

STRATEGIC EVALUATION

Joint Evaluation of Renewed Efforts Against Child Hunger and under-nutrition (REACH) 2011-2015

Volume II – Annexes

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Prepared by Mokoro: Muriel Visser, Anthea Gordon, Mirella Mokbel, Stephen Turner, Liv Bjørnstad and Lilli Loveday.



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Evaluation Management

Evaluation Manager:	Dawit Habtemariam
Evaluation Management Group:	Pierre Tremblay – Head of Decentralised Development Evaluation, DFATD Marta Bruno – Evaluation Officer, FAO Krishna Belbase – Senior Evaluation Specialist, UNICEF Anand Sivasankara Kurup – Evaluation Officer, WHO Dawit Habtemariam – Evaluation Officer, WFP
Director, Office of Evaluation WFP:	Helen Wedgwood

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Annexes

Annex A Terms of Reference

**TERMS OF REFERENCE
JOINT EVALUATION OF REACH
(RENEWED EFFORT AGAINST CHILD HUNGER AND UNDER-NUTRITION)
COMMISSIONED BY THE OFFICES OF EVALUATION OF
FAO, UNICEF, WFP, WHO, DFATD CANADA**

Background

Introduction

1. The purpose of the TOR is to provide key information to stakeholders about the proposed evaluation, to guide the evaluation team and specify expectations that the evaluation team should fulfil. The TOR were reviewed by key stakeholders and inputs taken into consideration in the final version. The TOR were approved by the joint Evaluation Management Group comprised of the Offices of Evaluation of the UN REACH partner organizations (Food and Agriculture Organization FAO, World Health Organization WHO, United Nations Children’s Fund UNICEF) and the Canadian Foreign Affairs, Trade and Development (DFATD), one of REACH’s major donors.
2. The TOR are structured as follows: Chapter 1 provides information on the context; Chapter 2 presents the rationale, objectives, stakeholders and main users of the evaluation; Chapter 3 presents an overview of REACH and its activities, and defines the scope of the evaluation; Chapter 4 the evaluation approach and methodology; and Chapter 5 indicates how the evaluation will be organized.
3. The annexes provide additional information on REACH and the evaluation process including a stakeholder analysis, REACH working tools and guidelines, REACH log frame, detailed timeline of the evaluation and REACH fact sheets.

1.2. Context

4. There has been a long standing interest in nutrition at the international level, but the interest has heightened in recent decades. The United Nations Standing Committee on Nutrition (SCN) was originally created in 1977, although it evolved over time in structure and focus. In 1992 the first International Conference on Nutrition (ICN) was held which led to a declaration and plan of action on nutrition. The Lancet Series on Maternal and Child Nutrition published in 2008 presented evidence of the irreversible and profound effect of nutrition on overall child development and linked achievement of the Millennium Development Goals to efforts to address nutrition¹.

¹ The Lancet, Maternal and Child Undernutrition, January, 2008.

5. In 2008 the Directors-General of the Food and Agriculture Organization (FAO) and WHO and the Executive Directors of United Nations Children’s Fund (UNICEF) and WFP wrote a letter to Country Representatives recognizing undernutrition as a key component to malnutrition and health. The letter noted that the causes of undernutrition are preventable and linked undernutrition to overall economic and social development.² The letter committed the agencies to developing a partnership called the Renewed Effort Against Child Hunger and Undernutrition (UN REACH) in an effort to strengthen the fight against undernutrition. The International Fund for Agricultural Development (IFAD) later joined REACH in an advisory role. REACH was initially intended to help countries accelerate progress towards the Millennium Development Goal MDG 1, Target 3 (to halve the proportion of underweight children under five globally by 2015) primarily through a public health oriented approach. This approach evolved over time to reflect an evolving broadened multi-sectoral approach which was articulated also in the 2013 Lancet Series.

6. REACH takes place in the context of other UN and global initiatives on nutrition. The SUN movement (Scaling Up Nutrition) was launched in 2010. SUN has been described as a voluntary multi-stakeholder partnership to scale up nutrition.³ An external evaluation is currently on going of the SUN movement, with preliminary results indicating the growing importance of nutrition on the international agenda, but with concurrent concerns about the proliferation of initiatives that are not always well harmonized. The preliminary results also point to the challenges related to managing multi-sectoral engagement in the nutrition agenda at the country level, an issue that REACH also aims to address. The SUN Global Gathering held between 16-18 November 2014 in Rome brought together a large number of SUN stakeholders and provided an opportunity to discuss emerging evaluation findings.⁴ In its most recent annual report, REACH is described as co-facilitating with UNSCN the UN System Network (UN Network) at the global level, which supports the Scaling Up Nutrition (SUN) Movement. UNSCN harmonizes UN nutrition policy and standards across the UN agencies (Annex 1). REACH is responsible for supporting SUN processes at the country level by strengthening cooperation and coordination.⁵

7. Another important event, the second International Conference on Nutrition (ICN2) was held in Rome in 2014 to follow up on the 1992 ICN. Progress has been made since the first ICN, with diets and nutrition having improved over much of the world. However, improvements were not uniformly felt, with many people still under nourished and little change seen in in some regions, notably Sub-Saharan Africa and India.⁶ A background paper on policy recommended more public investments in agriculture and a focus on the poorest regions and different approaches to address the diverse needs of different segments of populations.

8. WFP’s Office of Evaluation (OEV) was requested by the REACH Secretariat to manage the independent evaluation required by the Canadian donor because of its capacity to undertake such work including its Evaluation Quality Assurance System

² Letter from the Directors-General of FAO, WHO and Executive Directors of UNICEF and WFP addressed to All Country Representatives and dated 22 October 2008.

³ An overview of the evolution of SUN is presented in the SUN external evaluation Terms of Reference and Inception Report available on the SUN website. Scalingupnutrition.org

⁴ Mokoro, 2014. Independent Comprehensive Evaluation of the Scaling Up Nutrition Movement: Interim Progress Report. Oxford: Mokoro Ltd, 03 October 2014.

⁵ REACH Annual Report 2013

⁶ The Importance of Trend and Policy Influences on Global Diets since 1992 Summary Mazzocchi, M; Shankar, B; Traill, WB; Hallam, D . Paper presented to the Preparatory Technical Meeting For The International Conference On Nutrition (ICN2) Rome, 13-15 November 2013

(EQAS) and because of its structural, institutional and behavioural independence. OEV carried out an evaluability assessment in 2013 in order to prepare for the evaluation. The evaluability assessment confirmed the importance of carrying out the evaluation jointly with all REACH partners. An agreement among the Offices of Evaluation of the REACH partners and DFATD to cooperate on the joint evaluation was developed in 2014.

2. Reasons for the Evaluation

2.1. Rationale

9. Monitoring and evaluation is a high priority for REACH in order to build understanding of the initiative's effect on improving nutrition governance and ultimately nutrition outcomes in participating countries; for knowledge sharing and learning across REACH countries and with other stakeholders. The evaluation is one element of REACH's overall accountability and learning framework, documented in the REACH Monitoring and Evaluation Overview (2012). Since nutrition governance must be tailored to each unique situation and is led by government, lesson learning and knowledge sharing are strongly linked to REACH's goal achievement, and has therefore been a high priority.

10. The evaluation is intended to address aspects that cannot be understood through routine monitoring in particular the extent to which REACH's outcomes have been achieved, factors affecting REACH outcome achievement and a comparison of experiences across different REACH countries that capture the difference in how REACH has been implemented in different countries. This will inform participating countries of progress and effects, and enable countries to understand how their own experiences compares to those of other countries. This is important information upon which future action by the REACH partner agencies or the country governments themselves could be based. Finally, the Canadian government funding for REACH came with the expectation that an independent evaluation be conducted of REACH. While the evaluation will satisfy that requirement, it could also be of interest to other current and possible future donors.

2.2. Objectives

11. The evaluation will address the dual objectives of accountability and learning as follows:

- **Accountability:** The evaluation will assess and report on the performance and results of REACH in the 8 DFATD funded countries. A management response to the evaluation recommendations will be prepared by the REACH secretariat to document the level of agreement with the recommendations and the steps to be taken to address the recommendations; and
- **Learning:** The evaluation will determine the reasons why certain results occurred or not to draw lessons and derive good practices for learning. It will provide evidence-based findings to inform REACH's future operational and strategic decision-making. Findings will be actively disseminated and lessons incorporated into relevant lesson sharing systems.

2.3. Stakeholders and Users of the Evaluation

12. An initial stakeholder analysis was conducted as a part of the 2013 evaluability assessment. The results are shown in a table in Annex 2.

13. Stakeholders were categorized as those in REACH Countries and those at the global REACH secretariat level. In country stakeholders include government actors in the range of ministries associated with nutrition, non-governmental partners involved in nutrition, UN partners, key donors and international and national REACH facilitators. Their interests are in knowing how effective REACH is, how to redirect if when needed to improve effectiveness, and how lessons can be shared across countries. These will be represented on an external advisory group.

14. Global actors include the REACH secretariat staff notably the REACH coordinator and REACH team. All UN partners including agencies WFP, FAO, WHO and UNICEF and global bodies such as SUN Networks and SUN Secretariat, the High Level Task Force on Global Food Security and the Standing Committee on Nutrition have interests in the evaluation. UN agencies collaborated in the establishment and implementation of REACH and are actively involved in REACH management and governance. They will also use the lessons learned to improve current programmes and when expanding REACH to new countries in the future. The SUN secretariat is a key stakeholder with an interest in coherence and synergies between SUN and REACH. Other UN bodies have an interest in ensuring that REACH is contributing in a coherent way to the overall UN effort to improve nutrition, the zero hunger initiative and the Sustainable Development Goals (SDGs).

15. Since the evaluation focuses on countries funded by the Canadian government, the donor with the highest level of interest in the evaluation is Canadian DFATD who will be actively involved in the evaluation. The evaluation is essentially a formative evaluation, because decisions have already been taken to expand the REACH approach to additional SUN countries. Other REACH donors may be interested in the results because of their potential to fund the REACH approach to other countries.

16. The evaluation will be conducted as a joint evaluation with the Offices of Evaluation of all UN partners and the DFATD donor serving on an Evaluation Management Group (EMG described more fully in Section 5.3 below).

17. An Evaluation Reference Group will be developed that includes the REACH Steering Committee (technical representatives of the UN partner agencies), the REACH secretariat, REACH facilitators and SUN Focal Points (representatives of host country governments) in the 8 countries included in the evaluation. The role of the evaluation reference group will be to:

- Review and provide inputs on the key outputs in draft form (Terms of Reference and Evaluation Report)
- Facilitate access to sources of evidence and data at country or agency level
- Participate as key informants in interviews conducted by the evaluation team
- Facilitate broader stakeholder interest in the evaluation process and utilization of results (especially amongst national government line ministries and other national actors)
- Facilitate preparation of a consolidated management response to the evaluation

3. Subject of the Evaluation

3.1. Overview of REACH and its Activities

18. REACH aims to reduce maternal and child undernutrition in participating countries, as a part of country's efforts to achieve its development goals. REACH's contribution is to improve national nutrition governance and management in the countries in which it works. Two overarching theories underlying REACH are that:

- a. Through **better coordination** and less duplication, nutrition actions will be more efficiently and effectively delivered.
- b. By taking a **multi-sectoral approach** to nutrition, both nutrition direct and sensitive interventions will have a bigger impact on nutritional status of women and children.

19. The premise that improved nutrition governance is a key component in the fight against malnutrition is broadly supported by academic literature and the international nutrition community.⁷ For example, the WHO Commission on the Social Determinants of Health argued that increased coordination and commitment among nutritional players was critical at all levels.⁸

20. To strengthen national governance and management, REACH implements standardized approaches and tools in each country. Capacity strengthening of national actors is a critical dimension.

21. REACH's *modus operandi* is to establish national facilitation mechanisms to support countries to intensify coordinated action to address undernutrition and stunting. An international facilitator is teamed up in each country with a national facilitator. Facilitators support the establishment of effective systems for nutrition governance and management. REACH defines effective systems as sustainable, government-led, multi-sectoral, and solution-oriented and based on partnerships involving different government agencies, as well as civil society, the private sector and relevant United Nations agencies. Implementation arrangements at the country level has varied from country to country depending on the national context.

22. REACH has a multi-tiered management structure with a small international secretariat based at WFP in Rome and governance in the form of a steering committee that includes representatives of all partner agencies, in addition to its country level governance and facilitation.

23. At country level, REACH introduces a number of diagnostic and analytical tools, including initial in-depth scoping and analysis of each country's nutrition situation (see Annex 3). Knowledge sharing systems are established and coordination mechanisms set up. The multi-sectoral approach aims to engage relevant government ministries across relevant sectors on nutrition-specific and nutrition-sensitive actions to ensure resources are used most effectively to reach those children in need.

24. The ultimate beneficiaries of REACH are women and children under five years of age, the most affected vulnerable populations with nutritional deficiencies. REACH

⁷ An overview of the background to the emergence of nutrition governance as a key component to combat malnutrition is provided in pages 4-5 of the REACH Monitoring and Evaluation Overview, July 2012.

⁸ WHO Commission on Social Determinants of Health 2008

aims to achieve a level of improved governance that indirectly impacts these beneficiaries while supporting UN agencies' ability to assist governments in the scale-up of nutrition efforts.

25. As shown in the REACH logframe (see Annex 4), REACH established a high level impact aim of improving the nutritional status of children under five years of age and women. This would be achieved by addressing the four REACH outcomes:

Outcome 1: *Increased awareness and consensus* of stakeholders of the nutrition situation and the best strategies and priorities for improvement

Outcome 2: *Strengthened national policies and programmes* that operationalize and address nutrition through a multi-sectoral approach

Outcome 3: *Increased human and institutional capacity* on nutrition actions at all levels

Outcome 4: *Increased effectiveness and accountability* of stakeholders in implementing at scale and supporting nutrition actions.

26. REACH began in two pilot countries Laos and Mauritania in 2008. Building on those experiences in 2010, the Canadian government (originally Canadian ~~International Development~~ Agency CIDA now DFATD) funded REACH efforts in the eight additional countries in Africa and Asia, as shown in the following table:

Region	Country
Asia	Bangladesh, Nepal
West Africa	Ghana, Mali
East and Southern Africa	Mozambique, Rwanda, Tanzania, Uganda

27. Implementation of REACH in those countries began in 2011

3.2. Scope of the Evaluation

28. The evaluation will assess the relevance, efficiency, effectiveness and sustainability of REACH. The evaluation will also assess the effectiveness of the REACH secretariat, processes and coordination arrangements, governance and partnerships at all levels. It will also assess progress/ achievements of results at the country level in the eight DFATD funded countries. Case studies will cover all countries. The evaluation will also examine issues that are cross-cutting in nature (such as gender and equity, participation, national ownership, use of evidence, progress monitoring and reporting).

29. Funding was received in March 2011 and activities are on-going in all countries up to the present time. Therefore the evaluation reference period will be from March 2011 up until April 2015, when the evaluation's data collection will take place in order to assess the fullest extent of results achievement.

4. Evaluation Approach, Questions and Methodology

4.1 Overview of Evaluation Approach

30. The focus will be on evaluating the REACH country-level initiative and on the

extent to which the systems, processes and activities developed have collectively contributed to the overall achievements of the REACH objectives and impact on country scale-up of nutrition.

31. The evaluation will assess what has been achieved by the REACH initiative; and its overall performance and effectiveness in achieving its objectives and outcomes, which are to improve nutrition governance and management and ultimately, improve nutrition in the 8 countries covered by the evaluation. It will also assess REACH's relevance, efficiency, and effectiveness. An important element is the extent to which REACH has been able to build sustainable nutrition governance and management mechanisms in the 8 countries including policies, systems and capacity. This will include the extent to which REACH was able to affect gender equality within the institutional structure of participating countries.

32. The evaluation will focus closely on the REACH logframe, both in terms of assessing the degree to which the logframe served as a realistic framework of objectives, risks and assumptions and the extent to which the objectives set out in the logframe were accomplished.

33. The evaluation approach will enable an assessment of gender and equity issues, which is particularly important considering that REACH aims to positively impact women and children. The evaluation team will include one or more members with gender expertise; the final evaluation questions will reflect an appropriate focus on gender and equity issues.

34. The evaluation will also build understanding of the reasons for the observed performance and results and draw lessons to start identifying best practices more broadly. It will form the basis for possible changes to REACH approaches for development of future interventions.

Evaluability Assessment

35. An evaluability assessment was commissioned by OEV in late 2012 to determine the feasibility of the eventual evaluation of REACH, to identify potential uses of the evaluation and how utility can be maximized, to refine the purpose of the evaluation and provide suggestions for the evaluation approach and methods. The evaluability assessment was conducted by an independent consultant, and included document and data review, a survey of REACH facilitators, interviews and country visits and participation in a REACH workshop. The report was finalized in April 2013.

36. One of the overarching recommendations of the Evaluability Assessment was to “ensure the evaluation examines the relevance, efficiency, effectiveness and sustainability of REACH, including the governance and management of REACH”. It concluded with four more specific recommendations. The first was that REACH be fully implemented prior to the evaluation. At the time of the evaluability assessment, with the evaluation was planned for 2014, and the Canadian funded project closed in mid-2014. However due to delays in starting up REACH, the evaluability assessment found that REACH would not have been implemented sufficiently to allow for an evaluation. The recommendation was to extend the Canadian funding and delay the implementation of the evaluation to Q1 2015. This recommendation has been fully adopted.

37. The second recommendation was to clarify the logic model to focus more on the

changes sought in nutrition governance. The logic model and logframe have evolved over time. These changes will be documented and analysed, and additional modification and/or validation may be needed during the evaluation inception phase. The evaluability assessment recommended that the impact level not be assessed, as the length of the REACH implementation period would likely not have been long enough to see changes at the impact level. The evaluation should focus on assessing changes at the outcome level using both quantitative and qualitative data. This recommendation is reflected in the approach and evaluation questions.

38. Case studies should cover all countries to capture the diversity of country context and operational modalities employed in each country. At the time of the evaluability assessment, REACH was planning to conduct its own country case studies which would have been integrated into the external evaluation, but in consultation with the REACH secretariat a decision was made to integrate the case studies fully into the external evaluation methodology. This will minimize confusion and possible duplication of effort and lend additional credibility to the case studies conducted by the external, independent evaluation team. The collection of baseline and endline data is the responsibility of the REACH team, and will be analysed by the evaluation team. During the inception phase, this data will be made available to the evaluation team, and assessed for completeness and quality and a decision taken by the evaluation team whether the quality and coverage of the data is adequate for inclusion in the evaluation. This decision will be reflected in the Inception Report. The evaluation team will also develop the evaluation design that specifies how the baseline/endline data will be incorporated into the overall evaluation.

39. The evaluability assessment recommended a joint evaluation but ensuring that the process not become overly bureaucratic and lengthy and roles clearly defined. The evaluation is being conducted jointly, and terms of the collaboration and roles are documented in an agreement to collaborate on the evaluation.

40. Requisite language and technical skills will be included in the evaluation team. External small technical reference group comprised of experts in nutrition governance and management, coordination and partnership and also representatives from national governments will be established.

Evaluation Questions.

41. The inception report will include a complete evaluation matrix with fully developed evaluation questions and sub-questions, indicators, data sources and approach to analysis. The inception phase will include an assessment of existing REACH indicators, analysis frameworks and available base and end line data, and the evaluation matrix will build on them where appropriate. The following four key evaluation questions were derived from the REACH M&E Overview (2012), the evaluability assessment (2013) and consultation among stakeholders:

Question 1. Relevance of REACH and appropriateness of the design: The extent to which:

42. REACH objectives and strategies are in line with the international development agenda and with the priorities of participating countries in terms of reduction of hunger and improvements in nutrition;

- ii) the initiative is coherent with the mandates and capacities of the four UN agencies, including *inter alia* gender and equity objectives;
- iii) coherence, alignment, and complementarity were as achieved between REACH and other global nutrition initiatives (including the SUN initiative), and national nutrition policies and programmes.
- iv) REACH was designed and implemented to align and contribute to equity (including gender equality) as defined by international and regional conventions, national policies and strategies and the needs of the target group (women and children under five);
- v) the initiative's logic model including assumptions are valid, in terms of potential of REACH's activities and design to lead to its intended outcomes and impacts. Of particular interest are the assumptions concerning the importance of the multi-sectoral approach and coordinated action;
- vi) the design is appropriate to the stated goal in regard to the selection of outcomes, target groups (women and children under five), activities, countries and partnerships;

Question 2. Performance at the Country Level:

- i) **Effectiveness:** Analysis of the nature, quantity and quality of results against those intended; and unintended, including both positive and negative effects; While the focus is on outcome level, the evaluation will also analyse whether REACH is on track to achieve its intended impacts, and to what extent REACH's analysis is being reflected and taken up in policy and action planning at country level;
- ii) **Equity:** Extent to which REACH outputs and outcomes address equity considerations, including gender equity which is relevant to all four outcome areas: awareness raising and consensus building; policies and action planning; country priority interventions and coordinating mechanisms; and tracking and accountability systems; as well as the extent to which outputs and outcomes are moving towards achieving REACH's intended impacts on women and children;
- iii) **Efficiency:** Quantitative and qualitative assessment of the observed outputs produced in relation to inputs; how efficient are the administrative structures that REACH has put into place; are the current and/or proposed arrangements for managing REACH relative to SUN the most cost and administratively effective; and, could the results have been achieved more efficiently through other means.

Question 3. Contributing/Explanatory Factors: Analysis of the factors which affect REACH's performance and results, including *inter alia*:

- i) The operational and policy environments, capacity and resources, skills and knowledge in participating countries;
- ii) The governance and management of REACH, including the Steering Committee, the Secretariat, Country Committees and Technical Group;
- iii) REACH partnerships including: whether the necessary commitment, agreement and actions were taken by partners (including UN agencies at country and global levels) to support REACH to achieve its objectives; and, quality of partnership management by REACH with respect to other global and national nutrition initiatives

Question 4. Sustainability and the way forward

- i) Sustainability of the results achieved and of the REACH operational models;
- ii) The extent to which REACH is contributing to increased national ownership and its leadership role in multi-sectoral nutrition governance and coordination;
- iii) Based on the findings, concrete advice on ways forward, including whether REACH should continue and if so in what form; and/or other options for achieving outcomes.

4.4. Methodology

43. This section presents the overall preliminary methodology for the evaluation. Building on this, a complete methodology guide based on a fully developed evaluation matrix will be contained in the Inception Report, with annexes covering data collection instruments and further details as needed.

44. The methodology should be appropriate in terms of:

- Assessing REACH's logic and its objectives;
- Addressing the evaluation questions presented in section 4.3.
- Accounting for the limitations to evaluability identified in 4.2 as well as budget and timing constraints.

45. Data collection and analysis will be conducted at country level, for cross-cutting issues such as partnership, equity and capacity development, as well as analysis of REACH implementation mechanisms at the global level.

46. The methodology should demonstrate impartiality and lack of biases by enabling findings to be triangulated from a variety of information sources and both qualitative and quantitative data derived primarily from interviews with the full range of REACH stakeholders, data analysis, and document and records reviews.

47. Case studies will be carried out in all eight countries to explore the country level evaluation questions. Country cases will explore the achievement of outputs and outcomes, whether or not REACH is on track to achieve the planned impact, indications of the sustainability of efforts, and the processes and methods used as well as the different modus operandi employed at country level and their effectiveness. Case studies will be based on document review and interviews with all REACH stakeholders and those responsible for implementing REACH in each country. The sampling technique to impartially select stakeholders to be interviewed will be specified in the Inception Report.

48. The evaluation will also include an analysis of endline and baseline data on REACH outcomes collected by REACH facilitators, which will be analysed at both country level and across countries (where possible).

49. The methodology will also enable an assessment of the effectiveness and efficiency of the REACH's governance and management, including the Steering Committee, the Secretariat, Country Committees and Technical Group. Benchmarking may be used to compare REACH's governance and management with its own Memorandum of Understanding and with good practice in other international partnership arrangements. The evaluation should also explore how the governance and management structures interacted and impacted on each other.

50. The methodology should enable an assessment of the effectiveness of the REACH partnership including whether the necessary commitment, agreement and actions were taken by all partners to support REACH to achieve its objectives.

51. Where relevant, data will be disaggregated by sex, by age group and by country. The evaluation findings and conclusions will highlight differences in performance and results of the operation for different beneficiary groups as appropriate.

4.5. Quality Assurance

52. WFP's evaluation quality assurance system (EQAS) for Strategic Evaluations will be applied to all substantive aspects of the evaluation, including terms of reference, evaluation team selection, the inception report and draft and final evaluation report. EQAS is based on the UNEG norms and standards and good practice of the international evaluation community (ALNAP and DAC). It sets out processes with in-built steps for quality assurance and templates for evaluation products. It also includes quality assurance of evaluation reports (inception, full and summary reports) based on standardised checklists. EQAS will be systematically applied during the course of the evaluation and relevant documents provided to the evaluation team.

53. A small technical advisory group comprised of technical experts in multi-sectoral nutrition governance will review the TOR and the draft Evaluation Report to ensure the evaluation draws upon the appropriate literature and existing knowledge base, and meets expected quality in terms of multi-sectoral nutrition governance.

54. An interagency joint Evaluation Management Group (see section 5.3 below) will conduct the first level quality assurance, while the Senior Evaluation Officer on behalf of the OEV Director will conduct the second level review and clearance of all evaluation products. This quality assurance process does not interfere with the views and independence of the evaluation team, but ensures the report provides the necessary evidence in a clear and convincing way and draws its conclusions on that basis.

55. The evaluation team will be required to ensure the quality of data (validity, consistency and accuracy) throughout the analytical and reporting phases.

5. Organization of the Evaluation

5.1. Phases and Deliverables

56. In consultation with the REACH secretariat the evaluation reporting date was brought forward from February 2016 to November 2015, in order to ensure that the evaluation findings remain relevant in light of the expected evolution of REACH and changes in the international context for nutrition governance. A detailed timeline will be developed during the inception phase that enables the deadlines to be met, keeping in mind the consultation processes foreseen among the partners collaborating on the REACH evaluation and with other stakeholders.

Table 1: Timeline summary of the key evaluation milestones

Main Phases	Timeline	Tasks and Deliverables
1. Preparatory	Nov-Dec 2014	Terms of Reference Select and Contract Evaluation Team and/or firm
2. Inception	Jan-Feb 2015	Inception Mission and Inception Report.
3. Fieldwork	Mar-May 2015	Evaluation missions; data collection and case study reports
4. Reporting/ Reviews	Jun- Aug 2015	Evaluation Report Drafts and Final
5. EB.2/2015 (Nov)	Nov 2015	Summary Evaluation Report Editing/Formatting Management Response and Executive Board Presentation

5.2. Evaluation Component

57. A team leader and team members with appropriate evaluation and technical capacities will be engaged for the evaluation. Within the team, the team leader bears ultimate responsibility for all team outputs, overall team functioning, and client relations. The team leader requires strong evaluation and leadership skills, experience with evaluation of coordination mechanism and national programme capacity strengthening and technical expertise in one of the technical areas listed below. His/her primary responsibilities will be (a) setting out the methodology and approach in the inception report; (b) guiding and managing the team during the inception and evaluation phase and overseeing the preparation of working papers; (c) consolidating team members' inputs to the evaluation products; (d) representing the evaluation team in meetings with stakeholders; (e) delivering the inception report, draft and final evaluation reports (including the Executive Board summary report) and evaluation tools in line with agreed EQAS standards and agreed timelines.

58. A small evaluation team will bring together a complementary combination of technical expertise and experience in the fields of: (a) food security and nutrition issues and governance, policy and advocacy at country level; (b) the international nutrition landscape including other coordinating mechanisms and the roles of major UN actors, (c) multi-sectoral nutrition programming (country level) (d) coordination mechanisms, multi-sectoral partnerships or leadership and (e) institutional change and capacity building. The team should have strong capacity in conducting global evaluations that incorporate country level cases, the use of mixed methods in evaluation, and integrating equity issues including gender equity in evaluation. The team should have the appropriate language capacity (English, French and Portuguese). Back office support in data analysis will be required to support the evaluation team members.

59. The evaluation team leader and members will contribute to the design of the evaluation methodology in their area of expertise; undertake documentary review prior to fieldwork; conduct field work to generate additional evidence from a cross-section of stakeholders, including carrying out site visits, as necessary to collect

information; participate in team meetings, including with stakeholders; prepare inputs in their technical area for the evaluation products; and contribute to the preparation of the evaluation report. All members of the evaluation team will abide by the Code of Conduct for evaluators ensuring they maintain impartiality and professionalism.

60. Support will be provided by OEV to collect and compile relevant documentation, facilitate the evaluation team's engagement with interview subjects and provide support to the logistics of field visits.

5.3. Roles and Responsibilities

61. The evaluation is managed jointly by an interagency Evaluation Management Group comprised of representatives from the Offices of Evaluation of FAO, WHO, UNICEF, DFATD and WFP. The roles and responsibilities of the EMG are outlined in the agreement to collaborate on the evaluation. Main responsibilities are to support and oversee the evaluation management and act as a liaison for the evaluation with the appropriate technical units within their own organizations. They will provide inputs and review documents at key decision points in the development of the TOR, the selection of the evaluation team, the finalization of the inception report and the evaluation report.

62. The members of the Evaluation Management Group from the respective evaluation offices are:

- Marta Bruno, Evaluation Officer, FAO
- Krishna Belbase, Senior Evaluation Specialist, UNICEF
- Anand Sivasankara Kurup, Evaluation Officer, Programme Evaluation, WHO
- Pierre Tremblay, Head of Decentralized Development Evaluation, DFATD-Canada
- Dawit Habtemariam, Evaluation Officer, WFP

63. The WFP Office of Evaluation will chair and provide the secretariat function for the EMG, and will thus lead management of the process. Dawit Habtemariam will be the focal point, working closely with Jamie Watts, Senior Evaluation Officer who will provide supervision and second level review and Helen Wedgwood, OEV Director as needed.

64. The group will convene as needed at the key milestone points in the evaluation process. While most of these meetings will be virtual, two face to face meetings are foreseen: an initial planning meeting in November 2014 and a meeting during the finalization of the conclusions and recommendations (which may be held in conjunction with a stakeholder workshop in the summer of 2015; details to be developed during the inception phase). Each agency will meet the costs of its participation (a video link back-up will be provided for any member of the group which cannot be present in Rome).

65. Using a pragmatic approach that works within the given budget and time, the EMG will manage the entire evaluation process from consultation on draft terms of

reference through to dissemination and follow-up to the final evaluation report. WFP will lead management of the process, but all milestone decisions will be taken jointly by the EMG on the basis of inputs from collaborating agencies.

66. WFP will lead the recruitment of an evaluation team using the procedures it has established and relationships with firms with which it holds Long Term Agreements. WFP will act as the main interlocutor between the evaluation team, represented by the team leader, and facilitate interactions with other agencies' counterparts to ensure a smooth implementation process.

67. All agencies will participate in briefing the team (either in person or virtually) and participate in the inception visit to WFP HQ and field visits during the inception phase if these are deemed necessary (which may be by telecom). Agencies will support the collection and organization of all relevant documentation from within their own organization and making this information available to the evaluation team.

68. Stakeholders in REACH implementation in participating countries and at the REACH secretariat will be asked to provide information necessary to the evaluation; be available to the evaluation team to discuss the programme, its performance and results; facilitate the evaluation team's contacts with stakeholders for country visits; set up meetings and field visits, organize for interpretation if required and provide logistic support during the fieldwork. A detailed consultation schedule will be presented by the evaluation team in the Inception Report. The members of the EMG should not have had responsibilities in the past related to the implementation of REACH. To avoid a conflict of roles and interests and following WFP EQAS practices, members of the Evaluation Management Group will serve only in a management capacity and they will not be considered members of the evaluation team. Neither EMG members nor staff implementing REACH will participate in meetings where their presence could bias the responses of the stakeholders.

5.4. Communication

69. The EMG will ensure consultation with stakeholders on each of the key evaluation phases as shown in Table1 (above). In all cases the stakeholders' role is advisory. Briefings and de-briefings will include participants from country and global levels. Participants unable to attend a face-to-face meeting will be invited to participate by telephone. A communication plan for the findings and evaluation report will be drawn up by the EMG during the inception phase, based on the operational plan for the evaluation contained in the Inception Report. The evaluation report will be posted on WFP's external website once complete as required by EQAS, other agencies will post the report as per their normal procedures.

- Key outputs during the evaluation phase will be produced in English. Should translators be required for fieldwork, they will be provided.
- A workshop is scheduled between the evaluation team and REACH facilitators in February 2015 as a briefing during the inception phase. The usefulness and possibilities for other workshops during the evaluation process for instance, to discuss the evaluation report recommendations will be assessed and decided during the inception phase.
- The Summary Evaluation Report will be presented to WFP's Governing Body in all official UN languages. Each cooperating agency should report to its

governing bodies and management in line with its own procedures. Pro-active communications are encouraged. During the inception phase, the joint evaluation management group will agree on a plan for report dissemination in line with the evaluation objectives (see Section 2.B).

5.5. Budget

70. DFATD-Canada has provided funding to the WFP Office of Evaluation to manage the evaluation, through a trust fund managed by the REACH secretariat. The overall expected cost of the evaluation including preparatory work is US\$ 400,000, with the majority of the funding allocated to an independent evaluation team for fees and travel expenses. Partner agencies in the joint evaluation are covering their costs through in-kind contributions, although a small percentage of the evaluation budget may be used to cover the cost of coordinating the evaluation.

Annexes (not reproduced here)

Annex 1. Relationship between SUN Movement and REACH
Annex 2. Stakeholder Analysis from Evaluability Assessment Report
Annex 3. Reach Deliverables and Working Tools
Annex 4. REACH Logical Framework
Annex 5. Detailed Timeline
Annex 6. Factsheets

Annex B Stakeholder Analysis

1. During the inception phase, an analysis of key stakeholders was developed and presented in the Inception Report (Mokoro, 2015b). The evaluation team used the stakeholder analysis to guide selection of interviewees and informants and ensure that relevant parties were kept in view throughout the evaluation process.

