

How to

Mainstreaming nutrition into COSOPs and investment projects

Nutrition



This **How To Do Note** has been prepared by the IFAD's **Environment, Climate and Gender and Social Inclusion (ECG) Division** and aims to provide practical suggestions and guidelines to country programme managers, project design teams and implementing partners to help them design and implement programmes and projects.

It presents technical and practical aspects of specific approaches, methodologies, models or project components that have been tested and can be recommended for implementation and scaling up, including best practices and case studies that work and can be used as models in a particular field.

How To Do Notes may also illustrate "Tools" for good practice design based on best practices collected at field level and may guide teams on how to implement specific recommendations of IFAD's Operational Policies, standard project requirements or financing tools.

The **How To Do Notes** are "living" documents and will be updated periodically based on new experiences and feedback. Please provide your comments and suggestions:

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Acronyms

AIDS	Acquired Immune Deficiency Syndrome
AWP/B	Annual Work Plan and Budget
BCC	Behavioral Change Communication
CD	Country Director
CDT	COSOP Delivery team
COSOP	Country Strategic Opportunity programme
CSNs	Country Strategy Note
ECG	Environment Climate, Gender and Social Inclusion
FAO	Food and Agriculture Organization of the United Nations
HIV	Human Immunodeficiency Virus (HIV)
HTDN	How-To-Do-Note
IFAD	International Fund for Agricultural Development
KAP	Knowledge, Attitudes and Practices
Lao PDR	Lao People's Democratic Republic
MDD-W	Minimum Dietary Diversity for Women
M&E	Monitoring and Evaluation
MTR	Mid-Term Review
NGOs	Non Governmental Organizations
ORMS	Operational Results Management System
PDT	Project Delivery Team
PIM	Project Implementation Manual
PMU	Project Management Units
SECAP	Social, Environmental and Climate Assessment Procedures
SDGs	Sustainable Development Goals

SIS	Supervision and Implementation
SUN	Scaling Up Nutrition
TOC	Theory of Change
ToRs	Terms of Reference
UNSDCF	United Nations Sustainable Development Cooperation Framework
UNICEF	United Nations International Children's Emergency Fund
WASH	Water, Sanitation and Hygiene
WFP	World Food Programme

I. Introduction

This How-to-do Note (HTDN) is a practical step by step operational guidance on mainstreaming nutrition in the International Fund for Agricultural Development (IFAD)-supported country strategies and investment projects for use by IFAD staff, consultants and partners. It offers a set of resources, tools and methods and includes references to key sources of data. It is complemented by other resources such as: (i) Integrated homestead food production toolkit (iii) Nutrition-sensitive Value Chain Guide (iv) Framework and HTDNs on investing on neglected and underutilized species.

Key concepts

What is malnutrition?

Malnutrition is caused by inadequate, excessive or imbalanced intakes of carbohydrates, protein or fats (macronutrients), vitamins and minerals (micronutrients). The three forms of malnutrition are: (i) undernutrition, inadequate levels of food intake and repeated infectious diseases; (ii) micronutrient deficiencies, especially those of public health importance such as iron, iodine, zinc and vitamin A; and (iii) overweight and obesity, resulting from an excess of certain food components, such as fats and sugars, relative to levels of activity. Malnutrition is currently characterized as double or triple burden. The double burden of malnutrition refers to the coexistence of undernutrition along with overweight and obesity, or diet-related non-communicable diseases, within individuals, households and populations, and across the life course. Triple burden, on the other hand, occurs when the three forms co-exist within the same country, household or individual.

Undernutrition includes both acute and chronic malnutrition. **Acute malnutrition** or **wasting** is characterized by a rapid loss of fat and muscle weight loss. Wasting is classified as either moderate or severe based on body measurements. **Chronic malnutrition**, or **stunting**, is a form of child growth failure. Chronic malnutrition occurs over time, unlike acute malnutrition. A child who is stunted or chronically malnourished often appears to be normally proportioned, but is actually shorter than normal for his or her age. Stunting can start before birth and is caused by poor maternal nutrition, poor feeding practices, poor food quality as well as frequent infections which can slow down growth. This is why the first 1000 days between pregnancy and a child second birthday, also known as the window of opportunity is, are the most critical time for positive impact on a child's development to provide the right nutrition and care to mother and child.

Micronutrient deficiencies, also known as 'hidden hunger', is a consequence of inadequate intake, absorption or utilization of essential micronutrients. Often, specific clinical signs and symptoms may develop only when certain micronutrients are severely deficient owing to insufficient dietary intake, unsatisfactory absorption and/or suboptimal utilization of vitamins or minerals. Anemia, goiter, scurvy, beriberi and pellagra are classic examples of nutritional diseases. If these symptoms have not (yet) developed, micronutrient deficiency might not be detected (hidden hunger).

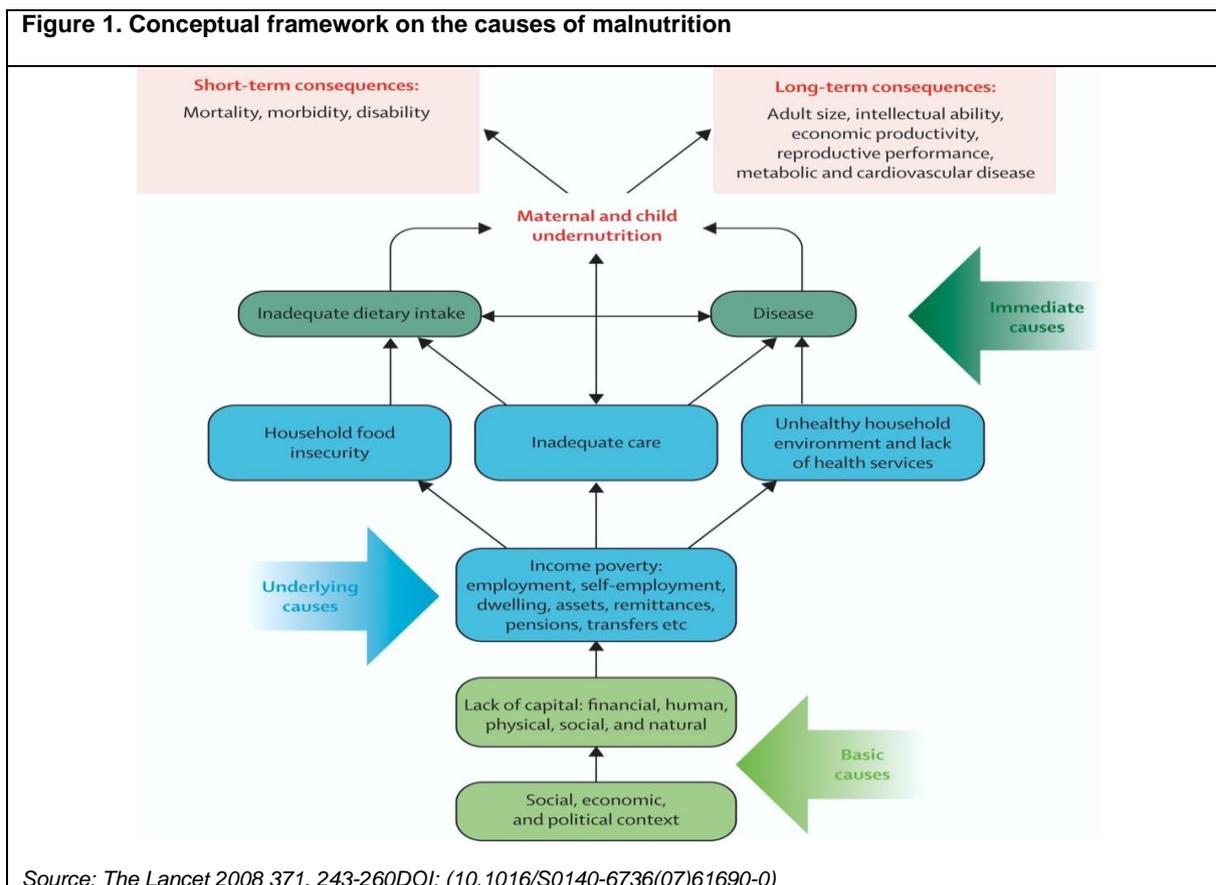
Overweight and **obesity** are defined as abnormal or excessive fat accumulation that may impair health¹. The prevalence of **overweight and obesity** continues to increase worldwide, including in low-income and middle-income countries. One of the drivers of rapidly increasing numbers of people being overweight and obese is the **nutrition transition**, a shift in dietary patterns, consumption and energy expenditure associated with economic development over time, often in the context of globalization and urbanization.

¹ Charts and tables: WHO child growth standards for children aged under 5 years; Charts and tables: WHO growth reference for children aged between 5–19 years

Complex carbohydrates, fibers and coarse grains are replaced by higher amounts of saturated fats, salt, simple sugars, and processed foods. The diet also tends to have greater variety, with more fruits and vegetables and more animal source food (meat, dairy, and fish). In the initial stages of the transition, physical activity levels go down, as economic development leads to more sedentary lifestyles, particularly in terms of labor. As a consequence, even as undernutrition declines, overweight and obesity rise, as do non-transmissible chronic diseases, such as diabetes and heart disease.

What are the causes of malnutrition?

The causes of undernutrition are categorized into three – immediate, underlying and basic. Figure 1 illustrates the *conceptual framework of malnutrition* and differentiates between the three categories of causes of malnutrition. The *immediate causes* affect the individual and are related to inadequate dietary and nutrient intake and diseases. The *underlying causes* influence the households and communities and include food insecurity, inadequate care for mother and child feeding practices and unhealthy environments. Finally, the basic causes are related to structures, processes and phenomena that operate at the society level and include sociocultural, economic and political context, financial resources, as well as education and environmental factors.



The fundamental cause of obesity and overweight is an energy imbalance between calories consumed and calories expended². Globally, there has been an increase in intake of energy-dense foods high in fat, and a decrease in physical activity due to a shift to a sedentary nature of many forms of work, changing modes of transportation and urbanization. These changes are often the result of environmental and societal changes associated with development and lack of supportive policies in sectors such as health, agriculture,

² WHO Obesity and Overweight factsheet

transport, urban planning, environment, food processing, distribution, marketing, and education. Overweight and obesity increase the risk of noncommunicable diseases.

Who is most vulnerable to malnutrition?

Vulnerability to malnutrition can have physiological, socio-cultural, or socio-economic dimensions or a combination of these. The people most **physiologically vulnerable** to undernutrition include pregnant and lactating women, children less than five years old, adolescent girls, the elderly, people living with human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS). **Social-cultural** vulnerabilities mainly affect socially marginalized groups and individuals such as women and girls. For example, *adolescent girls*, are particularly vulnerable to under-nutrition due to early pregnancy, which leads to increased nutrient requirements to support the rapid growth of the foetus. In cultures where early marriages are promoted, teenage mothers are at greater risk of giving birth to low birth weight and under-nourished babies, contributing to the intergenerational cycle of malnutrition. The most **socio-economic vulnerable groups** tend to be individuals and households with the lowest incomes, who are most economically and socially marginalized. These include people living with disabilities and refugees. It is important to consider all kinds of vulnerabilities and the interactions among them. As opposed to undernutrition, all individuals are vulnerable to overweight and obesity.

In **indigenous peoples'** communities, the nutrition transition characterized by a rapid dietary change, loss of traditional food systems, often due to loss of access and control over their land, territories and resources and dependency on industrial food is frequently associated with rising prevalence of chronic diseases. Projects should support and strengthen indigenous peoples' food systems, building on local food-based strategies that value indigenous peoples' traditional foods and agricultural systems (eg. shifting cultivation, milpa—a form of subsistence agriculture that involves cultivating the land for two years and then leaving it fallow for eight years). Other measures include incorporating local and traditional practices e.g. the use of indigenous seeds and breeds, non forest-timber products and medicinal herbs, neglected and underutilized species, and valuing their biodiversity.

Nutrition specific and Nutrition Sensitive interventions

Nutrition-specific interventions address the immediate causes of malnutrition, such as inadequate food and nutrient intake, feeding, care-giving and parenting practices, and low burden of infectious diseases. Examples of nutrition-specific interventions include treatment of severe acute malnutrition, disease management, maternal and child micronutrient supplementation, support for exclusive breastfeeding and fortification of foods.

