

**FOR THE APPROVAL/SIGNATURE OF THE DIRECTOR OF
PROGRAMMES**

Subject: 2010 Workplan

Section: Nutrition

Section Chief: Werner Schultink

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Approved



Nicholas Alipui
Director, Programmes

Not Approved

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Date

Workplanning 2010 – 2011. Nutrition Section.

Achievements against planned results for the 2008-2009 biennium

The past biennium (2008-2009) saw a marked upswing in Nutrition. This increased attention was noted not only within UNICEF, but also among the international development community including donors, institutions and agencies. Reasons included a strengthened and well articulated evidence base (e.g. The Lancet Nutrition series publication), improved advocacy on the cost effectiveness of nutrition interventions (Copenhagen Consensus, 2008), as well as a sharp increase in food prices in 2008 which threatens to reverse the gains made towards MDG 1. .

Within UNICEF, the Nutrition agenda advanced on many fronts. As part of the mid-term review process of the MTSP, Key Results for Nutrition were updated to be aligned with the latest evidence base and programme experiences. . Programme aspects such as complementary feeding, treatment of severe acute malnutrition, maternal supplementation and food fortification are specifically included. During the acute period of the food price increase in 2008, UNICEF allocated more than US \$60 million to counteract the negative impact of the price increases among vulnerable populations in select countries. The largest part of these funds was used for nutrition –and related health and WASH- interventions. Human resource capacity in countries and regional offices also improved. For example: two regional L-5 level Nutrition Advisors were appointed in Asia; a new L-4 specialist was appointed in Nigeria and Indonesia,. Towards the end of 2009, a special progress report on Tracking Progress on Maternal and Child Nutrition was released. Notably, this report focussed on stunting and on the 24 countries with the highest burden, and proposed a set of interventions to be implemented at scale. The Nutrition Section also spent considerable time and efforts to update the upcoming Facts for Life publication and prepare fact sheets on the different nutrition interventions for fundraising by PARMO.

Programmatic guidance was also strengthened. Documents published included programme guidance on the treatment of severe acute malnutrition; guidelines on the selection criteria for SAM treatment based on new WHO growth standards; programme guidance on infant and young child feeding (breastfeeding, complementary feeding, infant feeding in emergencies and HIV and infant feeding); guidance on new indicators to assess infant and young child feeding practices; case studies on large scale community based breastfeeding programmes and a review of infant and young child feeding programming; nutrition in emergency guidance was published by the Emergency Cluster; UNICEF also led on the finalization of a ten-year initiative to determine the impact of multiple micronutrient supplementation in pregnancy; the results of this were published in a special supplement of the Food and Nutrition Bulletin.

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24.2.10.
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3. Can be signed
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The recently published report on Tracking Progress revealed that there are many success stories on the reduction of undernutrition and on improvement in coverage of specific interventions. For some programme areas, such as breastfeeding, salt iodization, and vitamin A supplementation, good documentation of how improvements can be achieved is now available, and can be used to support those countries still facing bottlenecks to scaling up. Similar experiences exist for the treatment of severe acute malnutrition using RUTFs. However for this programming area more detailed information on the number of treated children needs to become available.

Focussed, programme oriented workshops and country visits also lead to the expansion of nutrition programmes. For example technical workshops on infant feeding in West Africa and on the use of multi-micronutrient powders in Asia improved the programming in several countries.

Experiences with supply management of vitamin A supplements (timeliness and focal points for handling) and RUTFs (shortage in supply) also led to improvements in this area in terms of forecasting, and the supply availability has improved for RUTFs, and for micronutrient powders.

Strategic Adjustments for 2010 – 2011 and Future Landscape

The future landscape and strategic adjustments for 2010 and 2011 focus on the following objectives.

- *Strengthening programmes to reduce stunting*
Stunting indicates more accurately the high burden of chronic undernutrition which exists in many countries, and in many countries the burden is higher than the burden of underweight. A more specific focus on stunting reduction is therefore required. In order to reduce stunting prevalence, interventions to support maternal nutrition and complementary feeding will need to be strengthened and implemented at a much bigger scale. Whereas we have achieved improvements and good coverage with programming areas such as vitamin A supplementation and (to a lesser extent) breastfeeding, the above mentioned 2 programming areas are currently implemented at much smaller scale. Whereas we will continue to strengthen ongoing programming, more focus will be given to improve maternal nutrition and complementary feeding.
- *Scaling up of effective programmes in key countries with high burden and or high prevalence.*
The 'Tracking Progress Report' highlighted that 80% of the world's stunted children live in just 24 countries. It is clear that if we want to reduce stunting globally, special efforts will need to be made to increase coverage of key interventions in these 24 countries. In addition there are a number of smaller countries where prevalence of wasting and/or stunting is very high and these countries (e.g. Timor Leste, Guatemala) will need special support.
- *Expanding HIV-Nutrition programmes*

Research is ongoing in various countries in collaboration with WFP and will need to continue and followed up.

The benefit of vitamin A supplements for newborns is still uncertain. WHO is supporting multi-site trials which will further inform policy. UNICEF is part of the core group along with other partners steering this process. Meanwhile, UNICEF supports the operations research around the introduction of a new born care package through community health workers in Nepal which includes the provision of newborn vitamin A.

Multiple micronutrient powders (best known by the trade mark *Sprinkles*) are an effective way to treat anemia in children. Issues remain re: the use of iron-containing MNPs in malaria endemic areas with respect to the quantity of iron and its impact on health of children affected by malaria. UNICEF is part of a multi-partner initiative with the BMGF and NIH to support research in this area. Meanwhile, UNICEF is exploring the use of low-iron containing MNPs in countries/areas with strong malaria prevention and control initiatives.

