nepal).

In Kenya, significant steps have been made towards improving treatment, food fortification, as well as the finalization and distribution of its national Food and Nutrition Security Policy (2012) and Nutrition Action Plan (2012-2017). Bangladesh has made substantial progress in reducing child mortality. However, in both countries macro and micro deficiencies remain high (Bangladesh; Kenya) and significant work remains in relation to prevention, hygiene and sanitation, livelihoods, and education (Kenya). Both the Prime Minister of Bangladesh and the founder of BRAC are global lead group members. However, advocacy has not yet been backed by enough resources in Bangladesh. In Ethiopia, the CBN program focusing on children under the age of two has seen significant reductions in underweight. It is also expected that in Ethiopia, SUN will allow for the continuation and acceleration of already on-going activities such as community-based nutrition program implementation studies, complementary food product development, shelf life studies, studies on the cost of hunger, and national micronutrient studies.

Ambassadors/champions for nutrition in various countries at levels from the Prime Minister (Bangladesh, Nepal) to the community (Nigeria) have pushed nutrition onto the agenda at national and subnational levels. Gathering and using local evidence has increased awareness around the causes and consequences of malnutrition. For example, after joining SUN, Nigeria held a summit on scaling up nutrition and had participation from many stakeholders, especially the agriculture sector, with agriculture officers from 36 states present. The Minister of Finance has become a lead group member.

Overall, SUN is helping to create a conducive and enabling environment for engaging in nutrition.

Fears, concerns

Representatives from several countries expressed concerns with regards to joining SUN, its governance, and its implementation. In Indonesia, implementation is expected to face constraints due to Indonesia's highly decentralized structure. SUN represents an opportunity for Civil Society Organizations to work with the national government to gain commitment from local governments, as well as share knowledge about nutrition and about SUN in general at the district level. Sufficient resources need to be allocated to nutrition in local budgets at province and district levels.

Several participants are not yet sure about the benefits of SUN, and question its ability to be strategically focused, its ability to highlight the most effective evidence-based approaches, and its ability to differentiate between scenarios in different countries (Indonesia). Some worry about how the momentum on nutrition created by SUN can be sustained (Kenya).

Some participants do not see many (if any) expected benefits from SUN. One participant from Bangladesh argued against the assumption that spending USD 12 billion will eradicate childhood malnutrition in developing countries, suggesting that resources are being inappropriately allocated in such plans (e.g. too much for plumpy'nut, too little for breastfeeding support), and that it has too much involvement of the private sector (e.g. GAIN). Suspicion was voiced that private sector partners including GAIN are controlled by food companies, and there has not been enough space for questions or input from stakeholders into the SUN development process (Bangladesh). Companies need to make profits, and breastfeeding is not profitable so they will target older children and adults instead. It is hence important that governments together with Civil Society organizations drive SUN in-country (Indonesia). Contributions by GAIN however agreed with this and re-emphasized the importance of

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exclusive breastfeeding, while also emphasizing the importance of complementary feeding after 6 months and the importance for all stakeholders to effectively work together to improve nutrition.

Lastly, some participants stated that we must recognize that food processing and the private sector have a role to play, but that we must engage with caution. Regulatory frameworks are needed to define what the private sector should and should not do; SUN provides an opportunity for such a discussion.

Theme 2 summary: challenges and constraints to scaling up SUN (29 November to 2 December)

Nepal

There has been a lack of **coordination** in Nepal in order to effectively share information about nutritious foods with the public. The **nutrition information system** is weak between key sectors, and a costed strategy to address this is yet to be finalized. **Socio-cultural factors** play an important role in determining what children eat (e.g. children are given what they ask for, or are not encouraged to eat if they don't want to). **Other influences** affect household budgets (e.g. school fees, clothes, modern devices), which can in turn affect what is spent on nutritious foods (vs. packaged foods).