2. The stakeholder analysis reproduced in Table 17 below builds on the list of stakeholders detailed in the Evaluability Assessment (Khogali, 2013) and details various stakeholders' roles and potential interest in the evaluation itself. The stakeholder analysis was used by evaluation team members to identify stakeholders both and global and country level and details of all informants consulted are presented in Annex C.

Table 17 List of key stakeholder groups

Stakeholder	Role in REACH	Interests in and concerns about the evaluation	Role in the evaluation	Implications for the evaluation
INTERNAL				
REACH Steering Committee (representatives from WHO, FAO, UNICEF and WFP and IFAD)	Main governing body for REACH. Closely involved in decision making	Interested in what the evaluation has to say about the future of REACH. Will also be affected and therefore interested in recommendations on governance	Key informants Will review drafts of the evaluation report and send comments to the evaluation team via OEV	Members of the SC have been closely involved in the decision making and direction setting of REACH. May be worth also interviewing past members of the SC if they can be traced.
REACH Secretariat	Develops and implements the global work-plan, carries out global level activities of REACH. Manages and monitors progress at country level	How effectively and efficiently the partnership has worked at global and national level? What has worked well and should be used in the future? Keen to generate lessons and use	Key informants – involved in the design of the evaluation. Will review drafts of the evaluation report and send comments to the evaluation team via OEV	Key informants (staff both past and present) able to provide background, context, direct experience, analysis and data. Important to understand their perspective on the role of REACH and how effective they have been as well as their relationship with other stakeholders.

Stakeholder	Role in REACH	Interests in and concerns about the evaluation	Role in the evaluation	Implications for the evaluation
		evaluation for fundraising purposes.		
DFATD (main donor)	Has funded REACH work in eight of the generation 1 countries. Have committed to fund REACH in four more countries (generation 2).	An external evaluation was a condition of their funding. Keen to have an external assessment of the work of REACH. Will influence future funding of REACH to some extent.	Represented on the evaluation management group. Involved in briefing the evaluation team during inception visit to Rome.	Understand donor perspectives and priorities and how this has shaped REACH. Their view of REACH in the wider nutrition landscape. Understand their priorities and suggestions for improvement.
Nutrition units/staff at HQ level in WHO, FAO, UNICEF and WFP	Key technical staff of Initiating Partners	Not necessarily directly involved in REACH but should understand and know what it is seeking to achieve. Level of interest may vary according to ownership	Interview at global level if possible	May have interesting perspectives on the effectiveness and relevance of REACH globally, but also perhaps at country level
Executive Boards of Initiating Partners	Will have varying levels of ownership of REACH WFP Executive Board has oversight of hosting the Secretariat	Decision makers on the strategies and use of resources for the UN agencies involved	The evaluation will be presented to the Executive Board of WFP (and potentially those of the other partners)	Key stakeholders with a variety of interests and agendas. Will have varying degrees of knowledge and/or experience of REACH but offer a unique high-level perspective of REACH, perhaps compared to similar initiatives.
REACH facilitators	REACH presence at country level	Particular interest in results of country studies	Key informants on history, context, REACH activities in country, impact and analysis	Key informants (staff both past and present) able to provide background, context, direct experience, analysis and data. Important to understand their perspective on the role of REACH and

Stakeholder	Role in REACH	Interests in and concerns about the evaluation	Role in the evaluation	Implications for the evaluation
			Provision of country level documentation and involvement in the programme for country visits as well as facilitating access to key stakeholders for the evaluation team.	how effective they have been as well as their relationship with other stakeholders.
Members of Country Committees	Diverse group of stakeholders who are appointed in country to govern REACH process	Particular interest in outputs from the country studies and in learning from other countries.	Key informants – will be individually interviewed and it will be important to have as many as possible involved in the final debriefing meeting in country.	As well as knowing REACH well the Committee members should know the nutrition landscape in country well and so may be able to suggest key contacts and routes of enquiry. Important to speak to them separately as well as review minutes of Committee meetings
Nutrition Focal points at country level (for WHO, WFP, FAO and UNICEF)	Advisory role to REACH facilitator	Particular interest in outputs from the country visit	Key informants – will also be able to organise interviews within their agencies e.g. with heads of agency. May also have perspectives from other countries where they have worked	Closely involved in REACH – may in some countries be necessary to speak to historic post holders (if there has been a recent change). Should be able to comment on effectiveness of REACH in coordinating the UN
Regional Nutrition Leads (for Initiating Partners)	No direct role	Maybe interested in final evaluation report depending how much exposure they have to REACH	May offer a regional and therefore more external perspective of the impact of REACH at country level	Part of global level interviews to try and understand how REACH's work is perceived by others in the sector
EXTERNAL				
Government Ministries	Key external partner for REACH –role will depend upon set up in country – those ministries involved in	Interested to learn about lessons learnt in other countries	Key informants on experience to date of REACH, successes, points for improvement and failures. What do they understand role of REACH and what advice do they	Government officials will be interviewed during the country visits, ideally both at national and provincial levels (to gain operational realities and

Stakeholder	Role in REACH	Interests in and concerns about the evaluation	Role in the evaluation	Implications for the evaluation
(MoH, MoA and Food, Social Welfare, water etc. as relevant)	nutrition policy, practice and budgeting will be key		have on future direction/ learning from their country?	perspectives from outside the capital city). Much of what REACH is trying to do in country is focused upon changes in perception and practice among this stakeholder group
National statistical agency	May be able to give national perspective on nutrition status in country or highlight what are the gaps in information available	Level of interest will depend upon level of involvement with/ knowledge of REACH	Key informant	Are they aware of the work REACH does on generating nutrition data – have they seen or used any of it? Interview at country level where relevant/ possible
Non-Governmental Organisations	NGOs are key implementing partners for the REACH partners and have an interest in coordinated implementation and improved nutrition governance. Role will vary according to NGO.	Interest in learning more about REACH in their country and globally	Key actors in the nutrition landscape at country level – important to talk to key INGOs as well as national NGOs at country level Some global level interviews may also be useful	Understand their understanding of REACH and perspectives on what it contributes in country. Their suggestions for improvement and the future role of REACH in country
SUN (global and country level)	Works closely alongside REACH at global and country level – “REACH = boots on the ground for SUN”	Role of REACH past, present and future is key to SUN – therefore high level of interest in evaluation. Concerns about any	Key informants at global level (SUN Secretariat)	Recent SUN ICE covers some of the same countries and will therefore provide good background information for the evaluation team. In some cases the same person who did the SUN CCS will carry out the REACH CCS, enabling the team to continue

Stakeholder	Role in REACH	Interests in and concerns about the evaluation	Role in the evaluation	Implications for the evaluation
		recommendations which may affect SUN		conversations started on SUN ICE and go deeper.
Donors (particularly USAID, EU, Gates Foundation, World Bank and other key donors at country level involved in nutrition)	USAID, EU and Gates Foundation have funded selected generation 1 countries Other donors may have country level involvement through nutrition sector groups	Interested in an external assessment of the work of REACH – heightened interest from those who have provided funding in the past. REACH as a model/ way of working – does it work?	Key informants (donor in country leads, donor HQ leads)	Interesting to speak to donors who have been involved in funding REACH but also those who haven't In each country the top four donors will be interviewed. Where possible evaluators will speak to donor agency gender experts.
UN Standing Committee on Nutrition (at global level)	Overlap in membership with the REACH SC	Depending on what decisions are made by the SC – there may be an element of merged governance in future – giving members more of a role/ownership of REACH	Key informants	Due to overlap in membership with the REACH SC – some members must be considered internal stakeholders. May give a high level perspective on role of REACH in global nutrition architecture
Evaluation Reference Group (reps from evaluation offices of WHO, UNICEF and FAO)	No role in REACH	Keen to learn about joint evaluation and to increase learning across agencies. Particular interest in potential increased efficiency of joint evaluations. Independence of the evaluation also very important.	Acting as the external reference group for the evaluation team. Review and approval of evaluation products Key participants in workshop on evaluation results/ recommendations	Key stakeholders in terms of the progress of the evaluation

Stakeholder	Role in REACH	Interests in and concerns about the evaluation	Role in the evaluation	Implications for the evaluation
Private sector (Boston Consulting Group, other private sector actors involved in nutrition at country level)	<p>BCG – Involved through the provision of staff in the pilot phase of REACH. Still involved via occasional inputs.</p> <p>Other private sector actors may have contact with REACH at country level (particularly external consultants working on nutrition or health)</p>	<p>BCG – interested in external evaluation results of REACH</p> <p>Interest in country level learning and recommendations</p>	<p>Key informants on the pilot phase of REACH</p> <p>Key informants from an external perspective of the nutrition sector at country level – some countries may be more relevant than others</p>	<p>BCG – due to intensive involvement can be considered an internal stakeholder in some respects. Interview relevant contacts by phone</p> <p>May be key partner for government, UN or NGOs working on nutrition at country level</p> <p>Meet in country if possible</p>
Academics involved in nutrition at country level and other independent nutrition experts	Will vary according to country context – may be country nutrition champions	Interest in country case study and any learning at country level. Interest in REACH’s role in nutrition architecture	Key informants on a country case by case basis	<p>Interesting external perspectives on effectiveness and efficiency of REACH at country level. Plus external perspective upon nutrition context in country and necessary drivers for change</p> <p>Meet in country if possible</p>
Other nutrition initiatives (e.g. GAIN) and foundation staff	No direct role in REACH but key partners for REACH	Interest in REACH’s role in nutrition architecture	Key informants on how REACH fits with other nutrition initiatives	<p>Interviews at global level but also key to meet at country level where relevant.</p> <p>Key perspectives on REACH’s role both at country and global level in the broader nutrition architecture</p>

Annex C List of People Consulted

1. Details of informants consulted at global and country level are presented in the table below, with the stakeholder group also indicated (e.g. donor, UN, academic etc.).

Category	Name	Position Title	Organisation
Global level interviews			
Inception Briefing – Rome WFP HQ (27-30 January, 2015)			
UN	Dawit Habtemariam	Evaluation Manager	WFP Office of Evaluation
UN	Serena Succhi	Research and Data Analyst	WFP Office of Evaluation
UN	Jamie Watts	Senior Evaluation Officer	WFP Office of Evaluation
UN	Florence Lasbennes	Chief of Staff, SRSG	SUN Secretariat
UN	Nancy Walters	Global Coordinator	REACH Secretariat
UN	Joyce Njoro	Senior Programme Officer	REACH Secretariat
UN	Tania Goossens	Programme Officer	REACH Secretariat
UN	Krishna Belbase	Senior Evaluation Specialist	UNICEF Evaluation Office
UN	Marta Bruno	Evaluation Officer (Knowledge and Learning)	FAO Office of Evaluation
Donor	Pierre Tremblay	Head of Decentralised Development Evaluation	Department of Foreign Affairs, Trade and Development (DFATD) Canada
UN	Paula Machungo	REACH National Facilitator, Mozambique	REACH Mozambique
UN	Christine Wenzel	M&E Consultant	REACH Secretariat
UN	Mary Manandhar	REACH International Facilitator, Bangladesh	REACH Bangladesh
Govt.	Marcela Limbobo	National Coordinator (SUN Focal Point)	Technical Secretariat for Food and Nutrition Security (SETSAN)
Independent	Bjørn Ljungqvist	Independent consultant (former head of REACH)	Self-employed
Donor	Kara O'Brien	Operations Department (REACH Portfolio)	DFATD
Academic	Jessica Fanzo	Assistant Professor of Nutrition, Institute of Human Nutrition and Department of Paediatrics	Columbia University
UN	Anna Lartey	Director, Nutrition Division	FAO
UN	Victoria Wise	REACH International Facilitator, Ghana	REACH Ghana

Category	Name	Position Title	Organisation
UN	Mohammed Hafiz Muntaka	REACH National Facilitator, Ghana	REACH Ghana
UN	Nicolas Bidault	Deputy Global Coordinator	REACH Secretariat
UN	Helen Wedgewood	Director, Office of Evaluation	WFP Office of Evaluation
Evaluation phase interviews – February – May 2015			
Donor	Georgina Fekete	Nutrition Director	CIFF
UN	Kristina Reinhardt	Consultant	REACH Secretariat
UN	Nicolas Bidault	Deputy Global Coordinator	REACH Secretariat
Independent	Dr Denise Costa Coitinho Delmué	Consultant / Collaborative Researcher	Independent / University of Brasilia
UN	Francesco Branca	Director, Department of Nutrition for Health and Development	WHO/.REACH Steering Committee
UN	Christine Wenzel	M&E Consultant	REACH Secretariat
UN	Holly Sedutto	Programme Officer	REACH Secretariat
UN	Sean Kennedy	Senior Health Specialist	IFAD
UN	Nancy Walters	Global Coordinator	REACH Secretariat
Independent	Keith Bezanson	Consultant	Independent
UN	Martin Bloem	Director of Nutrition	WFP
UN	Chizuru Nishida	Coordinator – Nutrition Policy and Scientific Advice/Department of Nutrition for Health and Development	WHO
Business/ Donor	Alex Rees	Head of Programme Development	GAIN
UN	David Nabarro	SUN Coordinator / Coordinator of UN Response to Ebola	SUN
UN	Joyce Njoro	Senior Programme Officer	REACH Secretariat
UN	Dr Jean Claude Nkurunziza	National Facilitator Burundi	REACH
UN	Dr Souleymane Diallo	International Facilitator Niger	REACH (WFP)
Civil Society	Richard Morgan	Global Director on Child Poverty	Save the Children
Academic	Lawrence Haddad	Senior Researcher / Chair of Global Nutrition Report	IFPRI
UN	Tania Goossens	Programme Officer	REACH Secretariat
Other	Ullrich Villis	Associate Director	Boston Consulting Group
Donor	Meera Shekar	Lead Health and Nutrition Specialist	World Bank

Category	Name	Position Title	Organisation
Independent	Milla McLachlan	Consultant to UN	Independent
UN	Allison Oman	Regional Nutrition Adviser	WFP
Academic	Andres Meija Acosta	Senior Lecturer in Political Economy of Emerging Markets	Kings College London
Donor	Ellen Piwoz	Senior Programme Officer Nutrition, Global Development Programme	BMGF
UN	Patrizia Fracassi	Senior Nutrition Analyst and Policy Adviser	SUN Secretariat
Civil society	Victoria Quinn	Senior Vice President of Programs	Helen Keller International
Independent	Heino Meerkat	Senior Partner	Boston Consulting Group
Academic	Stuart Gillespie	Senior Research Fellow / CEO of Transform Nutrition	IFPRI
Academic	Sue Horton	Professor / CIGI Chair in Global Health Economics	University of Waterloo
Donor	Erin McClean	Senior Nutrition Advisor	DFATD
UN	Lynnda Kiess	Head of Nutrition Programme	WFP
UN	Ruth Situma	Nutrition Specialist	UNICEF
Donor	Kara O'Brien	International Humanitarian Assistance Bureau	DFATD
Civil society	Jennifer Rigg	Director of Policies and Partnerships	1000 Days
Academic	Jessica Fanzo	Assistant Professor of Nutrition, Institute of Human Nutrition and Department of Paediatrics	Columbia University
Donor	Nkosinathi Mbuya	Senior Nutrition Specialist	World Bank, South Asia Food and Nutrition Security Initiative (SAFANSI)
UN	Werner Schultink	Head of Nutrition	UNICEF
Donor	Senoe Torgerson	Programme Officer, Nutrition Team	Gates Foundation
UN	Chizuru Nishida	Coordinator – Nutrition Policy and Scientific Advice, Department of Nutrition for Health and Development	WHO
UN	Kaia Engesveen	Technical Officer	WHO
UN	Charlotte Dufour	Food Security, Nutrition and Livelihoods Officer	FAO Nutrition Division

Category	Name	Position Title	Organisation
Civil society	Joanna Francis	Food and Nutrition Policy Officer	Concern UK
Civil society	Leni Martinez	Food Nutrition Policy Officer	Concern US
Civil society	Jennifer Thompson	Advocacy Officer for Hunger	Concern Ireland
Business	Jonathan Tench	SUN Business Network	SUN
Independent	Sergio Teixeira	Consultant	Hope Consulting
UN	Tom Arnold	SUN Coordinator	SUN Secretariat
Business	Anne Heughan	Director External Affairs, Nutrition and Health	UNILEVER
Donor	Nadia Hammel	Counsellor (Development – Health and HIV/AIDS)	DFATD
Civil Society	Sandra Matuma	Senior Nutrition Advisor	Action Against Hunger
Civil Society	Rose Ndolo	Senior Child Nutrition and Food Security Programmes Adviser	Action Against Hunger
Donor	Abigail Perry	Nutrition Technical Adviser	DFID
Country Studies			
Bangladesh			
UN	Lalita Bhattacharjee	Nutritionist and Officer in Charge, Meeting the Undernutrition Challenge	FAO
UN	Edourd Beigbeder	UNICEF Representative	UNICEF
UN	Dr Mary Manandhar	International Facilitator	UN REACH
UN	Dr Mamadou Hady Diallo	Medical Officer, Maternal and Child Health	WHO
UN	Dr Farzana Bilkes	National Officer, Nutrition and Food Safety	WHO
Civil Society	Dr Sultana Khanum	Bangladesh-based Member of SUN Global CSO Network	SUN Task Force
UN	Mr Andrew Musyoki Sammy	Nutrition Specialist and Chair, Nutrition Cluster	UNICEF
UN	Dr Moshin Ali	Nutrition Specialist	UNICEF
Donor	Mr Chris Penrose-Buckley	Nutrition Adviser	DFID
Civil Society	Mr Mohammad Mokarrom Hossain	Project Leader	World Fish
Civil Society	Dr Craig A. Meisner	Director South Asia	World Fish

Category	Name	Position Title	Organisation
Civil Society	Ms Sharon Hauser	Director, Programme Development and Quality	Save the Children
Civil Society	Mr Rakesh Katal	Director, Food Security and Livelihoods	Save the Children
Govt.	Dr Zakir Hussain	Senior Advisor, Nutrition Information Planning Unit (NIPU)	NNS, IPHN, MOHFW
Business/ donor	Dr Rudaba Khondker	Senior Adviser/Acting Representative	GAIN
Business/ donor	Mr Md. Zakir Hossain Akanda	Head of Policy and Advocacy	GAIN
Donor	Ms Sylvia Islam	Senior Development Specialist	DFATD
Donor	Ms Meaghan Bayers	First Secretary (Development)	DFATD
Donor	Dr Iftekhar Rashid	Programme Officer	USAID
Govt.	Mr Mostafa Faruq Al Banna	Additional Director, FPMU	Ministry of Food
UN	Mr Mike Robson	Country Representative	FAO
Govt.	Dr Nasreen Khan	Technical Support to SUN Focal Point	Ministry of Health and Social Welfare
Civil Society / donor	Meredith de Graffenried	Project Manager	Helen Keller International
Civil Society / donor	Jillian Waid	Manager – Research, Learning and Evaluation	Helen Keller International
Donor	Joao Anselmo	Food Security Attaché	EU Delegation
UN	Ms Christa Rader	Country Representative	WFP
UN	Ms Rachel Fuli	Head of Nutrition	WFP
UN	Mr Nicolas Syed	Country Programme Officer	IFAD
UN	Mr Palash K Das	Assistant Country Director	UNFP
UN	Ms Taskina Huq	Private Sector Relations Officer	WFP
Academic	Professor MQK Talukder	Nutrition Expert	
Govt.	Focus group	National Nutrition Services and NHSNDP stakeholders	
Govt.	Madam Roxana Quader	Additional Secretary PH and WHO, SUN Focal Point	Ministry of Health and Social Welfare

Category	Name	Position Title	Organisation
Govt.	Dr Zulfikar Ali Lenin	Director 3, Prime Minister's Officer	Government of Bangladesh
UN	Dr Abdul Mannan	Food Utilization and FAO	
Civil Society	Dr .A. K. M. Musha	Co-Chair CSA for SUN BD, Country Director,	Concern Worldwide
Civil Society	Dr. Kaosar Afsana	Secretary CSA for SUN BD Director, Health Nutrition & Population Programme(HNPP)	BRAC
Civil Society	Kathrin Tegenfeelt	Member CSA for SUN BD Country Director	Fhi360
Civil Society	Dr. Ikthiar Uddin Khandaker	Member CSA for SUN BD Health Advisor	Plan Bangladesh
Civil Society	Dr. Golam Mothabbir	Member CSA for SUN BD	Save The Children Int.
Civil Society	Dr. Shahed Rahman	Alternate Member CSA for SUN BD National Nutrition Coordinator	Care
Civil Society	Dr. S.M. Mustafizur Rahman	Member CSA for SUN BD Country Director	MI Bangladesh
Civil Society	Dr. Shahida Akter	National Coordinator CSA for SUN BD	CSA for SUN BD Secretariat
Civil Society	Mehzabeen Aziz	Communications Officer CSA for SUN BD	CSA for SUN BD Secretariat
Govt.	Dr. Alamgir Ahmed	Line Director	Institute of Public Health Nutrition IPHN/National Nutrition Services NNS, Ministry of Health and Family Welfare (MoHFW)
Govt.	Dr. Md. Moudud Hossain	Programme Manager	NNS, IPHN, MoHFW
Govt.	Dr. Sharear Farid	Consultant	NNS, IPHN, MoHFW
Govt.	Mr. Aweke Tekiu	Consultant (DFID-funded)	NIPU, NNS, IPHN, MoHFW
Govt.	Dr Md. Moiunul Haque	Planning Specialist	NNS
Other	Mr. Md. Shahid Hossain	Adviser	MRDI
Other	Ms Aktarun Naher	Senior Programme Officer	MRDI
Other	Mr Toufiq Maruf	Senior Reporter	The Daily Kaler Kantho
Other	Mr Syed Ishtiaque Reza	Director, News	Ekattor Media Ltd.
Other	Mr Hasibur Rahman Mukur	Executive Director	MRDI
Other	Mr Farid Hossain	CEO	In Focus

Category	Name	Position Title	Organisation
Ghana			
Govt.	Edith Tetteh	SUN Focal Point	
UN	Sophie Tadria	Nutrition Focal Point	FAO
UN	Lillian Selenge	Nutrition Specialist/UNICEF Focal Point	UNICEF
UN	Magdalena Owusu Moshi	Deputy Country Director	WFP
UN	Vera Kwara	Programme Officer	WFP
Govt.	Paulina Addy	Deputy Director	Women in Agricultural Development
UN	Victoria Wise	REACH Facilitator	WFP
UN	Abebe Hankore	Sub-office Representative	WFP
UN	Gyamila Wahabi Abdul-Razak	Programme Officer	WFP
Govt.	Nii Adjaije Laryea	Deputy Regional Director in Planning Country	Regional Coordinating Council
Govt.	Alexander Osei-Yeboah	Nutrition Officer	Ghana Health Service
Academic	Dr Paul Aryee	Lecturer and Public Health Nutritionist	
Govt.	Alhaji Sofo Porbilla Ewura	Regional Nutrition Department	Ministry of Health
Donor	Dominique Dery	Programme Manager Specialist for Health	USAID
UN	Imran Ravji	Head of Health and Nutrition	UNICEF
Civil Society	Madam Saadito	President of NGOs in Health / Chief Executive SIRDA	Savannah Integrated Rural Development Aid (SIRDA)
UN	Prosper Dakurah	Nutritionist	UNICEF
Govt.	William Boakye-Acheampong	Regional Director	Regional Development Unit for Ministry of Foreign Affairs
Civil Society	Alagskomah Noble	President	Coalition of NGOs in Health
Govt.	Dr J Koku Awoonor-Williams	Regional Director of Health Service, Upper East Region	GHS
Govt.	Alice Ellen Abeere-Inja	Education Officer (School Health)	Regional Education Office
Govt.	Gloria Kobati	Regional Nutrition Officer	Ghana Health Services
UN	Mohammed Hafiz Mutaka	REACH Facilitator	WFP

Category	Name	Position Title	Organisation
Govt.	Joseph Azuntaba	Planning Officer	Regional Economic Planning Office
Govt.	Mary Paula Kogama	Nutrition Officer	Department of Agriculture
Academic	Fetus Manuh	Principal Statistician	
Academic	Amos Laar	Senior Lecturer	School of Public Health, University of Ghana
Donor	Anna Antwi	Agriculture and Food Security Officer	DFATD
Donor	Zakariah Fusheini	Development Manager	DFATD
Business/Donor	Emmanuel Quaye	Country Manager	GAIN
Donor	Itsuko Shirotani	Assistant Representative	JICA
UN	Victor Nhongalah	Head of Health and Nutrition Programme	UNICEF
Donor	Fiona Edwards	Nutrition Specialist	SPRING
Civil Society	Hanna Awadzi	Senior Generalist	Ghana News Agency and Nutrition Media Platform
Civil Society/Donor	Raymond Kofi Owusu	Health, Nutrition and HIV/AIDS Specialist	World Vision
Donor	Sarah Lena Jensen	Project Manager (Affordable Nutritious Food for Women)	GTZ
Donor	Daniel Amanquah	Technical Adviser	GTZ
Govt.	Kate Quarshie	Deputy Chief Nutrition Officer, Nutrition Department	Ghana Health Service
Govt.	Mary Opoko	Director	Women in Agricultural Development
Govt.	Victoria Tsekpo	Value Addition, Gender and Livelihood	Women in Agricultural Development
Govt.	Teressa Wayo	Value Addition, Gender and Livelihood	Women in Agricultural Development
Govt.	Victoria Aniaku	Value Addition, Gender and Livelihood	Women in Agricultural Development
Civil Society	Nana Ayim Poakwa	Coordinator	CSO Platform for SUN
UN	Mohammed Agbendech	Senior Nutrition Officer	FAO
UN	Mawuli Sablah	Food Security Officer	FAO
UN	Mutinka Chimuka	Head of Agency	WFP
Mali			
Civil Society	Boureima Allaye Touré	President	National council of Civil Society

Category	Name	Position Title	Organisation
Civil Society	Massaman Sinaba	Alliance SUN, chef d'équipe des OMAES – coordinator SUN CSO	OMAES
Donor	Anna Horner	Nutrition Manager	UNICEF
Donor	Fatima Ouattara	Nutrition and Wash Advisor	USAID
Donor	Lara Romaniuc	Co-Director	Embassy of Canada
Donor	Marc-Olivier Jean	Second Secretary	Embassy of Canada
Govt.	Aissatou Pleah	Nutrition Expert	Nutrition Division
Govt.	Boubou Diall	Focal point	CM/ MPFEF
Govt.	Cissé Nariétou Touré	Health Education advisor	DNP/REN
Govt.	Guindo Yacine Gakou	Conseiller Technique	CJ/MPFEF
Govt.	Modibo Diarra	Focal Point Nutrition	Ministry of Health
Govt.	Mahamadou N'tchi Samaké	Nutrition Advisor	ONS/ON
Govt.	Mohamed Makiyou Coulibaly	Nutrition and food security focal point	Ministry of Rural Development
Govt.	Néné Dickel Daw	Nutrition focal point	Ministry of Education
Govt.	Ousmane Doumbia	Secretary General	Ministry of Health
Govt.	Seybou Guindo	Head of Nutrition Vision	DNS/DN
Govt.	Souleymane Sacko	Focal Point Nutrition	Paludisme, tuberculose et VIH
Govt.	Tenimba Monekata	Communication Expert	Commissariat à la sécurité alimentaire
Govt.	Traoré Mamadou	Nutrition advisor	DNS/DN
UN	Alessandra Dentice	Deputy Representative	UNICEF
UN	Amadou Fofana	National REACH Facilitator	REACH
UN	Amadou Moustapha	Former REACH International Facilitator	REACH
UN	Anne Laevens	Nutrition Expert	UNICEF
UN	Toure Attaher	Former REACH focal point/retired	WHO
UN	Fatima SEID	Resident Representative	FAO
UN	Fatoumata Konate Bagayoko	Nutrition Expert	FAO
UN	Kodjo Niamke Ezoua	Head of Nutrition	WFP
UN	Sally Haydock	Resident Representative	WFP
UN	Tessougue Fatoumata Cisse	Chargé de la santé maternelle	WHO
UN	William Affif	Head of Programme	WFP

Category	Name	Position Title	Organisation
Mozambique			
UN	Maaike Arts	Former Head of Nutrition UNICEF Mozambique	UNICEF
Donor	Albert Lousseau	Formerly with the EC in Mozambique	EU
UN	Abdoulaye Balde	WFP Representative	WFP
UN	Jennifer Topping	Resident Coordinator	UNICEF
Govt.	Marcela Limbobo	SETSAN Director	Government of Mozambique
UN	Felicidade Panguene	Nutrition Team	FAO
UN	Mathieu Joyeux	Nutrition Team	UNICEF
UN	Nadia Osman	Nutrition Team	WFP
UN	Daisy Trovoada	Nutrition Team	WHO
Civil Society	Carina Ismael	SUN Civil Society Focal Point	ANSA
Govt.	Marla Amaro	Head of the Department of Nutrition	Ministry of Health, Government of Mozambique
Govt.	Alice Zalaf Bjornlund- Larsen	Junior Programme Officer	SETSAN
Donors	Focus Group meeting with Nutrition Partners	Various	EU, USAID, Irish Aid, Danida
Business / donor	Tracy Whyman	Country Manager	GAIN
UN	Castro Camarada	FAO Representative	FAO
UN	Daniel Kertesz	WHO Representative	WHO
UN	Paula Machungo	REACH Facilitator	REACH
UN	Tania Goossens	Programme Officer, former International REACH facilitator	REACH Secretariat
UN	Koen Vanormelingen	Representative Mozambique	UNICEF
UN	Michel Le Pechoux	Deputy Representative	UNICEF
Govt.	Cosme Cabsela Mandu	Focal Point REACH	SETSAN Manica
Civil Society	Erin Homiak	Nutrition Advisor to SETSAN DPA Manica	Concern Worldwide
Govt.	Samuel Lucas Lozanimio	Programme officer	National Institute of Disaster Management (INGC)
Govt.	Ronaldo Fancisco	Provincial Director of Industry and Energy	
Civil Society	Louis Tomas Tomo	ANSA Manica	ANSA

Category	Name	Position Title	Organisation
Govt.	Catarina Antonio Simone	Provincial Extension Services	Directorate of Agriculture
Govt.	Bento Benardo Molongude	Programme Officer	Provincial AIDS Services
Academic	Candida Marisa das Dores	Programme Officer	Pedagogical University Manica
Govt.	Alfonso Joao Tembe	SETAN Maputo	SETSAN
Govt.	Carlota Benjamin Tomucene	Technical Staff Social Protection Department	National Institute for Social Action (INAS)
Govt.	Carlos Valente Mlhovo	Technical Staff, Department of Planning	Ministry of Public Works
Govt.	Jafar Ai	Technical Staff Department of Production and School Feeding	Ministry of Education
Govt.	Elda Cardoso Tembe	Technical Staff	Department of Nutrition, Ministry of Health
Govt.	Antonio Paulo	Technical Director	Information Services, SETSAN
Govt.	Fatima Verinde	Head of Human Resource Department	SETSAN
Govt.	Aida Contente	Head of Administration and Finance	SETSAN
Govt.	Ligia Mutemba	Technician, Department of Promotion	SETSAN
Govt.	Alissa Jorge Tembe	Planning Technician	SETSAN
Govt.	Claudia Lopez	Director	Policy and Planning, SETSAN
Uganda			
Academic	Dr. Florence Turyashemererwa	Researcher	Mulago Hospital
Academic	Dr. Hentry Wamani	Researcher	Mulago Hospital
Independent	Brenda Kaijuka Muwaga	Consultant	Consultant
Independent	Louise Sserunsoan	Consultant	Consultant
Independent	Matt Robinson	Consultant – mapping	Consultant
Govt.	Boas Musiimemta	Senior policy Analyst	OPM
Govt.	Jackson Tuwino	Coordinator	OPM/UNICIEF/ Columbia University
Govt.	Lydia Nalwaende	Policy Specialist	Ministry of Gender
Govt.	Maureen Bakunzi	AC/PIC	OPM

Category	Name	Position Title	Organisation
Govt.	Sarah Nahalamba	Senior Planner – Population, Gender and Social Development	National Planning Authority
Govt.	Sarah Ngalanda	Senior Nutrition Advisor	Ministry of Health
Govt.	Susan Oketchi	Principal Education Officer, In charge of standards – MOES	Ministry of Education
Civil Society	Christine Muyama	Coalition Coordinator	Uganda Civil Society Coalition on SUN (UCCO-SUN)
Civil Society	Edith Nantongo	Coordinator National Technical Assistant	FH1360/ CHIE,
Civil Society	Hanifa Bachou	Project Manager	FANTA
Civil Society	James Male	Program Officer Policy and Advocacy	National NGO forum
Civil Society	Kato Peterson Kikomeko	Chair	SUN CSO-UN,
Civil Society	Kenneth Mulondo	SVCC/PO	SPRING/OPM
Civil Society	Kenneth Mulontoe	Nutrition Specialist	OPM/SPRING
Civil Society	Nancy Adero	PO-MNFF	SPRING
Other (Peace Corps)	Meital Tzobotan	Communication Team Leader	PEACE CORPS
UN	Ahunna Eziakonwa-Onochie	Resident Representative	UNDP
UN	Aida Girma	Country Representative	UNICEF
UN	Ellen Girerd-Barclay	National Facilitator	REACH
UN	Esther Yamono	Nutrition Officer	UNICEF
UN	Geoffrey Ebong	Donor Relations and Partnerships Advisor	WFP
UN	Harriet Kivumbi	Health and Development Consultant	REACH
UN	Jackson Teumine	Nutrition specialist/researcher	UNICEF/Cornell
UN	Juliet Nakitto	Intern	REACH
UN	Martin Alimbsibwe	SPA-Nutritionist	WFP
UN	Michelle Isemingo	Head of RCO	One UN
UN	Miriam-Nagadya Lwanga	Communication for Development Officer	UNICEF