Nutrition-sensitive interventions target the underlying determinants of malnutrition, such as household food insecurity, poor maternal and child care, and unhealthy environment. Nutrition-sensitive interventions aim to make nutritious foods more accessible and available to everyone at all times promote access to clean water, hygiene and sanitation, access to education and employment, access to healthcare especially maternal and child health, social safety nets among others. Nutrition-sensitive interventions are the responsibility of multiple sectors – agriculture, education, social welfare, trade, water among others.

What is nutrition-sensitive agriculture?

Nutrition-sensitive agriculture³ is an approach that seeks to maximize agriculture's contribution to nutrition. This includes the multiple benefits derived from enjoying a variety of foods, recognizing the nutritional value of food for good nutrition, health and productivity, the social significance of the food and the role of agriculture sector in supporting rural livelihoods. Nutrition-sensitive agriculture also entails targeting poor households, promoting gender equality and providing nutrition education so that household resources are used to improve the nutrition of its members, especially that of women and young children. Finally, it

³ Agriculture broadly refers to production of crops, fisheries, forests, livestock etc

involves linking agriculture to sectors that address other causes of malnutrition, e.g. education, health and social protection.

How can agriculture and rural development contribute to improved nutrition? The recognition that addressing nutrition requires taking action at all stages of the food chain - from production, processing, retail to consumption – has led to a broader focus which encompasses the entire food system. A **food system** comprises all activities and elements – including environment, people, inputs, processes, infrastructure and institutions – that relate to the production, processing, distribution, preparation and consumption of food, and the outputs of those activities, including any socio-economic and environmental aspects. Food environments play an important role in shaping diets as they provide choices of food available for consumption. A healthy food environment is one that creates the conditions that enable and encourage people to elect and access healthy diets⁴.

Investments in agriculture and rural development have an important role in fighting hunger and malnutrition by ensuring that nutritious, safe and diverse foods are made available and affordable for all people at all times, either from the market or from farmers' own production. Growing nutrient-rich crops (including fruits and vegetables), fisheries (small-scale or commercialized) or rearing animals (for meat, eggs and dairy products) can increase and diversify food consumption and income sources. Income generated from agriculture and related rural enterprises can contribute significantly to household investments in improved diets, health, education, water, sanitation and hygiene especially when combined with nutrition education. Labor-saving technologies in agriculture can help reduce women's workload and increase time available for selfcare, childcare and self development. In addition, safe food and agricultural practices improve public health and food utilisation, thereby improving nutrition.

Nutrition education and behavior change communication is an essential component of nutrition-sensitive agriculture and rural development. It helps promote consumption of nutritious foods (reduce consumption of unhealthy options, such as ultraprocessed foods and junk food), introduction of cooking practices/food preparation that maintain the nutrient content of foods and reduce social and cultural practices with negative impacts on vulnerable individuals (e.g. early pregnancies). Investing in an enabling political and institutional environment helps promote a multi-sectoral approach and sustainability. Specific actions would include establishing policies and programmes to support nutrition, strengthening multi-sectoral coordination, partnerships, learning and accountability mechanisms.

II. IFAD's approach to mainstreaming nutrition

Recognizing the central role of nutrition in enabling sustainable and inclusive rural transformation, IFAD's Strategic Framework (2016-2025) envisions nutrition as fundamental for increasing poor rural people's productive capacities (Strategic Objective 1) and rural household's resilience. As reflected in the Nutrition Action Plan 2019-2025, IFAD's commitment to nutrition is that 100 percent of Country Strategic Opportunity Programmes (COSOPs) and 50 percent of new investment projects be nutrition-sensitive in IFAD11 (2019-2021). To accelerate the mainstreaming of nutrition into operations and to deliver on the commitments of the Nutrition Action Plan 2019-2025, IFAD adopts the following principles of engagement:

- **Apply a nutrition lens to investments.** Rather than investing in stand-alone nutrition actions, IFAD applies a nutrition lens to design and implementation of investments in agriculture, food systems and rural development, so as to optimize their contribution to improving nutrition. Special attention is given to those countries that have made reducing malnutrition a political and investment priority and to countries where malnutrition is at a significant level. Box 1 shows the criteria to prioritize investments on nutrition in countries.

⁴ Food environments comprise the foods available to people in their surroundings as they go about their everyday lives and the nutritional quality, safety, price, convenience, labelling and promotion of these foods. Influencing Food Environment for Health Diet, FAO, 2016

Box 1. Criteria to prioritize investment in on nutrition in countries

The following criteria* should be applied to identify priority countries whose interventions would focus on nutrition:

- **Under-five stunting** (Low: < 10%, Medium: 10- <20%, High: 20-<30%, Very high: >= 30%)
- **Under-five overweight** (Low: < 5%, Medium: 5- <10%, High: 10-<15%, Very high: >= 15%)

* Source: UNICEF/WHO: *New Prevalence thresholds for wasting, overweight and stunting, 2018/ WHO / World Bank Group Joint Child Malnutrition Estimates 2018*

Adult Body Mass Index (Low:5 - 9%-monitoring required, Medium:10 - 19%-poor situation, High:20 - 39%-serious situation, Very high:>= 40%-critical situation)

WHO has not yet defined the threshold for adult overweight and obesity. Until the threshold is available, it is suggested that the same principle as in children is used, i.e. use similar cut-off points as underweight but for the proportion that are over 2 standard-deviation of the population.

* Source: https://www.who.int/nutrition/nlis_interpretation_guide.pdf

- **Ensure coherence and increase effectiveness through integration of nutrition with other mainstreaming priorities**, namely: environment and climate; gender; and youth⁵ through an integrated approach that optimizes synergies and complementarities where possible, to improve nutrition, increase resilience and mitigate risks. Box 2 provides interlinkages of nutrition with other IFAD mainstreaming priorities.
- **Adopt a multi-sectoral approach and engage with other actors.** Addressing the problem of malnutrition requires a multi-sectoral approach and the involvement of various stakeholders.
- **Adopt a life cycle approach.** IFAD aims to improve the nutrition of all household members, primarily through improvements in dietary quality. However, to make sure that no one is left behind, attention is given to the most nutritionally vulnerable groups in the household – children, adolescent girls, women of reproductive age, and in particular pregnant and lactating women – thus tailoring interventions to address their specific nutrition needs.

Box 2. Interlinkages of nutrition with other IFAD mainstreaming priorities

Women's empowerment and gender equity. Women's education, empowerment and control over resources are crucial factors to improve nutrition outcomes not only for women themselves, but for their families and communities at large. Understanding how gender roles affect time and labor division, access and control over resources and decision-making at the household level, and how these factors influence the nutrition situation of women and their children, is key for improved nutrition.

Youth. Female and male youth are recognized as agents of change, with a critical role to play in transforming food systems, rural livelihoods and in changing behaviors harmful to nutrition. Adolescent girls are a nutritionally vulnerable group, especially given the magnitude of early pregnancies. Nutrition-sensitive projects should look for opportunities of creating employment for young people in rural areas, invest in education and social behavior change communication to help delay early marriages and pregnancy.

Environment and climate change. Climate-resilient agriculture and food systems can greatly contribute to improved nutrition and environmental sustainability. For example, by opting for nutritious as well as resilient commodities (crops, fish and livestock), or promoting production systems that are diversified, environmentally friendly, sustainable, leading to more diversified food choices.

⁵ Social inclusion of most vulnerable IFAD target groups including indigenous peoples, mobile people, adolescent girls, and people with disabilities

Lessons learned

Nutrition-sensitive projects have steadily increased across IFAD's portfolio since 2010. According to a review of PDRs (2010-2018), most nutrition-sensitive projects invested in: i) improvement of local food systems (mainly through increasing and diversifying food production); ii) nutrition education and behavior change communication; and iii) empowerment of women in ways that improve nutrition for themselves and their families. There is therefore scope for increasing nutrition investments through (i) investing in a wider range of nutrient-rich foods including neglected and underutilized species; (ii) integrating nutrition considerations into stages of the food value chain beyond production; (iii) further exploring the linkages between environment, climate and nutrition; (iv) increasing investments in water, sanitation and hygiene; and (v) strengthening nutrition-related policy dialogue and coordination with sectors outside agriculture.

Projects are experiencing challenges of implementing and tracking nutrition-related activities. This could potentially be related to the insufficient fund allocations to nutrition actions as well as to inadequate monitoring of outputs and outcomes during design. Analysis of the PDRs (2010-2018) indicate that the costing for nutrition activities is neither comprehensive nor systematic. Another challenge is the tracking and reporting on core nutrition indicator in the IFAD Operational Results Management System (ORMS). Section 4, step 5 and Annex 9 provide guidance on costing of nutrition-sensitive activities as well as monitoring outcomes.

Participation of nutrition specialists in designing missions has emerged as a key factor towards increasing investments in nutrition and ensuring that all quality-related concerns are taken on board at design.

III. Integrating nutrition into results-based Country Strategic Opportunity Programmes and Country Strategic Notes

Results-based COSOPs and Country Strategy Notes (CSNs) are strategic documents that define IFAD's rural development agenda in countries with which IFAD maintains active engagement⁶. COSOPs cover between three and six years, with a possible extension of a maximum of three years, in countries where no change in priorities or strategy is foreseen. CSNs are applicable for a maximum of two years for countries in vulnerable situations, such as conflicts and during election periods. Regardless of the type, nutrition should be mainstreamed in all country strategies. In the case of CSNs, the main nutritional problems in the context of rural poverty should be identified.

How to design a nutrition-sensitive COSOP: a step-by-step guidance

A nutrition-sensitive COSOP explicitly states the connection between the country programme's strategic objectives and improving diet diversity and healthy life style, explaining how IFAD will align with the government's priorities to tackle the nutrition problems affecting the targeted rural population through its investment strategy. Table 1 provides the essential requirements for a nutrition-sensitive COSOP.

Table 1. Essential requirements for nutrition-sensitive country strategies

Type of operation	Essential requirements
Nutrition-sensitive COSOP	<ul style="list-style-type: none"> ✓ A nutrition situation analysis in the country is undertaken. ✓ The country programme explicitly describes the way to reach the desired nutrition outcomes through its investment strategy and further strengthens national government efforts in achieving nutritional outcomes for the vulnerable groups

⁶ Revised Guidelines and Procedures for Results-based Country Strategic Opportunities Programmes; EB 2018/125/R.24, November 2018

The main steps to designing a nutrition-sensitive COSOP are as follows:

1. Analyze the nutrition situation in the country;
2. Identify appropriate strategies to address the nutrition problem;
3. Define the COSOP Theory of Change (TOC), embedding nutrition outcomes, outputs, activities and indicators;

Who will be responsible? The overall responsibility of developing the COSOP is the COSOP Delivery team (CDT), which is composed of the Country Director (CD), Regional economist and an Environment Climate, Gender and Social Inclusion (ECG) division staff member. The ECG CDT member is responsible for all mainstreaming priorities (including nutrition) and works in close coordination with the thematic experts.

The three steps needed in developing a COSOP are similar to those needed in project design. The latter are described in more detail in section IV.

Step 1. Analyse the nutrition situation at the country

The nutrition analysis for COSOP development mainly relies on secondary data. The situation analysis seeks to provide an overview of the national nutrition situation and does not go into depth at the subnational level as is the case during project design. At IFAD, the nutrition situation analysis informs the Social, Environmental and Climate Assessment Procedures (SECAP) background study covering IFAD mainstreaming priority areas, the targeting strategy and the full COSOP design process⁷. As opposed to project design, a mission is not always needed. In cases where a design mission is needed, it can be supported by an IFAD staff/consultant working in close collaboration with the ECG nutrition experts. A sample of Terms of Reference (ToRs) for a nutrition and social inclusion specialist to support design missions (for both COSOPs and projects) is enclosed in Annex 2. Ideally, background studies should be conducted before the COSOP design mission.

Step 2. Identify appropriate strategies to address the nutrition problem

The second step consists in identifying strategies addressing the nutrition problem. Considering that many low-and middle-income countries suffer from the double or triple burden of malnutrition, interventions to optimize nutrition improvements will depend on the prevalence rates, target groups and prevailing opportunities. It is therefore important to define target groups prioritized and how they will benefit from the nutrition interventions. Remember to apply the 'nutrition lens' while addressing other crosscutting issues (gender, youth, environment and climate change as documented in the SECAP note.) For example, how might changes in climate impact nutrition? How might gender patterns influence nutrition? Also note that in some countries the food and nutrition security of the population is subject to a series of vulnerabilities, such as country's dependence on food imports or food price volatility, social instability, or effects related to climate change.