There are also large institutional, organizational and human resource **capacity gaps** at the national, district, and community levels. There have been challenges with regards to integrating interventions effectively, along with coordinating budgets and adequate administrative capacity. The Nepali government has resisted integrated programming and a discussion needs to be held, supported by donors and the National Planning Commission.

There are inadequate institutional arrangements for **scaling up** remaining nutrition-specific interventions (maternal nutrition, YCV with MN powders, and CMAM), and community health workers and volunteers, as well as other frontline workers from non-health agencies lack the necessary capacity to carry out nutrition interventions, posing challenges to scale up. A costed strategy to address these capacity gaps is yet to be developed.

Furthermore, there is a need for sustained and predictable **financing** to scale up nutrition specific and nutrition sensitive interventions at national and district levels. Lastly, the **lack of political stability** and **lack of elected bodies** at district and village level hinder local governance and accountability.

Nigeria

There is a lack of sustainable mobilization and release of **funds** for nutrition interventions (often largely donor driven) and there is no specific budget line for nutrition; this means that funding is insufficient for effective scaling up efforts.

While there has been increased **political will** at national level, state and local governments need to engage. There is inadequate emphasis on nutrition among policy makers and the general public, and little political commitment of both policy makers and technocrats to ensure that a well-governed and well-coordinated body is in place to take nutrition forward. There is therefore also little commitment by the government to ensure that existing nutrition related policies are reviewed and aligned with the SUN objectives. The SUN network should continuously work to ensure that nutrition continues to be part of the national discussion and has buy-in from key policy-makers, legislators, and other political leaders.

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Due to the lack of an institutionalized structure to address nutrition issues, in-country multi-stakeholder **coordination** also represents a challenge. With regards to planning and programming, SUN should work within existing systems in the country in relation to maternal, infant and child health for better coordination and harmonization, and for the strengthening of those systems.

In addition, Nigeria's **governance structure**, with semi-autonomous federal, state and local governments, means that decisions made at higher levels are not necessarily binding at lower levels of governments, e.g. states or LGAs.

There also exists limited **understanding and awareness of the SUN movement** and about what scaling up actually means, especially at local/community levels; and hence there is limited community / grass-roots participation. SUN partners must have **clear roles and responsibilities**, in line with their strengths, and should build relationships with lower level institutions such as CBOs, FBOs, CSOs, the media, and so on.

There are also constraints at the community/health facility level, where there is **limited capacity** to plan, implement and monitor nutrition interventions. There should be possibilities for nutritionists to be trained and retrained to ensure quality in the implementation of nutrition interventions. Furthermore, **insufficient knowledge/information** on needs/gaps, unclear targets and timeframes, and challenges around monitoring, documentation and reporting represent further challenges.

Lastly, **public-private sector collaboration** will be crucial, as well as implementation and achievement of SUN objectives in line with equity, gender, equality and human rights concerns. The strengths and the reach of the private sector (formal and informal) as well as professional associations should be explored. Stronger and higher quality **data** on nutrition, food security, and household care practices is also needed, as well as better capacity to collect, consolidate and analyze data.

Bangladesh

There are significant challenges in relation to **multi-sectoral coordination and communication**.

Cautionary steps should be taken to avoid "sliding into oblivion" when the global pressure is off, and when there are no more high level meetings. There are also challenges related to **decentralization** such as coordination, leadership, and resources. For scaling up IYCF, there is still a lack of **human resource capacity**. **Monitoring** and **using data** for solving front line problems is also inadequate.

While there is substantial support for SUN from the government, there is a **lack of a clear and agreed vision** among the various partners (nutritionists, public health specialists, and so on) on how to use this support; SUN could play an instrumental role in institutionalizing intersectoral commitment, and it would be helpful if a **SUN spokesperson** from the government was appointed to lead all players in Bangladesh to make the movement a success. Capacity also needs to be strengthened in order for nutrition delivery across sectors to take place. Lastly, there is a need for more **country specific guidance** on SUN, to ensure that countries can adequately track progress on SUN indicators. There are some positive examples from SPRING in Bangladesh however on how this can work.