Category	Name	Position Title	Organisation
UN	Nelly Biruvi	Nutrition Specialist	UNICEF
UN	Noreen Prendiville	Deputy Resident Representative	UNICEF
UN	Priscilla Ravonmanana Tsoa	Nutrition Officer	WHO
UN	Ross Smith	Head of Country Programme	WFP
UN	Siddharth Krishnaswamy	Head, analysis, M&E Unit	WFP
UN	Siti Haliti	Nutrition Officer	WFP
Nepal			
UN	Mr. Ingo Neu	International REACH Facilitator/NNFSS	REACH/NNFSS
UN	Mr Min Raj Gyawali	Programme Officer (Nutrition)	NNFSS
UN	Ms. Kshitij Yadav	Programme Officer (Results Monitoring)	NNFSS
UN	Ms Savita Malla	Advocacy and Communication Specialist	NNFSS
UN	Ms.Kshitij Yadav	Programme Officer (Results Monitoring)	NNFSS
Govt.	Mr. Bishnu Prasad Nepal	Joint secretary	NPC
Govt.	Dr. Yagya Bahadur Karki	Member	NPC
Govt.	Mr. Radhakrishna	Programme Director, Health Nutrition and Population section	NPC
Govt.	Mr. Atmaram Pandey	Retired	NPC
Govt.	Mr.Giri Raj Subedi	Chief of Nutrition Section	MoHP
Govt.	Ms. Bishwo Maya Neupane	Women Development Officer/MSNP Focal Point	MoWCSW
Govt.	Mr. Hari Timilsina	Water Supply and Sanitation Branch/MSNP Focal Point	MoUD
Govt.	Ms. Naina Dhakal	Head Food and Nutrition Security Section/ MSNP Focal Point	MoAD
Govt.	Ms. Joystna Shrestha	Food Research Officer/Alternate MSNO Focal Point	MoAD

Category	Name	Position Title	Organisation
Govt.	Mr. Nil Sharma	Deputy Director of School Health & Nutrition Section Department of Education/	MoE
Govt.	Dr. Roj Nath Pandey	Deputy Director of National Centre for Educational Development/MSNP Focal Point	MoE
Govt.	Giri Raj Subedi		MoHP/CHD
Govt.	Mr. Ishwor Paudel		MoFALD
Govt.	Tula Raj Sunawar		MoFALD
Donor	Mr. Mim Hamal	Programme Manager	EU
Donor	Mr. Hari Koirala	Senior Nutrition Specialist	USAID
Donor	Mr. Manav Bhattarai	Health Specialist	WB
Civil Society	Mr. Martin Rosselot	Country Director	ACF
Civil Society	Ms. Dale Davis	Country Director	HKI
Civil Society	Mr Madhuker Shresta	Suaahara Consultant	HKI
UN	Mr. Somsak Pipoppinyo	Representative	FAO
UN	Mr. Shrawan Adhikyry	Programme Officer/REACH Focal Point	FAO
UN	Dr. Tomoo Hozumi	Representative	UNICEF
UN	Mr. Anirudra Sharma	Nutrition Specialist/REACH Focal Point	UNICEF
UN	Mr. Pradiumna Dahal	Nutrition Specialist	UNICEF
UN	Ms. Pippa Bradford	Country Director	WFP
UN	Mr. Marco Cavalcante	Deputy Country Director	WFP
UN	Mr. Kurt Burja	Head of Food security Monitoring and Analysis Unit	WFP
UN	Dr. Lin Aung	Representative	WHO
UN	Mr. Ashok Burtyal	Nutrition Focal Point	WHO
Civil Society	Mr. Peter Oyle	Chief of Party	SC/Suaahara
Civil Society	Ms. Pooja Pandey	Deputy	SC/Suaahara
Civil Society	Prof. Uma Koirala	Chairperson CSANN/Representing NNF	CSANN
Civil Society	Mr Deepak Thopa	Secretary CSANN/Representing NTAH	CSANN
Civil Society	Ms. Anjalina Karki	Project Coordinator SC	CSANN

Category	Name	Position Title	Organisation
Civil Society	Ms. Bina Wagle	Intern	CSANN
Academic	Mr. Ramesh Kant Adhikari	Member High Level NFS Steering committee	Academia Platform
Academic	Dr. Madhu Devkota	Member High Level NFS Steering committee	Academia Platform
Rwanda			
UN	Ms. Jeannette Kayirangwa	REACH/One UN	National REACH facilitator
UN	Mr. Svein Langeland	REACH/One UN	M&E Consultant
UN	Ms. Franklina Mantilla	REACH	International REACH Facilitator
Govt.	Dr. Fidèle Ngabo	I	Head of MCCH
Govt.	Ms. Justine Mukandakebuka	MINALOC	Social Welfare Officer/Nutrition Focal Point
Govt.	Ms. Carine Nyilimana	MINAGRI	Acting Animal Husbandry and Export/Nutrition Focal Point
Govt.	Ms. Claudine Mukagahima	MINEDUC	In charge of Environment, hygiene and nutrition/Nutrition Focal Point
UN	Mr Attaher Maiga	FAO	Representative
UN	Mr. Oliver Petrovic	UNICEF	Deputy Representative
UN	Mr. Abiud Omwega	UNICEF	Head of Nutrition/Chair of REACH Technical Committee
UN	Mr. Jean Pierre de Margerie	WFP	Representative and Country Director
UN	Ms. Chantal Gegout	WHO	Nutrition and Non Communicable Diseases Officer/Nutrition Focal Point
UN	Mr. Heri Gaetan	FAO	Policy Advisor/Nutrition Focal Point
UN	Mr. Mahamadou Tanimoune	WFP	Program Officer Nutrition Specialist/Nutrition Focal Point
Civil Society	Ms. Cronan Jessie	Gardens for Health International	Executive Director
Civil Society	Mr. Meghan Anson	Gardens for Health International	M&E Manager

Category	Name	Position Title	Organisation
Civil Society	Mr. Solomon Makuza	Gardens for Health International	Program Manager
Civil Society	Mr. Evode Micomyiza	Concern Worldwide	Program Manager
Civil Society	Mr. John Mugaba	SFH-Rwanda	Corporate Communications Manager
Civil Society	Ms. Marie-Noëlle Senyana-Mottier	Catholic Relief Services	Country Manager
Civil Society	Mr. Joseph Habimana	IRC	Project Manager, Kibungo Office
Civil Society	Mr. Olivier Bizimana Muhoza	World Relief	Health Program Manager
Donor	Mr. Tarik Marc Kubach	EU	Attaché Rural Development
Donor	Ms. Caro Pleysier	EKN	1 st Secretary Food Security and Private Sector Development
Donor	Ms. Katharina Jenny	Swiss Development Cooperation	Directrice Adjointe
Donor	Mr Silver Karumba	USAID	Nutrition Specialist
Other (Academia)	Mr. Damien Iyakaremye	University of Rwanda (KHI)	Professor/Participates in Nutrition and Food Security Technical WG
Tanzania			
UN	Kristina Reinhardt	REACH Secretariat	REACH
UN	Phillip Mann	Former International Facilitator for REACH Tanzania	REACH
UN	Harriet Torlesse	Former Nutrition Manager	UNICEF
REACH	Joyce Ngegba	REACH National Facilitator	REACH
Business / donor	Enock Musinguzi	GAIN Country Representative and SUN Business Network Coordinator	GAIN
UN	Biram Ndiaye	Nutrition Manager	UNICEF
UN	Rogers Wanyama	Programme Officer, Nutrition	WFP
UN	Isiaka Alo	Nutrition Specialist	WHO
UN	Moorine Lwakatare	Programme Officer	FAO
UN	Sangunk Sangai	Country Representative	FAO
UN	Fredrick Kivaria	Assistant FAOR – Programme	FAO
Govt.	Dr Wilbald Lorri	President's Advisor, Nutrition	President's Office

Category	Name	Position Title	Organisation
Donor	Lisha Lala	Health Advisor and DPG Nutrition Chair	DFID
Govt.	Dr Vincent Assey	Director of Nutrition, Nutrition Services Unit, Mohr	Ministry of Health
UN	Dr Rufaro Chatora	Head of Agency	WHO
Govt.	Geoffrey Chiduo	Agriculture Policy and Planning Officer	TFNC
Govt.	Julitha Masanja	Nutrition Focal Point	Ministry of Community Development, women and gender
UN	Rodriguez Alvaro	UN Resident Coordinator	UNDP
UN	Jerry Bailey	Deputy Country Director	WFP
Civil Society	Augustino Mwashiga	Project Manager ANI	Save the Children
Civil Society	Tumaini Mikindo	Chief Executive	PANITA
Civil Society	Margaret Paul	Project Officer	PANITA
Govt.	Magreth Natai	Nutrition Focal Point	Ministry of Agriculture
Donor	Nadia Hammel	Counsellor (Development Health and HIV/AIDS)	DFATD
Civil Society	Erin Smith	Deputy Country Director	Helen Keller International
Civil Society	Margret Benjamin	Nutrition Advisor	Helen Keller International
Civil Society	Pauline Kisanga	Executive Director	COUNSENUITH
Civil Society	Brian Grant	Chief of Party	Mwanzo Bora programme
Civil Society	Dr. Peter Nyella	Health Manager	World Vision
Civil Society	Dr Deborah Ash	Project Director	FANTA
Govt.	Obey Assery	Director and SUN focal person	Prime Minister's Office
UN	Dr Sudha Sharma	Chief of Health and Nutrition, UNICEF	UNICEF
Sierra Leone Desk Study			
UN	Joyce Njoro	Senior Programme Officer	REACH Secretariat
Independent	Bjorn Ljungqvist	Consultant	Independent
Donor	Paula Molloy	Deputy Head of Mission	Irish Aid Sierra Leone
Govt.	Aminata Shamit Koroma	Director of Food and Nutrition and National SUN Technical Focal Point	Ministry of Health and Sanitation
UN	Faraja Chiwile	Nutritionist	UNICEF
UN	Hannah Yankson	Nutritionist	WHO
Govt.	Foday Sawi	Deputy Minister of Health	Ministry of Health and Sanitation

Annex D Methodology

1. The methodological approach adopted by the team for the evaluation of the REACH initiative is summarised in this annex. The methodology was developed during the inception period and detailed in full in the Inception Report (Mokoro, 2015b).

Methodological approach

2. The methodology adopted reflects the complexities of evaluating a partnership initiative and builds on the elements of the methodological approach outlined in the TOR, drawing also from the Evaluability Assessment (Khogali, 2013).

Theory of Change and Evaluation Matrix

3. The team constructed a TOC to guide the evaluation's assessment of whether REACH has done what it set out to do and to test whether the underlying assumptions of REACH were correct. The TOC is presented in Annex E. Its development drew upon elements of the TOC presented in various REACH documents and shared during preliminary meetings, including the REACH facilitators' workshop in Rome in March 2015. The TOC developed by the team combines design assumptions identified by the Evaluation Team with those explicitly stated by REACH in its log frame at the output to outcome level, and at the outcome-to-impact level.

4. An Evaluation Matrix was also prepared, drawing upon the detailed evaluation questions set out in the TOR (presented in full at Annex F). Modifications were made to the questions' clarity whilst maintaining the questions specified in the TOR. Additions were also made in light of the suggestions received, especially around whether REACH is harmonised with other initiatives.

Contribution analysis

5. Recognising the challenges faced given that the evaluation is a partnership evaluation, the team used contribution analysis as a key analytical tool during the evaluation. Contribution analysis ensured due consideration that REACH did not act alone in the nutrition landscape, and that the areas of change may have been influenced by other events/actors. During the Country Case Studies, this involved taking the overall nutrition context at the start of the evaluation period as a basis, examining how the nutrition environment has evolved (in particular in the key areas of governance, coordination and inter-sectorality), and highlighting where and how REACH has played a role. In order to develop this understanding, the team drew upon stakeholder interviews and documentation review.

Gender analysis

6. In line with EQAS guidance, the team took a gendered approach to the evaluation, according central importance to gender equality in effective and equitable nutrition governance. To do this, the evaluation sought to understand to what extent REACH has contributed to an improved understanding and stronger approaches within nutrition governance and management to gender equality issues and in particular to women's empowerment (including in terms of access to land and other resources which are related to nutrition). The evaluation tools and approaches

included attention to gender equity (in the stakeholder analysis, analysis of the country contexts, and questioning by the ET of informants).

Engaging with stakeholders

7. Questionnaires by stakeholder group, including for country interviews, were developed. The questions aimed at collecting key information and views, as well as ensuring collection of information to understand the overall nutrition context and how it has evolved in line with the contribution analysis approach.

Table 18 Global level stakeholders consulted by category at time of IR submission

Category	Total
Other (including academics/nutrition experts/independent consultants)	12
Business	3
Civil Society	8
Donors	10
Government	1
UN	35
Total	69

Note: This table details the total number of discrete interviews with different stakeholder groups (some interviews with the same individual were duplicated).

Country Case Studies

8. Country desk studies were central to the evaluation methodology and approach. The country case studies included a desk-based phase, a phase of additional data collection in country, and a reporting phase. The process of conducting the country case studies will cover the following steps:

- Analysis of base-line and end-line data (to be provided by REACH ahead of each country visit)
- Drafting of country profiles (following a format) prior to the country visit, which formed an important input into the contribution analysis
- Preliminary interviews at global level and with REACH facilitators (by phone) ahead of the country visits
- Identification of preliminary responses to the evaluation questions in the evaluation framework based on the analysis of secondary data prior to the fieldwork (from the REACH monitoring data and documentation)
- Country visits of eight days to each of the evaluation countries (except Uganda where flight schedules meant this was not possible and seven days were spent in country). Country visits involved a preliminary briefing, in-country interviews and data collection, and a debriefing to stakeholders prior to departure. Ahead of the visits, REACH Facilitators were sent a briefing note on the evaluation to ensure engagement.

Secondary data collection

9. A comprehensive literature and document review informed the evaluation. For each of the country case studies, dossiers were drafted to ensure that the evaluator for each country had information on the contextual and background information. The country dossiers included an analysis of gender-specific data. The evaluation team also reviewed the REACH baseline and endline data (the data is discussed in Annex H and Annex I).
10. Given the importance of the first set of three countries, the team also completed a light touch desk study of Sierra Leone, which sought to answer a set of questions detailed in the inception report (Mokoro, 2015b).

Evaluation Process

11. The evaluation was completed by a team of experienced evaluators and researchers (as detailed in Table 19 below) and in line with the evaluation timetable agreed during the inception phase (see Table 20 below).
12. Key activities undertaken throughout the evaluation process are summarised as follows:
 - a) *Inception briefing in Rome 28-30 January*: Five team members travelled to the WFP HQ in Rome to meet with the Evaluation Management Group as well as key stakeholders, including the REACH Secretariat. The visit was primarily a fact finding mission as well as an opportunity to discuss the logistics, and scheduling for the evaluation.
 - b) *Team workshop in Rome 16/17 February*: All team members spent two days at the Mokoro HQ in Oxford to prepare and refine evaluation tools and ensure shared understanding across the team of REACH and of the evaluation requirements. Logistics for country case study missions were also discussed.
 - c) *Delivery of Inception Report (submitted 20 February, approved 24 April)*: The inception report set out the methodology for the evaluation as well as a work plan to guide the country case study missions. The Inception Report was subject to various rounds of comments and took nearly two months before it was approved, by which time the case studies were already under way.
 - d) *Facilitators' workshop in Rome (3-6 March)*: Two members of the evaluation team attended the workshop in Rome and took the opportunity to present the REACH reconstructed TOC and gather feedback from facilitators and other REACH staff present. The evaluation team also took the opportunity to meet with facilitators from countries not included as case study countries (such as Burundi and Niger).
 - e) *Country Case studies (end March – beginning June)*: A total of eight in-country case studies were completed over the period. Over 300 stakeholders were consulted. Following completion of the visits, a report was written up presenting findings at country level, with the evidence from the country studies feeding in to the main evaluation report. In addition to the in-country studies, a desk study of Sierra Leone was completed, drawing on relevant literature and a number of key stakeholder interviews.

- f) *Global level interviews, document review and global level analysis:* Between February and end May, the team have conducted 69 discrete interviews at global level (in addition to country-level interviews). Furthermore, analysis has been undertaken at global level of the REACH Secretariat, REACH's interaction with other initiatives and perceptions of REACH.
- g) *Consolidation of findings, conclusions and recommendations and completion of the Final Report:* extensive discussions between team members have enabled the team to triangulate findings from across countries as well as at the global level.

Table 19 REACH Evaluation Team

Team member and inputs	Role
Core Team	
Muriel Visser	Evaluation Team Leader Lead on Ghana and Mozambique Country Case Studies
Stephen Turner	Senior Evaluator Lead on Bangladesh Country Case Study
Mirella Mokbel Genequand	Nutritionist Lead on Nepal and Rwanda Country Case Studies
Liv Bjørnstad	Evaluator Lead on Uganda and Mali Country Case Studies
Anthea Gordon	Evaluator and Research Coordinator Lead on Tanzania Country Case Study and evaluator on Ghana study.
Lilli Loveday	Assistant Research Coordinator Researcher for Sierra Leone desk study
Zoe Driscoll Stephanie Allan Philip Lister	Research Support Research Support Editorial Support

Table 20 Timeline for the evaluation

Phase / Activity	Dates/deadline	By whom	Comments
Inception			
Inception briefing, Rome	<i>28-30 January</i>	EM & Team	
Team Workshop in Oxford	<i>16/17 February</i>	Team (TP/EM)	
Internal TP	<i>16 February</i>	TP	
Draft Inception Report to OEV	<i>Fri 20 February</i>	TL	
EQAS process for comments/EMG Review	<i>2nd March</i>	EM/EMG	Evaluation Management Group will provide comments at the same time as the Evaluation Manager. The EM will consolidate feedback – the feedback loop anticipated within 2 weeks
REACH facilitators workshop in Rome	<i>3-6 March</i>	Team	Attendance by ET members on 5-6 th March
Revised draft of IR submitted	<i>12 March</i>	TL	
EQAS process for comments/ EMG review	<i>13 March</i>	EM/EMG	EMG to review revised IR during its meeting in New York (9-13 March) (comments by 16 March)
Final IR submitted	<i>7 April</i>	TL	
Country case studies			

Phase / Activity	Dates/deadline	By whom	Comments
Ghana	<i>23-30 March</i>	MV (TL) + AG	
Lesson learning report	<i>During week beginning 30 March</i>	MV +AG	Not a formal deliverable, but to be shared with team members ahead of subsequent CCSs
<i>Ghana draft to TL</i>	<i>6 April</i>	MV+AG	All dates have been confirmed and approved by REACH country facilitators.
Uganda	<i>13-20 April</i>	LB	
<i>Uganda draft to TL</i>	<i>4 May</i>	LB	
Nepal	<i>15-22 April</i>	MMG	
Nepal draft to TL	<i>29 April</i>	MMG	
Mali	<i>21-28 April</i>	LB	
<i>Mali draft to TL</i>	<i>4 May</i>	LB	
Rwanda	<i>6-13 May</i>	MMG	
<i>Rwanda draft to TL</i>	<i>20 May</i>	MMG	
Mozambique	<i>11-18 May</i>	MV	
<i>Mozambique draft to TL</i>	<i>25 May</i>	MV	
Tanzania	<i>11-18 May</i>	AG	
<i>Tanzania draft to TL</i>	<i>22 May</i>	AG	
Bangladesh	<i>19-26 May</i>	SDT	
<i>Bangladesh draft to TL</i>	<i>28 May</i>	SDT	
Final reporting			
Draft 1 Evaluation report goes to EMG and TP in parallel	<i>Thursday 11 June</i>	TL	Between last country study and the report submission
Virtual meeting with EMG and ET to review ER	<i>Monday 22 June</i>	TL (+team tbc)	Virtual meeting in Rome
EMG quality feedback sent to the team	<i>Monday 22 June</i>	EM (+EMG)	Allows EMG 11 days
Submit revised draft ER to OEV	<i>Friday 26 June</i>	TL	Allows ET 4 days turnaround
Second level clearance prior to circulating the ER to Stakeholders. When cleared, draft evaluation report shared with stakeholders for their feedback.	<i>Friday 3rd July</i>	EM	Allows 1 week as it is second review (any changes to be made by ET to be done within this time)
OEV consolidate all stakeholder comments (matrix), and share them with team	<i>Monday 13 July</i>	EM	Ten days to gather and compile comments

Phase / Activity	Dates/deadline	By whom	Comments
Submit draft SER to OEV	<i>Monday 20 July</i>	TL	
Submit revised draft ER to OEV based on the comments, and team's comments on the matrix of comments.	<i>Thursday 23 July</i>		
EMG Review comments matrix and revised ER.	<i>Thursday 30th July</i>	EM/EMG	One week to turn around
EM seeks OEV Dir.'s clearance to issue Summary Evaluation Report (SER) to Collaborating Agency Executive Management.	<i>Friday 31st July</i>	EM	1-2 days (excluding weekend)
OEV circulates the SER to Collaborating Agency Executive Management for comments (upon clearance from second level supervisor)	<i>Tuesday 4 August</i>	EM/OEV/D	2 working days in case of comments from OEV Director
OEV sends and discusses the comments on the SER to the team for revision	<i>Friday 14 August</i>	EM	4-14 ten days for comments
Submit final draft ER (with the revised SER) to OEV	<i>Sunday 16 August</i>	TL	
Seek Final approval by second level supervisor/OEV Director Clarify last points/issues with the team if necessary	<i>Friday 28 August</i>	EM/OEV/D	

Annex E Reconstructed REACH Theory of Change

1. During the inception phase, the team developed a reconstructed Theory of Change (TOC) for REACH to guide the evaluation process. The team elucidated and expanded elements of the REACH ToC found in key documents (notably the Logical Framework (REACH, 2013d)) and from early discussions with key informants (including the REACH Secretariat and REACH Facilitators) to identify the assumptions underlying the REACH design.

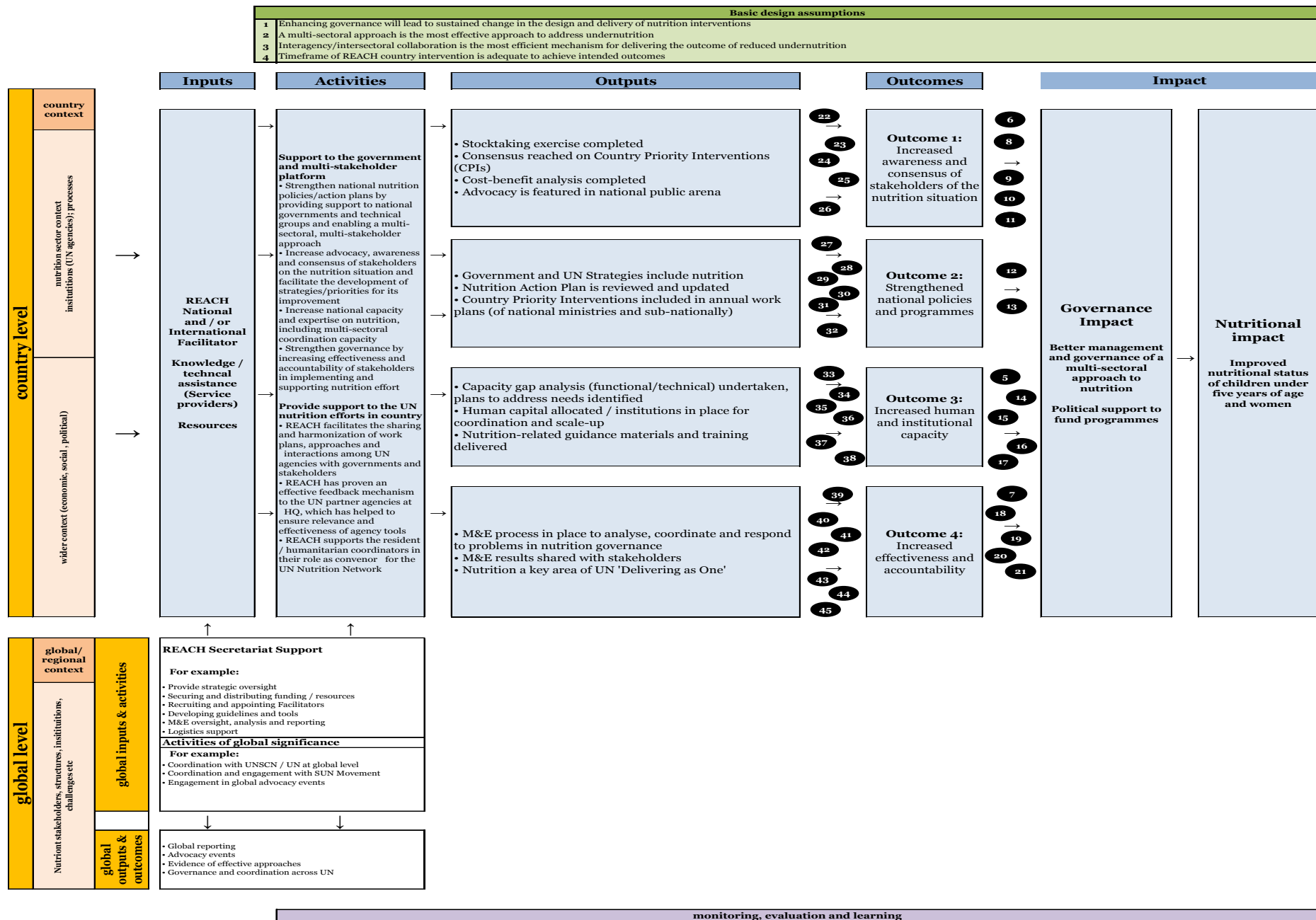
2. The full description of the REACH TOC is detailed in the Inception Report (Mokoro, 2015b), the figure presented below (see Figure 3). The outputs and outcomes are drawn from the September 2013 Logframe and the statement of activities is drawn from the presentation made to the evaluation team during the REACH Inception Briefing in Rome (REACH, 2015a). Across the top of the diagram basic design assumptions are detailed, with outcome-impact assumptions drawn from the logframe as well as the evaluation team's analysis of REACH Design. Table 21 maps the assumptions and the influence REACH has on them.

Table 21 ToC assumptions (design and outcome to impact)

#	Assumption	Influence
Basic design assumptions		
1	Enhancing governance will lead to sustained change in the design and delivery of nutrition interventions	-
2	A multi-sectoral approach is the most effective approach to address undernutrition	-
3	Interagency/intersectoral collaboration is the most efficient mechanism for delivering the outcome of reduced undernutrition	-
4	Timeframe of REACH country intervention is adequate to achieve intended outcomes	REACH influence
Outcome to Impact assumptions		
5	REACH can enhance governance (decision-making and power relations) and not just structure	REACH influence
6	The outcomes will be accompanied by political will and the resources to deliver at scale	Exogenous
7	The interventions, policies, plans and programmes are technically sound and appropriate in the country context	REACH partial influence
8	Commitment of stakeholders to support nutrition actions is a direct result of increased awareness and consensus of the nutrition problems and how to address the problems	REACH influence

#	Assumption	Influence
9	Nutrition focal points have adequate knowledge about the main stakeholder groups in the social sector in-country	REACH influence
10	The data are available to make informed choices	Exogenous
11	A list of donors and NGOs and their financial portfolios exists at the country level	Exogenous
12	There is stakeholder consensus on the national nutrition policy across all sectors	REACH partial influence
13	All government sectors will support the development/updating of a multi-sectoral nutrition action plan	REACH partial influence
14	The coverage indicators will capture the necessary information on a timely, regular basis	Exogenous
15	The coverage data will be captured accurately	Exogenous
16	Increased coverage is an indication of sufficient capacity	Exogenous
17	All countries will set up a high level coordination committee	Exogenous
18	Information systems across sectors are harmonised. If data collection, sampling methodologies, etc. vary so much, then it will not be possible to interpret these data. For example some surveys could be collecting data in selected regions while others have a national coverage	Exogenous
19	Data for most indicators can be collected routinely and effectively. Most surveys are conducted between 3-5 years and so will not be relevant for decision-making on a regular basis	Exogenous
20	The government has funding to commit to nutrition and is tracking it	Exogenous
21	National government and ministries have clear and accessible reports, indicating the amount of funds being earmarked. Also, earmarking funds is considered an action of commitment to implementing nutrition policies and programmes.	Exogenous

Figure 3 REACH Reconstructed Theory of Change



Outcome to impact assumptions

5	REACH can enhance governance (decision-making and power relations) and not just structure
6	The outcomes will be accompanied by political will and the resources to deliver at scale
7	The interventions, policies, plans and programmes are technically sound and appropriate in the country context
8	Commitment of stakeholders to support nutrition actions is a direct result of increased awareness and consensus of the nutrition problems and how to address the problems
9	Nutrition focal points have adequate knowledge about the main stakeholder groups in the social sector in-country
10	The data are available to make informed choices
11	A list of donors and NGOs and their financial portfolios exists at the country level
12	There is stakeholder consensus on the national nutrition policy across all sectors
13	All government sectors will support the development/updatign of a multi-sectoral nutrition action plan
14	The coverage indicators will capture the necessary information on a timely, regular basis
15	The coverage data will be captured accurately
16	Increased coverage is an indication of sufficient capacity
17	All countries will set up a high level coordination committee
18	Information systems across sectors are harmonised. If data collection, sampling methodologies, etc. vary so much, then it will not be possible to interpret these data. For example some surveys could be collecting data in selected regions while others have a national coverage
19	Data for most indicators can be collected routinely and effectively. Most surveys are conducted between 3-5 years and so will not be relevant for decision-making on a regular
20	The government has funding to commit to nutrition and is tracking it
21	National government and ministries have clear and accessible reports, indicating the amount of funds being earmarked. Also, earmarking funds is considered an action of

Ouput to outcome assumptions

22	Stakeholders are well represented in the nutrition analysis exercise and in the stocktaking exercise
23	Agreement on interventions is clearly defined
24	Advocacy for nutrition investment is a priority in the country
25	Resources are available to fund an investment case
26	Addressing nutriiton is a national priority
27	Nutrition is clearly defined and understood as a development issue
28	High-level strategy is drawn up during the UN REACH period and the strategy informs policy and action plans for all relevant ministries and development partners. Or, this indicator can be satisfied based on a previously drafted strategy
29	drafted UNDAF/UNDAP
30	Interventions have been prioritised and clearly defined
31	Ministries have been sensitized on the need and/or agree to mainstream nutrition into their respective work planning procedures/practices
32	The sub-national administrative units support integration of nutrition interventions in development plans
33	The national muti-sectoral action plan which determines capacity needs for the scale-up of interventions is of good quality
34	There is comprehensive multi-sectoral plan to address capacity needs of the nutrition action plan
35	Technical capacity needs to scale-up nutrition have been determined
36	Delivery of nutrition by country personnel is a priority
37	NCM is coordinating or overseeing the National Training guidance for community-based nutrition
38	All focal points will have been identified at national and sub-national level
39	The country is readily willing to adopt the use of a dashboard to track impact and implementation
40	The country has the technical infrastructure and human capital to implement and support the national/sector information system(s)
41	The country has a national/sector M&E system(s) that can adopt these new indicators
42	Resources are available for nutrition
43	M&E reports are disseminated to all key stakeholders
44	The four UN agencies are working effectively in country
45	Facilitator will be privy to all nutrition-related UN programmes planned or implemented

Annex F Evaluation Matrix

1. The evaluation matrix shown in Table 22 below was developed drawing on the questions posed in the Terms of Reference, together with the reconstructed theory of change shown in Annex E above and the logic model.