Step 3. Define the COSOP Theory of Change, embedding the nutrition outcomes, outputs, activities and indicators;

The third step is to define the country's strategy TOC, specifically, how the COSOP's strategic objectives will address the nutrition problems identified. COSOP's strategic objectives are determined by the intersection of the country's development goals and IFAD's comparative advantage in its member countries, the United Nations Sustainable Development Cooperation Framework⁸ (UNSDCF) and other agencies country strategies. In this context, the strategic objective should ensure that IFAD's country operations produce a positive impact on improved nutrition in line with the national priorities to achieve the

⁷ Revised Guidelines and Procedures for Results-based Country Strategic Opportunities Programmes, EB 2018/125/R.24, Nov. 2018.

⁸ Former United Nations Development Assistance Framework (UNDAF)

Sustainable Development Goals (SDGs). Explore strategies for IFAD lending and non-lending activities relevant to achieving the stated nutrition objective in the COSOP's investment areas. The analytical process is the same as the one for project design.

Table 2 presents examples on how COSOPs' strategic objectives can be formulated to address countries' nutrition problems in the results management frameworks. Table 2 presents examples of how to relate COSOP's strategic objectives to nutrition and identification of entry points for mainstreaming nutrition. For country examples on how to mainstream nutrition in COSOPs, see the Annex 4.

Table 2. Relate COSOP's strategic objectives to nutrition and identify entry points

Country	Main nutrition problem	Strategic Objectives	Entry points for nutrition
Benin	Nationally, about one third of households are considered food-insecure. Despite recent improvements, the prevalence of stunting among children under-five years remains high (34 %) with levels in rural areas significantly higher than in cities. Chronic malnutrition in rural areas is related to high poverty rates (43 %) limited access to safe drinking water, low diversification of agricultural production and low productivity and exposure to climate-related hazards.	Productive capacity, resilience to climate change, and food and nutrition security of vulnerable rural populations are sustainably improved.	The overall goal of the country strategy is to contribute to reducing rural poverty and to improve the food and nutrition security of vulnerable households. The COSOP therefore proposes to: (i) diversify agricultural production, by promoting the production of crops that are rich in nutrients; (ii) provide nutrition education and access to information on nutrition, (iii) support food processing for improved nutritional quality in the value chain; and (iv) support training of agricultural advisory services staff in nutrition-related issues.
Pakistan	Despite reductions in poverty, 60% of the country's population faces food insecurity and nearly 50% of rural children under-five years of age suffer from chronic malnutrition. This is linked to lack of education of the mother, poor child feeding practices, health and sanitation as well as inadequate food intake. Even families with sufficient food supplies are found to be suffering from different degrees of malnutrition and nutrient deficiencies.	Building resilience for sustainable nutrition and food security through partnerships in support of the Government's National Zero Hunger Action Plan.	To build resilience for sustainable nutrition security, efforts will ensure that all supported community development projects are nutrition-sensitive. This will be achieved through interventions such as: (i) integrating effective nutrition education in all projects, including children's food requirements along with improved health and sanitation practices; (ii) improving the quality of food processing, storage and preservation; (iii) women's management of community food banks; (iv) expanding markets for nutrient-rich products and market access for vulnerable groups. To address the poorest households, essential nutritional support, safety-net programmes aimed at women and children are also envisaged.

Sources: Republic of Benin, COSOP, 2018- 2022; Islamic Republic of Pakistan, COSOP, 2016-2021

IV. Making IFAD investment projects nutrition-sensitive

IFAD's investment projects refer to IFAD-financed projects which are implemented by national staff with support and guidance from IFAD staff at headquarters and in the country, as applicable. IFAD supervizes and provides implementation support to 100 per cent of the projects it finances.

How to design a nutrition-sensitive project

For a project to be considered nutrition-sensitive, it has to meet a set of minimum criteria. See table 3 below.

Table 3. Essential requirements for nutrition-sensitive investment projects

Type of operation	Essential requirements
Nutrition-sensitive project	<ul style="list-style-type: none"> ✓ A nutrition situation analysis is included. ✓ Nutrition outcome(s) are clearly articulated and the pathway to reach the desired nutrition outcome(s) defined. Outcome and output level nutrition-relevant indicators are incorporated into the project logical framework ✓ Nutrition-oriented activities are included and financial resources allocated in distinct budget lines for their implementation. ✓ Implementing arrangements for the delivery of nutrition-sensitive activities are defined.

This section offers a step-by-step guidance⁹ on how to mainstream nutrition in the design of IFAD investment projects. The steps have been sequenced to guide the user through the main phases of a design process; however in reality, some of them might occur in parallel. For example, the costing of nutrition-sensitive activities may take place while defining the activities.

The **key steps are:**

1. Analyze the nutrition situation in the project area;
2. Identify appropriate strategies to address the nutrition problem;
3. Define the Projects Theory of Change, embedding the nutrition outcomes, outputs, activities and indicators;
4. Define implementation arrangements for the delivery of the nutrition-sensitive activities;
5. Cost the nutrition-sensitive activities;
6. Develop the Annual Work Plan and Budget (AWP/B).

Who will be responsible? The overall responsibility of mainstreaming nutrition in the IFAD-funded projects is with the Project Delivery Team (PDT), under the leadership of the CD and the Project technical Lead. The ECG PDT member is responsible for the mainstreaming priorities and works in close coordination with the thematic experts. The ECG PDT member is also responsible for preparing the Terms Of Reference (ToRs) on nutrition for the design mission (for a staff member or consultant). He/she also helps in identifying a consultant in close collaboration with the ECG nutrition experts. Annex I provides the ToRs on the nutrition situation analysis that should be adapted and incorporated in the overall mission ToRs.

⁹ Adapted from (i) De la Peña I., Garrett J. (2018) Nutrition-sensitive value chains, a guide for project design. Volume I & Volume II, IFAD, Rome; FAO (2015) Designing nutrition-sensitive agricultural investments; (ii) Checklist and guidance for programme formulation, FAO, Rome; (iii) WFP (2017) Unlocking WFP's potential, Guidance for nutrition-sensitive programming, WFP, Rome; (iv) World Bank (2012) Prioritizing Nutrition in Agriculture and Rural Development, Guiding Principles for Operational investments, WB, Washington Dc .

Step 1. Analyse the nutrition situation in the project area

What? The multi-sectoral nutrition situation analysis identifies the main nutrition problems facing the target group in the project area, the underlying causes, existing policies and programmes, stakeholders and coordination mechanisms. The nutrition situation analysis is a contribution to the project SECAP note, the targeting strategy, and the entire design process. Interpreting data is key to understanding which actions should be proposed to improve the nutrition situation in the country or specific project area. This is why it is important to include a nutrition expert in the design team who understands how agriculture and food systems relate to nutrition.

How? Prior to the design mission, to the extent possible, collect secondary data on nutrition covering the national context and project area¹⁰. Remember to consult the latest COSOP, recent IFAD designs and the UNSDCF as they might already provide relevant data on nutrition, stakeholders and geographical coverage of IFAD's programmes/projects. Liaise with the IFAD Country team and other stakeholders (in-country) to access additional literature not available in the public domain. In preparation for the design mission, make a plan of interviews with key informants¹¹ from the main stakeholder groups needed to fill knowledge gaps and triangulate findings from the desk analysis. Note that the nutrition situation analysis can only be finalized once the geographical coverage of the project has been confirmed. Annex 2 presents a summary of research questions, secondary data sources, relevant key informants to be consulted in a nutrition analysis.

Step 2. Identify appropriate strategies to address the nutrition problem

What? Review the nutrition situation within the social, political, economic, environment and climatic context as per the data in the SECAP. This includes identifying the most vulnerable, possible interventions, and outcomes that can be achieved through the project.

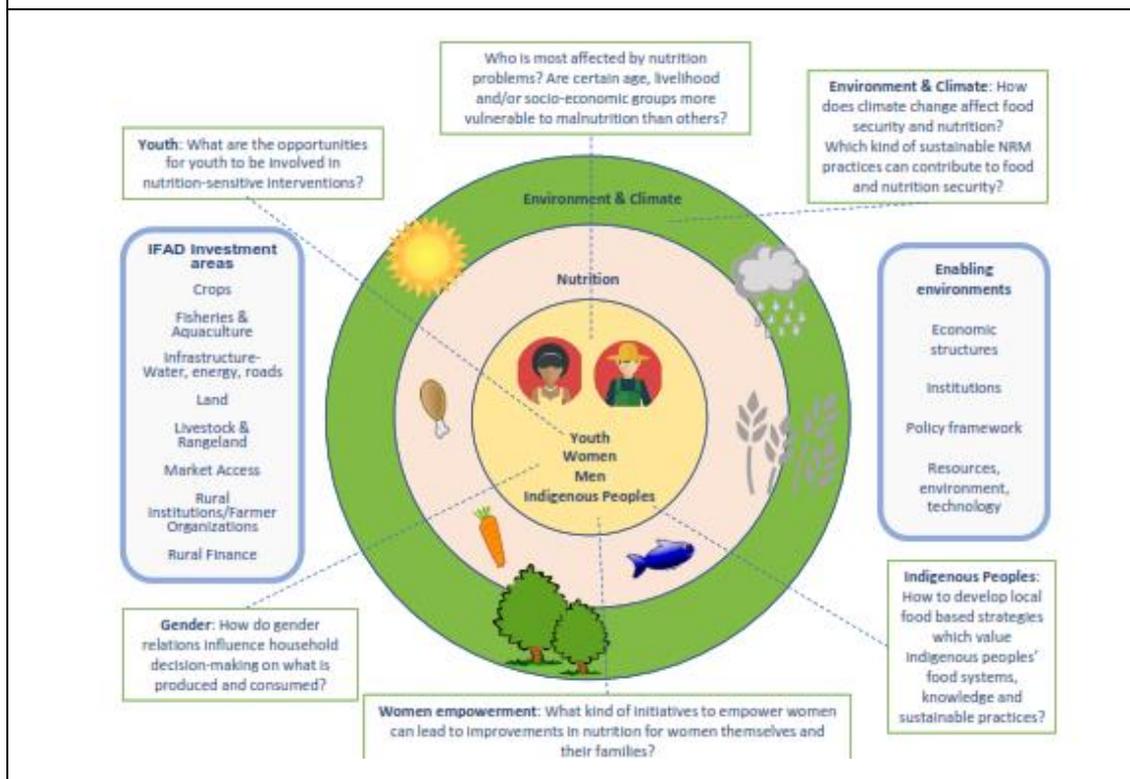
How? The following questions will help to define appropriate nutrition strategies

- a. Who are the nutrition vulnerable target group to nutrition? On what basis were they selected? How do they compare with the rest of projects target group? What strategies should be employed to ensure that these people benefit from the project? What is the nature of their vulnerability?
- b. Having considered the social, political, economic, environmental and climatic factors (from the SECAP), which are the best strategies to address the nutrition problem? What set of nutrition actions would be most feasible? How relevant are these interventions to the local context and the identified target groups? Which interventions would require complementarity with other IFAD priorities- gender, youth, social inclusion, indigenous peoples, environment and climate change E.g. gender equality, youth empowerment, resilience of local food systems? Figure 2 illustrates the interlinkages between nutrition and other mainstreaming priorities at IFAD to be considered in this stage.
- c. How do these strategies align with the government's priorities, the need for a multi-sectoral approach, collaboration with partners and IFAD's mandate? It is also important that the strategies defined fit within the broader context of the project. Annex 6 presents some of the IFAD's investment areas and examples of activities that may be considered to integrate nutrition into IFAD-funded operations.

¹⁰ National reports usually provide information by geographical areas, which will provide a better picture of the nutrition situation in the project areas. In many cases, local level data may be available – with INGOs which collect data at the local level, e.g. Concern, ACF, World Vision etc.

¹¹ Key informants may include international development agencies, government representatives from key sectors at national and sub-national level, local institutions and community members, universities, research centres, private sector among others.

Figure 2. Interlinkages between nutrition, social inclusion and IFAD's mainstreaming priority themes



- d. How can the project best contribute to improved nutrition of the identified vulnerable target groups? What outcomes are feasible based on analysis of a, b and c above. Through what impact pathways would the project achieve the proposed nutrition outcomes? This refers to the causal relation between the nutrition problems identified, the interventions proposed, the expected outputs and outcomes and the desired impact on nutrition. *For example, if the outcome is to improve the quality of diets of its target groups, would this be achieved by, improving households' production of nutritious food? And/or by increasing households' incomes to purchase nutrient rich foods? And/or by ensuring that nutritious foods are available in markets at affordable prices? Options will depend on the context, the nutrition problem and gaps identified the investment area of the project among other factors.*
- e. Which target groups would be primarily involved in the proposed interventions? *Remember that some interventions might be directed to the entire household (e.g. food production) while others might involve a specific target group (e.g. adolescent girls or youth) or a community (e.g. availability of nutritious foods in markets; food systems and food exchange in indigenous peoples' communities, etc.). See Box 3 for an example from Indonesia.*

Box 3. Targeting adolescent girls in nutrition-sensitive value chains interventions: The case of Indonesia.