Ethiopia

As in other countries, **multi-sectoral coordination** and the sharing of responsibilities represents a challenge. There is a need to **raise awareness** about nutrition at the sub-national/local level. Other challenges include: having sustainable **funding**, **advocacy** (especially in remote areas), the invisible

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nature of chronic malnutrition and how to tackle it, **cultural traditions** related to IYCF, financial and technical support, and the limited appreciation of role of nutrition in economic development. There is also a need to **revise the national nutrition program document**, accompanied by a clear **capacity building plan**. A strong **monitoring system** and **reliable research** on nutrition is also lacking. Most attention is focused on food security needs, leading to a neglect of nutrition aside from emergency interventions. There are also institutional, organizational and HR resource **capacity gaps** at all levels (national, regional and woreda/district and community levels). Poor remuneration and volatility of employment are constraints to this. Furthermore, poor infrastructure (physical infrastructure such as roads, as well as e.g the education system) is needed to implement interventions and ensure nutrition is included in school curricula.

More **formative research** is necessary to for example design effective BCC strategies and other programs that need a firm understanding of local context. And lastly, more **political commitment** will be needed, as well as stronger **linkages between livelihoods and nutrition programs**.

Indonesia

While there is substantial **political commitment** to nutrition at the national level, there are challenges to **decentralize** interventions to the district level, find local leaders to champion the cause, and develop the sufficient **capacity** to be able to carry out IYCF counseling (e.g. CCT facilitators part of a pilot program have not been trained to implement IYCF interventions at the local level, and there is insufficient caregiver knowledge of IYCF practices and issues surrounding breast milk substitutes).

While there is substantial political commitment to nutrition, **government corruption** and conflicts of interest remain big challenges. Hence, “multi-sectoral” must include those working on accountability and transparency. Furthermore, the agricultural and education sectors to pay more attention to nutrition, within their food diversity agenda and development of school curricula respectively. There is a need to **review long-standing interventions** that have little effectiveness (e.g. 15 years of iron supplementation with high reported coverage, but little impact on maternal anemia, LBW, or stunting). **Capacity of local producers** also needs to be developed to ensure that the MoH is capable of providing nationally developed micronutrient supplementation instead of relying on imports. It will also be important to clarify the role of the private sector in child nutrition beyond 6 months or 1 year. The code for marketing of BMS is yet to be adopted. Lastly, **awareness-raising** will be crucial among the media, parliamentarians, and local governments, as well as those working in other sectors who may not have a nutrition background (e.g. public health or medicine) so that their buy-in can be secured. When advocating to non-nutritionists, their point of view needs to be taken into consideration to be clear what inputs the nutrition sector needs from them.

Kenya

In Kenya, challenges to SUN include **inadequately qualified personnel** in remote areas (too little remuneration and little job security hence a high turnover), **low budgetary allocation/funding** (currently below the Abuja Declaration’s 15%), as well as too little **advocacy** for a multi-sectoral approach, for improved more political commitment to nutrition, and for more funding for nutrition.

The **lack of sustained political commitment** and high level **multi-sector coordination** and collaboration (including vertical program strategies with nutrition as an outcome indicator) also presents constraints. Furthermore, within the health sector, there is a need to harmonize activities between the two ministries of health. While nutrition leadership comes primarily from the Nutrition Division within the

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Ministry of Public Health and Sanitation, the Food and Nutrition Security Policy sits with the Office of the President and has not been enacted yet. This makes it harder to convince other sectors to prioritize nutrition.

Insufficient attention is given to underlying and structural causes of malnutrition, and there needs to be clarity among partners on **how to address stunting**. **Knowledge about nutrition** among general population (healthy eating habits, etc.) is also lacking, and the implementation of community strategies has not started; linking community activities to health-based activities should be done to address low coverage issues. There is also **too much emphasis on emergency** intervention as opposed to prevention.