Table 22 Evaluation Matrix

Key Question	Sub-question	Measure /indicator including benchmark	Source of information	Data collection Methods	Comments & Triangulation Approach
DESIGN					
Q1: How relevant and appropriate is the design of REACH? To what extent:	1.1 Are REACH objectives and strategies in line with the international development agenda in terms of reduction in hunger and improvements in nutrition priorities of participating countries?	Evidence of alignment with international agenda in REACH global strategy Evidence of alignment at country level in CIP and annual work plans MDGs (MDG1, target 3)	Review of key global nutrition priorities - documentation Review of REACH strategy documents and annual work plans	Country level interviews Selected global indicators Documents	Variety of stakeholders interviewed, review of documentation
	1.2 Is REACH aligned with the mandates and capacities of the four UN agencies?	Evidence of alignment in terms of stated mandates Evidence of alignment with gender priorities of four UN agencies	Global level interviews with staff from four UN agencies Interviews with focal points at country level Mandate documentation	Interviews Document review (e.g. UNDAF)	Interviews with UN staff at HQ, region and country level + external perspective of other stakeholders
	1.3 Was REACH designed to achieve coherence, alignment, and complementarity between REACH and other global nutrition initiatives (including the SUN initiative), and national nutrition policies and programmes?	Evidence in design of intention of working together with global and regional nutrition initiatives e.g. shared work plans and joint objectives Level of understanding of role of the different initiatives and how they work together amongst those working in nutrition Evidence of overlap or complementarity between REACH TA and that provided by other donor partners and other initiatives	Interviews with actors from other global initiatives – at global level and national level as key to see whether it's occurring at both levels. SUN and other initiatives strategy documents and stated objectives	Interviews Document review	Cross-section of interviews with variety of stakeholders – those within nutrition and those external

Key Question	Sub-question	Measure /indicator including benchmark	Source of information	Data collection Methods	Comments & Triangulation Approach
		Degree of linkage between REACH Country Committee and the SUN multi-stakeholder platform Relationships between REACH facilitators, SUN Focal point and lead operational donor in country.	SUN ICE final report and country studies		
	1.4 Was REACH designed to align and contribute to equity (including gender equity) as defined by international and regional conventions, national policies and strategies and the needs of the target group (women and children under five)?	Evidence of alignment with international and national gender policies and strategies Alignment with target groups (women and children under five)	Interviews with REACH staff past and present REACH historic and present documentation National policies and strategies on gender	Interviews (perhaps include Ministry for gender at country level) Document review	Triangulate across staff members but also with external interviews UN gender focal points in country
	1.5 Is the REACH logic model including its assumptions valid? In particular, is the relative emphasis on intra-UN and with-government “communication and coordination structures” (as per TOC) appropriate to the priority needs/gaps in the sector?	Assumptions on which theory of change is based Coherence of the components of the logic model with the desired results Level of agreement on assumptions by stakeholders	Theory of change and logframe	Review of theory of change and test its validity with stakeholders (interviews)	Interview variety of stakeholders Assess according to outputs and validity of logic
PERFORMANCE					
Q2: How has REACH performed at Country Level?	2.1 Effectiveness: <ul style="list-style-type: none"> What have been the intended and unintended results of REACH? What are the commonalities and 	Evidence of REACH policy position and/or analysis in country level documentation and planning Awareness amongst government officials of REACH and what it stands for Intended outcomes vs. actual outcomes (baseline compared to baseline data)	In country : REACH monthly activity plans, CIPs, interviews Baseline and endline REACH data Annual Reports	Interviews Review of REACH documentation Collection of government and other forms of documentation on country visit	Triangulation at country level through interviews with diverse stakeholders and checks with documentation at country level and at HQ Reliance on Secretariat for endline data collection

Key Question	Sub-question	Measure /indicator including benchmark	Source of information	Data collection Methods	Comments & Triangulation Approach
	<p>differences across countries?</p> <ul style="list-style-type: none"> To what extent have the outcomes been achieved? Is REACH on track to achieve its intended outcomes? To what extent are the findings from REACH's analysis of country level nutrition governance and progress being reflected and taken up in policy and action planning at country level? 				
	<p>2.2 Equity:</p> <ul style="list-style-type: none"> To what extent has REACH contributed to an enhanced understanding of and approach to equity and gender equality in nutrition? To what extent have REACH outputs and outcomes addressed equity considerations (including gender equality)? 	<p>Collection and use of gender disaggregated data Equity specifically referred to and evidence of how REACH planned to address it Indicators and outputs for impact on gender equity</p>	<p>REACH documentation</p>	<p>Review REACH documentation</p>	<p>Triangulate with external perspectives on extent to which REACH considers gender equity</p>
	<p>2.3 Efficiency:</p> <ul style="list-style-type: none"> How efficient has REACH been in terms of inputs compared to its outputs? 	<p>HQ budget allocation vs. spending</p>	<p>Budgets – planned and actual Steering Committee interviews Country case study</p>	<p>Document review Interviews</p>	<p>Triangulate by comparing with other initiatives Compare across country studies – is REACH more</p>

Key Question	Sub-question	Measure /indicator including benchmark	Source of information	Data collection Methods	Comments & Triangulation Approach
	How efficient and cost effective are its administrative and management structures (particularly compared to those of SUN)?		interviews		efficient in some countries than others?
PERFORMANCE AND RESULTS					
Q3: What contributory/explanatory factors have affected REACH's performance and results?	3.1 How have REACH performance and results been affected by the operational and policy environments, capacity and resources, skills and knowledge in participating countries?	Country context analysis Annual work plan vs. actual work done in that year	Country case studies External sources (such as World Bank, other evaluation reports) which provide country context/ background Facilitator logs In depth country assessment (for pilot countries)	Interviews Document review	Compare across country studies
	3.2 How have REACH performance and results been affected by its own governance and management including the Steering Committee, the Secretariat, Country Committees and Technical Group?	Areas where governance and management have been a positive influence and where negative (intentional or not) Examples	SC meeting minutes Secretariat briefing reports to the SC CC meeting minutes Facilitator logs	Interviews Document review	Compare across country studies
	3.3 To what extent have REACH's partnerships affected its performance and results? Have global and country level partners demonstrated the necessary commitment, agreement and actions to support REACH to achieve its objectives? Quality of partnership	Knowledge of REACH amongst partners (global and national) Extent of joint working Levels of commitment amongst partners (attendance at meetings, interactions, evidence of joint working/ joint initiatives) REACH facilitators network in country Degree of overlap or complementarity between REACH TA and that provided	Interviews (with partners and REACH staff) CIPs Annual work plans Minutes of meetings SUN ICE evaluation report and country studies Membership of	Interviews Document review	Compare across country studies Compare with SUN and any other national level nutrition initiatives

Key Question	Sub-question	Measure /indicator including benchmark	Source of information	Data collection Methods	Comments & Triangulation Approach
	<p>management by REACH compared to other global and national nutrition initiatives?</p> <p>Have coherence, alignment, and complementarity been achieved between REACH and other global and country-level nutrition initiatives (including the SUN initiative and development partners at country level?)</p>	<p>by other donor partners and other initiatives</p> <p>Look at link between REACH Country Committee and the SUN multi-stakeholder platform</p> <p>Relationships between REACH facilitators, SUN Focal point and lead operational donor in country.</p>	<p>country committees (and level of engagement of members)</p>		
	<p>3.4 To what extent has REACH at country level demonstrated the necessary commitment, agreement and actions to achieve its objectives? How catalytic has REACH been in the process of harmonisation and alignment?</p>	<p>Role of REACH at national level in bringing about change – what outputs have been achieved – how?</p> <p>Review what REACH facilitators have been doing compared to what has happened in nutrition</p> <p>Perceived role in bringing change</p>	<p>Facilitator logs</p> <p>Baseline and endline data for countries</p> <p>Membership and participation of REACH in country level nutrition groups/ platforms</p> <p>Interviews</p>	<p>Interviews</p> <p>Document review</p> <p>REACH data analysis</p>	<p>Compare across interviewees and country studies</p>
SUSTAINABILITY					
<p>Q4: To what extent are the outcomes of REACH likely to be sustainable?</p>	<p>4.1 Are the results achieved and the REACH operational models sustainable?</p>	<p>Use logframe indicators for results sought</p> <p>Finances available vs. required</p> <p>Level of forward planning and future proofing</p> <p>Evidence of capacity building</p> <p>Evidence of handover or planning for handover</p> <p>Evidence of national funding</p> <p>Likelihood that the REACH Facilitator's role will continue to be important after the first few years.</p> <p>Importance of the REACH Facilitators role to sustainability.</p>	<p>REACH baseline and endline data</p> <p>Logical framework</p> <p>Country case studies</p> <p>Interview notes</p> <p>Country reports/ reviews/ visits from pilot countries</p> <p>REACH budgets past and planned (forward)</p> <p>REACH expansion planning documents</p>	<p>Interviews</p> <p>Document review</p> <p>Analysis of REACH data</p>	<p>Sustainability – check with all stakeholders in country and global level</p>

Key Question	Sub-question	Measure /indicator including benchmark	Source of information	Data collection Methods	Comments & Triangulation Approach
	4.2 To what extent is REACH contributing to increased national ownership?	Evidence of REACH involvement/ data/ influence in national policies, planning and initiatives Awareness of REACH and its aims amongst nutrition partners in country Clear statements of strategy Evidence of prioritisation in country of women and children under 5 Level of coordination and coherence in the nutrition sector in country Evidence of capacity building – with national staff and government officials Baseline and endline data	Interviews particularly with national government officials National nutrition documentation, policy, action plan CIP – country progress reporting to Secretariat and CC Minutes of in country meetings	Interviews Document review	Country case study reports
	4.3 Based on the evaluation findings, what recommendations can be offered in terms of the future of REACH?	N/A	Country case studies Interview notes Drafts of evaluation report	Country case studies Document review	CCS findings will be tested in country through de-briefing meeting Recommendations will be linked to findings and conclusions

Annex G Country nutrition data

1. The evaluation has drawn on existing data sources to inform findings, conclusions and recommendations and to ensure a systematic review of the situation in each country case study. Key data sources have included the Global Nutrition Report (GNR) as well information drawn from a variety of sources to present a comprehensive picture of the nutrition situation in each country studied. This annex presents a snapshot of the data that has been used to guide investigation and analysis; it is by no means exhaustive.

2. Table 23 below summarises the progress status towards the six global World Health Assembly (WHA) nutrition targets for the eight countries included as case studies in this evaluation, along with Sierra Leone (the desk study country). Data is drawn from the Global Nutrition Report (IFPRI, 2014), which uses the Average Annual Rate of Reduction (AARR) indicator to determine whether progress is being made towards the targets. The findings highlight that none of the countries are on course against target 2 and target 4, and that only Nepal is on course against target 1. Furthermore, only Rwanda and Uganda are on course against target 6.

Table 23 Progress against WHA targets

Country	Under-five stunting			Under-five overweight			Under-five wasting		WRA anaemia		
	Current AARR	Required AARR (%)	On/off course	Baseline rate	Current AARR (%)	On/off course	Baseline rate	On/off course	Current AARR (%)	Required AARR (%)	On/off course
Bangladesh	2.7	3.3	Off	1.9	-6.6	Off	15.7	Off	0.6	5.2	Off
Nepal	3.4	3.2	On	1.5	-7.9	Off	11.2	Off	2.6	5.2	Off
Ghana	2.8	4.4	Off	2.6	-0.7	Off	6.2	Off	-1.3	5.2	Off
Mali	2.0	6.5	Off	4.7	-8.7	Off	15.3	Off	1.1	5.2	Off
Mozambique	1.4	5.5	Off	7.9	-1.4	Off	6.1	Off	1.0	5.2	Off
Rwanda	0.9	4.9	Off	7.1	0.1	Off	3.0	On	2.1	5.2	Off
Tanzania	1.9	5.7	Off	5.5	-4.7	Off	6.6	Off	1.3	5.2	Off
Uganda	2.6	6.0	Off	3.8	2.2	On	4.8	On	3.0	5.2	Off
Sierra Leone (desk study)	0.8	4.5	Off	10.3	-9.0	Off	9.2	Off	1.7	5.2	Off

Source: IFPRI, 2014. *Global Nutrition Report 2014: Actions and Accountability to Accelerate the World's Progress on Nutrition*. Washington, DC

3. Table 24 below presents key data on the REACH countries studied, including development indicators and indicators highlighting the nutritional status and preparedness in each country.

Table 24 Key data indicators for REACH evaluation case study countries

Indicator	End note #	Bangladesh	Ghana	Mali	Mozambique	Nepal	Rwanda	Tanzania	Uganda	Sierra Leone
General indicators										
Population (millions)	1	158.5	26.4	15.77	26.47	28.12	12.11	50.76	38.85	6.09
Population under 5	2	15.3	3.52	2.67	4.24	3.17	1.79	8.05	6.58	928,000
GDP/capita:	3	958	1,858	715	605	694	639	695	572	1,865.2
Population below \$1.25 (PPP) per day, %	4	43.3	28.6	50.6	59.6	23.7	63	43.5	37.8	56.6
Life expectancy at birth m/f, years	5	70/71	60/62	55/54	49/51	67/69	62/65	60/62	58/60	45.3 (total)
Political stability	6	-1.35	0.10	-1.98	0.35	-1.38	-0.21	0.03	-0.89	-0.27
Nutrition indicators										
Low birth weight, %	7	21.60	11	18	17	18	7	8	12	10.5
Exclusive breastfeeding, %	8	64.10	46	20	43	70	85	50	63	58.8
U5 Stunting, %	9	41.30	22.7	38.5	43.1	40.5	44.3	34.8	33.7	28.8
U5 Wasting, %	10	15.60	6.2	15.3	6.1	11.2	3	6.6	4.8	4.7
U5 Overweight, %	11	1.50	2.6	4.7	7.9	1.5	7.1	-	3.8	12.9
Nutrition-relevant indicators										
Adult literacy rate (15+ years) (m/f), %	12	62/55	78/65	43/25	67/36	71/47	71/62	75/61	83/65	70.5/52.1
Fertility rate	13	2.2	3.9	6.9	4.7	2.4	4.6	5.3	6.0	4.7
Female secondary school enrolment, %	14	51	50	28	17	61	-	26	-	42
Population using non-improved drinking water	15	18	32	34	42	6	20	31	16	n/a

Indicator	End note #	Bangladesh	Ghana	Mali	Mozambique	Nepal	Rwanda	Tanzania	Uganda	Sierra Leone
source										
Average dietary energy supply adequacy	16	108	142	136	108	117	102	102	107	113
Depth of food deficit	17	118	24	23	204	87	248	258	172	190
Nutrition Governance Indicator	18	Weak	Weak	Weak	Weak	Medium	Not rated	Weak	Strong	Not rated
HANCI ranking	19	16	10	24	25	6	12	7	17	29
Global Ranking of Stunting Prevalence	20	6	34	38	20	19	37	10	14	36
Global Hunger Index Rank/Score	21	57/19.1	16/7.8	28/13.0	62/20.5	44/16.4	40/15.6	53/17.3	52/17.0	22.5

Explanatory notes on sources for data in Table 24

1. Source for: all countries World Bank 2014; except Sierra Leone WB 2013
2. Source for all countries: WPP 2010; except Sierra Leone, UNICEF 2012
3. Source for all countries: WB, 2013; except Sierra Leone 2013 FAO FS Indicators, 2014
4. Source: Bangladesh, Mali, Nepal WB 2010; Tanzania; WB 2012; Uganda WB 2013; Sierra Leone, Rwanda WB 2011 Ghana UNDP 2006;
5. Source for all countries: WB 2012; except Sierra Leone UNICEF 2012
6. Source for all countries: (2012) FAO FS Indicators 2014
7. Source: Bangladesh, Mozambique, Nepal DHS 2011; Ghana MICS 2011; Mali MICS 2010; Sierra Leone UNICEF 2008-2012; Rwanda DHS 2010
8. Source for: Bangladesh, Mozambique, Nepal DHS 2011; Ghana MICS 2011; Mali MICS 2010; Sierra Leone SMART Survey 2014; Rwanda DHS 2010
9. Source for: Bangladesh DHS 2011; Ghana, Mozambique, Nepal, Rwanda, Tanzania, Uganda WHO NLiS 2011; Mali WHO NLiS 2006; Sierra Leone SMART Survey 2014
10. Source for: Bangladesh DHS 2011; Ghana, Mozambique, Nepal, Rwanda, Tanzania, Uganda WHO NLiS 2011; Mali WHO NLiS 2006; Sierra Leone SMART Survey 2014
11. Source for Bangladesh (DHS 2011); Ghana, Mozambique, Nepal, Rwanda, Tanzania, Uganda WHO NLiS 2011; Mali WHO NLiS 2006; Sierra Leone SMART Survey 2014
12. Source for: Bangladesh WB 2012; Ghana, Nepal, Tanzania, Uganda WB 2010; Mali, Nepal WB 2011; Sierra Leone UNICEF 2008-2012; Mozambique GMR 2013
13. Source for all countries: WB 2012; except Sierra Leone WB 2013; and Mozambique GMR 2013
14. Source for: Bangladesh, Mozambique, Nepal WB 2012; Ghana and Sierra Leone WB 2013; Mali WB 2011; Tanzania WB 2010; not available for Uganda and Rwanda
15. Source for all countries (not available for Sierra Leone): (2010) UNICEF 2012
16. Source for all countries: (2012-2014) FAO FS Indicators 2014
17. Source for all countries: FAO FS Indicators 2014 (2012-2014)
18. Source for all countries: UN SCN 2009; Rwanda not ranked
19. Source for all countries: HANCI, 2013
20. Source: UNICEF 2009
21. Source: 2014 IFPRI

Annex H Monitoring Data analysis

1. The evaluation reviewed the baseline and endline monitoring data for each of the eight DFATD-funded countries, collected by the REACH Secretariat alongside the in-country facilitator/s and UN nutrition focal points. The data informed the overall assessment of REACH outcomes and outputs and was used to crosscheck findings at the country level. However, as the discussion below highlights, there are complexities surrounding use of the data in terms of its reliability and in terms of making assessments across all of the case study countries included in the evaluation.

2. This annex presents an overview of the analysis of country data as well as observations on the processes around data collection and scoring, Annex I presents further analysis of country-level indicators.

Data collection process

3. The REACH M&E Facilitator guidelines envisaged three points at which data would be systematically collected at country level (in addition to on-going monitoring in the form of completing facilitator logs)– these were at baseline (prior to any REACH engagement), at midline (after one year of engagement) and at endline (after 2/3 years of engagement). The process for obtaining scores involves the REACH facilitator/s as well as key stakeholders (especially the UN Nutrition focal points) detailing progress against key outcomes and outputs at country level (based on review of documents and consultation). The data collected by REACH are collected from focus groups and literature reviews (data sources such as Demographic and Health Surveys (DHS) data). The main focus group used for data collection is made up of the four⁹ UN nutrition focal points that, in conjunction with the REACH facilitator, fill in the majority of the qualitative data indicators. Government officials and other key stakeholders in country then verify the completed indicators.

4. A score is assigned against the outcomes and outputs presented in the M&E framework (the REACH Logical Framework), being a percentage, a score out of 20, or a value indicating the actual number of, for example, nutrition champions. Once completed, scores are shared with and checked by the REACH Secretariat.

Baseline / midline and endline data collection in DFATD-funded countries

5. In the eight DFATD-funded countries, the REACH Secretariat collected data in 2012 and 2013. For the generation 1 countries, this took place by a team from the Secretariat on a REACH in-country mission before the facilitators were recruited. In 2012, the REACH Secretariat finalised a comprehensive M&E framework "complete with indicators and training manual" (REACH, 2012b: p.3).

6. As a result of the time taken to finalise the M&E framework, logframe and indicators, and delays in the recruitment of the facilitators, the midline was collected in 2013 and at the same time a baseline was constructed retrospectively. This was in part because the baseline templates issued (and in some cases completed) in 2012 had been altered when a revised version of the M&E section of the facilitators' manual was produced. After the baseline data were collected the template was again reviewed and

⁹ More than four in some countries.

revised as it had caused problems in some countries, and then the mid-line data were finalised.

7. The endline data was collected from towards the end of 2014 throughout the first half of 2015. At the same time, the baseline data collected in 2012/2013 was reviewed and some scores were altered. Table 25 below presents a summary of the data collection points in each of the eight DFATD countries. REACH learnt from the process and now tries to construct the baseline during the initial REACH country mission.

Table 25 REACH Baseline Data Collection Process

Country	Actual baseline	REACH Facilitators start date	Actual baseline data collection	Revised baseline (used for analysis)	Endline data collection
Bangladesh	December 2010	July 2012	December 2012	May 2015	May 2015
Uganda	January 2011	July 2012	March 2013	April 2015	April 2015
Mozambique	June 2011	July 2012	January 2013	May 2015	May 2015
Tanzania	July 2011	July 2012	February 2013	May 2015	May 2015
Nepal	August 2011	November 2012	July 2013	April 2015	April 2015
Rwanda	August 2011	June 2012	December 2012	April 2015	April 2015
Mali	August 2011	September 2012	January 2013	April 2015	April 2015
Ghana	September 2011	August 2012	March 2013	March 2015	March 2015

Source: REACH, 2015a, January 2015: slide 8

Data indicators, review process and implications for data reliability

8. The REACH logframe was first drafted in 2011. It includes a range of qualitative and quantitative indicators. A second version was produced in September 2013, and the total number of indicators reduced from 60 per country in 2012 to 53 in 2013. The number of outcome indicators increased from 14 to 21 whilst the number of impact and output indicators was reduced.

- For example, data captured against the 2012 logframe did not include sub-indicator output 1.1a (Nutrition Situation Analysis), whereas the 2013 logframe has outputs 1.1a Nutrition Situation Analysis and 1.1b Stakeholder Activity Mapping Exercise.
- Similarly, against output 4.1 there are three sub indicators in the 2013 version of the logframe (4.1a Dashboard – which is not included in the 2012 version – 4.1b Governance in NIS and 4.1c. Nutrition in NIS).

9. No data have yet been collected on the impact indicators¹⁰, as they are long-term and, with a starting date in 2012, it is still too early to see impact. Data collection on these indicators is planned for 2017. Whilst it was initially planned to use surveys to collect primary data for some of the indicators, this did not work at country level.¹¹

10. In 2015, at the same time as endline data collection, the baseline data was reviewed and revisions made against the ‘original’ baseline values assigned in

10 Six nutritional indicators which rely upon external international data sets such as DHS, MICS, Countdown to 2015.

11 Only Bangladesh and Mozambique did surveys.

2012/2013. This process took place as a result of the definitions and indicators having developed over time, which has led to an ‘updated’ understanding of what the outputs/indicators are and how they should be recorded.

- For example, output indicator 1.4a refers to the advocacy strategy and is scored between 0 and 20, with the indicator reading ‘...strategy established and adopted by government’. A score of 20 is therefore recorded when the document is both established and has been adopted. For Ghana, for example, the indicator was scored 10 in 2013 but this was revised to 0 in 2015 because although there was an advocacy plan drafted early on (2011/2012) it was not adopted and so the baseline value was changed to better represent progress against the indicator.
- Another example of where the understanding of indicators has changed leading to revised/reviewed baseline values is against indicator 4.3d – ‘inter-agency common strategy for nutrition agreed’. In 2013 when the midline/reconstructed baseline values were being collected, the UNDAF was considered by some to be an inter-agency common strategy, whilst the UNDAF should be captured as a separate item under 2.1b.
- In other instances, the denominator values have changed against certain indicators – for example under 3.2b, the denominator in Ghana in 2012/2013 was 22 because 22 districts were the focus. Between 2012/2013 and completion of the endline data, the number of districts in Ghana had changed and so the revised baseline changed the denominator value to three to represent the three regions where REACH focuses.

11. Due to the nature of REACH and what it is trying to achieve, many of the REACH indicators are perception based. Whilst REACH has put in place tools for the collection of these data (e.g. REACH stocktaking tools, stakeholder mapping exercise, stakeholder awareness tool, dashboard) and a clearly defined scoring system, the primary data source for many of the indicators is the UN Focal Point Team or the REACH facilitator's observations, logs and case studies. In some instances there is ambiguity around precisely what is being measured and/or how.

- For example, against the indicator 2.3b (CPI uptake), the sectors which are being assessed varies from country-to-country. When looking at one country in isolation, this is less of an issue but it makes comparison between countries difficult because the indicator results become misleading. For example, Nepal receives an endline score of 94 percent against output 2.3b - with the uptake of a total of 36 identified CPIs recorded across various ministries (including Health & Population, Agriculture Development, Urban Development, Education, Federal Affairs and Local Development). In Rwanda, comparatively, the score for output 2.3b at endline indicated that 48 percent of the core nutrition actions had been integrated, but the score was only assigned for uptake by the Ministries of Agriculture and Health. However, the notes accompanying the Rwanda data highlight that when viewed across a wider selection of sector plans, 96 percent of actions are integrated

12. Another issue in analysing across countries relates to precisely what is being measured against each of the indicators.

- For example, against output 3.1a (the capacity gap analysis), various different versions of a capacity gap analysis are captured/scored in the different countries (i.e. in Tanzania – even though no capacity gap analysis is costed in the REACH CIP – a score of 20 is recorded based on completion of a ‘Landscape Analysis’, which had as part of it a capacity assessment; and in Ghana the same issue applies but a score of 20 is recorded on account of a gap analysis having been undertaken in 3.1a). The indicators draw on activities completed by different actors/stakeholders and ‘go back in time’ to different degrees. This is indicative of some of the issues in terms of drawing comparisons between indicator values across countries.

13. The scoring assigned to some of the indicators also has implications for how progress is recorded.

- For example, various indicators can only be scored either 0 or 20 (with no intermediary value). This applies to outcome 4a, outcome 4b, outcome 4c and outputs 4.1a, 4.1b, 4.1c and 4.2, amongst others. Various of these outputs refer to tangible outputs (such as, 4.1a which is the Dashboard, 4.1b which measures whether nutrition governance is in the Nutrition Governance System and outcome 4a-c which indicate whether impact, implementation and funding tracking mechanisms are in place) which are either present or not (if present they receive the full score of 20). However, as with other indicators – such as 1.1a (nutrition situation analysis), which can be score 0, 10, 15 or 20 depending on the status of its completion, various of these can also be considered ‘works in progress’. In the case of Tanzania, as an example, even though the implementation tracking mechanism (outcome 4b) is being developed it is scored zero, since it has not been completed. The status of various indicators may, therefore, be more nuanced than what it is possible to indicate with the existing framework.
- Furthermore, targets assigned are the same across all countries (following the logical framework). In reality, it is observed that various countries had ‘achieved’ the target already at baseline (for example, against indicator 2.1b (the UNDAF containing nutrition) all countries except Uganda had already met the target).

14. Table 26 below presents a summary of comments on the scoring for each of the indicators, with some observations noted regarding the processes and comments on the country data reviewed.

15. The various factors discussed have implications for the reliability of the data as well as in terms of how far data can be compared across countries. Not only are there differences in terms of the way that the indicators have been applied at country level but the subjectivity of some of the scoring processes makes verifying the data challenging. As Table 25 above shows, the retrofitting of data to construct the baseline happened a year or more after the date of the baseline in countries and these values have been reviewed again subsequently, with various revisions made and changed understanding of what is being scored.

Table 26 Overview and observations on the M&E indicators and scoring

	Indicator		Scoring range	Comments/observations
OUTCOME 1	Outcome 1 Indicator 1A Commitment of Stakeholders	NGOs	0-100 percent	Target to be 80 percent for each group at endline. Percentage score based on an assessment of whether the top 5 largest stakeholder groups are committed to nutrition Selection process of the various groups of stakeholders – for NGOs should be the five biggest in the social sector.
		Donors	0-100 percent	
		Government Ministries	0-100 percent	
		UN Agencies	0-100 percent	
	Outcome 1 Indicator 1B Stakeholder Awareness	Policy Makers	0-100 percent	Survey intended to be used to determine what percentage scored 'high' on awareness survey Not completed in the majority of countries. Implemented in Mozambique and Bangladesh.
		Development Practitioners	0-100 percent	
Media		0-100 percent		
OUTPUT 1	Indicator 1.1a Nutrition Situation Analysis		0 = not done; 10 = on-going; 20 = completed	Target 20 at endline. Different types of analysis undertaken. For example, Ghana completed sub-nationally – whilst in Nepal a NAGA was conducted.
	Indicator 1.1b Stakeholder Activity Mapping Exercise		0 = Incomplete; 10 = Completed, out of date (> one year old); 15 = Completed and current (<12 months old); 20 = Completed (<12 months old) and disseminated	Target 20 at endline Some cases where score reduced against scale to reflect that mapping 'out of date' – e.g. Bangladesh
	Indicator 1.2 Relevant CPIs Selected		Yes (20); No (0)	Target 20 at endline Unclear whether recommendation in logical framework for countries to track 20 CPIs to monitor was followed
	Indicator 1.3 Cost-Benefit Analysis		0 = not completed; 10 = completed; 20 = completed and disseminated	Target 20 at endline
	Indicator 1.4a JNAS Established		0 = completed and adopted by government; 10 = completed; 0 = not completed	Target 20 at endline Revisions to some baseline scores.
	Indicator 1.4b Nutrition Champions		Actual number of identified champions	Target indicated to be >3 at endline What specifically constitutes somebody who is 'engaged in nutrition' is unclear from logical framework
OUTCOME 2	Outcome 2 Indicator 2A State of Policy		Aggregate of 3 scores receiving 20 (Yes), 0 (No) (Total of 60) (policy developed; policy endorsed; policy less than five years)	Target indicated to be at least 50/60 at endline

	Indicator		Scoring range	Comments/observations
	Outcome 2 Indicator 2B State of Action Plan		Aggregate score against six parameters – with total available score of 120	Target indicated to be at least 95/120 at endline
OUTPUT 2	Indicator 2.1a Nutrition in Government Strategy		Yes (20); No (0)	Target of 20 at endline
	Indicator 2.1b Nutrition in UNDAF/UNDAP		Yes (20); No (0)	Target of 20 at endline All countries in fact had achieved this at baseline, except Uganda.
	Indicator 2.2 Nutrition Action Plan		Measured under Outcome 2 Indicator 2b	
	Indicator 2.3a Sector Uptake		Number of ministries	Target of >3 at endline Number of CPIs to be listed by each ministry
	Indicator 2.3b CPI Uptake		0-100 percent	Target of 75 percent at endline Guidance indicates for the percentage of CPIs integrated in 'at least one sector's work plan' – variation on how measured at country-level, with some scoring across all ministries, and some scoring only a selection of ministries Various instances where information not available at baseline and/or endline
	Indicator 2.4 Sub-national Uptake		0-100 percent	Target of 50 percent at endline Instances where the number of districts has changed between baseline and endline Various instances where information not available at baseline and/or endline
OUTCOME 3	Outcome 3 Indicator 3A Implementation of Country Priority Interventions (CPIs) - Coverage Indicators	Various indicators	0-100 percent	Relative improvements each year (3.2percent - WHA, 2012) In most cases the same data is used at baseline and endline, given that updated data from DHS/MICS or other large surveys is not yet available Not possible to assess progress
	Outcome 3 Indicator 3B Governance and Management		Aggregate score against four areas (mechanisms established; meeting regularly; relevant sectors participating; secretariat established) 0 = no; 10 = on-going; 20 = yes	Target of 50/80 at endline
OUTPUT 3		FUNCTIONAL	0 = No; 10 partially/on-going; 20 = Yes	Target of 20 at endline

Indicator		Scoring range	Comments/observations
Indicator 3.1a Capacity Gap Analysis			<i>Different versions of a capacity gap analysis recorded across different countries; and with different timeframes (some completed as far back as 2008)</i>
	Total TECHNICAL (avg.)	<i>0 = No; 10 partially/on-going; 20 = Yes (average across two sectors)</i>	<i>Target of 20 at endline (average) Similarly, different versions of the assessment considered across countries.</i>
Indicator 3.1b Capacity Development Planning		<i>Yes (20); No (0)</i>	<i>Target of 20 at endline</i>
Indicator 3.2a Human Capital (technical)	Total NATIONAL (avg.)	<i>20=Satisfactorily implemented, 10=Partially implemented, 0=Implementation not started</i>	<i>Average of 15 at endline.</i>
	Total SUB-NATIONAL (avg.)	<i>Priority sector 1 and 2: 0=Implementation not started; 10=Partially implemented; 20=Satisfactorily implemented,</i>	<i>Average of 15 at endline</i>
Indicator 3.2b Human Capital (functional)	NATIONAL	<i>Number of relevant ministries with dedicated focal points</i>	<i>Target of > 5 at endline</i>
	SUB-NATIONAL	<i>0-100 percent</i>	<i>Target of 50 percent at endline. Sub-national unit: Number of sub-national units with dedicated focal points / Number of selected sub-national units</i>
Indicator 3.3a National Guidance for Government		<i>Yes (20); No (0)</i>	<i>Target of 20 at endline The scoring does not enable country-level to indicate that work is in progress towards these outcome indicators. In some cases, the comments on data collected highlight that work is on-going towards developing this.</i>
Indicator 3.3b Guidance for Community-Based Nutrition		<i>0 = No action 10 = At least 2 sectors have started to review guidelines and tools 15 = On-going development of a more comprehensive approach (multi-sectoral); 20 = Comprehensive approach being rolled out</i>	<i>Minimum 15 at endline</i>
Indicator 3.3c Nutrition M&E Training	NATIONAL	<i>Number of ministries</i>	<i>Target of > 5 at endline</i>
	SUB-NATIONAL	<i>0-100 percent</i>	<i>Target of 50 percent at endline</i>
Outcome 4 Indicator 4A Impact Tracking		<i>Yes (20); No (0)</i>	<i>Target of 20 at endline</i>

	Indicator	Scoring range	Comments/observations
OUTCOME 4	Outcome 4 Indicator 4B Implementation Tracking	Yes (20); No (0)	<i>The scoring does not enable country-level to indicate that work is in progress towards these outcome indicators. In some cases, the comments on data collected highlight that work is on-going towards developing these.</i>
	Outcome 4 Indicator 4C Funding Tracking	Yes (20); No (0)	
OUTPUT 4	Indicator 4.1a Dashboard	<i>0 = Incomplete; 10 = Completed, Out of date (> one year old); 15 = Completed and current (<12 months old); 20 = Completed (<12 months old) & Adopted by government</i>	<i>Target of 20 at endline Comments on various indicate that different versions of a dashboard (capturing different information) are recorded</i>
	Indicator 4.1b Governance in NIS	Yes (20); No (0)	<i>Target of 20 at endline The scoring does not enable country-level to indicate that work is in progress towards these outcome indicators. In some cases, the comments on data collected highlight that work is on-going towards developing this.</i>
	Indicator 4.1c Nutrition in NIS	Yes (20); No (0)	<i>Target of 20 at endline The scoring does not enable country-level to indicate that work is in progress towards these outcome indicators. In some cases, the comments on data collected highlight that work is on-going towards developing this.</i>
	Indicator 4.2 M&E Output Results	<i>0 = M&E reports not accessible or distributed; 10 = M&E reports available, out of date; 20 = M&E reports available, current (within 12 months)</i>	<i>Target of 20 at endline</i>
	Indicator 4.3a UN as One	<i>0 = No joint UN program developed and funded; 10 = 1 joint UN program developed and funded; 20 = 2 or more joint UN programs developed and funded</i>	<i>Target of 20 at endline In the case of</i>
	Indicator 4.3b UN In-country Focal Points	<i>Number UN Agencies that have focal points with nutrition governance responsibilities</i>	<i>Target of 4 at endline. Some comments make explicit that the focal points have nutrition governance responsibilities others refer to their positions.</i>
	Indicator 4.3c UN Coordination	<i>0 = no mechanism in place; 10 mechanism created but not operational; 20 mechanism created and fully operational</i>	<i>Target of 20 at endline</i>
	Indicator 4.3d UN Strategy in Nutrition	Yes (20); No (0)	<i>Target of 20 at endline</i>

Annex I Data Analysis for Country Case Studies

1. This annex presents an overview of some of the key findings drawn from analysis of the case study country baseline and endline data. Given limitations on the comparability across countries of various indicators, analysis is not undertaken against all of the outcome and output indicators. However, broader analysis and observations are noted.

Outcomes and outputs

2. Table 27 below summarises whether at endline the eight DFATD countries have achieved the target detailed in the logframe (shaded green), or not (shaded red). The table does not indicate where partial progress towards the target has been made (see Figure 4, Figure 5, Figure 6 and Figure 7 below for overview of countries and indicators against which progress has been made).

3. The overview and figures highlight a number of broad patterns:

- Broadly, a slight pattern is observed with more countries having achieved outcome and output 1 and outcome and output 2 indicators than outcome and output 3 and outcome and output 4 indicators.
- **Outcomes:** Outcome 1a was achieved for all countries across all four stakeholder groups, except Nepal (NGOs) and Tanzania (Donors). Outcome 2b was achieved across all except Bangladesh and Ghana, and outcome 3b across all except Bangladesh and Uganda. Outcome 2a was achieved in Ghana, Mali and Rwanda, outcome 4b was only achieved in Mozambique and outcome 4c was only achieved in Tanzania. It should be noted, however, that the Secretariat made the decision to remove funding tracking from the expected deliverables, given that other stakeholders (namely MQSUN) are focusing on this). No countries record having met the outcome 4a target (impact tracking mechanism).
- **Outputs:** Against output indicator targets, two are recorded as having been met by all countries – 2.1a and 2.1b (nutrition in the government strategy and in the UNDAF). Against the other indicators, output 1.1a has been achieved in all countries except Rwanda, and output 1.2 in all countries except Bangladesh, output 1.4b in all countries except Mozambique. The target for output 3.2b (human capital (functional), national and subnational) is met in all countries except Bangladesh. No countries record having met output 3.2a (Human capital (technical)) at either national or sub-national level; and only Rwanda records having met output 4.1b (governance in NIS) and output 4.1c (nutrition in NIS). Only Mozambique records having met output 4.2 (M&E).