The nutrition situation analysis of the Indonesia IFAD-funded Smallholder Livelihood Development Project, found that adolescent girls were particularly vulnerable to nutrition insecurity. Young girls were given the lowest priority at mealtime and were significantly worse off in terms of energy and protein intake, with very low levels of fruit and vegetable consumption. To address this challenge, the team identified female adolescents as the key target group for the nutrition-sensitive value chain project: instead of selecting key foods for the population in general, the team-selected foods that could address the dietary gap of female adolescents. Furthermore, additional measures in the project were taken to ensure their active participation in project's activities.

Adapted from: De la Peña I., Garrett J. (2018)

Step 3. Define the Project's Theory of Change, embedding the nutrition outcomes, outputs, activities and indicators

What? Defining the project TOC while ensuring that the project achieves nutrition outcomes identified at the design stage. The project TOC should embed the nutrition impact pathway identified in step 2 above. This step provides an opportunity to refine the proposed impact pathway, outcomes, outputs and interventions formulated based on the SECAP analysis. It is also an opportunity to identify relevant nutrition-sensitive indicators. A clear understanding of the pathway and the expected impact on nutrition will help identify potential opportunities of optimising nutrition benefits and minimising risks (e.g. sanitary risks, burden of women workload, etc.) that need to be addressed or mitigated. Annex 5 is an example of a project design in Guyana that has embedded nutrition considerations in its TOC and defined clear impact pathways for nutrition.

How? Contribute in defining the project TOC, making sure that the process considers improved nutrition as one of the key results. Define the project goal, strategies and components and ensure that the nutrition impact pathways are clearly embedded within the TOC. Note that nutrition may not necessarily be a standalone component but that it may be embedded in one or more components.

Define nutrition relevant indicators: Together with the PDT and Monitoring and Evaluation (M&E) specialists, ensure that the project's logical framework incorporates IFAD's core nutrition indicators at outcome and output level, to be reported in the ORMS. IFAD has adopted three nutrition-sensitive **Core Indicators**¹² one at output and two at outcome level that can be used as reference. See Box 4 and Annex 7 for a full description of the indicators. It is also important to set targets and benchmarks for each indicator to guide project implementers.

Typically, in an IFAD project, opportunities to improve nutrition may be found at various points: a) the production level, by increasing households' production of and access to nutrient-rich and nutritious foods; b) the processing level, promoting post-harvest practices aimed to preserve and enhance nutrient quality of the food produced, and increasing year round availability through safe processing and storage; c) commercial level, by improving safe and healthy transport and; d) the consumption level, by encouraging consumers to make healthier food choices through targeted nutrition education; e) women or youth empowerment in ways that improve nutrition (f) Promoting water sanitation and hygiene.

Box 4. Nutrition Core indicators

- i. **Minimum Dietary Diversity for Women (MDD-W):** *Percentage of women, 15-49 years of age, who consume at least 5 out of 10 food groups (MDD-W);* this indicator measures the Dietary Diversity of women to assess their diet quality. It is a proxy indicator to judge adequacy of micronutrients (e.g. vitamins, minerals) consumption by women. It is also a proxy to gauge the adequacy of nutrition intake of the household members.
- ii. **Percentage of the targeted people who have improved knowledge, attitudes and practices (KAP) of food, feeding, caring and hygiene.** When the project includes nutrition education, counselling, behavior change communication, mass media message transmission on nutrition knowledge, cooking demonstration etc. the outcome of such activity is measured through KAP surveys. See Annex 7 for interim guideline for reporting on corporate nutrition indicators
- iii. **Output indicator.** Number of households provided with support to improve their nutrition. *The reported data should be disaggregated by sex, head of household, age status and indigenous peoples.*

¹² Core Indicator (CIs) are mandatory when relevant and are to be integrated in logframes as from project design and, consequently, in project M&E systems. CIs to be used for a given project will be selected on the basis of the project's main area(s) of thematic focus and the specific interventions to be implemented. Source: IFAD (2017) Taking IFAD's Results and Impact Management System to the Next Level: <https://webapps.ifad.org/members/ec/96/docs/EC-2017-96-W-P-7.pdf>

Step 4. Define implementation arrangements for the delivery of the nutrition-sensitive activities

What? Implementation arrangements is a description of how the nutrition-sensitive activities will be delivered and how they will be sequenced within the project lifetime. The description should be clearly reflected in the Project Implementation Manual (PIM). Collaboration with partners should be foreseen in order to build synergies and to achieve a full multi-sectoral approach towards addressing the nutrition problem. Partnerships help to leverage finance, knowledge, capacity and scale up interventions. Box 5 summarizes inputs to be considered when developing a PIM.

Box 5. Nutrition in the Project Implementation Manual

Points to consider when describing implementation arrangements of nutrition-sensitive interventions:

- ✓ Dedicated human resources are included in the project's institutional arrangements (e.g. nutrition specialist or a nutrition focal point as part of the project management unit). Includes enclosing clear ToRs to guide the the selection of a nutrition expert and ensure that adequate financial resources are allocated for the position;
- ✓ Nutrition-sensitive activities are explicitly reported and budgeted in dedicated budget lines;
- ✓ Delivery mechanisms of the nutrition-sensitive activities are clearly described;
- ✓ Partnerships relevant at implementation are included, roles and responsibilities and contributions (technical, financial) defined and ToRs included;
- ✓ Mechanisms to collect analyse, report, interpret and share nutrition-sensitive data are defined. The project budget is comprehensive and factors in the costs of the nutrition oriented activities as well as supportive costs such as M&E

How? Identify the delivery mechanisms to be prioritized for the nutrition-sensitive activities, for example extension workers, community-based organisations (CSOs), private sector, farmer-based organisations among others. Assess their capacity -human, technical and financial – to effectively implement and plan for capacity development activities as needed. Box 6 presents examples of implementing through community-based approaches.

Box 6. Implementing through community-based approaches

In **Mozambique**, the IFAD Coastal HIV/AIDS Prevention and Nutrition Improvement Project (CHAPANI, 2015) adopted a community mobilisation approach for carrying out the HIV/AIDS and nutrition education in fishing communities. Traditional and religious leaders, members of fishermen associations and community volunteers were involved in the project through capacity building activities to understand health and nutrition issues and learn about prevention and treatment of HIV and undernutrition. They were then engaged to act as reference persons in their communities to spread these messages.

In **Senegal**, the engagement of religious and community leaders as nutrition champions proved to be key to sensitize communities on nutrition-related issues. Religious leaders were trained to help to raise awareness within their communities on nutrition problems and on the adoption of positive nutrition behaviors. These nutrition champions also helped to foster collaboration among local administrative and health stakeholders (sub-prefect officials, rural councils, village chiefs, local medical centers, etc.); thus, generating significant results in terms of people reached and good practices adopted.

In **Lao People's Democratic Republic (Lao PDR)**, the Women's Income and Nutrition Groups, developed by CARE International and the Lao Women's Union, are bringing together village women to jointly identify solutions that best respond to their needs. The various activities undertaken by these groups include training in the preparation of nutritious family meals using local and seasonally available foods. While the groups have a focus on nutrition, including how to grow food for own consumption (fish ponds, cropping etc.), they are also encouraged to look at other aspects of women' lives that have a significant impact on their nutrition status, such as workload, income and health.

Sources: IFAD (2015), Evaluation of CHAPANI Project, Mozambique; SUN (2016), Empowering women and girls to improve nutrition: Building a sisterhood of success, Issue 6, May 2016, Scaling Up Nutrition; SUN, Women's Income and Nutrition Groups: by women for women (<https://scalingupnutrition.org/news/>)

Project staff, service providers and implementing partners, such as local non governmental organizations (NGOs) and agricultural extension workers, are the people who interact with local communities the most. Therefore, building capacities of project staff at Project Management Units (PMU) level only will not help

reach expected nutrition outcomes if the capacities of those working with the beneficiary communities in the field are not strengthened as well.

Capacities should include the need to equip service providers with simple, illustrative and community friendly tools for use during their work with the communities in local languages- for example counselling guides, leaflets and posters and recipies.

In cases where there are multiple implementing partners, define roles and responsibilities within in the short, medium and long term and sequence the actions. It is important to also manage partnerships and collaborations since they are crucial for effective delivery and accountability. Box 7 summarizes roles and responsibilities in the case where of a project in The Gambia where implementation was assigned to multiple partners.

The following is a summary of considerations that will help in identifying the kind of support on nutrition required for the implementation of the project:

- a. Which are the nutrition-sensitive interventions in the project and staff-time required to efficiently and effectively coordinate and monitor their implementation? *E.g. A project may need a full-time specialist (nutrition specialist) as part of the PMU staff; (See Annex 1 for the ToRs for a project nutrition expert).*
- b. What kind of technical expertise would be required? And, at which phase(s) of the project implementation? *Depending on the project design and activities to be implemented customized technical expertise may be needed at different phases of project implementation, E.g. To provide capacity building and training to project staff and/or beneficiaries and plan them accordingly in the project Annual Working Plan and Budget.*
- c. What is the depth of technical suport required at implementation? Depending on the technical needs of the proposed interventions, other options may include identifying an implenmeting partner such as an NGO, UN agency, other sector e.g Ministry of Health, research organisation to provide the needed capacity throughout the life of the project.
- d. In the absence of a nutrition expert, a focal point can be appointed among the PMU staff to coordinate implementation *of nutrition-sensitive activities.*

Box 7. Defining roles and responsibilities for the delivery of nutrition-sensitive activities by multiple partners: Case of The Gambia.

The Gambia adopted a multi-sectoral approach to address food and nutrition insecurity in particularly among women and children. Within the agriculture development operations, undernutrition-related problems were addressed by combining a set of interventions, including community mobilization, capacity building, behavioral change communication (BCC) and technical assistance to agriculture and livestock production. To operationalize the multi-sectoral collaboration, roles and functions were distributed across partners, at the different levels, as follows*:

Institutional partners	Roles and responsibilities
Ministry of Agriculture	Community mobilization; provision of technical support to agriculture and livestock production; cooking demonstrations.
Ministry of Health and Social Welfare	BCC for improved child and maternal health and nutrition.
Village Development Committee	Identification of vulnerable households and monitoring of the inputs.
Village Support Groups	Conducting the BCC in local communities

* Source: Adapted from: *The Gambia. Addressing malnutrition through a multisectoral approach. Presentation delivered by M. Cheyassin Phall, Executive Director, NaNA/ SUN Country Focal Person. 34th RPCA Annual Meeting, Banjul, The Gambia, 2018.*

Step 5. Costing nutrition-sensitive activities

What? Costing of nutrition-sensitive activities will depend on each project context. While costing, one should consider all the inputs needed for each activity and the unit costs if available. Dedicated financial resources for nutrition-sensitive activities should be allocated in an earmarked budget to make sure that they are not used for other activities. While doing the costing, it is important to liaise with the economic and financial analysis specialist of the project design team. Annex 9 provides details of potential nutrition-sensitive actions by investment/project type to facilitate comprehensive and systematic costing.

It should be noted that, in costing of nutrition oriented activities is at times associated with the incremental costs beyond the main project activities. This distinction is important because in practice, enhancing or diversifying production may not necessarily lead to improved diet of the targeted household or the most vulnerable within the household. This is because high nutrient value product may be sold because they generate more income, or may not necessary be processed optimally or high nutrient value food may not be consumed by vulnerable ones within the household etc. Hence the need to consider additional activities to ensure that these issues are addressed to ensure or maximize the impact of the project on nutrition outcomes.

How?