Engagement with the private sector also needs more thought. Companies involved in food processing should be sensitized on the need to fortify their products as part of their CSR; the Ministry of Health should take education on nutrition to the grassroots level to counter misinformation about fortified processed food products. **Monitoring and evaluation** for SUN interventions is also a challenge; the Kenya Nutrition and Dietician Institute also needs to be strengthened to ensure effective regulation and monitoring. Furthermore, there is a need for more **nutrition ambassadors**, especially in rural areas in order to reach vulnerable groups.

Furthermore, there is inadequate infrastructure on which to base policies (physical infrastructure, but also e.g. education infrastructure), **poor linkages** between livelihoods and nutrition programs, a **lack of formative research** (e.g. BCC designed without really studying population targeted and determinants of unhealthy behavior), and a lack of information about nutrition in schools.

Lastly, it will be important to disseminate messages about nutrition down from national to sub-national to local levels; this will be particularly important with the upcoming elections in March 2013, which will lead to counties' autonomous operation.

Table 1: frequency of constraints to Scaling Up Nutrition highlighted by discussion participants (Theme 2)

Constraints/challenges	Countries' frequency of response					
	Nepal	Nigeria	Bangladesh	Indonesia	Ethiopia	Kenya
<i>Defining the nutrition/SUN agenda</i>						
Unclear targets & timeframes		1				
Defining scaling up		1		1		
Clarity among SUN partners on how to address stunting						1
Agreement among partners (nutritionists, public health professionals etc) about the SUN agenda/vision and on how to use government support			1			
Need for SUN to develop more country specific agendas/indicators			1			
Implementation/achievement of SUN objectives in line with gender, equity, and human rights concerns		1				
Need for flexibility and adaptability		1				
Clarifying the structure and governance of SUN in line with SUN partners' priorities and strengths		1				
<i>Private sector issues</i>						
Private sector involvement		1	2	1		
Collaboration between public and private sectors		1				
Sensitize companies that process food on needs for fortification						1
Adopt the code for marketing BMS				1		
<i>Capacity</i>						
Lack of capacity gap analyses		1			1	
Institutional, organizational and HR resource capacity gap at all levels (national, regional, district, community)					1	
Human resource gap (nutritionists)	1	1				1
Capacity (and remuneration) of community and extension workers (e.g. frontline workers, health volunteers, etc.) to plan, implement and monitor nutrition interventions	3	1		1	3	3
Capacity of local producers to develop micronutrient supplementation products				1		

Constraints/challenges	Countries' frequency of response					
	Nepal	Nigeria	Bangladesh	Indonesia	Ethiopia	Kenya
Strengthening of the Kenya Nutrition and Dietician Institute for effective regulation and monitoring						1
Funding/financing						
Joint funding of the action plan by multiple sectors		1				1
Heavy dependence on donor funds for current interventions		1			1	1
Limited financing follow-up mechanisms		1				
Sustained and predictable resources mobilization and allocation (incl. low budget allocation / lack of nutrition-specific budget line)	2	4		1	2	5
SUN governance / country governance structure / political will						
Government corruption				1		
Lack of political stability and elected bodies at district and village level	2					
Lack of political commitment		3	1		1	4
Governance structure of the country		2				
Decentralizing successfully (facing issues of coordination, leadership, resources) (incl. implementation at community level)			1	4		2
Inadequate institutional arrangements to scale up	1					1
Working in line with/within existing structures in-country		1				
Coordination/integration						
Coordination w/ regards to sharing of information on nutrition to the public	1					
Coordination and collaboration between (and within) different ministries	1	3	2		1	4
Integrated programming (incl. vertical programming); how to configure packages of integrated interventions	3	1				3
Institutional arrangement for carrying out scaled up interventions at different levels	2					
Focus of other sectors (e.g. agriculture, education) on nutrition the agricultural sector to focus on food to prevent stunting, within their focus on food diversity				2	1	1
M&E, Information sharing						