4. In some cases, the target had been achieved at baseline already. For example, this is the case against output 2.1a (all countries) 2.1b (all except Uganda) and for all countries against indicator 4.3c (UN coordination).

5. There are a number of indicators where no data is collected either at baseline or endline, such as 2.3a (sector uptake), which is not captured at baseline in any of the countries (not scored at endline in Bangladesh, Ghana and Tanzania). Similarly, scores are missing against indicators 2.3b in Bangladesh, Ghana and Tanzania, and 2.4 (sub-

national uptake) in Bangladesh, Ghana, Mozambique, Rwanda and Uganda. There is no score for Tanzania against output 3.3c (national).

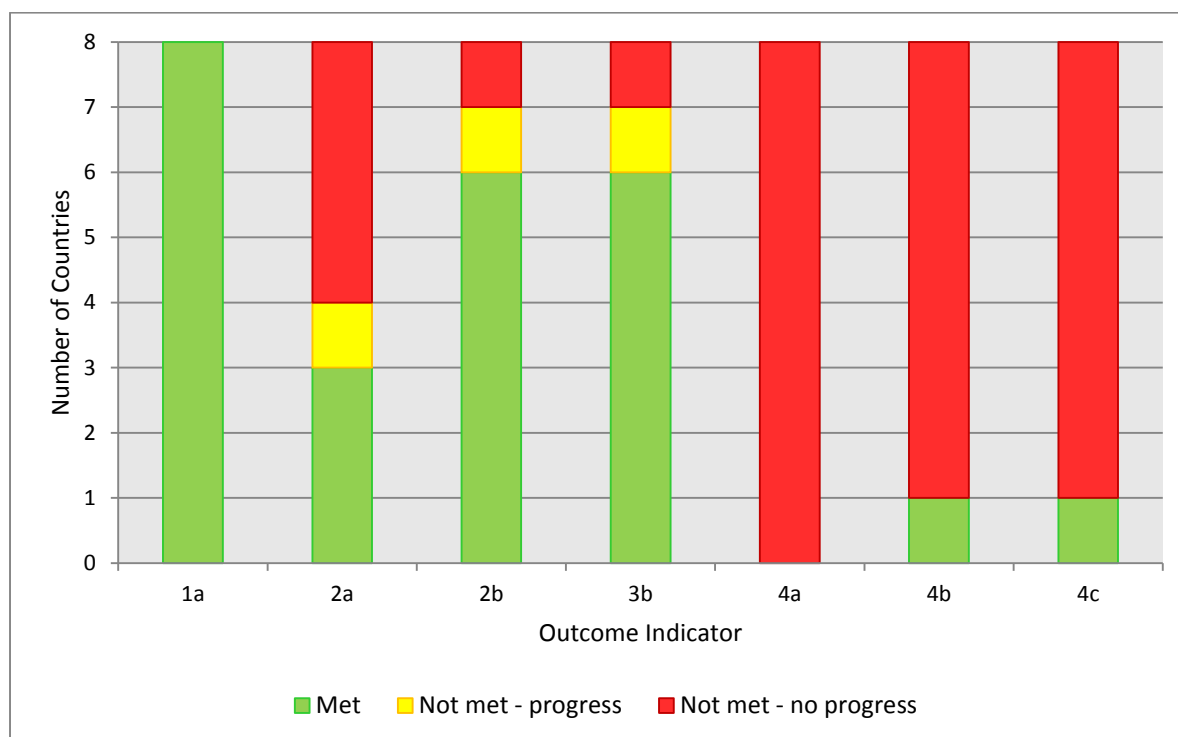
Table 27 Overview of targets achieved at endline against outcomes and outputs

				Country <i>Red shading = Outcome not achieved at endline</i> <i>Green shading = outcome achieved at endline</i>							
Indicator		Target	Bangladesh	Ghana	Mali	Mozambique	Nepal	Rwanda	Tanzania	Uganda	
OUTCOME 1	Outcome 1 Indicator 1A Commitment of Stakeholders	NGOs	80%								
		Donors	80%								
		Government Ministries	80%								
		UN Agencies	80%								
	Outcome 1 Indicator 1B Stakeholder Awareness	Policy Makers		Not available							
		Development Practitioners									
Media											
OUTPUT 1	Indicator 1.1a Nutrition Situation Analysis		20								
	Indicator 1.1b Stakeholder Activity Mapping Exercise		20								
	Indicator 1.2 Relevant CPIs Selected		20								
	Indicator 1.3 Cost-Benefit Analysis		20								
	Indicator 1.4a JNAS Established		20								
	Indicator 1.4b Nutrition Champions		>3								
OUTCOME 2	Outcome 2 Indicator 2A State of Policy		50								
	Outcome 2 Indicator 2B State of Action Plan		95								
OUTPUT 2	Indicator 2.1a Nutrition in Government Strategy		20								
	Indicator 2.1b Nutrition in UNDAF/UNDAP		20								
	Indicator 2.2 Nutrition Action Plan		-	Measured under outcome 2.2b							
	Indicator 2.3a Sector Uptake		>3	-	-						
	Indicator 2.3b CPI Uptake		75%	-	-						
	Indicator 2.4 Sub-national Uptake		50%	-	-						
OUTCOME 3	Outcome 3 Indicator 3A Implementation of Country Priority Interventions (CPIs)		Various indicators	Country specific targets							
	Outcome 3 Indicator 3B Governance and Management		50								
OUTPUT 3	Indicator 3.1a Capacity Gap Analysis	FUNCTIONAL	20								
		Total TECHNICAL (avg.)	20								
	Indicator 3.1b Capacity Development Planning		20								
	Indicator 3.2a Human Capital (technical)	Total NATIONAL (avg.)	15								
		Total SUB-NATIONAL (avg.)	15								
	Indicator 3.2b Human Capital (functional)	NATIONAL	>5								
		SUB-NATIONAL	50%								
	Indicator 3.3a National Guidance for Government		20								
	Indicator 3.3b Guidance for Community-Based Nutrition		15								
Indicator 3.3c Nutrition M&E Training	NATIONAL	>5									
	SUB-NATIONAL	50%									
OUTCOME 4	Outcome 4 Indicator 4A Impact Tracking		20								
	Outcome 4 Indicator 4B Implementation Tracking		20								
	Outcome 4 Indicator 4C Funding Tracking										

		Country <i>Red shading = Outcome not achieved at endline</i> <i>Green shading = outcome achieved at endline</i>								
	Indicator	Target	Bangladesh	Ghana	Mali	Mozambique	Nepal	Rwanda	Tanzania	Uganda
OUTPUT 4	Indicator 4.1a Dashboard	20								
	Indicator 4.1b Governance in NIS	20								
	Indicator 4.1c Nutrition in NIS	20								
	Indicator 4.2 M&E Output Results	20								
	Indicator 4.3a UN as One	20								
	Indicator 4.3b UN In-country Focal Points	4								
	Indicator 4.3c UN Coordination	20								
	Indicator 4.3d UN Strategy in Nutrition	20								

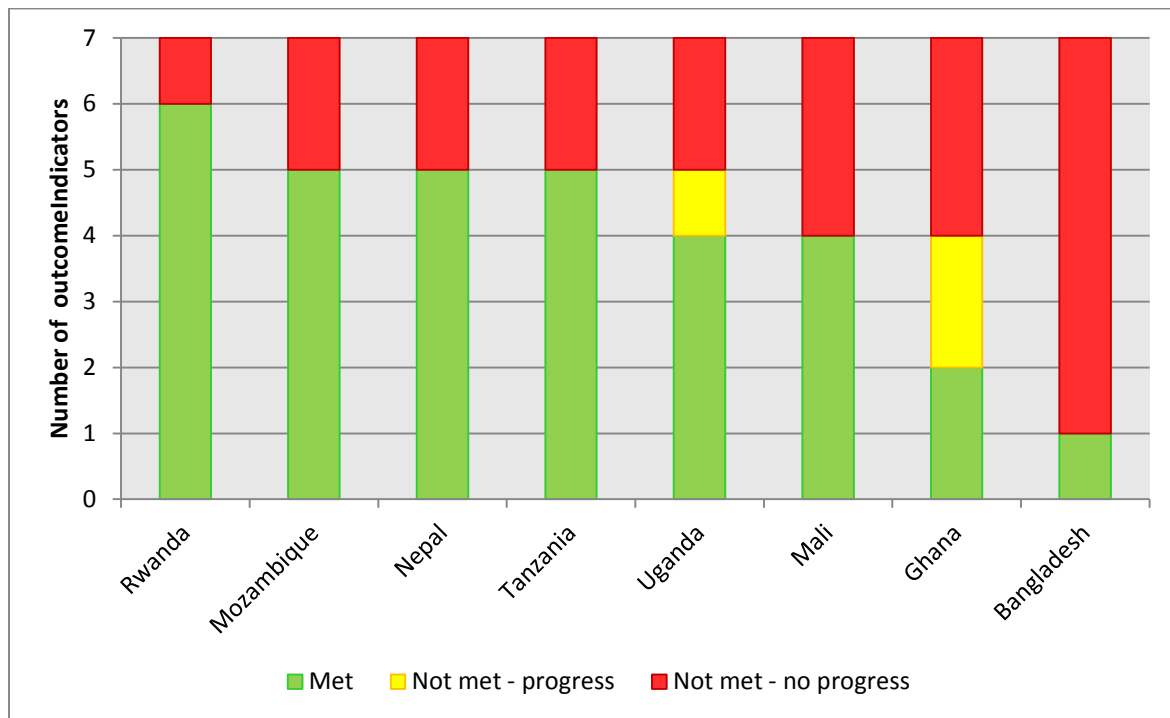
6. The four figures below provide analysis based on whether progress has been made against outcome indicators. Figure 4 shows the number of countries which have either met or made progress against the outcome indicators – highlighting where progress has been most and least pronounced.

Figure 4 Performance against Outcome Indicators, by Indicator



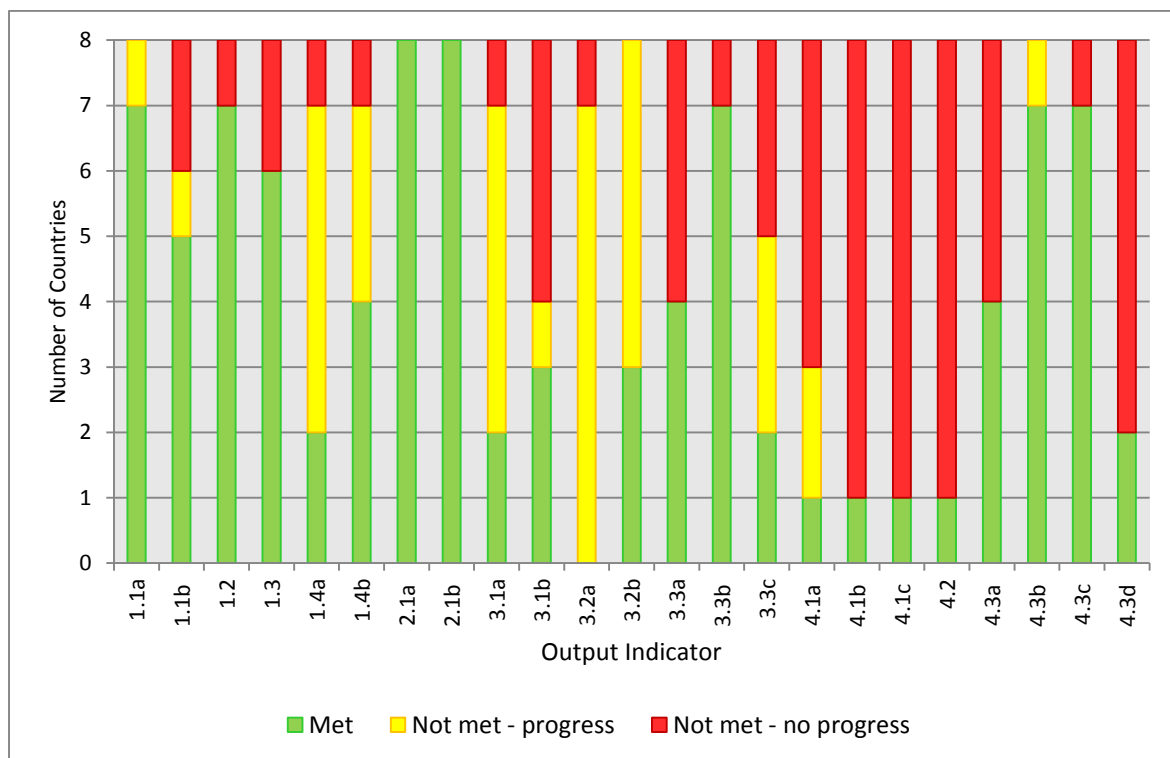
Notes: indicator 1a is a simple average of stakeholder scores; no data for indicator 1b; indicator 3a not included as it is country specific

Figure 5 Performance against Outcome Indicators, by Country



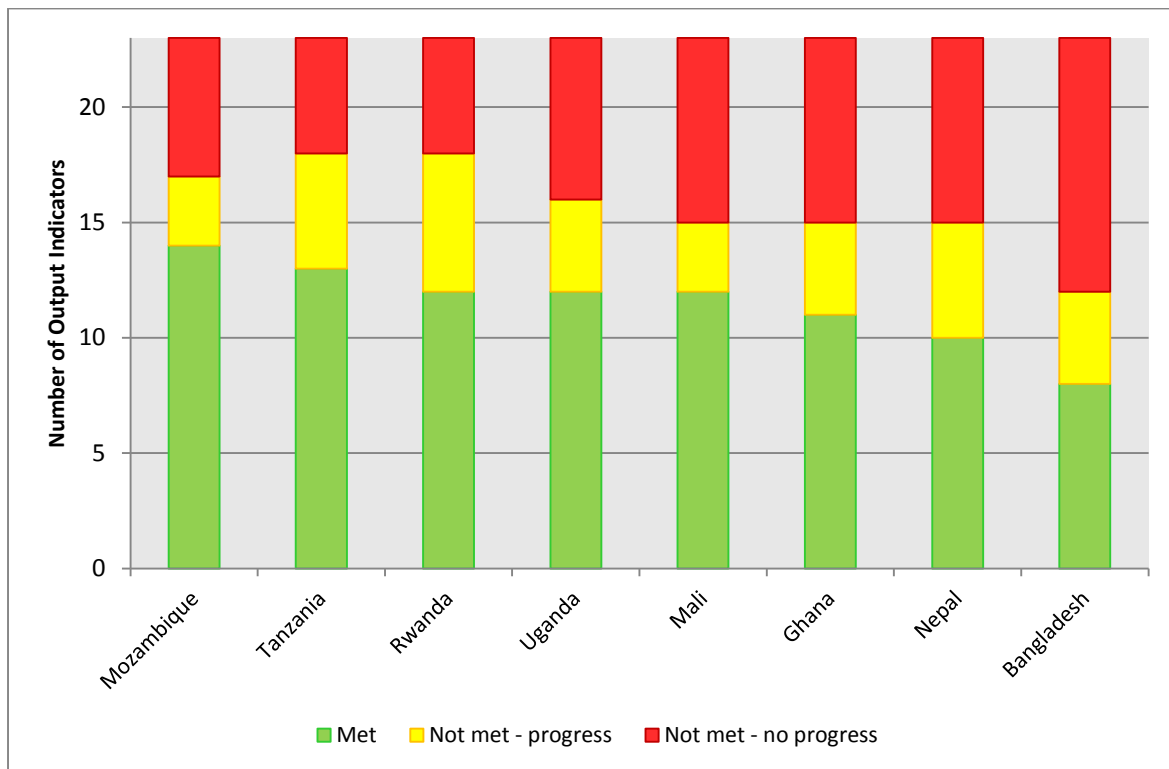
Notes: ordered by overall performance ranking. Indicator 1a is a simple average of stakeholder scores; no data for indicator 1b; indicator 3a not included as it is country specific

Figure 6 Performance against Output Indicators, by Indicator



Notes: no data for indicator 2.2; indicator 3.1a - simple average of technical and functional; indicators 3.2a, 3.2b, 3.2c - simple averages of national and subnational.

Figure 7 Performance against Output Indicators, by Country



Notes: ordered by overall performance ranking. No data for indicator 2.2; indicator 3.1a - simple average of technical and functional; indicators 3.2a, 3.2b, 3.2c - simple averages of national and subnational.

Annex J Case Study Findings

Bangladesh Summary Report

Context and REACH intervention

Country Context

1. The context in Bangladesh is highly politicised, with political instability limiting progress in recent years especially during the last two months of 2013 and the first three months of 2015. Despite impressive economic advances in the past ten to fifteen years, there are still high rates of poverty and Bangladesh has some of the highest rates of malnutrition in the world (FAO website, 2010). Some analysts consider Bangladesh to be in a state of chronic emergency. The country has a population of over 150 million and 2011 figures indicate that the prevalence of U5 stunting was 41.3%, with 15.6% of U5s suffering from wasting (above WHO's 'critical' level), as well as high rates of micronutrient deficiencies (especially Vitamin A, iron, iodine and zinc). In Bangladesh, 7.8 million children are undernourished, and 36% of those aged U5 are underweight (Common Narrative, 2014). Nearly 51% of children U5 are undernourished in the lowest quintile, compared to 26% in the highest quintile (MQSUN, 2013). Furthermore, rates of malnutrition amongst women are high, with over 50% of women suffering from energy deficiencies and little improvement in women's nutrition status in recent years. Rates of undernutrition are not significantly different between boys and girls (WFP, 2012b). However, deep-rooted gender disparities in terms of household distribution of food mean that women often eat last and eat less, which along with other factors (including early pregnancy) increases the number of low birth weight babies delivered.

Nutrition governance

2. **Before REACH:** In recent years, the separate coordination of nutrition actions under two line ministries – the Ministry of Food and the Ministry of Health – has characterised the nutrition environment in Bangladesh. The National Food and Nutrition Policy (NFNP) and National Plan of Action on Nutrition (NPAN) were both developed in 1997. Subsequently, the National Food Policy formed in 2006 became the National Food Policy Action Plan (NFPAN) 2008-2015. As far back as 1975, the Bangladesh National Nutrition Council (BNNC) had been formed and has been reconstituted on a number of occasions since. However, the BNCC has been inactive for many years. Its function was to coordinate nutrition and the drafting of key nutrition policies and it was multisectoral in its Executive Committee membership. A multi-sectoral Food Planning and Monitoring Committee (FPMC) was established in 1992, with a Monitoring Unit (FPMU) in the Ministry of Food serving as the Secretariat and with a mandate to guide the NFPAN. Various technical working groups were established, as well as the Food Policy Working Group (FPWG).

3. **At the time of the evaluation:** A Steering Committee for Nutrition Implementation (established in 2011) is hosted in the Ministry of Health and Family Welfare (MOHFW), drawing membership from across stakeholder groups (including ministries, development partners, UN agencies and academia). From within that ministry, the National Nutrition Services (NNS) are responsible for mainstreaming nutrition into work plans across sectors and for strengthening multisectoral linkages.

Work has been ongoing to prepare a new national nutrition policy, coordinated by MOHFW – with the document highlighting the 1,000 days concept. The draft policy includes a proposal to revive the BNNC. Political commitment at the highest levels remains a challenge and there has been limited expression of commitment to drive nutrition forward on a multisectoral basis. Furthermore, the development of multi-stakeholder platforms and coordinated action on nutrition at local/district level remains challenging, despite positive piloting of multisectoral mechanisms and approaches by REACH in the Satkhira district (REACH Bangladesh website, nd). UN agencies and development partner organisations have taken steps to establish common ground on nutrition challenges and opportunities, leading to the preparation of a 2014 ‘Common Narrative’ regarding key nutrition issues in Bangladesh (Common Narrative, 2014).

Description of the REACH intervention

4. **Staffing, hosting and administrative arrangements:** The REACH engagement period in Bangladesh began in 2009, although the international facilitator was not deployed until July 2012 and the national facilitator not until October 2012. The national facilitator left in August 2014, with the post not subsequently filled. AusAid provided a volunteer advocacy and communications officer from May 2013 to December 2014. During 2015, the international facilitator has operated alone, given difficulties faced in recruiting a suitably qualified individual on a short-term contract to fill the national facilitator role for the remainder of REACH funding. The international facilitator’s contract will end in June 2015. REACH is hosted in the WFP office in Dhaka. The SUN Government Focal Point is based in the FPMU.

5. **Funding:** REACH in Bangladesh has been funded primarily by DFATD. For the years 2011/12-2014, the total planned budget against outcomes was USD 518,610. The total amount spent was USD 211,812. Although there has been underspend against various output activities and zero spend against some activities where a budget was allocated, there was overspend against output 2.1 to integrate nutrition in national and UN development strategies (with a planned budget of USD 5,000 against actual spend of USD 37,461). The overspend against output 2.1 arose from employment of three national consultants to draft a background paper on nutrition for use in preparation of the national seventh five year development plan. This became one of REACH’s most valuable contributions to enhanced, multisectoral nutrition policy. Rapidly shifting institutional and policy circumstances meant budgeted activities specified in work plans became irrelevant or impossible, while new opportunities for useful contributions could be identified. In some cases, facilitators have been afforded the flexibility to deviate from budget in this way.

6. **Institutional framework within the UN country system:** In Bangladesh, REACH is governed by a Country Committee of the country representatives of the four UN agencies (FAO, UNICEF, WHO and WFP) and works through a Technical Focal Point team drawn from the agencies. WFP is responsible for administering REACH in-country, handling the budget and contracting. The Country Committee faced difficulties at first – for example, in understanding and scaling back the CIP, of which agency heads had a limited understanding when discussing it in 2012, as not all of them had been engaged in its preparation by visiting consultants in 2011. The agencies did not allow the international facilitator to operate as if representing them. The restrictions placed on the autonomous actions of this relatively

junior (P4) contract officer limited what REACH could do in strengthening UN coordination on nutrition. Agency heads did make proactive contributions (with facilitator encouragement), such as their personal visit to the Speaker of Parliament to promote a proposed meeting on nutrition with all parliamentarians (which ultimately did not happen).

Activities undertaken to enhance nutrition governance

7. In the original Country Implementation Plan (CIP) prepared in 2011, four areas were highlighted as priority areas for REACH engagement, namely the preparation of the Joint Communications and Advocacy Strategy; the integration of priority nutrition actions into work plans (at national and district levels); the establishment/development of a functioning multisectoral coordination mechanism; and the development of a multisectoral nutrition monitoring system. The CIP was a three year plan, which was implemented through annual workplans that guided activities.

8. REACH did significant work to support the production of a ‘Common Narrative on Undernutrition’ (see above), a document to be used by the UN and development partners. Although REACH was not directly involved – as a coordinated initiative of the four agencies – in revising the national nutrition policy, it made inputs into the draft Social Protection Policy and inclusion of nutrition in the Participatory Monitoring for Accountability report. As noted above, its facilitation of a background paper on nutrition for the forthcoming seventh five year national development plan (the first such paper) was a major contribution. Additionally, REACH has:

- Completed and subsequently updated a Nutrition Situation Analysis
- Worked to undertake a stakeholder mapping exercise
- Worked to develop an advocacy video

Sources: REACH Bangladesh, 2011; REACH Bangladesh, 2014; REACH Bangladesh, 2015 and stakeholder interviews.

9. REACH’s contributions to enhance nutrition governance were constrained by delays in the approval of the new national nutrition policy and revival of the BNNC. Throughout the REACH period in Bangladesh, nutrition structures, mechanisms and action therefore continued to be split between those of the Ministry of Food and those of the Ministry of Health and Family Welfare. Although SUN should have created new opportunities for strengthening nutrition governance (and much of REACH’s effort in the country came to be focused on support to the SUN National Focal Point in the MOHFW), the same factors constrained SUN’s effectiveness too.

Summary of key findings

Relevance of REACH in Bangladesh

10. Alignment with the national nutrition priorities cannot be definitively assessed given that the National Nutrition Policy is not yet approved. However, in a broad sense, given that Bangladesh is increasingly endorsing global concerns with stunting and an emphasis on nutrition during the first 1,000 days of life, REACH is in line with national priorities. Coherence, alignment and complementarity were challenged in Bangladesh since national nutrition priorities are addressed through two largely parallel planning and management mechanisms. The CIP did not mention ‘equity’, though it did set out gender issues in national nutrition challenges. The design of REACH actions only

mentioned REACH's potential to contribute to better understanding of the influence of gender on nutrition outcomes.

Performance at country level

11. **Effectiveness:** REACH efforts at country level were primarily a series of processes, which were flexible, adaptive and to some extent unpredictable. In Bangladesh, REACH made some valuable progress towards achieving the four outcomes – notably outcome 1, through contributions to stakeholder mapping exercises, development of a common narrative, and an advocacy and communications strategy (not approved at the time of the evaluation). Less progress was made towards outcome 2 in terms of drafting the National Nutrition Policy, though REACH did facilitate and support SUN, systematising participation at country level (although it did not become strongly effective). Limited progress was made towards outcome 3, although some coalition and advocacy training was undertaken at district level. Work towards outcome 4 was not fully possible given the absence of the national nutrition policy and a lack of UN agency commitment to coordinated action. However, support to SUN to develop the monitoring framework for the Country Investment Plan arguably enhanced efficiency and REACH contributed to development of a UN/government paper on participatory monitoring for accountability.

12. **Equity:** REACH's work in Bangladesh has made little direct reference to equity issues, though advocacy and communications have served to raise awareness and strengthen opportunities to explore the issue.

13. **Efficiency:** Implementation of any development intervention efficiently is challenging in Bangladesh, and the political instability during the period under review severely affected operations. Efficiency has been affected by, *inter alia*, the bureaucratic structure of government, factions and divisions between different actors, high staff turnover, and a long delay between drafting of the CIP and posting of the international facilitator. One result of the constraints on efficiency was underspend of the budget – allowing for a no cost extension. The REACH International Facilitator period of engagement was extended to mid-2015.

Contributing factors

14. The political and operational context in Bangladesh was significant in determining REACH's performance against outcomes. Despite challenging circumstances, achievements were credited to the REACH facilitators' industrious and tenacious efforts to build incremental progress in both UN co-ordination and enhanced nutrition governance.

Sustainability

15. There is little evidence that the results of REACH are sustainable in Bangladesh, and the consensus is that REACH is leaving too soon. In the absence of REACH, there is concern among some stakeholders that SUN will become less active or collapse. At the time of the evaluation country mission (as of 18 May 2015), no sustainability strategy or transition plan was in place but there were plans to draft one.

Ghana Summary Report

Context and REACH intervention

Country Context

1. Economic growth in Ghana has slowed since 2013, linked largely to a decline in the manufacturing industry (WB, 2015). The fiscal deficit has had a tangible effect of budget allocations to ministries. Ghana's status as an emerging Middle Income Country (MIC) precludes it being considered a priority country for many donors, yet it has a higher level of stunting than countries in other regions with similar levels of income (WB, 2010).

2. Progress has been made against MDG 1C, halving children underweight by 2015. In 1993, the prevalence of underweight children was 27 percent and Ghana succeeded in reducing this by half by 2015. The stunting rate, over the same period, also decreased by eight percentage points. However, stunting rates remain high and for wasting the numbers are virtually unchanged (WB, 2010). A variety of cultural, social, climatic, and economic factors impact on the nutrition situation in Ghana, with men typically afforded family-related nutrition and land use decision-making roles in the three northern regions. Climate change has also had an impact on food security, with only one (previously two) rainy season now recorded in the northern regions. Poor feeding practices, and generalised micro-nutrient deficiencies are also key contributors (WB, 2010). There are also beliefs held about taboo foods in certain regions.

Nutrition governance

3. **Before REACH:** Nutrition coordination existed before REACH but was strongly focussed on the health sector and focused upon specific needs or projects. As far back as 1980, a National Nutrition Coordinating Committee existed. Prior to 2011, responsibility for nutrition management and implementation lay with the Nutrition Department, which was part of the Ghana Health Services (GHS). There was some cross-sectoral working between the GHS and the Ministries of Agriculture and Education, and a joint action plan had been put in place.

4. In 2010 GHS established the National Nutrition Partners Coordinating Committee (NaNuPaCC), which was aimed principally at coordinating the development partners and determining who was doing what where. GHS also initiated the process of drafting the Country's first national nutrition policy¹². In 2011, Ghana joined the SUN Movement and nutrition coordination was moved from GHS to the National Development Planning Commission (NDPC) – an entity responsible for multi-sectoral coordination across all areas of government. A Cross Sectoral Planning Group (CSPG) for nutrition was established, chaired by the SUN Government Focal Point and with primary responsibility for moving the nutrition response forward.

5. **At the time of the evaluation:** Overall, progress in terms of coordination and priority setting has been stronger at decentralised levels than at national level. Challenges remain in terms of high level commitment (and budget allocations to fund

¹² At the time of this evaluation's visit to Ghana the nutrition policy was awaiting the finalization of sector plans and its submission to Cabinet for approval.

interventions), the capacity for coordination and the incentives for UN agencies to co-finance nutrition priorities. There have been some efforts to scale up nutrition activities and there is a multi-sectoral approach to nutrition. Progress has been made towards the finalisation of the National Nutrition Policy, with plans to submit the policy to cabinet in 2015. Additionally, nutrition awareness has increased and the dialogue around nutrition has enhanced understanding. REACH UN agencies are reported to have become better at working together. In terms of interventions, there has been an increase in the number of partnerships and partners involved in the nutrition sector and the CSO platform is vibrant and active.

Description of the REACH intervention

6. **Staffing, hosting and administrative arrangements:** REACH Ghana has had consistent staffing. Full time support has been provided by an international and a national facilitator. In what constitutes an exception to other countries, the national facilitator has been based in the Tamale in the north of Ghana, while the international facilitator is in the capital. A part-time project administrator has supported the international facilitator and the REACH Secretariat has provided short-term inputs. Student interns from Colombia University have supported REACH annually since 2012 (approx. 60 days of additional support each year) and consultants have been employed for support on specific tasks (approx. 200 days in total). Two positions at NDPC are funded by REACH (since 2014) to support the national coordinator.

7. **Funding:** DFATD is the main funder of REACH in Ghana. Ghana was allocated US\$ 1,475 million and spent a total actual value of US\$ 389,699.54 versus a total budgeted value of US\$699,000 (for the period 2012-2015). There has been under spending against the budget for activities in each year. Other actors have provided funding, which has also resulted in underspending – for example, the national advocacy strategy was completed with funding from the World Bank in 2012 (Ghana REACH, 2012). The long lag time between the exploratory mission/drafting of the CIP (2011) and the start of the facilitators (2012) also contributed to underspend.

8. **Institutional framework within the UN country system:** REACH is hosted by the UN in country and has no separate agreement/ or Memorandum of Understanding (MoU) with the Government of Ghana. The REACH International facilitator is supervised by the REACH country committee (RCC), made up of the heads of agency for FAO, UNICEF, WFP and WHO. The RCC aims to meet quarterly – in practice they have met no more than twice a year. The REACH facilitators sit within WFP (who administer REACH in-country) in Accra and Tamale and have WFP email addresses.

Activities undertaken to enhance nutrition governance

9. The original Country Implementation Plan (CIP) was wide-ranging and ambitious. The facilitators have aimed to bring realism to this through the annual plan documents, which they report against. In Ghana REACH has worked successfully at national and regional/district level. Its work at regional/district level has given credibility to its work at national level and its work at national level has provided good entry points and has helped push for momentum. REACH Ghana have carried out a diverse range of activities which have contributed towards increasing awareness of the importance of nutrition. These include providing support to the:

- Drafting the National Nutrition Policy

- Organization of coordination meetings by NDPC
- Capacity development of sectors to plan for nutrition
- Prioritisation of nutrition interventions to scale-up
- Implementation of the SUN Movement at country level

10. At sub-national level, REACH has supported stakeholder and activity mapping and the development of sector and district planning guidelines. Training has been provided on the REACH mapping tool and work undertaken to develop the UN Nutrition Strategy.

Sources: REACH Ghana, 2013a; REACH Ghana, 2014 interviews with stakeholders

Summary of key findings

Relevance of REACH in Ghana

11. REACH's strategies have focussed on supporting national processes and priorities as much as possible. REACH has intentionally worked closely with the SUN Movement and has provided key support, bringing stakeholders together and pushing for progress. Whilst the Ghana CIP mentions the importance of gender concerns and identifies areas where REACH could contribute, gender and equity were not considered to have been a key element of the design or implementation by REACH.

Performance at country level

12. **Effectiveness:** REACH has been effective in Ghana at raising awareness of the importance of nutrition and broadening it out from being viewed as mainly a health issue. REACH has influenced its staff, those of other agencies and officials resulting in: greater clarity on priorities, a better understanding of a multi-sector approach and the identification of strategies as to how to move forward. The evidence for this was particularly strong in the three northern regions where REACH's role is considered to have been catalytic. At national level, REACH has been effective at strengthening national policies, and was credited by stakeholders as having given a major push to the nutrition policy (although the policy remains in draft). REACH has also ensured that the inter-sectoral dialogue and planning initiated by SUN is happening. REACH has been effective at building capacity particularly at decentralised levels where it has resulted in national ownership. Whilst there is a clear system for dialogue and discussion in place at national and decentralised levels: and the REACH facilitators have built good relationships with government, SUN partners and the UN agencies, UN coordination remains limited (and there has been no joint programme launched to date (though it is acknowledged that this is not mandatory)). Both at senior government level and within the UN agencies challenges in accountability and incentives for making progress on nutrition remain a constraint.

13. **Equity:** Whilst gender was included in the CIP neither gender nor equity have been obviously linked into the planned activities. Those interviewed were not aware of REACH prioritising or focusing on gender and equity issues in nutrition.