- a. Determine the full cost needed to cover the entirety of the implementation of each activity, including the beneficiary's contribution. *Expected costs should be detailed into accounts and related investment/ recurrent costs: e.g. Integrated Household Food Production may include the introduction of new vegetable species and/or small animals, and/or new technologies, specialized technical assistance to household beneficiaries (e.g. veterinary), nutrition education and cooking classes, the expertise of a nutrition specialist, etc. (See Annex 9 for details on costing).*
- b. Remember to assign a cost to supportive activities such as M&E, knowledge and communication activities, policy engagement, management and human resource. *E.g. In the M&E system, costs for establishing a baseline or specific monitoring for nutrition-sensitive activities should be budgeted separately; nutrition-related knowledge management and communication products should also have dedicated financial resources. Remember to allocate resources to facilitate coordination (meetings, travels) among the different partners and stakeholders. Note that it may not always be feasible to include these granular costs in the project budget, in which case they can be included in the PIM.*

Step 6. Developing the annual workplan and budget

What? The PMU's preliminary AWP/B is a critical management tool in project implementation, usually prepared by project component and structured to reflect outputs and allocation of funds by activity. The AWP/B will be the main instrument to ensure that nutrition is fully integrated into project's operations and it is first developed at design stage for the first year.

How? While the AWP/B is being prepared, ensure the following:

- a. Nutrition-related activities are detailed into the annual work plan and the sequence is well planned taking into account the need to leverage on other ongoing activities (e.g. women's or youth's trainings that could integrate nutrition training);
- b. Sufficient financial resources are allocated for the preparatory activities and disaggregated into specific budget-lines. The risk is that if the *financial resources for nutrition are not budgeted separately within a budget category (e.g. capacity building): the resources may be used to cover activities that are not nutrition-related. Ensure that the financial resources for nutrition-related activities are allocated into explicit budget lines.*

V. Nutrition during project implementation

This section is designed to provide guidance to IFAD staff and consultants on the implementation and monitoring of nutrition-sensitive interventions in IFAD's investment projects. The country borrowing resources has the responsibility of implementation, with IFAD providing periodic supervision and implementation support and oversight. Implementation is managed and coordinated by PMUs in line with the PIM.

This section is divided as follows:

- Start-up workshop
- Supervision and Implementaiton Support
- Mid-term review
- Completion
- Mainstreaming nutrition at implementation

Project start-up workshop

Who? The project start-up workshop is organised by the government in close liaison with the CD. It takes place after the PMU staff have been recruited. IFAD staff from Regional Hubs, headquarters and technical experts who have been engaged in the project design or have specific relevant expertise may attend. It is not all the time that nutrition or social inclusion staff or consultants are invited to the workshop, in which case the mainstreaming themes are presented by those participating in the meeting.

What? Start-up workshops represent the official launch of the project and bring together the PMU, government and IFAD staff, including those involved in the design. The purpose of these workshops is to create an understanding of IFAD's corporate priorities and processes, project objectives and goals, project components and to clarify the roles and responsibilities of the entities involved in implementation. The start-up workshop can help to achieve multiple objectives specific to nutrition-sensitive projects as follows:

- **Create awareness on nutrition:** Project's start-up workshops provide a platform to raise awareness to PMU staff on nutrition-sensitive agriculture and provide highlights on the nutrition problem and how it is being addressed by the project, nutrition impact pathways and how they relate to the nutrition indicators, implementation and coordination arrangements. Box 8 provides suggested nutrition content to be covered during the start-up workshop. It is also an opportunity to review the project design and PIM and refine the proposed activities.

Box 8. Suggestions of nutrition content to be covered at start up workshops of nutrition-sensitive projects

- ✓ Outline IFAD's commitments to mainstreaming nutrition into its programmes and projects;
- ✓ Provide an overview of the different types of malnutrition and describe the nutrition situation in the project area (prevalence rates, causes and target groups affected);
- ✓ Provide information on how the project aims to address the nutrition problems and the project nutrition-sensitive activities;
- ✓ Review implementation procedures and arrangements, human and financial resources, output and outcome indicators in the M&E system;
- ✓ Support sequencing of nutrition interventions and identify key implementation milestones in relation to nutrition-sensitive activities.

- **Develop the Annual workplan:** The PMU's AWP/B is a critical management tool in project implementation, usually prepared by project component and structured by outputs while allocating funds by activity. The AWP/B will be the main instrument to ensure that nutrition is fully integrated into project's operations. The year one AWP/B is developed during the design period. The start-up workshop provides the opportunity to review this draft, and develop a detailed activity plan, with clear sequencing of activities and how they will be implemented. It is important to note that generally Year one is a preparatory phase and therefore activities included in the workplan will mainly be related to procurement of inputs and service providers etc. Similar activities should be included for nutrition as needed.

- **Nutrition focal points:** If a PMU has recruited a nutrition specialist, she/he becomes the automatic focal point for nutrition. In the absence of a nutrition specialist any other staff can take on the role of the nutrition focal point. Take advantage to identify a nutrition focal point from among the PMU staff and enlighten them on their roles and responsibilities (see Annex 10 for ToRs of a nutrition focal point).

Supervision and implementation support missions

For IFAD, supervision and implementation support are two mutually supportive and operationally linked functions. Supervision is the tracking of progress of implementation of the project while implementation support includes providing technical assistance to projects. Although these two activities are more often conducted together, implementation support can also be organized independently.

Who? The Country Director is responsible for planning and organizing the supervision and implementation support missions in close liaison with the government and with support by the PDT. The mission is composed of IFAD staff and consultants. Nutrition responsibilities may be handled by a nutrition specialist, by a social inclusion expert who handles gender, youth, targeting and nutrition or assigned to any other mission member. It is however recommended that a nutrition specialist be part of the team for nutrition-sensitive projects. The CD/Project Team Leader is responsible the preparation of the mission ToRs, for reporting and following up on recommendations and actions agreed during the missions. See Annex 3 for generic ToRs for nutrition and social inclusion experts in supervision, mid-term and implementation support missions. In cases where the IFAD nutrition team is not part of the mission, they are to review and validate the nutrition ratings assigned to the projects.

What? Supervision and Implementation (SIS) support missions are essential to review and report progress and quality of implementation of nutrition-sensitive interventions in IFAD-funded projects. It is also an opportunity to provide implementation technical support and design adjustments to improve effectiveness as needed (Box 9). IFAD's corporate requirements foresee at least one full supervision mission per calendar year. For projects at risk and actual problem projects this would increase to two mandatory supervision missions. Project performance on nutrition is rated during supervision missions. Consistent with the corporate mainstreaming priority, the performance ratings are applied to all nutrition-sensitive projects. The SIS assesses both physical and financial execution of the projects. Progress is measured at output level until the mid-term review after which outcome indicators are measured on an annual basis (See box 4 for a list of nutrition core indicators).

Box 9. Nutrition checklist for supervision, and mid-term review missions

- ✓ Assess if nutrition-related actions/interventions are included in the annual workplan and budget
- ✓ Assess if the AWP/B has allocated adequate financial and human resources for implementation of nutrition-sensitive activities;
- ✓ Assess if nutrition indicators are integrated into the project M&E and learning system and that they are routinely tracked and reported (including reporting on ORMS);
- ✓ Review project documentation- progress reports, baselines and Aide-Memoire of previous SIS missions to see if recommendations related to nutrition were followed up;
- ✓ Assess quality of implementation e.g training materials, tools;
- ✓ Assess the progress of implementation of planned nutrition activities;
- ✓ Verify how the nutrition-related activities are coordinated with other sectors and stakeholders, including with existing coordination platforms ;
- ✓ Assess if the project's interventions are reaching the intended target group(s);
- ✓ Identify implementation challenges and provide technical support, including policy engagement as needed;
- ✓ Assess if other project activities pose any undesired effects on the nutritional status of the target population;
- ✓ Identify opportunities and make recommendations on how to improve project performance;
- ✓ Propose activities to be included in the next AWP/B.

Mid-Term Review

A mid-term review (MTR), usually scheduled half way through the life of the project, takes into account specific characteristics and needs of the project. The MTR, in general, follows the same principles and processes as a regular supervision mission. However, as opposed to supervision, prior to an MTR, surveys are conducted on outcome indicators to assess project process towards reaching the outcome indicator targets. The MTR provides an opportunity to restructure the project and at this point, those not categorized as nutrition-sensitive may decide to fully mainstream nutrition. Such decisions can also be influenced by additional financing for nutrition.

Project Completion

The last project supervision mission (conducted during the last year of the project closing date) focuses on the project exit strategy, sustainability and opportunities for scaling-up and the drafting of the Project Completion Report. During this mission, attention is given to:

- Data collection for the end-line surveys to assess the achievements of the project;
- Plan for impact evaluations;
- Finalize gathering of good practices and lessons to feed future projects;
- Identify opportunities for scaling-up in future projects;
- Identify opportunities for evidence-based policy and advocacy engagement;

Impact assessments may be conducted if a project is sampled by IFAD Research and Impact Assessment Division and/or the IFAD Independent Office of Evaluation or if the project had made an allowance for it in the design. These assessments provide an opportunity to determine the actual impact achieved by the project and can generate evidence to inform future nutrition-sensitive projects in the country.

In the exit strategy, the focus can be on how to ensure sustainability of the nutrition interventions and benefits. Attention will therefore be given to strengthening the capacity of local institutions, government focal departments/ ministries, policies and systems to ensure they can sustain the interventions after closure of project. These activities should ideally be considered at design.

Mainstreaming nutrition at implementation

While the most opportune time to mainstream nutrition is at design, other projects may mainstream nutrition during implementation due to several reasons. This could be as a result of additional financing to cover nutrition, a decision by the government to restructure the project based on a shift in national priorities or informed by the recommendations from SIS or MTR missions.

Who? Decisions to mainstream nutrition to on-going projects are made by the government in close consultation with the IFAD Country Directors. Technical support is provided by a technical specialist or a partner organization that helps with the analytical work, defining interventions and indicators within the context of the on-going project.

What? Mainstreaming nutrition to on-going projects should meet the full criteria established at design (see Table 2). Once the full criteria is met and verified, then the project can be considered nutrition-sensitive. Consideration should be given to the age of the project to ensure that it is able to deliver on the intended nutrition outcomes. Ideal timing should be between start-up to mid-term. If past mid-term mainstreaming should only be considered if there are opportunities for additional financing or extension of the project with a commitment to cover nutrition. The changes made to the project should be documented and relevant sections uploaded onto the ORMS. Subsequently, the project will be expected to start reporting on nutrition at SIS and to conduct a baseline for the nutrition outcome indicators.

How? The process is similar as at design. See below some considerations:

- Conduct a nutrition analysis, if already conducted at design, consider if it is up-to-date or if new data is available
- Define the nutrition vulnerable groups and revise the targeting strategy accordingly
- Define the nutrition impact pathways while closely aligning with the project TOC
- Include nutrition core indicators in the log frame
- Define nutrition interventions and allocate budget accordingly
- Define implementation arrangements and human resource needs to successfully implement nutrition interventions. This may need recruitment of new staff in the PMU or close coordination/collaboration with other organizations.

Annex 1. Terms of Reference for nutrition - COSOP and project design missions

Roles and responsibilities

Under the general supervision of the Country Director/Country Programme Officer, the nutrition and social inclusion specialist will be responsible to prepare the nutrition situation analysis of the country/ project area in question, and to mainstream nutrition in the COSOP/IFAD investment project, in close cooperation with the members of the design team and the IFAD Nutrition Team in headquarters.

Specific tasks will include the following:

- Analyze (secondary data) the food security and nutrition situation in the country/ project geographic area, including the prevalence of the different forms of malnutrition and its main underlying causes among the target groups (e.g. by age, gender, ethnicity).
- Review the national nutrition policy and strategy documents to understand the national nutrition priorities, institutional framework, strengths, gaps and opportunities, for IFAD's investments to contribute to nutrition outcomes.
- In close collaboration with the gender and social inclusion specialist, support the development of criteria for the selection of the target groups, especially the most vulnerable people, women, youth, children and indigenous peoples (in areas home to indigenous and tribal peoples and ethnic minorities).
- Together with the policy expert, explore opportunities to work with key partners, including in policy engagement on nutrition and related domains.
- In the context of the COSOP design, and in close collaboration with the design team, assess the entry points on nutrition and how improved nutrition outcomes can be achieved; in project concept notes, propose relevant project activities to address issues related to nutrition problems of the different target groups for the proposed investment projects.
- In the context of the project design, and in close collaboration with the design team, identify and include nutrition-sensitive interventions in the project strategy, integrate nutrition considerations in the theory of change by identifying nutrition pathways, and suggest partnership arrangements; reflect implementation arrangements in the PIM.
- Contribute to the COSOP/project results framework, identifying suitable indicators for nutrition-sensitive interventions (outcome and output levels) and data disaggregation by gender, age and indigenous peoples in line with IFAD's Results, Impact and Management System.
- Ensure that nutrition-related activities are budgeted and that financial resources are allocated in separated budget lines for their implementation (and reflected into the first Annual Working Plan & Budget, in the context of the project design).
- Perform any other duty assigned by the mission leader and related to the area of expertise to fulfil the objectives of the assignment.