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Constraints/challenges	Countries' frequency of response					
	Nepal	Nigeria	Bangladesh	Indonesia	Ethiopia	Kenya
Existence of effective monitoring systems	2	1			1	1
Knowledge/understanding						
Inadequate knowledge about nutrition among the general public					1	2
Awareness about SUN with the media, parliamentarians, and local governments				1		
Awareness raising (esp. in remote areas)				1	3	
Awareness raising and networking about nutrition among colleagues/partners in other sectors who may not have had substantial nutrition training (e.g. those with a medical or public health background) and hence securing their buy-in			1	1		1
Lack of effective information system	2					
Development of studies and guidelines to conduct high quality research / conducting formative research				1	1	1
Limited understanding & awareness of SUN movement		2				
Insufficient caregiver knowledge of IYCF practices and surrounding breast milk substitutes			1	1		
Appropriate collection, collation, and analysis of data on nutrition, food security and care practices		1				
Too much focus on emergency interventions vs. prevention + lack of holistic programming					1	1
Geographical issues/distance/coverage						
Need for nutrition ambassadors in rural areas						1
Need for development of developing country infrastructure (e.g. roads, education etc.) to serve as a basis for effective policy-making			1		1	1
Coverage of interventions						1
Operating in remote areas with poor infrastructure						1
Other						
Socio-cultural factors	1					
Lack of livelihood programs (off-farm income generation activities) to increase purchasing power of HH for nutritious foods	1				1	1

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Constraints/challenges	Countries' frequency of response					
	Nepal	Nigeria	Bangladesh	Indonesia	Ethiopia	Kenya
Feminization of agriculture that might compromise women's time and child care	1					
Outside influences that affect households budgets (e.g. school fees, clothing, etc.)	1					
Making progress when global pressure is off, when there are no more high-level meetings			1			
Limited community/grass-roots participation		1			1	
Changing strategies when certain interventions are not working				1		
Building links with CBOs, CSOs, the media etc.		1				

Theme 3 summary: what needs to happen going forward for SUN to be effective in reducing undernutrition? (3 to 4 December)

Kenya:

- More well-coordinated and targeted **advocacy** at all levels is needed to ensure that (financial and human) resources are available for governments, NGOs, the private sector and donors to tackle nutrition issues in-country and follow the national plan of action. Furthermore, advocacy is necessary for nutrition to be considered as crucial to overall economic growth. This can be done by having more evidence-based nutrition interventions that will increase funding for the sector. Furthermore, the country nutrition representative needs support to ensure nutrition activities are included in country budgets and action plans. Political leaders should be continuously sensitized.
- **Coordination and collaboration systems** between different sectors on nutrition need to be strengthened at different levels. Regular meetings for coordinating committees at all levels should take place so that we can track progress and share results. Furthermore, partnerships among all sectors should be encouraged to mobilize further resources and ensure production of good quality food, and promotion of breastfeeding.
- The **Community Strategy** needs to be actualized and supported by the Kenyan government to ensure high coverage of nutrition activities at the grassroots level, and to increase community demand for nutrition services. Communities should be involved to identify available resources and ensure that some of the resources are allocated to improving nutrition from the family to the national level.
- There is a need to have strong **ambassadors** for nutrition (from media, politics, education, health, activists etc.) who can speak for and to different audiences, and speak publicly about the issue.
- **Capacity** needs to be built for staff in the health sector, the private sector and among community leaders of advocacy, coordination, and how to implement the high impact nutrition interventions, and how to implement them within integrated health services.
- Guidelines need to be reviewed, supported by high-quality research and effective monitoring.
- **Awareness-raising and dissemination** of SUN messages is needed, and the national nutrition action plan and draft Food and Nutrition Security Policy need to be realized at national and country level.