14. **Efficiency:** REACH has worked very efficiently with the resources available to it. Spreading the resources across national and regional levels has perhaps reduced efficiency at national level. But it has seen significant gains and catalytic impact at regional level.

Contributing factors

15. The ability of REACH to be seen as neutral and provide flexible funding has enabled it to maintain momentum on nutrition at both national and regional levels. REACH's close relationship with the SUN focal point and its position in NDPC has enabled REACH to build the capacity of this key body in terms of nutrition coordination.

Sustainability

16. Things were seen to be at a critical point in Ghana, REACH and other actors have worked hard to generate momentum around nutrition. The loss of the REACH facilitators at this point was seen as being very problematic. Sustainability and transition had not previously been discussed widely in country and indeed many of the stakeholders interviewed were unaware that REACH would soon be coming to an end. When the evaluation team left country the transition plan was in draft and discussions with the CCC were planned.

Mali Summary Report

Context and REACH intervention

Country Context

1. Mali's economy is dependent on gold mining and the export of agricultural exports; the country has experienced slow rates of growth in recent years. With over half of its population living on less than US\$1.25 a day, the country is one of the 25 poorest in the world, and ranks 176 out of a total 186 countries on the Human Development Index. Unrest erupted in Mali 2012 following an attempted coup, and whilst civilian rule was re-established in 2013, rebel forces (backed by Al-Qaeda) occupy northern areas where ongoing conflict has led to the internal displacement of civilians depriving them of their livelihoods and access to food and resulting in a state of nutrition emergency.

2. Food insecurity has been exacerbated by drought in recent years, poor harvests, pasture deficits and rising food prices. That considered, Mali has achieved MDG target 1 1.8, "to reduce the prevalence of underweight incidences to 20 percent in children under 5" with 18.9% percent of children under 5 underweight. However, malnutrition remains a serious issue; according to UNICEF statistics, the prevalence of wasting and stunting among children under 5 years of age is 8.9 % and 27.8 % respectively (UNICEF Mali, 2013). Malnutrition is also the largest risk factors for maternal mortality.

Nutrition governance

3. **Before REACH:** Prior to the entry of REACH in July 2011, the policy environment for nutrition was difficult with weak governance systems and limited government funding for the provision of nutrition services. Nutrition was treated mostly as a health problem, though the focus was increasingly on a preventive approach focusing on the first 1000 days of life from as early as 2011 (Ministère de la Santé, 2005; Ministère Du Développement Rural et de L'environnement Mali, 2011). Other Ministries were involved in nutrition such as the Ministry of Education for the school feeding programme, however, these initiatives had not yet been integrated into an approved national nutrition plan. Donor programs were based on sectoral interventions, such as WFP support to school feeding.

4. In 2010, a multi-sectoral National Nutrition Forum was led by the Ministry of Health (MoH) and the National Nutrition Council (CNN) and one of the emerging recommendations was for the Government to develop a multi-sectoral nutrition policy. The government joined SUN in 2011 and a MoH nutrition advisor was appointed as SUN focal point shortly thereafter. In 2011/2012 a National Multi Sectoral Nutrition Plan (PNN) was developed which set out, *inter alia*, the intention to establish a national council on nutrition presided over by the MOH and a Multi-Sectoral Technical Committee (CTIN), however the plan was not approved by the government until January 2013 and as such progress against these objectives stalled.

5. **At the time of the evaluation:** The PNN was finally approved in January 2013, and the multi-stakeholder Intersectoral Technical Committee on Nutrition (CTIN) was proposed as the coordination mechanism, with a Technical Secretariat (ST). A Multisectoral Nutrition Action Plan (2014-2018) was adopted in June 2014, following inputs from wide range of stakeholders, including the Ministries of Health,

Humanitarian Action, Family Promotion, Agriculture, Religious Affairs, and Higher Education (REACH Mali, 2014a). In 2014, the nutrition action plan was costed and it was estimated that of the US\$605 million required to implement the plan, only US\$300 million was available for the period of 2014-2018, with the government financing 3% of the total envelope. A Communication Strategy for the action plan was also developed in 2014 and to date it has been disseminated at the national and regional levels.

6. Most recent technical efforts are currently focused on the creation of a “Cellule de Coordination”. This proposed Coordination Unit will create and manage a centralized nutrition-information platform in Mali to facilitate nutrition governance data for informed decision-making, to be supported by REACH for the first phase. (ibid).

7. The UN led technical and financial partners (PTF) working group which includes the four UN REACH agencies, the REACH facilitators and the SUN representative, convenes regularly to discuss the national food security situation.

Description of the REACH intervention

8. **Staffing, hosting, and administrative arrangements:** An interim international facilitator was hired in September 2012 to ‘bridge the gap’ pending the arrival of the ‘permanent’ international facilitator. The interim facilitator sat in the MoH and WFP, with responsibility to advocate for the adoption of the National Nutrition Policy. The ‘permanent’ International Facilitator arrived in February 2013, and a national facilitator was appointed in June 2013 (REACH, 2014a). The national and international facilitators were solely hosted by WFP. The International Facilitator completed their two-year contract in February 2015, whilst the national facilitator remains in position. Requests have been made by the UN team for an international facilitator to be contracted for an additional year of inputs – however, recruitment efforts are ongoing. For specific technical tasks, REACH has brought in national and international consultancy support.

9. **Funding:** The total budget allocated for the REACH Programme in Mali was US\$1,475,000 for the 2011-2015 period, but a no-cost extension was granted until December 2016. Based on budget information available mid-2014, the expenditure against the total budget was US\$206,313.86 against US\$229,000). However, these values do not include the costs of the national/international facilitator or the technical assistance cost of US\$50,000. Included, this means that there was overspend against the 2014 budget however, an underspend for 2015 is expected given the ongoing lack of an international facilitator and associated costs.

10. **Institutional framework within the UN country system:** In Mali, the UN led efforts in nutrition are divided into two main mechanisms. The first committee is the *Comité de pilotage REACH* (REACH Steering Committee), which is comprised of the nutrition focal points from the REACH agencies, each of whom collaborates with the sectoral government ministries to advocate strong inclusion of nutrition governance and related activities. The second is the *comité technique REACH* (REACH Technical Committee), comprised of the REACH facilitators, focal points from the four UN agencies, and the SUN Focal point, which has been working towards the creation and implementation of a long-term nutrition Coordination Unit that supports the Malian Government. Although there is a Heads of Agency (HoA) Group which is

‘coordinated’ by REACH in Mali, the HoAs as a group have only met formally once in the last two years.

Activities undertaken to enhance nutrition governance

11. REACH has supported a number of activities to enhance nutrition governance which have furthered both a multi sectoral approach to nutrition as well as coordination amongst UN agencies, SUN and other donor partners, in spite security challenges, changes to staff in Government including a humanitarian crisis. These include:

- Providing valuable expertise in facilitation, mobilization and awareness for non-specialists in nutrition, including by bringing international experiences into national discussions
- Supporting the SUN movement, including all the SUN networks SUN (particularly CSOs)
- Being seen as a neutral actor, with no “own” agenda, and providing a bridge between all stakeholders.
- Facilitating a number of organizational and working groups such as CTIN, CNN, the Technical Secretariat, REACH technical committee, the steering committee for REACH, and the SUN Platform for CSOs.
- Coordinating HoA support for the approval of the national nutrition action plan through the PTF.
- Providing technical and financial assistance to the elaboration of the multi-sector action plan for nutrition (2014- 2018), and the costing of the national action plan for nutrition and funding gap analysis.
- Launching a communication strategy in 2015, which has been disseminated at the Central and Regional Levels.
- Providing support for the development of sectoral strategies in health and rural development.
- Supporting the establishment of the Cellule de Coordination, which has been approved by the Prime Minister.
- Undertaking a mapping in two regions of Mali to show who does what and where.
- Current development of a transition strategy that is nearing completion.

Sources REACH Mali, 2012; REACH Mali, 2014a; REACH Mali, 2014b; REACH Mali, 2014c; and stakeholder interviews

Summary of key findings

Relevance of REACH in Mali

12. REACH is fully in line with both national nutrition priorities and SUN – and has sought to support national processes (including the development of the National Nutrition Multi-Sectoral Action Plan), with varying degrees of engagement across different sectors of Government. REACH meets regularly with the SUN Focal Point, and activities are aligned and coordinated under his lead. Gender and equity do not fit explicitly into any of the 5 objectives of the CIP or subsequent planning documents.

Performance at country level

13. **Effectiveness:** REACH has played a seminal role in developing a viable plan to tackle issues of malnutrition in Mali, and contributed to a greater awareness of the problems of malnutrition as well as identification of potential solutions. REACH contributed to developing the first multi-sectoral plan in Mali and has worked with individual ministries to integrate nutrition into their national strategies – though implementation has been limited and the action plan is not well prioritised. Capacity remains weak and it cannot be said that activities at the central level (training and sensitisations) have significantly strengthened capacity (and certainly not at the decentralised level).

14. **Equity:** Efforts were made to engage the Ministry of Women and Gender in planning the nutrition plan. However, whilst there is acknowledgement that this is an important area in Mali, in reality, not much has been done on either gender or equity issues.

15. **Efficiency:** The efficiency of cooperation may have increased under REACH through participatory planning and budgeting of the nutrition action plan. On the other hand, the transaction costs associated with all the coordination working groups that have been formed in Mali during REACH's time suggest the that cost of coordination is high..

Contributing factors

16. The proactive and inclusive structure, and actors, and positive stakeholder buy-in have contributed to REACH's progress – although concerns remain regarding multi-stakeholder implementation amongst some ministries and UN inter-agency cooperation could be improved.

Sustainability

17. The sustainability strategy was drafted covering REACH's extended engagement period until December 2016, as well as outlining tentative plans for ongoing support post 2017. There are concerns that it is too soon for Mali to transition into less intense support from REACH given the wider political and security context. There are also concerns over the financing and resourcing of the coordination function (the Cellule de Coordination) which remains to be established.

Mozambique Summary Report

Context and REACH intervention

Country Context

1. With a population of just over 23 million (DHS Mozambique, 2011) the Republic of Mozambique is one of the poorest countries in the world, with over half of the population living under the national poverty line (18.4 meticaís/day). The nation's twelve-year civil war after gaining its independence in 1975 from Portugal, caused the economy to collapse. Since the peace deal in 1992, the nation has experienced strong economic growth averaging 8 percent per year, largely driven by the extractives industries. However future growth forecasts are tempered on account of falling commodity prices, mismanagement and corruption. Aid to the country has also reduced significantly in recent years, alongside a retreat from budget support modalities.

2. Mozambique has gone through a process of decentralization and deconcentration which has made more room now for priority setting at decentralized levels. The new President, Nyusi, took up position in January 2015, and his government introduced a five year plan, which includes a focus on nutrition. However, malnutrition continues to be a major challenge. Although there has been a slight reduction in the prevalence of stunting in Mozambique, from 2003 to 2011, stunting levels remain very high (42.3%) and are above critical population threshold of 40%. Differing stunting trends are observed by province, and are highest in the northern provinces. Increasing wasting prevalence is found in rural settings, particularly in the country's central provinces, which are also the areas which have been more prone to flooding and other natural disasters. Over half the households in Mozambique are considered food insecure. Insufficient land to cultivate is among the contributing factors to food insecurity where over half of the country's households only has access to 1 hectare or less. However, newly published data shows that food security and nutrition do not coincide from a geographical perspective, and that in fact areas which are producing agricultural surpluses are also those that have high levels of chronic malnutrition.

Nutrition Governance

3. **Before REACH:** Mozambique has mature coordination systems within sectors between donors, civil society and the government, dating back to budget support mechanisms. Mozambique also already had experience with multi-sectorality, because of the need for an integrated approach to re-building the country after the war. Nutrition coordination started in the 1990s, but at that time it was mainly a health driven response. A small informal coordination group brought together key external donor and NGO partners as well as the Ministry of Health (MoH) to plan the nutrition response. However before 2007/08, nutrition got little attention from donors and was not an overall national priority, until 2008 when a Multiple Indicator Cluster Survey (MICS) highlighted continued high levels of malnutrition and prompted the development of the Nutrition Action Plan (PAMRDC) 2011-2015/20. This national multi-sectoral action plan aims at accelerating the reduction of chronic undernutrition. Once the multi-sectoral nature of the process became clear, the coordination of the PAMRDC was handed over from the MoH to SETSAN, which is based inside the Ministry of Agriculture. The PAMRDC Technical Working Group

(TWG), a multi-sectoral platform on nutrition, was established and is hosted by SETSAN.

4. REACH was requested to support coordination of the PAMRDC in 2011, the same **year** that Mozambique joined the SUN Movement and the same year that the UN Country Team facilitated the formulation of the United Nations Development Assistance Framework (UNDAF), which included provisions for a working group on Health and Nutrition (UNDAF Mozambique, 2011).

5. **At the time of the evaluation:** The nutrition governance landscape has evolved since REACH started in country in August 2011. There is a better understanding of the importance of nutrition, due to the existence of PAMRDC, a nutrition monitoring framework, and the presence of nutrition focal points in key sectors. An important achievement has been the development of provincial nutrition action plans, which are receiving technical and some financial support from donors, although they remain largely unfunded. Consistent high-level commitment to the nutrition response has been missing, but the creation of an independent Institute for the Promotion of Food Security and Nutrition (IPSAN) that will oversee the implementation of actions aimed at improving food security and reducing malnutrition, is a positive sign of nutrition moving up the agenda. Government capacity to coordinate nutrition has increased but needs to be boosted, particularly in some line ministries. The involvement of civil society in the nutrition response has grown and a civil society network for nutrition has been in place since 2013, with additional networks existing in selected provinces. The group of UN agencies committed to nutrition has also grown with the addition of UNFPA, although stakeholders continue to express frustration with the lack of UN coordination. A new UNDAF is in the process of being drafted, and is likely to include a stronger focus on nutrition.

Description of REACH Intervention

6. **Staffing, hosting, and administrative arrangements:** The REACH international facilitator arrived in August 2012, and the national facilitator at the end of the year. The international facilitator stayed for two years, and is now based at the Secretariat in Rome where she continues to allocate on average 10% of her time to supporting to Mozambique. The National Facilitator's contract was extended until January 2016. In addition, REACH Mozambique has contracted approximately 300 consultancy days of support for specific tasks.

7. **Funding:** The total REACH budget for Mozambique was US\$1,475,000. By the end of 2014, just over US\$1 million had been spent (including the costs of the national/international facilitators and external technical assistance). Under spending is partially a reflection of other agencies funding and/or co-funding activities that REACH had included in its Country Implementation Plan (CIP) budget.

8. **Institutional framework within the UN country system:** Mozambique is a pilot country for the 'UN delivering as One approach' since January 2007. The work of REACH in country is guided by the Country Country Committee (RCC), which brings together the Heads of Agency (HoA) of the four UN REACH agencies and meets about twice a year. A TWG composed of the nutrition focal points from the four UN agencies (meeting to discuss the work plan/progress every 6-8 weeks) was 'transformed' in 2014 to constitute what is known as the Nutrition 'Gang', with the intention of broadening the agenda and discussing programming issues not only

related to REACH. This group meets monthly and works on the operational side of the UN REACH response to nutrition. The members of the gang also participate in the Nutrition Partners Forum, which also meets monthly, and which emerged prior to the establishment of REACH in country, and members of the 'Nutrition Gang' are also part of the PAMRDC TWG.

Activities undertaken to enhance nutrition governance

9. While initially the main focus of REACH's support was on government and on working closely with SETSAN, more recently REACH has been also facilitating support to UN coordination on nutrition in its role as Secretariat to the UN Nutrition Team. Key achievements to date include:

- Conducting Stakeholder and nutrition action mapping exercises.
- Facilitating a planning retreat with the sectors in early 2013 to review their contributions to the PAMRDC and prioritize key nutrition interventions in the annual planning cycle of sector ministries (as well as a series of follow-up meetings to review work plans).
- Facilitating the development of provincial nutrition plans in close partnership with SETSAN, the Ministry of Health and the Nutrition Partners Forum, to ensure they all used same methodology and tools.
- Drafting a National Advocacy and Communications Plan for Nutrition (incl. selection of nutrition champions)
- Support to SETSAN's capacity development in terms of its organizational structure, mandate, modus operandi, strategic management and communications.
- Providing technical support on planning and reporting of funding by the SUN MPTF to the civil society platform.
- Helping SETSAN create an implementation tracking mechanism to monitor the progress on the implementation of the PAMRDC.
- Organizing meetings and workshops for nutrition stakeholders at national and provincial levels, convening UN REACH meetings, and participating in the nutrition coordination structures.
- Providing support to the implementation of the SUN at country level.

Sources: REACH Mozambique, 2011; REACH Mozambique, 2014a; REACH Mozambique, 2014b; REACH Mozambique, 2014c; and stakeholder interviews

Summary of key findings

Relevance of REACH in Mozambique

10. REACH was relevant to the Mozambique context and to priorities in nutrition. REACH was integrated in SETSAN, and the identification of several high priority outputs among the set of overall outputs ensured that the design could fit with country needs. REACH also linked closely with planning mechanisms for nutrition, including the Nutrition Partners Forum, and planning was aligned with national development and nutrition priorities as well as with the UNDAF process. The CIP was developed in a participatory manner, allowing different stakeholders to contribute its design and to

contribute to decision making on its focus. REACH was also coherent and aligned with other national nutrition actors and initiatives, in particular the SUN initiative.

11. Gender and equity issues were taken into account in the design of REACH and reflected at outcome level. They were relevant to the main gender and equity concerns of the country. However the focus on gender and equity was not explicit at activity and indicator level.

Performance at country level

12. **Effectiveness:** REACH has tangibly contributed to nutrition governance at national and provincial levels by working on the institutional strengthening of SETSAN, creating awareness around the need for better coordination and prioritization, motivating stakeholders to participate, supporting the process of developing provincial plans, encouraging improved coordination of technical assistance at national and provincial levels, and by using opportunities to influence high level decision making by the newly elected government. These efforts are reflected in the inclusion of nutrition activities in the government budget (the PES) although most provincial plans remain at the planning stage only with funding and capacity continuing to be identified as the main constraints

13. **Equity:** Whilst REACH tools and indicators have given some visibility to the gender specificities of nutrition, REACH has not substantially contributed to further understanding in this area or to a focus on gender and equity beyond what had emerged naturally through discussion and sharing of evidence.

14. **Efficiency:** The norm of coordination in Mozambique worked in favour of REACH's efficiency, as well as the facilitators' prior knowledge of the context prior to engagement. Efficiency was enhanced by integrating REACH within the SETSAN structures – allowing REACH to identify some of the overarching capacity and systems weaknesses and work to strengthen these. The CIP was implemented with less funding, with 'savings' used to extend activities over a longer period.

Contributing factors

15. The environment and operating context in Mozambique were conducive to REACH engagement, as one of eight pilot One UN countries, with a well-established coordination tradition and an existing nutrition policy that ensured a level of clarity on priorities and good support for nutrition from the outset. The appointment of knowledgeable facilitators, recruitment of additional support within SETSAN and commitment from the Resident Coordinator's office were all important factors and enabled REACH to occupy a catalytic/supporting role. Other factors were reported as less conducive, including limited, tangible shifts amongst UN agencies away from agency-centered nutrition agendas, and the limited 'leadership' role REACH is able to play (in terms of steering the UN agencies) linked in part to the the level of the REACH International Facilitator (P4) . The lack of real political buy in at the most senior levels was also considered to be an inhibiting factor.

Sustainability

16. At the time of the evaluation, a sustainability strategy was being developed. Although consensus had not been drawn on what the way forward would be., discussions took place during the year prior to the evaluation regarding continuation of REACH. At the request of SETSAN, the option of providing more direct support to

nutrition governance at decentralised levels was considered. Overall, the period of REACH engagement was considered too short. Mozambique was reported to be on the cusp of rolling out its nutrition plan, and at a point where revived commitment at government level required sustained support from a 'neutral' broker to see through plans rather than indicate the departure of REACH was viable.

Nepal Summary Report

Context and REACH intervention

Country Context

1. Political instability has been the defining feature of Nepal during the last two decades, with 20 governments since the introduction of democracy in 1990 (World Bank). Despite some progress in poverty reduction in recent years, Nepal remains one of the poorest countries in the world, with a Human Development Index (HDI) of 0.463, ranking it 157th out of 187 countries listed in the UNDP Human Development Report (UN, 2014).
2. Food insecurity is an on-going concern in the country, particularly in the far western and mid-western mountains. Key causal factors include remoteness, low-income generating opportunities and lack of access to food. An analysis of the Demographic and Health Survey (DHS) data of 2011 revealed a significant association between food insecurity and malnutrition among children and women in Nepal (Singh et al, 2014). However, in general, the nutritional status of children in Nepal has improved in recent years, with the percentage of stunted children declining by 14 percent between 2001 and 2006 and by an additional 16 percent between 2006 and 2011 (DHS Nepal, 2012). At the same time, the level of wasting (11 percent in 2011) reached or exceeded the “nutrition emergency” threshold of 15% in the Central hill and Western Terai sub-regions. Nepalese children also suffer from vitamin and mineral deficiencies: the prevalence of anaemia was 74% in children under two and 37% of households are not fully protected from iodine deficiency through salt iodization. Maternal undernutrition is also a significant problem in Nepal (ibid).

Nutrition governance

3. **Before REACH:** The National Planning Commission (NPC), an advisory body, provided policy guidance on Food Security and Nutrition programming in Nepal under the directives of the National Development Council of the Government of Nepal. Under its direction, Nepal joined the SUN Movement in May 2011, and shortly after the NPC established the High Level Nutrition and Food Security Steering Committee (HLNFSSC), an inter-ministerial body responsible for policy development; organizing internal and external resources; ensuring commitment at national and local level; and coordinating sectoral policies and programs (NPC, 2012). In July 2012, the NPC released a concept note on the establishment of the National Nutrition and Food Security Secretariat under the NPC. The NNFSS was set up by REACH (with staff costs to be covered by REACH Nepal, WFP, the World Bank, and UNICEF), to provide strong support to the HLNFSSC in coordinating and assisting policy making, with emphasis on a multi-sectoral approach (NPC, 2012).
4. The Multi-Sector Nutrition Plan (MSNP) was finalized and endorsed by the Cabinet and signed by all stakeholders in September 2012, and the National Nutrition and Food Security Coordination Committee (NNFSCC) given the mandate for monitor progress of the MSNP, as well for ensuring effective coordination, supporting implementation of the decisions of the HLNFSSC, and providing guidance to the national NNFSS (NPC, 2012).
5. **At the time of the evaluation:** When the two REACH facilitators arrived in the country in late 2012, they were assigned offices in UNICEF and given the

responsibility for renovation and furnishing of the NNFSS premises, as well as recruitment of most staff positions. They were tasked to establish the NNFSS, develop a workplan and lead its activities. In early 2013 they moved to the new premises of the NNFSS. The relocation was taken consensually by all stakeholders, and widely seen as a means of fostering Government ownership. However, changes within the Government of Nepal and also the NPC led to significant delays in the planned activities of the NNFSS, and multi-sector coordination meetings could not be carried out as planned for some time, resulting in growing frustration of development partners. NNFSSC meetings finally resumed in the last quarter of 2013, and since then, REACH facilitators have managed to organize more regular and frequent meetings of the NNFSSC. REACH/NNFSS has supported the establishment of various multi-sector, multi-stakeholder groups and coordination platforms, including three Working Groups (WG) (on advocacy and communication, capacity development, and M&E); the Academia Platform; and serves as liaison between the SUN Movement Secretariat that provides funding to Save the Children for the establishment of the Civil Society Alliance for Nutrition, Nepal (CSANN) (NPC/NNFSS, 2014). Through its support at district level, REACH also leveraged additional funding for district nutrition plans.

Description of REACH Intervention¹³

6. **Staffing, hosting, and administrative arrangements:** In 2013-2014, the NNFSS comprised nine staff: the two facilitators and an Administration Officer were seconded by REACH, a further three officers recruited by WFP with funding provided by World Bank, a WFP-seconded Food Security Officer, and two UNICEF-funded assistants. NNFSS/REACH facilitators work under the overall guidance and support of the Social Development Division (SDD) and Agriculture and Rural Development Division (ARDD) of the NPC.

7. **Funding:** The funding of REACH in Nepal has mainly come from DFATD through the REACH Secretariat. Expenditures (excluding the salary of the international facilitator but including the salary of the national facilitator and external technical assistance costs) increased from US\$153,504.61 in 2013 to US\$258,471.08 in 2014 (REACH, 2014d). The budgeted value for Outcome 2 “strengthening national policies and programs” was drastically reduced from USD 123,900.00 in 2013 to USD 49,133.00 in 2014, while for Outcome 3 “increased capacity at all levels”, the budgeted value doubled between the two years (increasing from USD 91,000.00 to 197,880.00 in 2014). About two-thirds of this higher planned budget for outcome 3 were spent in 2014. There was no expenditure on outcome 4 “Increased efficiency and accountability” in 2013. The planned budget for this outcome, which amounted to USD 99,450.00 in 2013, was reduced to USD 15,000.00 in 2014, of which USD 7,511.87 (50 percent) was spent in that year.

8. **Institutional framework within the UN country system:** The approved CIP stipulated that the REACH UN partner agencies would rotate the hosting of the REACH facilitators (with UNICEF hosting in the first year, WFP in the second, and FAO in the third). However, it was decided instead to position REACH in the NNFSS - a Government structure. While having to follow the relevant administrative procedures of the government, the REACH facilitators are also accountable to the REACH Country Committee (RCC) composed by the heads of FAO, UNICEF, WFP and

13 A powerful earthquake shook Nepal on 25th April. Communications with the REACH facilitator to further discuss or clarify some issues or obtain complementary information have not been, understandably so, possible.

WHO. So far the RCC has met twice a year to discuss REACH-related matters and for information sharing. In each agency a Nutrition Focal Point (NFP) has been appointed who contribute to REACH activities through their participation in the three WGs, and through technical inputs into various documents facilitated by REACH.

Activities undertaken to enhance nutrition governance

9. In terms of activities undertaken and outputs achieved: REACH Nepal has focused on nutrition governance, whilst intra-UN coordination received less attention. Overall, interviewees thought this was the right focus. REACH's key achievements in Nepal include:

- Establishing and operationalizing the NNFSS and ensuring Government ownership of all its activities.
- Establishing/completing a multisector, multistakeholder coordination architecture at national level.
- Supporting implementation of the MSNP including:
 - Study on funding modalities;
 - Study on financial tracking options;
 - Functional capacity assessment;
 - Support to ministries to ensure alignment of their sectoral work plans;
 - Meetings with parliamentarians to ensure long-term high-level government commitment;
 - Multiple MSNP meetings and workshops for high level government officials;
 - District Support Workshop to identify needs and enable coordinated support;
 - Stakeholder Mapping at national level and in the six MSNP pilot districts, and online questionnaire;
 - Support to the launch of the MSNP in the 6 priority districts, including training of district officials in developing annual multisectoral and costed plans;
 - Joint National Advocacy and Communication Strategy that has been endorsed and launched as national strategy;
- Supporting the revision of the MSNP M&E Framework with the participation and endorsement of all involved ministries (guidelines and training materials developed and implementation mechanisms at district level defined);
- Developing the “Nepal Nutrition and Food Security Portal”, a Government owned website serving as online platform for information sharing (document and resource repositories, online tools such as the stakeholder mapping and data visualization), to be used as a planning tool.

Sources: REACH Nepal, 2011; REACH Nepal, 2014; REACH Nepal, 2014b; REACH Nepal, 2014c; and stakeholder interviews.

Summary of key findings

Relevance of REACH in Nepal

10. There is overall convergence between national priorities – defined in NPC’s Concept Note and the NNFSS Work Plan – and the REACH CIP, and a sense that REACH has fostered alignment of nutrition projects with national priorities. REACH/NNFSS has not provided direct technical assistance on gender and equity issues, but has facilitated the involvement of relevant stakeholders in the nutrition architecture, namely the Ministry of Women, Children and Social Welfare (MOWCSW) as well as civil society (with grass-root, caste, gender are usually high on their agenda). SUN and REACH are convergent and REACH has provided considerable support to SUN at country level.

Performance at country level

11. **Effectiveness:** REACH (housed within NNFSS) is less understood or known about at country level and amongst government officials. This was considered to be an indication of REACH’s contribution to government ownership and leadership. In terms of activities undertaken and outputs achieved, REACH Nepal has focused on nutrition governance (outcomes 1 to 3). Intra-UN coordination (output 4.4 “Establishment of nutrition as a key area for the UN delivering as one”) received less attention as it was perceived as contradicting the objectives of the NNFSS as being ‘overall coordinator’, not supporting a specific stakeholder groups such as the UN. This was possibly the only conflict with the original objectives of REACH that was caused by the specific role REACH was assigned to play in NEapl. Although dissemination the results of the stakeholders and activities mapping (national level with a focus on the 6 MSNP priority districts) was delayed due to data quality problems, it ended up being incorporated into the Nepal Nutrition and Food Security Portal developed in 2015, and hence sustainable.

12. REACH/NNFSS have been perceived to have achieved a substantial amount of work, whilst some stakeholders were critical of the move to district level as being too slow. Significant progress was reported in terms of increased donor commitment as well against the different outcome areas.

13. **Equity:** Whilst the CIP includes analysis of gender issues in Nepal, there is no indication of how REACH would incorporate gender considerations into its work (which, it was highlighted would need to be integrated into the roll-out of the MSNP). It was agreed that more is needed in terms of promoting commitment to gender issues from the top.

14. **Efficiency:** Some activities received less funding than planned, as they were either no longer relevant (for example the integration of priority nutrition actions into annual work plans of relevant ministries had already been done as part of the MSNP) or were budgeted by others. The “strengthening of institutional and human capacity for nutrition in government (relevant ministries and district level)” received a larger budget allocation than originally planned in the CIP. At the time of the evaluation, USD 347,085.32 were spent (47 percent of the planned USD 734,986.22). Expenditures versus planned spend are unevenly distributed between the four outcomes: 82 percent of the budget planned for outcome 3 was spent, whilst 30, 18, and 19 percent of the budget allocated respectively for outcomes 1, 2, and 4 was spent.

Contributing factors

15. Certain local factors, including strong government commitment to nutrition (prior to REACH engagement), as well as the operational and policy environments converging to present the opportunity to situate REACH in the NNFSS (which resulted in strengthening government involvement), and the timely arrival of REACH to support implementation of the MSNP, contributed to REACH's progress in Nepal. Despite this, constraints were faced in terms of staff turnover (within Government), lag time between drafting of the CIP and its approval, and human/institutional capacity weaknesses.

Sustainability

16. The NNFSS was perceived by some as being a time-bound project secretariat, and there is a lack of a joint (Government and EDP) plan for the secretariat and its timeframe. The government has made commitments to providing resources throughout 2014/15, and various 'REACH' activities (stakeholder mapping, advocacy strategy development) are likely to continue beyond REACH's direct engagement.

17. No transition and sustainability Plan for Nepal has been developed as yet but one was expected to be drawn up before the end of 2015. A revision of the 2012 Concept Note regarding NNFSS establishment was also suggested in order to define a long-term plan/Government of Nepal Phase-in. Financial support to NNFSS in 2016 might be forthcoming from an EU/UNICEF three years "Partnership for Improved Nutrition in Nepal: Support the Multi-sector Nutrition Plan implementation in at least 28 districts, 2015-2018", which is currently being discussed with the Government of Nepal (EU/UNICEF, 2015; EU/UNICEF, 2015).

Rwanda Summary Report

Context and REACH intervention

Country Context

1. Rwanda is a landlocked, densely populated central African country, with a population of about 12.11 million and up to 477 people per square kilometre (WB, 2014a). Operating under a decentralized structure, it is composed of five provinces, which are further divided into districts (the main decentralized political administrative entity), sectors (implementation units of districts) and cells (GOR, 2005). Its economy, which is dependent on subsistence agriculture that employs 80% of its workforce, suffered under the devastating economic and social impacts of the 1994 genocide. Whilst GDP grew by an average of 8 percent per year between 2000 to 2013 (amongst the highest average growth rates in East Africa) (IMF, 2013), 44.9% of the population still lives below the poverty line (REACH, 2014g), and the country is ranked 151 out of 179 worldwide on its most recent Human Development Index (UNDP, 2014).

2. Over 20% of Rwandan households have unacceptable food consumption and can be considered to be food insecure (WFP, 2012), and 44% of the population are stunted (with higher rates found in rural areas and the Northern and Western provinces) (GOR, 2012a). That said, there has been measurable progress in addressing malnutrition in recent years, attributed in part to the Emergency Plan to Eliminate Malnutrition launched in 2009, which included active nutrition screening of children and referral by community health workers. Indeed, the percentage of wasting declined from 5% in 2005 to 3% in 2010, and underweight also declined from 18% to 11% over the same period.

Nutrition governance

3. **Before REACH:** The Presidential “Emergency Plan for the Elimination of Malnutrition” made in April 2009, which focused mainly on acute malnutrition, was followed by the First National Nutrition Summit, held in November 2009 and the National Multi-sectoral Strategy to Eliminate Malnutrition in Rwanda (NMSEM) 2010-2013, released in June 2010. A cross-ministerial National Coordination Committee (NCC) was established in 2009, under the office of the President but chaired by the Permanent Secretary of Ministry of Health (MOH) and mandated to provide overall coordination of the implementation of the NMSEM 2010-2013 and of the yearly Joint Action Plans to Eliminate Malnutrition (JAPEM). The NCC is to convene meetings on a quarterly basis with senior representation of the respective Social Cluster Ministries (REACH Rwanda, 2011). Meanwhile, a Nutrition Technical Working Group (NTWG), co-chaired by the MOH and the USAID, brings together all external development partners for technical discussions.

4. The NMSEM set out strong emphasis on district level implementation of the NMSEM through District Plans to Eliminate Malnutrition (DPEMs). Coordination mechanisms were established at district level as part of the process to initiate the DPEMs, with district nutrition steering committees chaired by the Vice-Mayor in-charge of social affairs.