Expected outputs

- a) Input into the Aide-Memoire outlining the rational and the proposed entry points on nutrition/ nutrition-sensitive interventions;
- b) Contribute to relevant sections of the COSOP/IFAD investment project as required. In the context of project design, contribute to the relevant sections of the Project Design Report (PDR), SECAP Review Note, PIM, and AWP&B.
- c) Prepare a document with the main findings of the nutrition situation analysis.

Annex 2. Nutrition situation analysis

Nutrition-sensitive analysis: summary of research questions, secondary data sources, methods and tools¹³			
A. Prevalence of the different forms of malnutrition: nutrition indicators			
Research question	Information needs	Data collection methods	
		Secondary data	Primary data
<p>What is the prevalence of the different forms of malnutrition? <i>Disaggregate data by sex, age, socio-economic group and indigenous peoples and from national to regional/provincial/municipal/ district level, depending on data availability.</i></p> <p>Who is most vulnerable to malnutrition?</p> <p>Are certain age livelihood and/or socio-economic groups (e.g. youth, women, landless, indigenous peoples, ethnic minorities) more affected by nutrition problems than others? <i>Work in close liaison with the targeting/gender/social inclusion specialist in the design team, as the identification of the nutritionally vulnerable groups will directly impact the targeting strategy.</i></p>	<ul style="list-style-type: none"> • Prevalence of malnutrition among children under five years: stunting, wasting, underweight, overweight and obesity. • Prevalence of maternal malnutrition: underweight, overweight and obesity. • Prevalence of micronutrient deficiencies among children under-five years and women. 	<ul style="list-style-type: none"> • Global Nutrition Report – annual – country profiles • Scaling Up Nutrition – annual – country profiles • WHO Global Database on Child Growth and Malnutrition • National Information Platform on Nutrition • National data: Demographic and Health Surveys (DHS), Nutrition and Health Surveys (NHS), Standardized Monitoring Surveys, Multiple Indicator Cluster Surveys (MICs) 	<ul style="list-style-type: none"> • Nutrition officials at province/local level, nutrition experts, Scaling Up Nutrition (SUN) focal points, development partners working on nutrition (World Food Programme [WFP], United Nations Children's Fund [UNICEF], Food and Agriculture Organization of the United Nations [FAO], NGOs, bilateral assistance organizations) • Global nutrition report and data on underlying and immediate causes of malnutrition yearly updated

¹³ The same research questions, secondary data sources, methods and tools can be applied to develop the nutrition situation analysis for both COSOPs and investment projects. In the first case, the analysis will look at data at the national level, while for investment projects the analysis should report on the specific nutrition context in the area covered by the project.

Adapted from: De la Peña I., Garrett J. (2018b), Nutrition-Sensitive Value Chains: a guide for project design. Volume II: Resources, IFAD.

B. Main causes of malnutrition			
Research Question	Information needs	Data collection methods	
		Secondary data	Primary data
What are the basic causes of malnutrition?	<ul style="list-style-type: none"> • Policies and programmes related to food and nutrition security • Prevalence of poverty and economic, social and political conditions • Status of women's empowerment, education and control over resources 	<ul style="list-style-type: none"> • National nutrition strategies and programmes, relevant studies, socio-economic surveys and databases 	<ul style="list-style-type: none"> • Government officials (ministries of Health, Agriculture, Rural development, and Women's affairs), SUN focal points, development partners
What are the underlying causes of malnutrition?	Food security <ul style="list-style-type: none"> • Prevalence of food insecurity 	<ul style="list-style-type: none"> • Food consumption score (FCS), Food Insecurity; Experience Scale (FIES), Coping Strategies Index (CSI) • Comprehensive Food Security and Vulnerability Assessments (CFSVA) 	<ul style="list-style-type: none"> • Food and agriculture sector professionals, development partners, researchers, community leaders
	Care and feeding practices <ul style="list-style-type: none"> • Prevalence of poor child feeding and other care practices, specifically breastfeeding and complementary feeding practices • Maternal nutrition • Women's time use 	<ul style="list-style-type: none"> • MIC surveys • Infant and young child feeding (IYCF) data and studies • Gender studies 	<ul style="list-style-type: none"> • Professionals from the health sector, social inclusion and gender experts, development partners
	Environmental health and access to health services <ul style="list-style-type: none"> • Access to safe drinking water • Access to improved sanitation facilities (or open defecation rates) • Access to or use of quality health services • Prevalence of infectious illness, such as malaria, HIV/AIDS, diarrheal diseases 	<ul style="list-style-type: none"> • MIC surveys, DHS, NHS, health surveys • WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation • Global Nutrition Report. 	<ul style="list-style-type: none"> • Professionals from the health sector, development partners, UN agencies, NGOs
C. Food consumption patterns and diet characterization			
Research question	Information needs	Data collection methods	
		Secondary Data	Primary data: Tools
What are the food consumption patterns and the main dietary problems of the target population groups?	Food consumption <ul style="list-style-type: none"> • Food consumption patterns: commonly and poorly consumed 	<ul style="list-style-type: none"> • Food security data: household consumption and expenditure 	<ul style="list-style-type: none"> • Focus groups discussions with women and men at the household

<p>Are food consumption patterns changing? <i>E.g. due to population increase, changes in diets linked to urbanisation and introduction of ultra-processed and industrial foods in rural areas, etc.</i></p>	<p>food groups and food items</p> <ul style="list-style-type: none"> • Food availability and sources of food: own-production, market, collected from the wild, social assistance programmes • Food stability: seasonal patterns affecting year-round availability • Food affordability: food expenditure and household purchasing power • Food culture and consumer preferences: food values and beliefs underlying people's food choices, eg. norms and taboos, intra-household food distribution dynamics, especially food intake of children and women <p>Dietary problems</p> <ul style="list-style-type: none"> • Nutrient content of commonly/poorly consumed foods • Optimal dietary intake • Existing diet/nutrient gaps 	<p>surveys, food price data, cost-of-diet studies</p> <ul style="list-style-type: none"> • Household diets: food consumption surveys, Food Consumption Score (FCS), Household Dietary Diversity Score (HDDS), Fill the Nutrient Gap studies, other reports • Children's diets: DHS or MIC surveys, Minimum Dietary Diversity (MDD), minimum meal frequency, Minimum Acceptable Diets (MAD) • Women's diets: MDD-W • Food composition tables and databases (INFOODS) • Dietary recommendations: food-based dietary guidelines (FBDG), recommended daily allowances (RDA) 	<p>level, observation of meal preparation, seasonal food calendar records, among others.</p>
<p>D. Policy framework for food an nutrition security, main stakeholders and coordination mechanisms</p>			
<p>Research question</p>	<p>Information needs</p>	<p>Data collection methods</p>	
		<p>Secondary data</p>	<p>Primary data</p>
<p>Who are the main stakeholders (ministries, governmental institutions, development partners) involved in nutrition-related interventions at country level and/or in the project area?</p> <p>What are the relevant guiding strategies, policies and programming frameworks related to nutrition at the national level?</p> <p>How do stakeholders coordinate together, through which mechanisms/ platforms?</p>	<ul style="list-style-type: none"> • Nutrition strategies and programmes at the national level or in the area covered by the project • Main actors involved in the development and implementation of nutrition interventions • Nutrition coordination mechanisms at national and sub-national level 	<ul style="list-style-type: none"> • Latest COSOP • Nutrition strategies and programmes operating at sub-national level by the Government and key development partners (UN agencies, NGOs) • Multisectoral nutrition action plan at the national and sub-national level • National and sub-national Agriculture and Food Security Plans/ Strategies 	<ul style="list-style-type: none"> • Nutrition officials at national, province/local level, nutrition experts, SUN focal points, development partners working on nutrition

Annex 3. Terms of Reference for nutrition implementation support, supervision and mid-term review missions

Under the general supervision of the mission Team Leader, in close collaboration with the mission team members and the IFAD Nutrition Team in Headquarters the nutrition specialist will be responsible for reviewing the mainstreaming nutrition aspects of the project.

Specific tasks will include the following:

- a. Review project documentation- progress reports, baselines and Aide-Memoire of previous SIS missions to see if recommendations related to nutrition were followed up;
- b. Assess the progress of implementation of planned nutrition activities;
- c. Assess quality of implementation (e.g training materials, tools);
- d. Verify how the nutrition-related activities are coordinated with other sectors and stakeholders, including with existing coordination platforms;
- e. Assess if other project activities pose any undesired effects on the nutritional status of the target population;
- f. Assess if nutrition-related actions/interventions are included in the annual workplan and budget
- g. Assess if the AWP/B has allocated adequate financial and human resources for implementation of nutrition-sensitive activities;
- h. Assess if nutrition indicators are integrated into the project M&E and learning system and that they are routinely tracked and reported (including reporting in the ORMS);
- i. Assess if the project's interventions are reaching the intended target group(s);
- j. Identify implementation challenges and provide technical support and practical guidance to the the nutrition Focal Point as appropriate to ensure, among others, that nutrition is mainstreamed in all aspects of the project, including good agricultural practices, choice of value chain commodities and policy engagement as needed;
- k. Identify opportunities and make recommendations on how to improve project performance and where necessary re-design and resource the nutrition mainstreaming sub-component of the project with a view to provide for more substantive mainstreaming activities than was provided for in the design document, (e.g. nutrition knowledge, food processing, storage and utilization).

Annex 4. Mainstreaming nutrition in COSOPs: examples from the countries

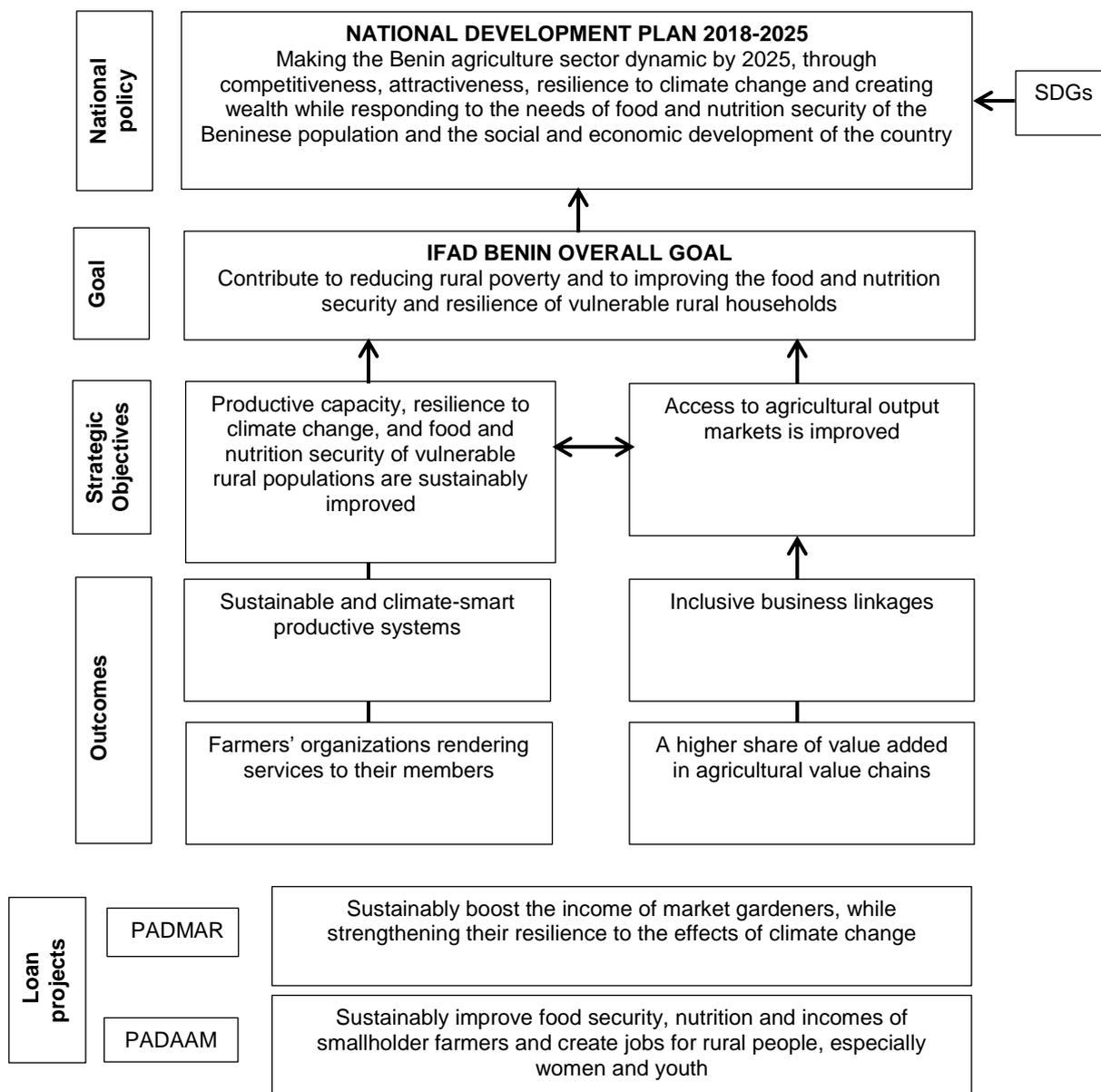
▪ COSOP, Lao People's Democratic Republic (2018-2024)