Nepal

- It is important that we **maintain the momentum** gained on nutrition so far. The multi-sector nutrition plan was signed off by all relevant sectors, and we should continue to engage policy makers, document experiences, and share these with other countries.
- There is a need to establish **sustainable financing** of the Multi-Sectoral Nutrition Program (MSNP); a strategy for nutrition surveillance and a **monitoring system** are needed to track progress of MSNP implementation. Furthermore, there should be investment in human resources, coordination, and monitoring.
- **Nutrition knowledge** needs to be improved: making **nutrition education** compulsory in schools would ensure good nutrition knowledge among the public; every government ministry should have a nutrition focal point to develop links and improve coordination among government programs. Adequate **research** is also needed on consumption, feeding practices, gaps, and remaining challenges.
- Strong **advocacy** on nutrition is required (e.g. through nutrition champions) to all stakeholders to raise awareness of the importance of nutrition for overall national development. The media should be utilized for the dissemination of messages on nutrition.

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- SUN should host regional events e.g. 6 monthly for networking and interaction between SUN country representatives. Conducting a stakeholder mapping exercise would allow us to keep track of nutrition initiatives
- There is also a need to develop a **capacity building strategy** to scale up nutrition-specific and nutrition-sensitive interventions (incl. human resource development but also in-service and pre-service training); and build capacity in areas such as leadership, planning, coordination, supervision, monitoring and information systems.
- It is important to maintain alignment between SUN and REACH
- Finally, there is a question in relation to **how we reach the hard to reach** (those in geographically hard to reach locations, or those hard to reach due to poverty, ethnicity, caste, etc.)

Nigeria

To meet challenges, there is a need to:

- **Integrate action plans**, and align donor agendas with government plans
- Assess and **build local capacity** to reduce turnover and duplication, and increase sustainability of projects
- **Strengthen understanding** of the nutrition problem among all stakeholders; Distinguish between food security and nutrition security
- Facilitate **multi-sectoral and multi-disciplinary collaboration** aimed at facilitating capacity building and mobilizing resources; and establish a **forum to engage with private sector**
- **Broaden partnerships** to include religious and traditional institutions, OPS (CSR), and professional associations
- Adopt a principle of **peer review** within the SUN movement; **align country sub-strategies** with SUN global objectives and vision
- Establish **Nutrition Demonstration Centers** in each of the Local, State and Federal health institutions (in every community)
- "Fast-track" actions to **build credibility for nutrition-linked programs** and enhance **commitment of political leaders** as well as capacity of institutions.
- Create coordinated **media strategies** for nutrition advocacy and public education.
- Appoint **nutrition champions**
- **Strengthen nutrition data**; build better nutrition information and surveillance systems on which to base planning, resource allocation and impact evaluation
- Most activities are at the national level; they should be cascaded down to state and local government levels to ensure effective adaptations and buy-in.
- Push for adequate **budgetary allocations** on nutrition; define a **framework to monitor and track funding** for nutrition to prevent duplication and ensure that it supports elements of a government led strategy/plan. This can also allow for analysis of spending, and supporting Government decision making on where it should be prioritized.
- Push for **community engagement and social mobilization**; community based approaches like integrated community case management (ICCM) should be scaled up and involve diverse stakeholders
- Increase and improve **monitoring and evaluation**; publish **performance scorecards** on key nutrition indicators at least twice a year
- Engage men / heads of households; improve female education
- Improve and coordinate with agriculture

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- **Review, prioritize and update key interventions** as part of the Nigeria National Plan of Action for Food and Nutrition 2004. There are a number of existing policies and plans in Nigeria that can serve as a basis for an updated plan.