5. In December 2011, the Republic of Rwanda joined the SUN Movement.

6. **At the time of the evaluation:** Whilst the CIP proposed basing the REACH national facilitator in the NCC or a to be established NCC secretariat as a means of

providing technical support to the committee, the Government of Rwanda (GOR) were not in favour of this option, and thus the national REACH facilitator is based in UNICEF, and therefore not in a position to influence the NCC's membership or functioning (REACH, 2015a). The main reasons given for this deviation from plan are the time lag of almost two years between initial discussions regarding REACH engagement (which started in 2010), CIP funding approval (in August 2011), and the arrival of the International Facilitator in June 2012; and 2) the absence of a formal endorsement of the CIP by the GOR (source: interviews and REACH Rwanda, 2014b).

7. Whilst REACH had little influence on the national coordination mechanism already in place, the majority of interviewed stakeholders thought that REACH contributed to improving multi-stakeholder coordination through the NTWG, whose membership has grown in recent years. There was also overall consensus among stakeholders on the positive contributions that the "Stakeholders and Activities Mapping" exercise initiated by REACH in late 2012. REACH agencies and REACH facilitators were also involved in the consultation process leading to the mobilization of increased resources for 30 districts (REACH Rwanda, 2014b), although the general scale up in funding for nutrition started to increase in conjunction with the NMSEM and DPEM prior to REACH.

Description of REACH Intervention

8. **Staffing, hosting, and administrative arrangements:** The international and national REACH facilitators started their functions in June and October 2012 respectively and were assigned offices in UNICEF. The International facilitator contract was extended for 6 months until 31 December 2014, and that of the national facilitator until 31 December 2015. REACH has recruited mainly national consultants for specific technical tasks, particularly in 2014.

9. **Funding:** The total REACH budget in Rwanda amounted to US\$1,475,000. In 2011/12, US\$199,576.83 was spent. In 2013, USD 398,172.46 was spent, amounting to approximately 60 percent of the planned budget of USD 683,500.00 (including the facilitator salaries and REACH Secretariat costs). However, if one considers only the Country Office costs (excluding facilitator salaries and REACH Secretariat costs), around USD 76,188.76 has been spent, which equates to 22 percent of the planned activity budget of USD 345,000.00. Planned expenditures (excluding facilitators salaries) for 2014 amounted to US\$114,000.

10. **Institutional framework within the UN country system:** Rwanda is a pilot country for the 'UN delivering as One' approach and as such has a 'UN development assistance program' (UNDAP). In Rwanda REACH is known as the One UN Joint Programming for Nutrition (One UN JPN). The REACH Rwanda Country Management Team is comprised of a Steering Committee made up of the heads of the four REACH UN agencies, which is responsible for decision-making and meets at least twice a year. A Technical Committee, made up of four Focal Points representing the four REACH UN agencies, meets monthly.

Activities undertaken to enhance nutrition governance

11. The REACH facilitators have undertaken a wide range of activities: convening the UN Technical Committee meetings, facilitating the FS&NTWG, developing work plans, managing and disbursing funds, organizing workshops and planning joint

retreats (compiling reports). These have contributed to the following key achievements (REACH Rwanda, 2015):

- Stakeholder and action mapping, which was used to update the National Nutrition Policy and the national strategy.
- Costing of the revised National nutrition policy and strategy
- Support to the development of a multi-sectoral advocacy strategy “A Thousand Days in the Land of a Thousand Hills”
- Support to the training and roll out of a Dev-Info system in 17 districts.
- Support to the development of a Joint UN program to support government efforts in scaling up nutrition: this One UN joint nutrition project, which is jointly led by the four UN REACH agencies with Swiss Development Cooperation (SDC) funding of USD 4,895,000 is implemented in two districts: Nyamagabe and Rutsiro.

Summary of key findings

Relevance of REACH in Rwanda

12. REACH was relevant. The CIP as designed was aligned with national nutrition priorities. However, due to the long time lag between the design stage and arrival of the facilitators in country, a revision of the CIP outputs and activities was deemed necessary in order to comply with GOR/MOH views and with emerging national priorities. REACH facilitators have provided valuable technical and administrative support to the SUN Focal Point. Equity and gender “sensitivity” have received due attention in the national nutrition policy and strategy documents elaborated in 2013. Gender issues were adequately analyzed in the CIP and a few specific activities were proposed.

Performance at country level

13. **Effectiveness:** Prior to REACH engagement, there was awareness about nutrition and the environment was conducive to planning for nutrition scale-up. REACH’s stakeholder and activity mapping was a powerful tool which not only further raised awareness but also presented intervention gaps and priorities. REACH supported various activities, including the costing of the National Food and Strategic Plan and the development of the national joint advocacy strategy. REACH was effective in supporting the development of the multi-sector policy and strategy, and supported capacity building (primarily through technical support to the FS&NTWG, as well as at district level). However, remaining capacity weaknesses were acknowledged and REACH’s ability to effectively address capacity gaps within a short time questioned, with need to clarify and focus the type of capacity being addressed (technical, coordination etc.). Work to increase efficiency and accountability was not begun until 2014.

14. **Equity:** It is difficult to single out the contribution of REACH to gender equity in the national nutrition policy, strategy and advocacy. There was consensus on the importance of gender mainstreaming through all sectors being supported, though little awareness of specific intentions/contributions made by REACH to gender and equity issues despite some acknowledgement of REACH’s contribution to gender being in the 1000 Days campaign.

15. **Efficiency:** The funding of REACH in Rwanda has mainly come from DFATD through the REACH Secretariat. Total expenditures up till end May 2015 (excluding the salary of the facilitators) amounted to US\$ 398,172.46. Over that period, close to 80 percent of the amount budgeted for outcome 3 “increased capacity at all levels” were spent, whilst only 27 percent of the planned budget for outcome 2 “Strengthened national policies and programs” were spent. In 2014, more was spent than originally budgeted for two outputs: 3.4 “Knowledge-sharing network for exchange of good programming practices” and 4.2 “Creation and implementation of multi-sectoral nutrition monitoring system and linkages to accountability.”

Contributing factors

16. The Government’s readiness to scale-up nutrition (prior to REACH engagement) and Rwanda’s commitment to UN Delivering as One, were considered key ‘enabling factors’ contributing to REACH’s progress. REACH was strongly supported by the heads of the four UN agencies and this has facilitated positive commitment and cooperation at the working level (and amongst the nutrition focal points). Various factors have constrained REACH engagement, including limited government participation in development of the CIP, and weak capacity amongst social cluster ministries.

Sustainability

17. There was consensus that a full time coordinator is needed in order to maintain the activities being implemented by REACH, and that capacity building across relevant sectors is critical for sustainability.

18. Rwanda’s transition and sustainability plan was drawn up at the end of 2014 and includes suggestions on how to maintain some of the key roles and activities supported by the REACH facilitators after the end of their assignments, but without firm assurance that the institutional and budgetary implications will be secured. Thus, including a phase-out plan from the onset (at the time of the elaboration of the CIP) would help clarifying expectations as well as short-, medium- and long-term institutional and financial commitments of all concerned stakeholders.

Tanzania Summary Report

Context and REACH intervention

Country Context

1. The United Republic of Tanzania is one of the largest countries in Africa, being composed of 26 Regions which are divided into 127 Districts. A relatively peaceful and stable country, Tanzania has recorded an impressive 7 percent average annual Gross Domestic Product (GDP) growth rate over the past decade, and maintained the status of a “donor darling”. This has not, however, translated into a commensurate improvement in poverty levels or living standards, with the country ranking 159 out of 187 countries in the 2014 Global Human Development Report, a fall of seven places from 2013 (UNDP Tanzania, 2014).

2. Whilst 80 percent of Tanzania’s population are dependent upon agriculture for their livelihood, agricultural productivity is low and localized food deficits occur regularly (IFPRI, 2015). The overall prevalence of stunting and underweight have been decreasing over the last two decades but are higher than those countries in the region with a similar Gross National Income (GNI) per capita, and Tanzania looks unlikely to meet MDG 1c (WB, 2015b). There are also high rates of Vitamin A and Iron deficiency in Tanzania; - 25 percent of pre-school aged children and 15 percent of pregnant women are deficient in vitamin A, and anaemia rates are 72 percent amongst pre-school aged children and 58 percent amongst pregnant women (WB, 2015b).

Nutrition governance

3. **Before REACH:** In 1973, the Tanzanian Food and Nutrition Centre (TFNC) was established to coordinate and catalyse nutrition work in the country. During the 1970s and 1980s the TFNC was responsible for highly successful programme delivery and research, and developed the Tanzania National Food and Nutrition Policy. However during the 1990s, a reduction in donor funding for TFNC led to lower staff capacity, weaker management and a constrained financing for programmes (MBNP, 2012).

4. As the progress driven by the TFNC lost momentum in 1990s – 2000s, other bodies emerged. A Nutrition Technical Working Group (TWG) was set up but was put under the Health TWG and as such, nutrition was increasingly seen as a health issue rather than a priority for all of government. An (informal) Development Partner Group for Nutrition (DPG-Nutrition) was also established and whilst the group is well attended by a diverse number of organisations, they are not all pushing forward the group’s agenda and activities with the same vigour. In 2010, the Partnership for Nutrition in Tanzania (PANITA) was formed, bringing together over 230 civil society organisations (CSOs).

5. Tanzania joined the SUN movement in 2011 and in June 2011 hosted a High Level meeting on SUN. Around this time there was increased engagement at the highest levels of government with nutrition, leading to the launch later that year of a National Nutrition Strategy 2011-2016, and the establishment of a High Level Steering Committee on Nutrition (HLSCN) under the Prime Minister’s Office (PMO). The HLSCN then took over the high level coordination role whilst the TFNC continued with the responsibility of coordinating the technical side of nutrition.

6. **At the time of the evaluation:** REACH came to Tanzania at an opportune time when there was growing national action on nutrition. REACH has been able to benefit from the high level champions of nutrition, including H.E. President Kikwete, who in 2012 made a “call to action on nutrition” that led to a visioning document for 2025 drafted by a REACH-funded consultant. REACH has also had a good relationship with the Director of the Prime Minister’s Office (the national SUN focal point), and The Honourable Member of Parliament Lediana Mng’ong’o (who set up the Parliamentary Group on Nutrition, Food Security and Children Rights). Whilst REACH facilitators contributed to the nutrition coordination platforms in Tanzania (including recently taken on the role of supporting the chair of the DPG-nutrition in the administration of the group), such groups were not started or catalysed by REACH. The presence of REACH has brought the UN agency nutrition focal points together once a month, but the Country Coordinating Committee (CCC) meetings have struggled to attract the Heads of Agency, in part because they already meet monthly in conjunction with the UNDAF.

Description of REACH Intervention

7. **Staffing, hosting, and administrative arrangements:** The staffing for REACH Tanzania has not followed the standard REACH model. As was the case across most DFATD-funded countries, it took a year from the CIP being approved before the international facilitator arrived in Ghana (in July 2012). In part this was due to delays in being able to recruit facilitators – given that recruitment could not begin until an MoU had been signed (at Secretariat-level) with DFATD (formerly CIDA), which did not happen until December 2011. A national facilitator was not appointed until a month before the departure of the international facilitator (November 2014), due to delays in hosting decisions and a lengthy recruitment process (REACH Tanzania 2014: ref: p.6). Due to the lower than usual level of staffing, the facilitator relied on consultant and intern support.

8. **Funding:** The funding of REACH in Tanzania has mainly come from DFATD through the REACH Secretariat, and has been managed by WFP. There has been a significant underspend across the budget – but notably against the outcome areas (total spent of US\$ 222,426 against a budget of US\$749,000 (including the cost of the national facilitator)). This in part is because the context has evolved significantly since the outputs were defined in the 2011 CIP, and because some activities have been financed by other parties (such as the USAID funded PROFILES exercise in 2014, or the UN agency funded advocacy strategy). Staff costs have been also lower than budgeted, because Tanzania hasn’t had two concurrent facilitators (international and national) as per the standard REACH model. The underspend is being used to fund a national facilitator in country in 2015.

9. **Institutional framework within the UN country system:** REACH in Tanzania sits under the UN in country and has no separate agreement or Memorandum of Understanding (MoU) with the Government of Tanzania. It is hosted administratively by WFP, who also manage the REACH budget. The REACH facilitator is formally accountable to the RCC, however it meets infrequently. On a day-to-day basis the facilitators have been managed by the Deputy Country Representative at WFP. The REACH facilitator was initially located in the TFNC, however, a misunderstanding resulting from the lack of formal MoU between REACH and the Tanzanian government resulted in the facilitator being asked to leave the TFNC after a month he relocated to WFP. Some saw this as advantageous, bringing in greater

access to the UN agencies, whilst others felt it undermined REACH's ability to influence and facilitate the TFNC. REACH's way of working has also shifted over the period it has been present in Tanzania. The initial intention was for the four agencies to draw down on this joint REACH budget (as per the One UN model) to fund activities according to the plan. However it proved impossible for UNICEF, for example, to receive funds from WFP at country level, and as such REACH now contributes to joint activities and funds individual pieces of work.

Activities undertaken to enhance nutrition governance

10. REACH has had a number of key successes in Tanzania. These include:

- Supporting stakeholder and activity mapping in 2014 (30 regions and 7 WHO-ANI districts), which catalysed government interest to expand exercise to all districts.
- Supporting development of a UN nutrition advocacy strategy informed the FANTA-supported national nutrition advocacy and communication strategy (which is in its final stages of finalisation).
- Facilitating strategic planning workshop for the parliamentarians from which a 3 year strategic plan (2013 – 2017) emerged and some parliamentarians became as nutrition champions.
- Supporting CSO network efforts to integrate nutrition into political manifestos in preparation for the 2015 elections.
- Supporting TFNC with the development of technical paper on Nutrition Vision 2025 to inform review of the national nutrition policy/strategy and national development strategy.
- Supporting a nutrition surveillance review recommendations which were integrated in the WHO-ANI work on nutrition information systems
- Initiating the first joint sector review to review progress of NNS implementation and coordination mechanisms government and stakeholders recommended it to be held annually.
- Supporting the development of nutrition score card for accountability and action to be linked to a accountability matrix in 2015/2016.
- Providing ongoing support to TFNC to review the TFNC Act of Parliament (Act No 24) of November 21st 1973).

Sources: UN REACH, 2015; REACH Tanzania, 2011; REACH Tanzania, 2014a; REACH Tanzania, 2014b; REACH Tanzania, 2014c; REACH Tanzania, 2015; and stakeholder interviews

Summary of key findings

Relevance of REACH in Tanzania

11. REACH's objectives and strategies were in line with the agenda in Tanzania. However, Tanzania was already advanced in terms of making progress on nutrition, making some of the awareness-raising focus of REACH less pertinent. The CIP was aligned with the UNDAF. Whilst there was no explicit focus on SUN in the CIP, in practice REACH has provided a valuable behind-the-scenes support. The two are seen as complementary by those in country. REACH has not provided direct technical assistance on gender and equity issues.

Performance at country level

12. **Effectiveness:** The CIP for Tanzania was highly ambitious; this, combined with only having one facilitator at a time and no national facilitator until the final year, has somewhat undermined REACH's effectiveness. REACH has been opportunistic and flexible in Tanzania and this has enabled it to build on new initiatives and work well with others. REACH has been more effective at supporting the improvement of nutrition governance in Tanzania than it has been at galvanising UN coordination. This may be in part due to the country's status as a One UN country and a reticence about the value-add of REACH amongst the four UN agencies.

13. **Equity:** Whilst gender equity was acknowledged as being important in the CIP, REACH has not advocated specifically on gender or equity issues in nutrition.

14. **Efficiency:** Despite a low budget and 50 percent less staffing than planned, REACH managed to gain a surprising level of visibility and traction in Tanzania. There were some questions surrounding the efficiency of REACH in a One UN country where the UN agencies were already coordinating under the UNDAP. The way REACH funds were managed at country level (by WFP) made truly joint UN programming difficult and undermined the efficiency of REACH. REACH has not completed all the activities or spent all the funding allocated for the three years (although the period is not yet finished); there may well be funds unspent at the end of the period.

Contributing factors

15. The Tanzanian context was very favourable to the work that REACH wanted to do on nutrition governance. Many of the things REACH would prioritise at the start – raising awareness, finding nutrition champions, putting in place a multi-sectoral approach – were already in place. In the context of a One-UN pilot country REACH was considered by some to be an unnecessary addition and its coordination role has been harder to sell. At the same time REACH has struggled with fluctuating levels of buy-in and support from the four agencies. The management and governance by the RCC has been limited as a result. Relationships with partners have been generally good although not consistent across the period. Mixed expectations and varying levels of understanding about what REACH should and would do, have not helped REACH's partnership relationships.

Sustainability

16. The sustainability and the transition of REACH seem not to have been considered very much until its final year. The process thus far has not included government. There was concern in country that much of what REACH had done would disappear if REACH closed.

Uganda Summary Report

Context and REACH intervention

Country Context

1. Uganda has experienced relatively strong growth and poverty reduction since the cessation of the civil war, and the transition to a democratic state in the late 1980s. However, in spite of a significant drop in poverty from 56.4% in 1992/1993 to 19.7% in 2013, the country remains one of the poorest in the world, and Northern Uganda the worst affected. Social indicators have improved over time, but the country is unlikely to meet all of the MDGs by the end of 2015. Access to social services is constrained by a declining social sector budget, with the northern region, again being disproportionately disadvantaged (WB, 2014b). Although the government is firmly committed to maintain strong growth through infrastructure investment - governance, corruption, and a lack of space for civil society remain as growing concerns for the country.

2. The nutrition situation in Uganda lags behind improvements in the economy and poverty. Malnutrition in children under five years old is considered a “hidden problem” in Uganda, as many children exhibit moderate malnutrition and micronutrient deficiencies. The prevalence of wasting and stunting among children under the age of 5 is 33.7 % and 4.5 % respectively (WHO NLIS, 2011). Diseases, particularly diarrhoea, malaria, and acute respiratory infections, contribute as immediate causes of malnutrition. Furthermore, the double burden of increasing rates of overweight and obesity is a major challenge

Nutrition governance

3. **Before REACH:** Uganda was a Scaling Up Nutrition (SUN) Early Riser country, joining the movement in 2011. The five year multi-sectoral Uganda Nutrition Action Plan was approved in 2011 (UNAP) (2011-2016) (REACH Uganda, 2014b), which underscored the need for the Ministries of health, agriculture, education and gender to be involved to reduce malnutrition, particularly during the first 1000 days of life. Prior to the UNAP, the Ministry of Health (MoH) had been the most active sector in nutrition programming, with activities ranging from prevention, assessment and treatment of acute malnutrition; growth monitoring and promotion, and services to identify and treat micronutrient deficiencies.

4. An NGO consortium, the Uganda Group for Action on Nutrition (UGAN) was active in Uganda and had contributed, along with members of Uganda’s academia, to the development of the UNAP. Furthermore, UNICEF and WHO were the main UN agencies involved in nutrition-specific programming, and a limited number of nutrition-sensitive actions were also undertaken by FAO and WFP.

5. **At the time of the evaluation:** Building on guidance outlined in the UNAP, the Government of Uganda put in place nutrition coordination arrangements at the national and district level in 2014. Responsibility for overall coordination of the UNAP is held with the Office of the Prime Minister (OPM). A Secretariat was also formed (although as its 10 staff members have other full-time duties, only limited time is devoted to nutrition coordination). The UNAP Secretariat is the driver of multi-sectoral coordination in Uganda, and operationalized the National Multi-Sectoral Nutrition Technical Committee (NMS-NTC) in 2012, which is comprised of key

technical experts from the government, development partners, the private sector, academia, and civil society. The responsibility of the NMS-NTC is to oversee the implementation of nutrition policies and strategies including UNAP, however the roll out of the UNAP has been slow, in spite of the significant amount of support which has been provided by stakeholders including REACH.

6. The UN Nutrition Technical Working Group (NTW) had functioned since the beginning of the UNAP, with sporadic meetings of four national focal points from the active REACH UN partner agencies (FAO, UNICEF, WFP and WHO). In December 2013, the UNAP Secretariat also hosted the first National Nutrition Forum (NNF), which should meet bi-annually to review implementation and provide advice and advocate for nutrition. The Nutrition Development Partners Committee was established in 2013 to promote and identify funding resources for Uganda's nutrition agenda, composed of representatives of nutrition development partners and UN agencies (REACH Uganda, 2014b). The Uganda Coalition of Civil Society Organizations for the Scaling Up Nutrition Movement (UCCO-SUN) is a large group of national and local CSOs that implement nutrition actions and carry out nutrition advocacy and communication work.

Description of the REACH intervention

7. **Staffing, hosting and administrative arrangements:** During the duration of the REACH Engagement Period in Uganda (July 2012 to July 2015), there has been a high turnover of staff with 1 international and 2 national facilitators. Currently there is only one International Facilitator and she will end her contract in July 2015. REACH is housed in the WFP office in Kampala and has an office at the OPM as well, though this is not yet utilized. The REACH team has received support from student interns and consultants.

8. **Funding:** The funding of REACH in Uganda has mainly come from DFATD through the REACH Secretariat. The allocation was US\$1,475,000 for the period 2011-2015. Currently it is not possible to assess planned versus actual expenditures, but according to the data provided there will be a remaining balance at the end of 2015 of US\$235,129.88. Other donors such as UNICEF have joint funded activities with REACH such as for the district induction of the UNAP.

9. **Institutional framework within the UN country system:** The Resident Coordinators Office (RCO) has been advocating for a one-UN approach in all sectors including nutrition. REACH formed a group formed of the four Heads of Agencies known as the REACH Coordination Committee (RCC), who are supposed to meet quarterly, but to date there has been no meeting where all four RCC members were present (REACH Uganda, 2014b). The UN Nutrition Technical Working Group (TWG) was formed to bring nutrition focal points from key UN nutrition agencies, together to share information and plan support for the UNAP. There are differences of opinion as to whether REACH should be involved in this TWG, but to date it has been.

Activities undertaken to enhance nutrition governance

10. REACH has supported a number of activities to enhance nutrition governance which has furthered both a multi sectoral approach to nutrition as well as coordination amongst partners. REACH has performed in a very challenging environment in Uganda and in spite of issues of tension between REACH and Government and REACH and other UN agencies. REACH's main interventions have included:

- Support to the Uganda Nutrition Action Plan (UNAP) Coordination Secretariat.
- Organising and facilitating the 2013 UNAP Workplan Review and 2014 UNAP Planning session.
- Supporting preparations for the National Nutrition Forum (NNF)
- Helping to orientate districts to the UNAP.
- Funding and managing a consulting group to develop a national Nutrition Issues Paper, which served as the basis for informing sectors during the development of Uganda's Second National Development Plan (NDPII).
- In 2014, REACH facilitated a Nutrition Advocacy and Communication (NAC) Task Force resulting in a final NAC Strategy, to be launched in 2015.
- Developing a UN Nutrition Inventory and Strategy with inputs from all four UN Partner agencies.
- REACH has supported the development of several tools for planning and monitoring nutrition scale up including a Nutrition analysis, Nutrition dashboard and Nutrition Stakeholder and Action mapping tool.

Sources: REACH Uganda, 2011a; REACH Uganda, 2014a; REACH Uganda, 2014b; Reach Uganda, 2014c; REACH Uganda, 2015;; and interview notes.

Summary of key findings

Relevance of REACH in Uganda

11. REACH's objectives and strategies were aligned to the national nutrition strategy, and with the 2014 REACH workplan prepared as a joint exercise with UNAP. REACH has played a supporting role to SUN, hosting the bi-monthly conference calls and organizing the Self-Assessment exercise, although there is limited coordinated interaction between the two initiatives. REACH has also had limited interaction with the Government coordination institution housed in the OPM.

Performance at country level

12. **Effectiveness:** The UNAP itself was in place prior to REACH's arrival 'on the ground' in Uganda. Annual work plans (REACH plans) for the UNAP have provided room to better plan and allocate resources. However, despite significant advocacy work undertaken by REACH, little progress has been made in moving the UNAP agenda forward. The major stalling factor has not been lack of understanding of nutrition issues, but limited availability and allocation of resources. REACH has provided support to the rollout of UNAP at district level and sought to catalyse nutrition coordination and governance at central level. It was problematic to attribute any 'increased accountability' within the UN system to REACH, although they have gone some way towards developing a UN Nutrition Strategy which brings together inputs from the four agencies. REACH efforts to support accountability within the government have been limited.

13. **Equity:** The REACH CIP highlights gender as an area of explicit focus, but this is not reflected in annual work plans and there is less evidence that interventions have taken gender and equity into consideration.

14. **Efficiency:** Weak coordination of the UNAP has meant lack of transparency and subsequent duplication of activities, as well as competition between nutrition actors.

Contributing factors

15. Factors 'external' to REACH have proven critical to determining the extent to which progress has been possible. The policy environment for nutrition is weak and barriers to implementation have caused issues for REACH's engagement. Uptake of templates and tools introduced by REACH to support enhanced 'governance and management' has been minimal at government level and there is a reported sense that REACH does not 'add value'. In terms of UN coordination, progress has been limited with UNICEF, in particular, continuing to operate independently although efforts have been made by REACH to involve all UN agencies in coordination activities.

Sustainability

16. Reportedly, the CIP has not been fully implemented in Uganda and the achievement of many activities has been superficial, with limited tangible impact on governance and coordination. The absence of a fully functioning and accountable coordination structure and an up-to-date nutrition policy have limited REACH's ability to push forward the nutrition agenda. These factors call into question the likely sustainability of REACH beyond the period of direct engagement.

Annex K Summary of REACH Operational Activities/ REACH Changes over time

Table 28 Summary of Operational Activities

Country	Donor	Approved budget (US\$)	Staffing and first start date	Status April 2015
Laos PDR	BCG (and funding from ECHO, DFID, UN agencies)	BCG covered staff costs	One BCG consultant June 2008	Pilot closed
Mauritania	BCG and WFP followed by Spanish MDG fund ^a	BCG covered staff costs	One BCG consultant June 2008	Pilot closed but MDG funding continued for 3 years
Sierra Leone	BMGF initially, and subsequently UNICEF (Irish Aid)	320,0000	International (October 2010); National (March 2011)	Pilot closed in 2012 – UNICEF (with support from Irish Aid) took over REACH funding in the second year as part of their country nutrition budget
Bangladesh	DFATD	518,610	July 2012 international; national consultant until 2014	International contracted until June 2015
Uganda	DFATD	Budgeted 1,475,000	First international and national, July 2012 Both replaced in 2013	Current international contracted until July 2015
Mozambique	DFATD	Budgeted,475,000	July 2012	National facilitator contracted until January 2016 International departed 2014
Tanzania	DFATD	Budgeted 749,000	International followed by national facilitator July 2012	National facilitator in post until Nov 2015
Nepal	DFATD	Budgeted 1,517,952.27	September 2012 (international), November 2012 (national) Administration officer funded by REACH (February 2014); various other programme staff co-financed by REACH/WB	International contracted until August 2015, administration Assistant until August 2015

Country	Donor	Approved budget (US\$)	Staffing and first start date	Status April 2015
Rwanda	DFATD	Budgeted 1,475,000	International June 2012; national (October 2012)	National contracted until May 2015
Mali	DFATD	Budgeted for first three years – 1,475,000 Budgeted for 2016 extension – 285,000	September 2012 (international on six-month contract); international Feb 2013, national June 2013	Extended until 2016 Extension of national facilitator position has been arranged as part of extension of REACH till December 2016
Ghana	DFATD	1,500,000	International (Accra based), national (based in regions) August 2012	Facilitators' contracts end Aug 2015
Niger	EU	4,681,710 ^b	One national 2012	On-going
Burundi	EU and UN in country	Staff costs covered no budget	One national August 2013	On-going
Ethiopia	USAID	608,578 ^c	One national	On-going
Chad	ECHO and UNICEF	1,475,000 (covers staffing only)	One national	On-going
Senegal	DFATD	925,833	International and national, October 2014	On-going
Haiti	DFATD	758, 719	International and national, January 2015	On-going
Myanmar	DFATD	760,000	International and national, scheduled to begin August 2015	Work to officially begin August 2015; however UN team have initiated work with remote support from Secretariat Columbia intern began June 2014
Burkina Faso	DFATD	845,833	International and national, November 2014	On-going

Source: Country Case studies, REACH Secretariat, CIP documents

Notes: ^a A proposal to the Spanish MDG fund gained funding of 7.5 million Euros for Mauritania to implement their new nutrition strategy. ^b CIP October 2011 figure given in Euros converted to US\$ using rate from October 2011. ^c - Ethiopia budget for 2012/13

Table 29 Changes in REACH Goals and Outcomes over time as reflected in key documents

2008 ¹⁴	2012	2013
Goal		
To help countries accelerate progress towards the MDG 1, Target 3 (to halve proportion of underweight children under five globally by 2015) primarily through a public health oriented approach	Strengthening government capacity to scale-up nutrition and improve nutrition management and governance , and support nutrition-sensitive, multi-sectoral approaches	REACH helps to build and strengthen national programmes so that these can be effective in overcoming child and maternal undernutrition.
Outcomes		
<ul style="list-style-type: none"> a. Increased awareness of the underlying problem of hunger and undernutrition and of the potential solutions b. Strengthened, resourced and effectively monitored national policies and programs c. Increased capacity at the international, community and household levels for action d. Increased efficiency and accountability of the global efforts to reduce child hunger and under-nutrition 	<ul style="list-style-type: none"> a. Increase awareness of nutrition problems and their solutions b. Strengthen national nutrition policies and programmes c. Increase capacity at all levels d. Increase efficiency and accountability. 	<p>At the level of the government and multi-stakeholder platform</p> <ul style="list-style-type: none"> a. Strengthen national nutrition policies / action plans b. Support advocacy and consensus c. Increase national capacity, including multi-sectoral coordination d. Strengthen governance through effectiveness and accountability <p>For the UN System Network</p> <ul style="list-style-type: none"> a. Co-facilitate the UN Network b. Support the UN nutrition efforts

Sources: For 2008 – REACH MOU (REACH Agencies, 2011), for 2012 – Annual Report 2011 (REACH, 2011), REACH Summary Brief (REACH, 2012b), for 2013 – REACH, 2013c, REACH, 2013e

¹⁴ Until 2011.

Annex L Time lag between CIP visit and Facilitator deployment

Country	SUN	CIP Visit	CIP approval	REACH Facilitators in country	Time lag between CIP visit and arrival of facilitators in country	CIP revision	Location of REACH facilitators
Bangladesh	September 2012	November 2010 and April 2011	8 August 2011	July 2012 and October 2012	(from April 2011) One year + 4 months (international) One year +7 months (national)	Adjustments made through yearly work plans	WFP Dhaka
Ghana	March 2011	August 2011	12 March 2012	August 2012 and October 2012	One year (international) and 14 months (national)	No; annual work plans developed	WFP (National facilitator in Tamale (Northern Region) and International Facilitator in Accra)
Mali	March 2011	July 2011	12 March 2012	September 2012 and February 2013	14 months (international) and one year 8 months (national)	No; annual work plans developed from 2013	WFP Bamako
Mozambique	August 2011	May-June 2011	8 August 2011	August 2012; December 2012	14 months (international) and one year 5 months (national)	Annual work plans developed	SETSAN (Ministry of Agriculture)
Nepal	May 2011	August 2011	12 March 2012	September and November 2012	11 months (international); and 14 months national)	No; adjustments made through yearly work plans	National Planning Commission

Country	SUN	CIP Visit	CIP approval	REACH Facilitators in country	Time lag between CIP visit and arrival of facilitators in country	CIP revision	Location of REACH facilitators
Rwanda	December 2011	June 2011	8 August 2011	June and October 2012	One year (international) and 15 months (national)	Yes in March 2013 by UN team (retreat)	UNICEF Kigali
Tanzania	June 2011	May 2011	8 August 2011	July 2012 (international) and November 2014 (national)	One year (international) and three years + 7 months (national)	Annual work plans developed	WFP Dar Es Salaam
Uganda	March 2011	July 2011	12 March 2012	July 2012	One year	Adjustments made to translate CIP to outcome/output areas of M&E framework; annual work plans developed since 2013	National based in WFP Kampala (office also at OPM)

Annex M Timeline of Global Nutrition events

1. Table 30 below provides a summary of major nutrition and nutrition-related events, as well as the resulting interagency commitments, processes and bodies formed since the ICN1 in 1992. The timeline is intended to provide a snapshot of the global nutrition architecture and to situate REACH within the broader context of developments in nutrition/nutrition-related institutions and initiatives.

Table 30 Main Interagency Initiatives to Reduce Hunger and Malnutrition since 1992

Year	Event	Commitment	Processes	Body
December 1992	International Conference on Nutrition (ICN1), Rome, Italy	Eliminate hunger and to reduce all forms of malnutrition within the decade	National Plans of Action for Nutrition (NPANs)	
November 1996	World Food Summit, Rome, Italy	Reduce the number of undernourished people to half their present level no later than 2015	Food Insecurity and Vulnerability Information and Mapping Systems (FIVIMS) established	
September 2000	Millennium Summit, New York, USA	United Nations Millennium Declaration: Millennium Development Goals (MDGs)	Task Forces and UN Experts Group	UN Millennium Project Team (As of Jan 1 2007, replaced by an MDG Support team integrated under the United Nations Development Program (UNDP))
June 2002	World Food Summit: five years later, Rome, Italy	Declaration adopted		International Alliance Against Hunger
April 2008	Meeting of the UN Chief Executives Board, Berne, Switzerland	Chief Executives Board communiqué	Comprehensive Framework for Action (CFA)	High Level Task Force (HLTF) on Global Food Security established

Year	Event	Commitment	Processes	Body
June 2008	REACH begins operational activities			
September 2009	World Summit on Food Security, Rome, Italy	Declaration of the World Summit on Food Security	-	Reform of the Committee on World Food Security (CFS)
April 2010	World Bank Spring Meetings, Washington DC, USA	Scaling Up Nutrition Framework for Action (FFA) (birth of SUN Movement)	Rome Nutrition Forum	-
September 2010	Change a Life, Change the Future event, New York, USA	Joint donor statement	1,000 Days Partnership	-
September 2011	High Level Meeting on Nutrition hosted by the United Nations (UN) Secretary-General at the UN General Assembly followed by the SUN Movement Global Gathering			
December 2011	REACH Memorandum of Understanding signed between partner agencies			
2012	Zero Hunger Challenge is Launched by Launched by UN Secretary-General Ban Ki-moon in 2012			
May 2012	Sixty-fourth World Health Assembly, Geneva, Switzerland	Resolution 65/5	-	-
July 2012	The UN Secretary-General launched his High-level Panel of Eminent Persons to provide guidance and recommendations on the post-2015 development agenda.			
September 2012	Launch of the SUN Movement revised Roadmap at the annual global gathering.			