The COSOP for Lao PDR (2018-2024) provides a good example on how to design a nutrition-sensitive Country Strategic Opportunity Programme, following the steps described in section III:

- **Nutrition problems:** Despite substantial improvements in food security, chronic undernutrition rates in Lao PDR remain high, especially among ethnic groups, with underweight at 27% and under-five stunting rate of 44% one of the highest rates in Southeast Asia, with northern and southern provinces showing the highest incidences.
- **Underlying causes of undernutrition:** Poverty, exposure to climate-related hazards, unavailability of nutritious food in local markets, lack of knowledge on nutrition-related issues, lack of sanitation and health services, are among the main factors causing undernutrition. Adolescent marriage and pregnancies (18%) impact adversely on education levels, livelihood opportunities and nutritional status of women and their children. Women's low access and control over farming inputs and credit, particularly among ethnic groups, translate into low intra-household decision-making power, including decision on food choices.
- **Policies and coordination mechanisms:** Coordinated by the National Nutrition Committee, chaired by the Ministry of Health and inclusive of key sectors (Ministry of Agriculture, Ministry of Education, Ministry of Planning and Investment) the Lao PDR National Plan on Action on Nutrition (2016-2020) guides the policy framework on nutrition; actions are implemented by a set of stakeholders, including UN agencies and international development organizations.
- **COSOP's Strategic Objectives:** in line with the National Plan, which – among other issues- aims to improve availability and accessibility of nutritious food and improve family diets, the COSOP sets improved food security and nutrition as one of its strategic objectives, within the framework of enhancing resilience to natural shocks of poor rural families.
- **Entry points on nutrition:** to reach this objective, the COSOP proposes to: (a) mainstream nutrition at all levels of agricultural services and in rural households; (b) enhance resilience of poor rural families to climate-related hazards; (c) raise awareness among poor rural families on better nutrition and healthy diets, food processing and preservation, through the promotion of nutrition education programmes. To address undernutrition among women, children and ethnic groups, the COSOP will support capacity building and training of women on Integrated Homestead Food Production and on nutrition and health education, focusing in particular on the first 1,000 days from conception of the child and on adolescent pregnancies. Future interventions are planned in the northern and southern regions where under-five stunting rates are higher. Projects tailor approaches to the socio-cultural and economic characteristics and needs of ethnic groups, such as access to non-timber forest products, nutrition and local trade. Coordination mechanisms with other development partners are also set up to gain leverage in nutrition.
- **Results Management Framework:** the COSOP results management framework refers to nutrition into its SOs and indicators, as showed below:



▪ COSOP results management framework, Republic of Benin (2018-2022)



Annex 5. Mainstreaming nutrition at project design: from identifying nutrition problems to tracing impact pathways

The case of the Cooperative Republic of Guyana

Background: Approved in 2016, the "Hinterland Environmentally Sustainable Agricultural Development Project" (2016-2022) of the Cooperative Republic of Guyana benefits 6,000 poor rural families from 80 communities in regions 1 and 9 of the country. In the project area, at least 75 percent of project beneficiaries are indigenous peoples. Among the rural population, indigenous peoples are the most affected by poverty, food insecurity and malnutrition. The project supports the resilience of rural families and indigenous people by promoting the links between economic diversification, productive transformation, environmental protection and family nutrition, with the final aim of improving livelihood resilience through income generation, access to assets, improved nutrition and adaptation to climate variability.

1. Nutrition situation analysis: identify the main nutrition problems

Prevalence of the different forms of malnutrition, main causes, food consumption patterns and diet characterization (see, Annex 2, guiding questions in sections A, B and C)

In Guyana, one or more of the multiple forms of malnutrition remain significant public health concerns: for children, undernutrition remains the greatest problem (although the national averages for stunting are 10 percent, rates are as high as 25 percent among Amerindian children), whereas adults face mostly problems of micronutrient deficiencies and overweight and obesity. It is likely that co-existence of stunted children and overweight or obese mothers in the same household occurs. Such problems are common in middle-income countries like Guyana, which experience a nutrition transition as incomes increase, livelihoods and the food systems transform, and diets change to include more purchased and processed foods, even for the more rural populations. In the project area, the rising dependence on remittances also negatively affects consumption patterns, especially in indigenous areas: discernible changes in Amerindian diets (rising consumption of refined carbohydrates, processed foods, and sweetened and calorie-dense foods) may for example be indicted for the rise in chronic diseases among indigenous peoples. Changes in diets are also leading to the loss of traditional knowledge related to indigenous food systems. Furthermore, natural resource constraints (climate variability, salt water intrusion in Region 1 and extensive flooding followed by prolonged dry periods in Region 9) are major challenges for the development of the agricultural and rural sector in the project area, contributing to worsening food insecurity.

2. Identify appropriate nutrition outcomes to address the nutrition problems

What does the project aim to achieve to contribute to improved nutrition among its target groups?

Overall, the project's Development Objective is to improve livelihood resilience through income generation, access to assets, improve nutrition and adaptation to climate variability. To tackle the nutrition-related problems described above, the project sets as specific outcome "improved diet of adequate quality and appropriate quantity, referring to context-appropriate food-based dietary guidelines and drawing in so far as possible on own-production and local markets in a context of effective behavior change and nutrition education activities" (Outcome 2.3, Project Logical Framework).

3. Trace the project's pathways to impact nutrition

What type of intervention does the project put in place to reach the desired nutrition outcomes?

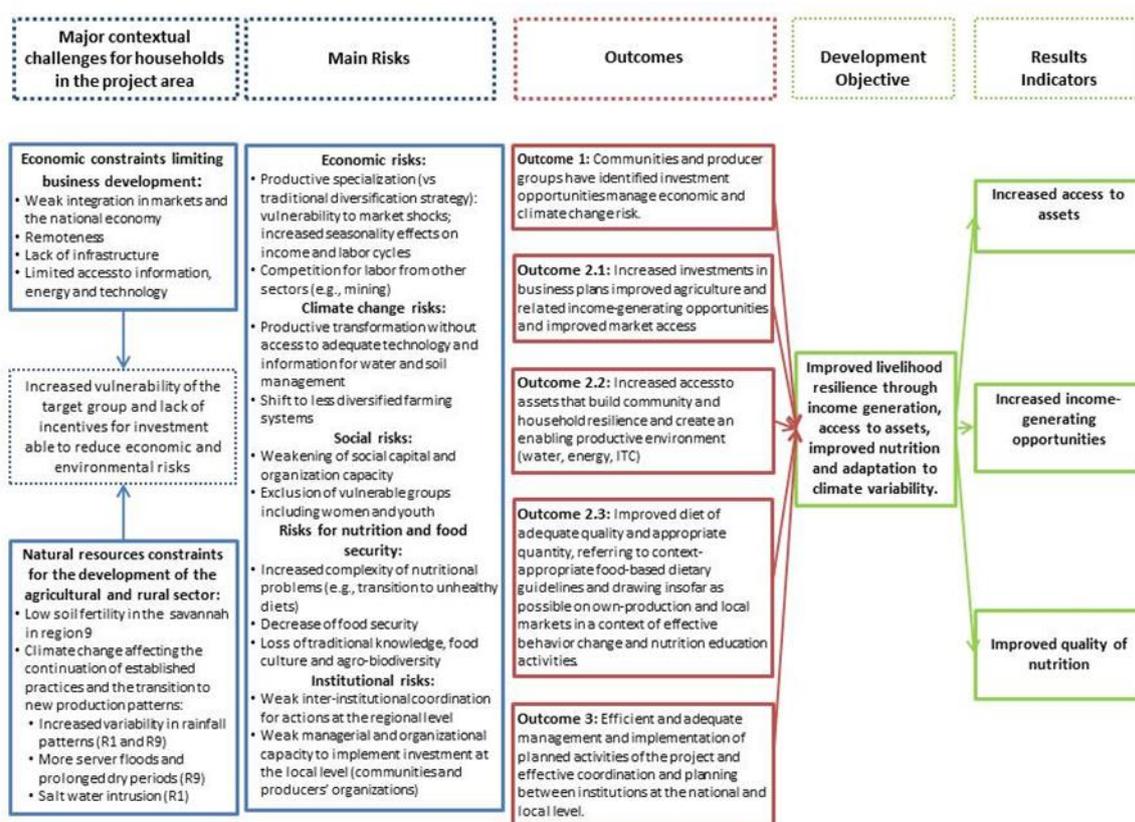
To achieve the desired outcome, food and nutrition security will be enhanced by (i) identifying and promoting commodities, including crops, fish and forest products, that improve and maintain the diet quality of the household and, (ii) by increasing awareness of nutritional issues and dietary guidelines.

Therefore, on the one hand, the project supports rural households and indigenous communities in the identification and development of value chains that can provide new income opportunities and, at the same time, contribute to rural livelihood diversification, thus strengthening the linkage between increased income generation and quality of nutrition. Given the vulnerability of local households to climate change effects and to shocks, in fact, is essential that participation in new income-generating activities does not result in the abandonment of productive activities that play a crucial role in households' food security and nutrition quality, including the production of food for self-consumption.

On the other hand, the project assists households and indigenous communities to make more informed and healthy dietary choices, through awareness-raising and training activities on the nutritional implications of dietary choices and on the potential contribution of local food to nutrition quality.

Through these pathways, the projects aims to ensure that target households benefit from higher incomes and greater production to have improved, consistent access to foods with adequate nutritional quality through self-provision and markets.

The project's **Theory of Change** presents the casual linkage between problems identification, desired outcomes and expected impacts in regard to nutrition:



Source: IFAD (2016), Cooperative Republic of Guyana, Hinterland Environmentally Sustainable Agricultural Development Project (2016-2022), Project completion report, IFAD. <https://operations.ifad.org/documents/654016/ab57f1b3-2486-456d-9f5f-91aeb4873dbf>

Annex 6. Typologies of nutrition-sensitive interventions in IFAD-supported projects

Type	Examples of activities included
Integrated Homestead Food Production	<ul style="list-style-type: none"> • Homestead food production for diet diversification and income generation; • Kitchen gardens, production of nutrient-rich and nutritious foods, such as fruits and vegetables; • Animal-sourced foods, including small ruminants and fisheries.
Food production for own consumption and local markets	<ul style="list-style-type: none"> • Choice of commodities informed by nutritious foods, selecting commodities with high nutritional value, including non-timber forest products, bio-fortified crop varieties and under-utilized and neglected species (especially with indigenous peoples); • Dissemination of agricultural practices/ technologies for increased production and productivity of nutritious food both for own consumption and sale of surplus; • Diversification of food production: integrated farming systems, incorporation of additional varieties, intercropping, agroecology, etc.; • Promotion of agricultural practices to increase year round availability of food for the households and in local markets.
Food storage, processing and marketing	<ul style="list-style-type: none"> • Public and private partnerships to target domestic and external and export markets with focus on nutrition: e.g. for food fortification, nutrient-rich varieties, etc.; • Equipment/technologies/ training to farmers for safe home storage and food preservation for increased shelf-life; • Equipment/training to farmers on home processing for increased year round availability; • Post –harvest practices aimed to preserve and enhance nutrient quality of the food produced; • Food safety, quality control, certification and implementation of hygienic standards for food preparation and commercialization; • Social marketing, consumer's food and nutrition awareness.
Behavior change communication and targeted nutrition education	<ul style="list-style-type: none"> • Targeted nutrition education for community's household members and communities; • Nutrition education for extension workers and integration of nutrition modules in Farmers Field Schools; • Cooking classes for nutrient retention and promotion of healthy diets; • Collaboration with local media for breastfeeding, maternal and child care and supplementary feeding practices campaigns; • Hygiene, health and Water, Sanitation and Hygiene (WASH) campaigns (if accompanied by investments in infrastructure); • Consumers' awareness campaigns.
Gender equality, adolescent girls and women's empowerment	<ul style="list-style-type: none"> • Women's access to productive resources, nutrition education and income-generating activities, as a contribution to women's control over assets and income; • Labor and time saving technologies to reduce women's workload (e.g. energy, water, stoves, etc.); • Support to women's voice in decision-making power at household and community level; • Awareness raising on issues related to gender equality and nutrition (early marriage, sexual and reproductive health); • Adolescent girls' access to education, productive resources and to decent rural employment opportunities.