Ethiopia

To meet the challenges, SUN can help facilitate the following:

- A coordinated effort involving all stakeholders, monitoring the interventions.
- Advocacy and sensitization of policy makers and public / communities: share evidence showing nutrition is critical to economic development
- Build capacity for academic and research institutes
- Strengthen the nutrition coordinating body to ensure multi-sectoral work
- Invest in girls education
- Engage the private sector in production and distribution of appropriate, affordable complementary food
- Motivate agriculture development programs to be nutrition-sensitive

Bangladesh

To meet the challenges, the following actions are proposed:

- Political support is essential. To keep nutrition a top priority, create a standing committee on nutrition in parliament, which will be in place irrespective of which political party is in place.
- Educate the media on undernutrition; use prominent figures in the country as champions to support interventions.
- Develop a nation-wide TV campaign on nutrition and the 1000 days to improve knowledge and practices among population. NOTE: Alive & Thrive has a TV campaign with 6 commercials delivering IYCF messages.
- Help relevant government bodies to define standards of practice, and encourage coordination.
- SUN will provide a strong civil society platform for scaling up nutrition, ensuring sustainability and wide participation.

To maximize effectiveness the following is needed:

- Good governance
- A results-based approach with immediate, medium-, and long-term action plans with built in tracking
- Strong civil society constituency to support nutrition agenda; strong partnerships
- Awareness and momentum through conferences, workshops, fairs, technical working groups

The role of SUN in meeting these challenges:

- Facilitating sustained advocacy and motivate countries to generate sustainable funding
- Help countries systematically de-construct what is meant by nutrition-friendly actions for each sector, then share lessons on achieving uptake
- Nutrition capacity building to fill implementation needs; tools and guidelines for program monitoring and documenting progress
- Assist countries to positively involve the private sector

Indonesia

To move SUN forward the following concrete actions are necessary:

- Advocacy with politicians to get nutrition language and indicators into strategic plans, policies, and roadmaps in relevant sectors

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- Decentralized policies to support the above
- Advocacy with politicians for appropriate funding for these policies
- Agreed upon definition of SUN, agreed upon indicators, so as to develop workable targets for each country.
- Research showing underlying factors affecting slow progress of nutrition and opportunity cost of not investing sufficiently
- Educate local leaders so that commitment can cascade down to district level.

In addition there were suggestions to a) support communities in rural areas in setting up producer organizations, b) build human and institutional capacity in rural areas (esp. unemployed women and youth), c) integrate nutrition into smallholder agriculture, d) improve economic access to nutritious food, e) support primary and secondary value addition to optimize shelf life to minimize post-harvest losses.

Annex 2: Discussion stimulus note

[Used to brief participants in advance of the online discussion]

Outline of Paper 4 of the Lancet Nutrition Series 2013

Gillespie, S, Haddad, L, Mannar, V, Menon, P. and Nisbett, N.

Over the last five years or so, since the first Lancet series on nutrition was launched, the landscape for nutrition has changed quite dramatically. The volume and level of political discourse has increased and led to stated commitments on the part of many national governments, international organisations and donors. The Scaling Up Nutrition (SUN) movement has both driven and been driven by this developing momentum. At the end of 2012, we find greater harmonisation among stakeholders with regard both to their understanding of the main causes of malnutrition, as well as the various options for addressing it. Enhancing and expanding the quality and coverage of nutrition specific interventions, and the embedding of nutritional components within more distal (“indirect”) interventions, such as agriculture, social protection, water and sanitation etc., are now universally recognised as the main challenges. And there is a crucial third level of engagement which – like undernutrition itself – has been neglected till now. This third level relates to the environments and processes which underpin and shape political and policy processes.

Paper 4 in this series focuses on this third level. The core question that we address here is: **“how can enabling environments and processes be cultivated, sustained and ultimately translated into impact on the ground?”**. How has high level political momentum been generated? What needs to happen to turn this momentum into results on the ground? How to ensure that high quality, well resourced nutrition-specific interventions are available to those who need them, and agriculture, social protection, water and sanitation systems and programmes are proactively re-oriented to support nutrition goals?