Year	Event	Commitment	Processes	Body
June 2013	Nutrition for Growth Summit, London, UK	Global Nutrition for Growth Compact	-	-
September 2013	Annual SUN Movement Global Gathering, New York			
June 2014	Malabo Declaration on Nutrition Security for Inclusive Economic Growth and Sustainable Development in Africa. During which AU Heads of State and Government committed to ending hunger by 2025.	AU Heads of State Commit to ending hunger by 2025		
November 2014	Second International Conference on Nutrition, Rome, Italy	The Rome Declaration on Nutrition and the Framework for Action on Nutrition	-	-
November 2014	Annual SUN Movement Global Gathering			
March 2015	REACH Annual Facilitators Workshop hosted in Rome			
2015	Post 2015 process under way Post 2015 process underway lead by the UN in order to define a post-2015 development agenda to replace the Millennium Development Goals. This agenda will be launched at a Summit in September 2015.			

Sources: Mokoro, 2015 Information extracted from SUN ICE Full Report: Annex H, pp. 247-27; REACH and SUN website

Annex N UN Mandates

Agency and function	Mandate	Specific nutrition related activities and roles
<p>FAO Normative agency – leadership role on food security and related dimensions</p>	<p><i>‘To support Member Nations in their efforts to increase the effectiveness of food and agricultural systems in improving nutrition across the life cycle for their populations, working with partners at global, regional and national levels.’</i></p>	<p>Food-based interventions to bring lasting solutions to target populations, including complementary feeding, good nutrition for mothers and WRA, improve dietary quality, using schools as entry points, and promoting resilience at individual/household and community levels through food-systems.</p> <p>Shape food and agricultural systems (nutrition-sensitive approaches to increase food diversity and dietary balance); strengthen capacity to evaluate and monitor the nutrition situation; provide tools and support for scale-up.</p> <p>Undertake analytical work on food consumption, food-based dietary guidelines and provide knowledge.</p>
<p>UNICEF Preparation and dissemination of guidelines; focus on children, children’s rights, resilience</p>	<p><i>‘To support the realisation of the rights of children, particularly the most disadvantaged.’</i></p>	<p><i>‘Improved and equitable use of nutritional support and improved nutrition and care practices’</i> (through support for interventions including vitamin and micronutrient deficiencies; community management of malnutrition and supporting care practices for vulnerable households).</p> <p>Focus on early childhood, infant and young child feeding; resilience; capacity development.</p> <p><i>‘Gender equality is integral to the Strategic Plan as a normative principle and as a core element of the refocus on equity...’</i> (Mainstreaming of gender equality across interventions)</p>
<p>WFP Preparation and dissemination of guidelines; focus on food based assistance, access, nutrition interventions</p>	<p><i>‘To ensure that no child goes to bed hungry and that the poorest and most vulnerable, particularly women and children, can access the nutritious food they need.’</i></p>	<p>Nutrition-specific interventions and nutrition-sensitive approaches.</p> <p>Work with partners to contribute to a coherent, coordinated and gender-sensitive response to food and nutrition needs. Provide and distribute nutritious foods to save lives.</p> <p>Work to improve nutrition along the value chain, providing targeted food assistance to build food security and strengthen access to markets/economic opportunities.</p> <p>Improve availability and accessibility to nutritious food and increase access to health and education services. Strengthen capacity to design/scale up/manage nutrition programmes. Include gender equality in the design and execution of food assistance programmes.</p>
<p>WHO Normative agency – leadership role on public</p>	<p>Coordinating authority for health within the United Nations system. Mandate to:</p>	<p>Promote the improvement of nutrition with other agencies; develop food and nutrition policies in high burden countries; monitor malnutrition trends globally; provide evidence and scientific advice on implementing strategies.</p>

Agency and function	Mandate	Specific nutrition related activities and roles
<i>health; analytical and technical guidance/M&E</i>	<i>'provide a clearer understanding of health equity...[mainstream] gender equality...focus attention and action on ensuring countries have sufficient human resources for health....work to strengthen national health systems and build understanding...engage more systematically with society and industry.'</i>	

Sources: FAO, 2012; UNICEF, 2013; WFP, 2013b; WHO, 2006; and UNGNA, 2015: draft version

Annex O Summary findings from Sierra Leone

1. An overview of findings from the Sierra Leone desk study is presented in Box 16 and Box 17 below.

Box 16 Summary of REACH intervention in Sierra Leone (funding, staffing, hosting and activities)

Overview of financing and staffing for the REACH intervention

REACH was officially launched in Sierra Leone in March 2010, following endorsement of the intervention by the First Lady of Sierra Leone, the four United Nations (UN) partner agencies (WFP, WHO, FAO and UNICEF), key line ministries, development partners and Non-Governmental Organisations (NGOs) (REACH Sierra Leone, 2010; REACH Sierra Leone, 2012). Funding through the BMGF project was initially provided for one year, and subsequently extended through Irish Aid commitments and UN agency commitments at country level. Funding was channelled through UNICEF, which led to some delays in contracting. REACH was the first country with two facilitators who were meant to be deployed in August 2010. However, the International Facilitator was deployed in November 2010 and the National Facilitator was recruited in March 2011, with the international contracted until October 2012, and the national until March 2013 – although in January 2013, the national was appointed Deputy Minister of Health.

REACH hosting arrangement in Sierra Leone

REACH was led by the UN Country Representatives from the four partner agencies (FAO, UNICEF, WHO and WFP), each of whom had appointed a nutrition focal point and worked to develop the REACH work plan prior to engagement. Upon deployment of the facilitators, the work plan was reviewed and finalised following with government. UNICEF administered the hosting arrangements for REACH, although both facilitators were based in the Strategic Planning Unit of the United Nations Integrated Peace Building Office in Sierra Leone (SPU/UNIPSIL) in the capital, Freetown. It was anticipated that the facilitators would subsequently be moved to within one of the government ministries, but the decision was made for them to remain in SPU/UNIPSIL based on practical constraints (limited office space) as well as the perception that this could represent bias.

Summary of activities supported by REACH in Sierra Leone

Analysis undertaken at the beginning of the REACH intervention highlighted that coordination for nutrition interventions was undertaken sectorally (REACH Sierra Leone, 2010) and there was reportedly little interaction between key ministries. One of the key focus areas of the REACH engagement was to bring together the Ministry of Agriculture, Forestry and Food Security and the Ministry of Health. Work was undertaken to establish the High Level Coordination Committee with more limited work at sub-national level to develop the coordination structures beyond the initial analysis of the weaknesses. Furthermore, whilst malnutrition was acknowledged as a major problem in Sierra Leone, there was need for policy makers to know how best to address it and REACH worked to sensitise institutions and individuals on issues surrounding nutrition through national and regional Nutrition and Food Security Fora. In addition, REACH supported Operational Research on links between agriculture and nutrition, as well as a Mapping Exercise and situation analysis, and the Operationalisation of the NFNP (though this was not finalised by the end of engagement). REACH also played a key coordinating role to the Nutrition Working Group (NWG).

Box 17 Summary of findings for Sierra Leone – factors influencing success, the transition period and durability

Factors influencing the level of REACH achievement in Sierra Leone

Although the period of engagement in Sierra Leone was shorter than in subsequent DFATD-funded REACH countries, significant progress was made. Given the recent approval of the National Food and Nutrition Policy (NFNP) policy prior to REACH engagement, the role of REACH was not to write/re-write the NFNP policy but instead to open up spaces for discussion between different stakeholders and to foster greater multi-sectoral coordination. Various factors were cited as contributing to the ‘success’ of REACH in Sierra Leone:

- *Political willingness/readiness to engage:* there was already a growing sense in the country of the need to move beyond emergency type responses to nutrition and a receptive policy environment
- *Profiles of the personnel involved:* Considered a key contributing factor, with the combination of skills between the facilitators as well as the country-level profile of the national facilitator being well matched and enabling work to be pushed forward. This also served to increase the perceived credibility of REACH at country level.
- *Perceived neutrality of REACH:* REACH sat outside any one ministry and was therefore considered to be neutral and not representing the agenda of any one stakeholder.
- *Structure and operation of the engagement period:* The focus of activities could evolve and there was a degree of flexibility enabling facilitators/stakeholders to determine country-level priorities and areas for engagement.

REACH transition period

In January 2012, Sierra Leone became a SUN Movement country and the SUN Secretariat was established in the Vice President’s Office. The Secretariat was intended to take over the responsibilities of the REACH facilitators, especially in terms of coordinating multi-sectoral engagement. Although training was subsequently provided by the REACH Secretariat to the SUN Secretariat (through a return mission in 2014), various stakeholders felt that this should have formed part of REACH’s exit strategy. Indeed, comments imply that the REACH departure from Sierra Leone was considered sudden. The work plan for 2011-2012 indicates intentions for a three-year engagement (referring to REACH’s Focus in Year 2 and Year 3) and, reportedly, broader issues, rather than specific responsibilities were ‘handed over’. REACH facilitators left Sierra Leone prior to finalisation of the operational plan for the NFNP.

Durability of REACH outcomes

Overall, there is a reported sense that nutrition is still a priority and that the ‘spirit’ of REACH has survived REACH’s departure. Sierra Leone was marked as an ‘early riser’ in the SUN Movement, with the SUN Secretariat funded directly from the Government’s budget. In 2013, nutrition was raised to Directorate level in the Ministry of Health and nutritionists now employed in the MAFFS. Furthermore, the relationship between MAFFS and MOHS has seemingly endured, with the two ministries presenting jointly at international events (e.g. SUN Global Gathering).

However, since REACH’s departure, the SUN Steering Committee has reportedly fallen short in terms of coordination. NWG meetings were stopped completely in recognition of the potential overlap with the SUN Multi-stakeholder Platform (MSP) activities. However, reportedly, SUN MSP meetings have been limited and not very structured or focused. In the wake of the Ebola crisis, a working group on nutrition has been established, called the Nutrition in Emergency Coordination Group (NECG) (coordinated by UNICEF/the MOHS) with the functions reportedly being extended beyond initial emergency coordination.

Additionally, the Food Security Working Group (coordinated by FAO) has increased its coordination activities. The establishment of two working groups (one for nutrition and one for food security) implies a shift back to the two things being treated separately. Undoubtedly, the Ebola crisis has been a major factor in recent developments and has influenced the current context and responses significantly.

One stakeholder indicated that the situation in Sierra Leone prior to REACH engagement was one where there was commitment but not the accompanying coordination. Whilst some of the wider shifts that REACH contributed to (raised profile/understanding of nutrition etc.) have sustained, there are indications that the specific coordination function which REACH played has, however, not been sustained.

Annex P Mapping of Findings, Conclusions and Recommendations

Report section	Key findings	Conclusions	Recommendations
<i>EQ1: How relevant and appropriate is the design of REACH? To what extent:</i>			
<i>Sub question 1.1: Are REACH objectives and strategies in line with the international development agenda in terms of reduction in hunger and improvements in nutrition priorities of participating countries?</i>			
2.1	<p>The design of REACH fits well with the priorities of the international nutrition agenda, especially given its focus on prioritising country-specific and country-led responses, multi-sector action, and the need to scale up funding.</p> <p>CIP processes were useful in setting priorities at country-level for all stakeholders and in responding to nationally recognized needs and gaps. However, CIP processes were not always sufficiently thorough or participatory to be owned by the countries, and gaps between CIP design and implementation reduced their relevance.</p>	<p>REACH has effectively focussed on prioritising country-specific and country-led responses, multi-sectoral action, and the need for scaled-up action. This aligned well with global level priorities. It also fits with the agenda of UN agencies that are part of REACH.</p> <p>REACH has been broadly relevant to country policies and priorities. A standard CIP process, and the subsequent annual planning processes, in each country ensured that the REACH design took national priorities into account. The full involvement of government and other key stakeholders in the development of the CIPs varied in practice. A standard model was applied, with a tight time-frame, insufficient consultation, not enough adjustment to local realities, and with too long a gap before implementation started.</p>	<p><i>No recommendation needed at the level that the ET are being asked to consider recommendations (i.e. high level and strategic). However, future engagement in countries should learn from the past CIP experiences and improve on them (which is already happening to some extent).</i></p>
<i>Sub question 1.2: Is REACH aligned with the mandates and capacities of the four UN agencies?</i>			
2.1	<p>REACH's objectives were in line with the nutrition priorities of the four participating agencies, including their gender and equity objectives. However, REACH did not always make sufficient use</p>	<p>REACH is relevant to the mandates of the four agencies. However, REACH has had to struggle a lot internally within the UN to be</p>	<p>R1. The core function of REACH should continue to be facilitation and coordination of country-level nutrition responses, with a strong focus on</p>

Report section	Key findings	Conclusions	Recommendations
	<p>of existing UN tools (guidance and manuals) or effectively leverage UN agencies' nutrition capacity to improve coordination and scale-up nutrition responses in country. At the country level, competition for funding among the four agencies and with REACH has affected the level of coherence.</p>	<p>given a space, and on the global nutrition landscape to be understood.</p> <p>As a result, the rationale for REACH as a separate initiative remains questionable given limited buy in by UN agencies.</p>	<p>maintaining and developing its reputation for neutrality. This function should be based on two modes of intervention: one should involve multi-year facilitation services, building on the approach adopted to date; and the other should involve specialized short-term facilitation and related services, for countries meeting specific criteria.</p>
<p><i>Sub question 1.3: Was REACH designed to achieve coherence, alignment, and complementarity between REACH and other global nutrition initiatives (including the SUN initiative), and national nutrition policies and programmes?</i></p>			
2.1	<p>In a crowded nutrition environment, which includes the related SUN movement and UNSCN initiatives, the establishment of REACH as another initiative was contested, and continues to be questioned by some global stakeholders. There is little understanding of REACH beyond the people directly involved. The evaluation found various contributory factors for this, including lack of operational buy-in REACH's low-profile facilitating role and focus on the country-level country level, and its limited range of global-level partnerships.</p> <p>At country level, the evaluation found that REACH has complemented the work of the SUN Movement (by providing facilitating support for SUN activities at country level) and is considered by stakeholders to be well aligned and coherent with nutrition work by government, donors and civil society. It was easier to achieve complementarity at country level because the main focus of REACH has been on Government coordination. Efforts in UN coordination have been undertaken by REACH but have had less emphasis. As a result REACH is not seen as UN-specific.</p>	<p>There was good alignment between REACH and SUN at country level, with initial confusion in some countries at least partly dissipated in implementation. The REACH facilitators provided valuable – invaluable – technical and administrative support to the SUN process at country level.</p> <p>Nonetheless, in a crowded landscape, the establishment of REACH and its existence continues to be questioned by various nutrition actors at the global level.</p> <p>The limited buy in from UN agencies into REACH and the close collaboration between REACH and SUN would argue in favor of merging of SUN and REACH to simplify the nutrition architecture.</p>	<p>R1 as above</p> <p>R2. REACH should develop a medium-term vision, strategies and an operating plan for its second phase, which has a five-year timeframe to align effectively with SUN's five-year timeframe and strategy.</p>

Report section	Key findings	Conclusions	Recommendations
<i>Sub question 1.4 Was REACH designed to align and contribute to equity (including gender equity) as defined by international and regional conventions, national policies and strategies and the needs of the target group (women and children under five)?</i>			
2.1	REACH was designed to align with and contribute to equity - including gender equality. However, CIPs were uneven in clarifying the extent to which these issues would be addressed through improved planning, advocacy and monitoring.	Whilst gender and equity received attention in REACH’s design stage they have been less prominent in implementation. CIPs and annual work plans generally included little focus or detail on specific activities, or indicators to monitor progress on gender and equity. REACH was not seen to be strongly supporting gender and equity issues.	R8. Country-level implementation of REACH should continue to be guided by CIPs and annual plans. However, CIP processes should be revised to ensure maximum leadership and buy-in from all stakeholders. CIPs should also adopt an approach to ensuring that equity and gender issues are part of the country-level work and global advocacy on nutrition. Ensuring that REACH has expertise in gender and equity, establishing incentives for national actions on gender and equity in nutrition, and monitoring progress against indicators are all essential.
<i>Sub question 1.5 Is the REACH logic model including its assumptions valid? In particular, is the relative emphasis on intra-UN and with-government “communication and coordination structures” (as per TOC) appropriate to the priority needs/gaps in the sector?</i>			
2.1	The assumptions of the TOC at output to outcome level were found to be relevant for the most part. The validity of the TOC is challenged by major assumptions from the outcome to the impact level. In particular, the evaluation found only limited supporting evidence for the assumption that the commitment of stakeholders is a direct result of increased awareness of and consensus on nutrition problems and that REACH, through its key agents (the country facilitators, UN focal points and Heads of Agencies), can influence power relations so that country governments and key nutrition players including UN agencies place nutrition at the top of their agenda. The evaluation was able to find relatively strong evidence with respect to the first	The assumptions of the REACH TOC were relevant at the output to outcome level. The TOC did not take account a number of critical factors, including the importance of high-level political support, the reality of changing contexts, the lack of incentives to merge programmes and the competition between UN agencies which continues to undermine ownership and affect commitment. It also failed to see the challenges of a structure which can only facilitate and where real change has to come from within a global system like the UN on	R4. The next phase of REACH – and further decisions on funding multi-year, country-level interventions – should be based on a thorough reappraisal of the REACH theory of change, which should recognize that the role of REACH is facilitation and related services, rather than technical assistance or support. The new theory of change should form both the role of REACH as the implementer of SUN in the field and its support to the United Nations Network for SUN. It should be broadly disseminated to contribute to

Report section	Key findings	Conclusions	Recommendations
	<p>assumption, that the establishment of the multi-sectoral and multi-stakeholder approaches that REACH has facilitated at country level has indeed contributed to more awareness and better priority-setting across the eight case study countries. However, the evaluation was not able to find conclusive support for the second assumption, that inter-agency/inter-sectoral collaboration is the most efficient mechanisms for delivering on the outcome of reduced malnutrition.</p> <p>The TOC did not sufficiently take account of external factors that have remained largely beyond REACH's control to date. High-level political commitment by Governments, the political economy of the UN (which remains beyond the grasp of REACH), and the lack of clear accountability and incentives for support to REACH within the UN. Finally, the timeframes of REACH have been highly ambitious in practice and the evaluation CCS findings underscore that the assumption that a 2-3 year period of catalytic support would be enough is in practice erroneous.</p>	<p>which facilitators at country level have little influence.</p> <p>REACH theory of change was deeply flawed in its assumption that the UN system could or would accommodate true collaboration and shared effort between its agencies at country level in the absence of commitment from the highest level of the UN organizations.</p>	<p>better understanding of REACH's role in the overall nutrition environment.</p> <p>R5: To inform the new theory of change, REACH should commission a study of the architecture of technical assistance for scaling up nutrition. The study should include facilitation and identify priority areas for REACH, taking into account the work of other technical-support partners. The study should be used to inform REACH's medium-term plan of action and its strategies for engagement in the coming five years (see recommendations 1-4).</p>
EQ2: How has REACH performed at Country Level?			
Effectiveness:			
2.2 2a	<p>Outcome 1 – Increased awareness of the problem and of potential solutions:</p> <p>Country level evidence shows that – partly in association with SUN – REACH effectively contributed to increased awareness of nutrition problems and potential solutions, and helped to build national commitment. However, of the four outputs under this area, stakeholder and activity mapping (the most prominent) was considered over complex and difficult to update. Over the period</p>	<p>REACH showed variable levels of progress, reflecting different starting points and different levels of engagement and commitment at country level. In some countries the contexts evolved considerably and this has had an impact; in others the institutional politics are so complex that it is difficult for REACH to make progress towards its intended results.</p>	<p>R1 as above.</p> <p>R4 as above.</p>

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	<p>reviewed, REACH made significant but in most cases incomplete progress with joint communications and advocacy strategies. Investment cases for nutrition at country level were the area where least progress was made, with this output removed from the priorities in view of other initiatives (such as the Cost of Hunger Profiles). This implied missed opportunities to leverage resources for nutrition priorities as originally envisaged.</p> <p><i>Outcome 2 – Strengthening national nutrition policies and programmes</i></p> <p>As countries’ baselines differed, progress varied considerably. In most countries, REACH contributed to advancing national or subnational plans by drafting or contributing to processes that ensured this approval. In Ghana and Mozambique, engagement through REACH inspired a new intensity of nutrition planning at sub-national levels. However, plans in all eight countries remained unimplemented because funding was lacking. In two countries, institutional limitations precluded progress towards this outcome.</p> <p>Overall, this Outcome was about policy and planning rather than implementation. It was beyond the scope of this evaluation to assess the quality of the plans that would be developed, and in any event the best test of this would be the quality of subsequent implementation – which largely lies in the future.</p> <p><i>Outcome 3 – Increased capacity at all levels</i></p> <p>Outcome 3 was one of the more challenging areas of REACH’s work.</p> <p>Overall, the scope for progress depended on national</p>	<p>Across the eight case study countries, most of REACH’s progress was made towards outcomes 1 and 2. Lack of progress on outcomes 3 and 4 is related in part to the limited timeframes of REACH and the sequential nature of the outcomes</p> <p>REACH did a lot of SUN’s work on the ground. The REACH contribution to SUN in country was a positive achievement. In other ways however, this role has created tensions and additional work for REACH facilitators.</p> <p>An area of added value of REACH has been that in most countries it is seen as neutral and at the service of the overall nutrition response, not just the UN agencies.</p> <p>REACH inputs have been important in rolling out SUN activities at country level. A key strength of REACH was putting staff on the ground, providing facilitating and analytical inputs, and doing this in the right place at the right time. The quality and engagement of the REACH facilitators, and the fact that they were on the ground, has also been a key characteristic of REACH that has contributed to the progress that was made.</p>	

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	<p>institutional contexts. The complexities of capacity development processes, particularly when they extended from national to local government levels meant that, in three years, there were limits to what REACH could achieve. Along with other partners, REACH contributed to significant enhancements in institutional capacity, although progress is best described as incremental. And the complexities mean that, after three years, the sustainability of those enhancements cannot be guaranteed.</p> <p>REACH's approach to capacity enhancement is not without dispute. There was no clear agreement among global stakeholders regarding whether REACH should focus purely on mobilizing partners to provide technical inputs or play a direct role in addressing capacity gaps. REACH's role with respect to supporting UN coordination was also contested by some global and country-level informants, and in particular the extent to which this should be paid for by donors.</p> <p><i>Outcome 4: Increasing efficiency and accountability</i></p> <p>Outcome 4 has seen limited progress and has also been an area where results have been more difficult to achieve. As in other outcome areas, progress was dependent on country context. Work has been done in developing multi-sector monitoring systems, and in some countries partial nationally led systems are now in place. Whilst Nepal has made notable progress in developing its MSNP M&E system, it is not yet fully functional. REACH's achievements in breaking down barriers among UN agencies were also limited. Good technical relationships were built, but there was little joint programming other than</p>		

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	<p>that occurring through One UN). Country-level stakeholders had differing opinions as to whether REACH should or could have a coordinating function among UN agencies. Progress in this area was strongly affected by the willingness of the UN agencies at country level to collaborate.</p> <p>REACH's limited performance in this area highlights the flawed assumption in the that relatively short-term facilitators at the country level could influence long-standing institutional incentives and political economy factors. This was unrealistic. The levels of progress towards this outcome were uneven and depended on the local institutional factors and personalities of country heads of UN agencies.</p>		
Equity:			
Section 2.2 2b	REACH's tools and analytical work highlighted equity and gender issues. However, across all countries and stakeholder groups, REACH was not strongly associated with having specifically advocated for equity and gender or with having progressed on the agenda in this area.	<p>Equity and gender received attention in REACH's design stage, but have been less prominent in implementation.</p> <p>In all countries gender and equity issues were reflected in the CIPs. REACH tools highlighted gender and equity issues through the analyses that were done. However, CIPs and annual work plans generally included little focus or detail on specific activities, or indicators to monitor progress on gender and equity.</p>	R8 as above.
Efficiency:			
Section 2.2 2c	REACH 'model' was generally perceived as expensive by global-level interviewees. The inverse view prevailed in REACH countries. In both cases there was no specific cost analysis to back up these perceptions. Given REACH's supportive role vis-à-vis SUN, comparisons with the latter (which were	At country level REACH was seen as having been good value for money. REACH budgets were underspent and were stretched further than initially anticipated to cover contract extensions for facilitators and significant time investment by REACH facilitators in	R1 as above. R5 as above.

Report section	Key findings	Conclusions	Recommendations
	<p>part of the TOR) are not considered relevant.</p> <p>The findings from the country level highlight the predominant view that REACH inputs need to have sufficient ‘weight’, consistency, and continuity. This would challenge the current idea of having a ‘REACH light’ approach in countries as is now being envisioned for the next phase of REACH and its expansion to support all 55 SUN countries.</p>	<p>SUN work. However, outcomes were affected by the short time frames. The evaluation concludes that REACH did well but it needed a longer time frame to allow for results to be achieved and sustainability to be envisioned.</p> <p>As a supposedly country-led movement, SUN benefitted – opportunistically – from REACH facilities and facilitation in these few countries. However, this was not the way that SUN, or REACH, was meant to operate. There was also little attention or discussion as to what would happen to SUN when the REACH boots walked away from the selected countries</p>	
<p><i>EQ3: What contributory/explanatory factors have affected REACH’s performance and results?</i></p>			
<p><i>Sub question 3.1: How have REACH performance and results been affected by the operational and policy environments, capacity and resources, skills and knowledge in participating countries?</i></p>			
2.3	<p>The strongest external influencing factors for country progress on nutrition are without doubt the starting point of the country and the degree of high-level political commitment by the Government. Government staff turnover also played a role, as did the time taken to build institutional capacity. Being based in a Government institution was a facilitating factor. The personality and experience of the facilitators appointed and the grade they were given in the UN (P4) influenced their impact.</p>	<p>REACH showed variable levels of progress, reflecting different starting points and different levels of engagement and commitment at country level. In some countries the contexts evolved considerably and this has had an impact; in others the institutional politics are so complex that it is difficult for REACH to make progress towards its intended results.</p>	<p>R1 as above.</p>

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<i>Sub question 3.2: How have REACH performance and results been affected by its own governance and management including the Steering Committee, the Secretariat, Country Committees and Technical Group?</i>			
2.3	REACH Secretariat support to countries was considered to have improved over the period (2011-2015). However, informants indicated that further improvement could be made through better alignment of field-headquarter priorities, staffing to meet the needs of the countries, and increasing UN regional office links. In addition, need for a more strategic/cross-sectoral REACH Steering Committee, stronger support to the facilitators during start-up so they are aware of the REACH model and processes, and clarity in introducing them into country processes were also noted.	REACH's flexibility and local decision-making structures have allowed it to make progress in spite of challenges related to the ToC, tight time-frames and contextual issues The progress of REACH was significantly influenced by the performance of the Secretariat in Rome. Although the challenges of launching REACH should not be underestimated and the creativity of those involved in identifying the REACH approach was admirable, the process was slow and in some respects disjointed and confused. The fact that a reasonably standardised programme of effort across eight or more countries later developed was due to the system and order that were gradually introduced by the Secretariat.	R6: Participating United Nations agencies should sign a new Memorandum of Understanding with stronger provisions that include strategic decision-making and accountability mechanisms at the most senior level of United Nations agencies; commitment to contributing funding to country-level REACH activities; and commitment to better coordinating their planning, resourcing, implementation and advocacy efforts in the nutrition sector at the country level.
<i>Sub question 3.3: To what extent have REACH's partnerships affected its performance and results? Have global and country level partners demonstrated the necessary commitment, agreement and actions to support REACH to achieve its objectives? Quality of partnership management by REACH compared to other global and national nutrition initiatives? Have coherence, alignment, and complementarity been achieved between REACH and other global and country-level nutrition initiatives (including the SUN initiative and development partners at country level?)</i>			
2.3	REACH has been focused on country-level action. Within the UN engagement is a function of the willingness of the agencies to collaborate. While REACH has a large network of partners with which it interacts on a regular basis it continues to be little understood and known at global level. The limited approach to partnership and the choice to keep REACH low profile has reduced REACH's overall	REACH had to struggle a lot within the UN to be given a space, and on the global nutrition landscape to be understood and accepted. There are still varying levels of ownership of REACH between countries and among different UN agencies. REACH adapted itself to the evolving context, taking	R3. As part of its key strategies for engagement, REACH should encourage the United Nations Network for SUN – which REACH now coordinates – to align its focus with REACH's core function of facilitation and coordination. The network – and REACH'S support to it – would thus

Report section	Key findings	Conclusions	Recommendations
	<p>sphere of influence.</p> <p>At country level, partnerships varied, often being dependent upon those in post (particularly in the case of the UN agencies) and the skill and diplomacy of the facilitators. Lack of buy-in by partners to the CIP in some cases put REACH on a wrong footing from the start.</p>	<p>on a different role from what was initially envisioned.</p> <p>REACH’s design meant that its achievements, and its failures, were ultimately a function of the level of commitment and engagement of its partner agencies and of collaborating governments. In practice government and UN commitment were not always strong and clear enough for things to move forward.</p>	<p>have a central mission in mobilizing the technical strength of the United Nations for facilitating scaled-up and effective country-level nutrition responses.</p> <p>R6 as above.</p>
<p><i>Sub question 3.4: To what extent has REACH at country level demonstrated the necessary commitment, agreement and actions to achieve its objectives? How catalytic has REACH been in the process of harmonisation and alignment?</i></p>			
2.3	<p>REACH tools and the hard and consistent work of facilitators have played an important role in the support that has been provided to countries.</p> <p>The CIPs have played a limited role in ensuring REACH was aligned and complementary due to lack of national ownership and loss of credibility because of the time lag between its design and REACH rolling out in country.</p> <p>REACH has played a particular role with respect to the SUN movement, and has been a key facilitator at operational level for the SUN work, playing a significant role in the successes of SUN in all countries. However, this role was not formalised at either country or global level.</p> <p>REACH has had a limited catalytic effect in the nutrition landscape in some of the country contexts.</p>	<p>REACH inputs have been important in rolling out activities at country level. A key strength of REACH was putting staff on the ground, providing facilitating and analytical inputs, and doing this in the right place at the right time.</p> <p>The quality and engagement of the REACH facilitators, and the fact that they were on the ground, has also been a key characteristic of REACH that has contributed to the progress that was made.</p>	<p>R1 as above.</p>
<p><i>Q4: To what extent are the outcomes of REACH likely to be sustainable?</i></p>			
<p><i>Sub question 4.1: Are the results achieved and the REACH operational models sustainable?</i></p>			
2.4	<p>There were strong consensual views from the eight case studies that the 2–3 year catalytic phase of</p>	<p>The overall time frame for REACH was much too short, and CIPs – the basis for</p>	<p>R1 as above.</p>

Report section	Key findings	Conclusions	Recommendations
	<p>REACH was not enough and that more time is needed to consolidate emerging gains.</p> <p>Government ownership has been built across countries but to varying degrees. In a few countries the capacity of the national nutrition coordination structure has been expanded (more staff, and staff at decentralized levels), contributing to stronger operational structures.</p> <p>Transition plans have been developed late in the REACH process. These sustainability strategies in some cases require resources to continue the facilitator position. Across the REACH countries, there was the view that effective multi-sector, multi-stakeholder coordination requires full-time staff (rather than a reduced staff load, or phasing out as envisaged by the REACH model) and that in the absence of this it is unlikely that achievements will be sustained. Commitment by nutrition actors at country level (Government, UN, other donors) for taking over the costs associated with continuing the position have, in spite of positive views on REACH's contribution, been few (with the exception of Mozambique and possibly Rwanda).</p> <p>Stakeholders expressed a strong concern that SUN is likely to be affected by the transitioning of REACH to new modalities, in particular if the facilitator position(s) were to be discontinued, given the key supportive role that REACH has played vis-à-vis many of the SUN focal points and the SUN processes.</p>	<p>engagement at country level - were in many cases too broad and over-ambitious. The REACH model underestimated the scale and complexity of nutrition governance challenges in the country – as well as those of achieving genuine collaboration and sharing between UN agencies' nutrition programmes.</p> <p>The lack of attention to transition and sustainability planning by REACH until the last phase is a gap. This is likely related to the aforementioned conclusion that the REACH model underestimated the scale and complexity of nutrition governance challenges in the country – as well as those of achieving genuine collaboration and sharing between UN agencies' nutrition programmes. The complexities of capacity development processes, particularly when they extend from national to local government levels, inevitably meant that, in three years, there were limits to what REACH could achieve. Furthermore, the complexities mean that, after three years, the sustainability of those enhancements cannot be guaranteed.</p> <p>In addition, REACH did a lot of the SUN work on the ground. In some ways, this has created opportunities. In other ways this created tensions. As a supposedly country-led movement, SUN could benefit – opportunistically – from REACH facilities and facilitation in these few countries. But it was not the way that SUN, or REACH, was meant to operate.</p>	<p>R2 as above.</p>

Report section	Key findings	Conclusions	Recommendations
		The conclusion that this evaluation draws is that REACH did well but that it needed a longer time frame and a clearer exit in order not to undercut (by substitution) needed improvement in country capacity.	
Sub question 4.2: To what extent is REACH contributing to increased national ownership?			
2.4	Government ownership has been built in some countries, but needs further work in others. Stakeholders expressed a strong concern that SUN is likely to be affected by the transitioning of REACH to new modalities, in particular if the facilitator position were to be discontinued (see conclusions section).	REACH showed variable levels of progress, reflecting different starting points and different levels of engagement and commitment at country level.	R7. The REACH partnership should proactively explore and develop funding options and sources for its second phase. Recognizing its recently augmented role regarding the United Nations Network for SUN, it should particularly encourage appropriate financial allocations from member agencies (see recommendation 6), donors and host countries. Funding from host governments should be encouraged as a means of ensuring sustainability in countries where multi-year engagement is foreseen.
Sub question 4.3 Based on the evaluation findings, what recommendations can be offered in terms of the future of REACH?			
3.2	See column 3 in this table		

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