UNICEF should also explore potential collaborators for operations research on approaches to improve maternal nutrition, particularly for pregnant and lactating women with low BMI, including distribution of fortified supplements (e.g. lipid nutrient supplements), vouchers and cash transfers together with counselling.

Although new guidelines were developed for the improved programming on complementary feeding, experiences with this programming area will need to be documented and evaluated in order to be able to provide optimal guidance to countries. More operations research is needed on delivery and targeting mechanisms for fortified complementary foods/lipid nutrient supplements to improve complementary feeding for children in the most vulnerable or food insecure populations (for whom social marketing is unlikely to be appropriate), and

UNICEF should explore potential partners to do this.

In order to be able to continue to strengthen advocacy about the need to expand nutrition programmes it is useful to get more information on the cost- benefit ratio of various nutrition interventions. This includes information on the lives saved because of ongoing programmes, and information on this will be strengthened through collaboration with Cornell University as well as the group working on the LiST tool.

The impact of the food and economic crisis on the nutrition status of women and children is still difficult to quantify and efforts will be made in collaboration with other institutes and universities to shed more light on this. In this context the potential use and impact of social safety nets such as food-for-work, conditional cash transfers, vouchers, will need to be explored and documented.

Food security is an important determinant of nutritional status, especially in countries which face regular shortages in food production. Knowledge on the assessment of food security as well as on policies and strategies and required partnerships need to be enhanced.

Strategic partnerships with several organizations and universities can be used to ensure implementation of parts of the research and knowledge creation agenda (e.g. Cornell and Tufts University, SGHI, IFPRI, regional and national institutions) as well as the increase of coverage of key interventions (e.g. Micronutrient Initiative, Helen Keller International, Valid).

Consultancy contracts and institutional contracts will need to be used to ensure implementation of several time-bound tasks. Furthermore, the focus of accountabilities and tasks of several section staff members will need to be reviewed and widened.

Funding Summary Sheet Nutrition Section 2010/2011 Workplan

| | RR | OR | TOTAL Funded | Total Unfunded | Total Required |
|---------------------------------|-----------|-------------|--------------|----------------|----------------|
| KRA1 &2 | \$165,000 | \$1,591,000 | \$1,756,000 | \$266,000 | \$2,022,000 |
| KRA 4 | \$10,000 | \$6,818,820 | \$6,828,820 | \$722,000 | \$7,550,820 |
| overarching | \$176,000 | \$750,000 | \$926,000 | \$1,115,000 | \$2,041,000 |
| Total Nutrition Section | \$351,000 | \$9,159,820 | \$9,510,820 | \$2,103,000 | \$11,613,820 |
| % of total required in workplan | 3% | 79% | | 18% | |

| Priority funding needs 2010 | Amount |
|--|------------------|
| Conduct at least 4 Regional/sub-regional workshops/ consultations to review/develop region specific IYCF | \$80,000 |
| In coordination with ROs, other Nutrition Section & YCSD, provide joint strategic and technical support to high | \$27,000 |
| Revise ProPAN and Linear Programming software tools, hold workshop with designers and users of the tools, finalize and disseminate the tools for better programming in CF; support selected countries to use the tools to conduct assessments on CF. (partly funded) | \$10,000 |
| Review of forecasting of therapeutic supplies against actual to inform future forecasts and adaptation of tool (on 6 monthly basis) | \$15,000 |
| Establish stock pile /buffer stock of RUTF at SD | \$25,000 |
| Develop guideline and e-learning tool on nutrition in emergencies (partly funded) | \$10,000 |
| Organize workshop for ROs and selected COs for updating on Management of Acute Malnutrition, and other innovations in Nutrition in Emergencies | \$50,000 |
| Collaborate in further development/compilation of tools for nutrition investment cost benefit analysis for inclusion in national policy/budget (PRSPs, SWAPs) discussions | \$10,000 |
| TOTAL priority funding needs 2010 | \$227,000 |

1. Target country refers to: countries with U5MR > 22222 and/or stunting prevalence > 22222. Mainly from top 24 stunting burden countries (we need to make a list of these countries for planning and monitoring purposes which we are working on with ROs)
2. Appropriate Nutrition package to be defined by country specific context based on minimum package of xyz yet to be determined
future
4. Required inputs include, TA, SSA, TFT, etc. Staff time is implied in all.

Nutrition Section Planned Publications 2010

| Name/Topic | Partners | Type |
|---|-------------------------------------|--------------------------------|
| Guidance to countries on use of multiple micronutrient powders | SGHI, WFP, MI | Programme |
| Best practices and lessons learned on the use of multiple micronutrient powders. | N/A | Peer review article |
| Report of a 14-country workshop | | |
| Infant and Young Child Feeding Programme Review: Consolidated Report of Six Country Programme Review (2009) | Academy for Educational Development | Programme review |
| Introduction to Interpreting Area Graphs for Infant and Young Child Feeding (2009) | N/A | Programme guidance |
| Programme Guidance on Infant and Young Child Feeding (2010) | N/A | Programme guidance |
| Community Based Infant and Young Child Feeding Counseling: Training Package, Adaptation Guide and Brochures | URC/CHS, WHO | Training material |
| Infant and Young Child Feeding Programme Review: Lessons Learned and Future Perspectives (working title...) | N/A | Peer reviewed article |
| Perspectives on the implementation of the Baby Friendly Hospital Initiative | N/A | Peer reviewed article |
| Maternity Protection Resource Package | ILO, IBFAN | Advocacy and training material |