There are 5 main sections. First, after a brief introduction, we characterise “enabling environments” with regard to nutrition: what are they, where are they, and what drives their formation? Second, we highlight what has changed at the global level over the last 5 years with regard to the development landscape, and the effects these changes have had on nutrition as a development priority. Changes have occurred in the wider landscape as well as within the nutrition community itself. In the next section – the largest of this paper – the focus shifts to the national level. We review the current situation of high-burden countries with regard to their policy commitments and the degree to which nutrition relevant actions have been intensified and scaled up in recent years. Is emerging political momentum being translated into accelerated rates of reduction in undernutrition? Are the right programmes and interventions in place to allow this to happen? We examine key elements and processes to strengthen nutrition relevant leadership, capacity, accountability and financing. Throughout this section, we are tracking key drivers through three stages – a) creating or cultivating momentum, b) sustaining and consolidating it, and c) translating this momentum into impact. The final two sections explore remaining evidence gaps before concluding with some recommendations for the future and a call to action.

Key points from the Scaling Up Nutrition (SUN) Government Focal Points’ Meeting, Sept 2012

The meeting encouraged focussed discussion on key issues raised in the Focal Points’ first meeting and during their regular teleconferences. The discussion concentrated on two issues that are relevant to advancing the SUN Movement. Firstly, the development of cross sectoral nutrition sensitive strategies,

and, secondly, how to ensure that the SUN Movement Networks are better able to respond to the needs of Country Government Focal Points.

Nutrition sensitive strategies

SUN Country Focal Points and Network Facilitators discussed challenges to effective in-country implementation of nutrition sensitive strategies at scale. They discussed what Government Focal Points could do: (i) to align nutrition sensitive interventions across different sectors around a single set of results, and (ii) to scale up resources available both for nutrition specific interventions and for implementation of nutrition sensitive strategies in multiple sectors.

The group's suggestions were to:

- a) ***Engage communities from the start***
- b) ***Lay the foundation for a multi-sectoral approach***
- c) ***Develop plans and a results framework for nutrition sensitivity***
- d) ***Create a mechanism to sustain high level engagement***
- e) ***Advocate for nutrition sensitivity – sharing experiences between countries***
- f) ***Ensure accountability***
- g) ***Mobilise adequate resources***
- h) ***Engage key actors on financing – finance ministries and civil society***

Ensuring that SUN Countries receive the best possible support

How could SUN Countries receive better support from the SUN donor, business, civil society and UN networks (i) when they work with stakeholders in different sectors to identify nutrition sensitive interventions and (ii) when they try to align the interventions with a single set of expected results. They also considered how best SUN Country Focal Points and Networks can work together to mobilise extra internal and external resources for scaling up nutrition.

The group concluded that the following actions were needed:

- a) ***Get the different stakeholders to focus on nutrition***
- b) ***Emphasis on capacity building is vital***
- c) ***Share experience and information among stakeholders***
- d) ***Increase work at the regional level***
- e) ***Align programmes and funding***
- f) ***Adopt innovative approaches to mobilizing resources***
- g) ***Work with the SUN Movement Networks on financing***
- h) ***Document country experience***
- i) ***Engage the Private Sector***
- j) ***Make the Movement Work as We all Want it To***

Conclusion

The meeting was an opportunity for analysing constraints to scaling up nutrition, sharing approaches for overcoming them and identifying ways in which the SUN Lead Group, Networks and Secretariat can help. The outcomes of the discussion emphasised the importance that SUN Focal Points attach to the four processes identified in the SUN Strategy.

- First: functioning, multi-stakeholder platforms that focus on people's interests and needs.
- Second: agreed strategies and legislative frameworks.

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- Third: a single set of expected results around which different groups align.
- Fourth: mobilising additional resources (and capacity) in support of effective actions to realise results.

SUN Country Focal Points are leading the way in catalysing these processes at country level. However, they are looking to the SUN Lead Group, Networks and Secretariat for support in mobilising and sustaining high level political commitment; capturing and sharing learning; aligning external support; mobilising resources; and advocating at national and global levels.

The full report can be viewed here: http://scalingupnutrition.org/wp-content/uploads/2012/10/28-September-2012-SUN-Focal-Points-Meeting-Final-Report_en.pdf