Environment and climate change	<ul style="list-style-type: none"> • Sustainable natural resource management (soil, manure, forestry, etc.) for diversification of food production; • Climate-smart and diversified food systems integrating farming systems for improved/diversified access to food; • Promotion/ research on nutritious and resilient seed varieties and conservation of traditional seeds.
Water and sanitation	<ul style="list-style-type: none"> • Incorporation of small infrastructure to improve access to safe water, sanitation and hygiene; • Rehabilitation and maintenance of water sources.
Policy dialogue and coordination	<ul style="list-style-type: none"> • Policy engagement and advocacy on food security and nutrition; • Support multi-stakeholder engagement to influence nutrition policies; • Multi-sectoral planning and coordination for the delivery of nutrition-sensitive interventions; • Support policy development (laws, regulations, policies) contributing to improved nutrition.
Health services and education/ social protection¹⁴	<ul style="list-style-type: none"> • Health education and awareness (HIV/AIDS and other transmissible diseases); • Linkages with social protection programmes: cash transfers, food assistance, school feeding programmes, etc.

Source: IFAD (2019) *Mainstreaming nutrition-sensitive agriculture and rural development in IFAD-funded investments. Categorization of COSOPs and IFAD funded projects (2016-2018)*

¹⁴ These type of interventions in IFAD-funded projects are often in close coordination with governmental ongoing projects with other UN agencies eg. WHO.

Annex 7. IFAD corporate nutrition indicators

IFAD has introduced the corporate indicators on nutrition:

Impact Indicator: Percentage of targeted people with improved diet diversity

Output Indicator: Number of person provided with targeted support to improve their nutrition

Outcome Indicators: i) Percentage of women, 15-49 years of age, who consume at least 5 out of 10 food groups (MDD-W)

ii) Percentage of the targeted people who have improved knowledge, attitudes and practices of food, feeding, caring and hygiene

Target Setting: The target for MDD-W should be set at 50%, i.e. at least 50% of the women from targeted households should achieve the minimum diet diversity by the end of the project. And the target for KAP should be set at 60%, i.e. at least 60% of the people who are direct participants of the nutrition/training and behavior change communication interventions should have improved their knowledge, attitude and practices regarding food, feeding, caring and hygiene practices of selected key indicators.

Counting output:

Beneficiary counting methodology should adopt IFAD's corporate guideline on beneficiary counting and reporting so as to avoid double counting. To report on nutrition, specific beneficiary counting should be considered for any project that has been classified as "nutrition-sensitive", or any project that is implementing activities to improve nutrition security of targeted beneficiaries. This indicator refers to the number of people that have directly benefited from project-supported activities designed to help improve nutrition either during the past 12 months (annual reporting) or since project start-up (cumulative reporting). Note that the nutrition-sensitive activities are not generic, but they are tailored to address context-based nutrition problems. Activities may include people participating in nutrition-related trainings, exchange visits, behavior change communication campaigns, infrastructure (e.g. drinking water and sanitation), technical assistance on the use of inputs and technologies intended to improve nutrition outcomes (e.g. bio-fortified seeds, poultry, horticulture, livestock, labor-saving implements/ technologies), socio-cultural-related issues impacting on nutrition outcomes etc.

It is important to note that not all nutrition-related activities will be reported under this indicator. For example, mass media campaigns (e.g. radio) and/or other open sessions where it is difficult to quantify the number of people reached should be excluded. But if nutrition education sessions are held in villages/communities with a group of people, the total number of people participating in these sessions can be counted as people reached.

Measuring outcome(s):

i) **MDD-W**

MDD-W is the measure of Dietary Diversity of women to assess their diet quality. It is a proxy indicator to judge adequacy of micronutrients (e.g. vitamins, minerals) consumption by women. It is also a proxy to gauge the adequacy of nutrition intake of the household members. MDD-W is expected to provide a broader picture of the household nutrient intake taking into consideration that women are more likely to be nutritionally vulnerable in most societies because of their disadvantaged position in relation to intra-household distribution of nutritious foods in the resource-poor settings which are the primary targets for IFAD operations. Additionally, women and, in particular women of reproductive age (15-49 years), are more vulnerable due to their higher physiological demand of nutrients as compared to adult men.

A consistent use of the same methodology over time to measure women's diet quality in the same population will allow assessment of impact of IFAD's investment of nutrition adequacy of the targeted household. MDD-W captures daily diet diversity of women of reproductive age (15-49 years of age). The methodology includes classification of food into 10 food groups and assessing whether women have consumed at least 5 groups out of 10 in a day. Women are asked what food they have eaten in the past 24 hours (refer to Annexes for examples). The food list is then divided into groups. The 10 food groups are (i)

Grains, white roots and tubers, and plantains (ii) Pulses (beans, peas and lentils) (iii) Nuts and seeds (iv) Dairy (v) Meat, Poultry and fish (vi) Eggs (vii) Dark green leafy vegetables (viii) Other vitamin A rich fruits and vegetables (ix) Other vegetables (x) Other fruits. If the women's diets include food items that can be categorized in a minimum of five food groups, then she is expected to have met the minimum requirement for micronutrient consumption. The amount of each food group; however, must be 15 g or more. Specific technique/methodology has been prescribed to administer the question to women, as outlined in the guideline on MDD-W¹⁵.

ii) Knowledge, Attitudes and Practices survey/assessment measures

The outcomes of nutrition education, counselling, behavior change communication, mass media message transmission on nutrition knowledge, cooking demonstration among others, are measured through a KAP survey. KAP surveys/study is a qualitative method of understanding knowledge, attitude and behavior of targeted population. It can be done either through sample survey of individuals or through focus group discussion with few groups of targeted beneficiaries. The sample size of KAP surveys can be relative small and cheap. However, skilled personnel is needed to conduct the interview or facilitate the discussion. While there are basic formats, methodologies and guidelines available for KAP surveys/study¹⁶, the survey questionnaire or the guideline for focus group discussion needs to be context-specific and hence locally developed/adapted.

List of topics to be considered for KAP survey

1. Local food habits and culinary practices
2. Food processing, storage and preparation
3. Different type of nutrient-dense food available locally
4. Diversified diet for meeting nutrient needs
5. Safe hygiene practices
6. Drinking water treatment methods
7. Psychosocial interaction with infants
8. Increase nutrient/food need during pregnancy and lactation
9. First breast-milk feeding need for new-born and exclusive breastfeeding up to six months of age to enhance immunity and meet nutrient needs
10. Exclusive breastfeeding till the child reaches 6 months of age
11. Breastfeeding of infants under 2 for prevention of sickness and breast milk nutritional value
12. Feeding practices among young infants and children under five (initiation of complementary food at 6 months of age, frequency and amount of feeding, food items given to infants and children)
13. Local taboos regarding food, health and hygiene practices
14. Physical exercise to prevent overweight and obesity and related non-communicable disease, e.g. hyper tension, diabetes etc.
15. Avoidance of excessive fat/oil, salt and sugar-rich, processed and ultra-processed food for better adolescence and adult health
16. Avoidance of sugary low-nutrient drinks such as Coco-Cola, Pepsi etc.
17. Socio-cultural issues such as early marriage, teenage pregnancy etc.

To measure changes brought about by any intervention, i.e. the success of any intervention in bringing about positive change in KAP, information regarding knowledge, attitude and practices should be known before the start of any intervention through a baseline survey/study. Based on the project life-span, regular follow-up survey/study should be schedule to monitor the impact and adapt the approach as necessary before the end of the project. End-line study should be schedule at the end of the project to measure total changes brought about by the intervention. It should be noted that the base-line, follow-ups and end line survey/study needs to be conducted within the same beneficiary population.

¹⁵ FAO and FHI 360. 2016. Minimum Dietary Diversity for Women: A Guide for Measurement. Rome: FAO Available at: <http://www.fao.org/3/a-i5486e.pdf>

¹⁶ FAO 2014: Guidelines for assessing nutrition-related Knowledge, Attitudes and Practices Available at: <http://www.fao.org/3/i3545e/i3545e00.htm>

Annex 8: Sample MMD Questionnaire – English

(List-based approach)

Minimum Diet Diversity - Women			
1.1.1 Is there a woman aged 15-49 in this household? (If no, terminate the interview and go to the next household)		0 = No 1=Yes	<input type="checkbox"/> <input type="checkbox"/>
1.1.2 Name of the Woman		_____	
1.1.3 Age of the Woman		<input type="checkbox"/> <input type="checkbox"/>	
1.1.4 May I ask you about the food you consumed yesterday from early morning to the time until you went to sleep in your home or elsewhere? Please tell me what you ate and drank from early morning after you woke-up in the morning to the time you went to bed at night.			
A	Any food made from grains, like:	Porridge, bread, rice, pasta/noodles or other food made from grains	0 = No 1 = Yes
B	Any vegetables or roots that are orange color inside, like:	Pumpkin, carrots, squash or sweet potatoes that are yellow or orange inside	0 = No 1 = Yes
C	Any white roots or tuber or plantains, such as:	White potatoes, white yam, manioc/cassava/yucca, cocoyam, taro or any other foods made from white-fleshed roots or tubers, or plantains	0 = No 1 = Yes
D	Any dark green leafy vegetables, such as:	<i>List examples of any medium-to-dark green leafy vegetables, including wild/foraged leaves that are available in the local area</i>	0 = No 1 = Yes
E	Any fruits that are dark yellow or orange inside, like:	Ripe mango, ripe papaya etc.	0 = No 1 = Yes
F	Any other fruits	<i>List example of any other fruits that are available in the local area</i>	0 = No 1 = Yes
G	Any other vegetables	<i>List example of any other vegetables available in the area</i>	0 = No 1 = Yes
H	Any meat made from animal organs, such as:	Liver, kidney, heart or other organ meats or blood-based foods, including from wild games	0 = Non Yes 1 = Yes
I	Any other type of meat or poultry, like	Beef, pork, lamb, goat, rabbit, wild game meat, chicken, duck, other birds	0 = Non Yes 1 = Yes
J	Any eggs	Eggs from poultry or other birds	0 = Non Yes 1 = Yes
K	Any fish or seafood, whether fresh or dried	Fresh or dried fish, shellfish or seafood	0 = Non Yes 1 = Yes

L	Any beans or peas such as:	Mature beans or peas (fresh or dried seed), lentils or beans/pea products, including hummus, tofu, and tempeh	0 = Non Yes 1 = Yes
M	Any nuts or seeds, like:	Any tree nuts, groundnut/peanut, or certain seeds or nut/seed "butter" or pastes	0 = No 1 = Yes
N	Any milk or milk products, such as:	Milk, cheese, yogurt or other milk products, but not including butter, ice cream, cream or sour cream	0 = No 1 = Yes
O	Any condiments and seasonings, such as	Ingredients used in small quantities for flavor, such as chilies, spices, herbs, fish powder, tomato paste, flavor cubes or seeds	0 = No 1 = Yes
Q	Any other beverages and foods	Tea or coffee if not sweetened, clear broth, alcohol	0 = No 1 = Yes
R	Any other foods not listed	Specify_____	0 = No 1 = Yes

Note: If insects or small protein food including snails, farm rodents, etc. or red palm oil, any oil and fats, savory snacks, sweets such as chocolate, biscuits cakes etc., sweetened beverages etc. relevant in the areas, they need to be included in the questionnaire.

Annex 9. Cost components of Nutrition-Sensitive Actions within IFAD's Investment Portfolios

The following table provides a list of all possible nutrition-sensitive actions by intervention type that are likely to be incorporated in agriculture and rural development projects. The aim is to provide guidance to project designers on likely nutrition-sensitive activities as well as costing considerations.

S.N.	Intervention Type	Cost Components to Consider for Budgeting During Design	Remarks
1	Nutrient-rich varieties and diversification	a. Identification of the locally available under-utilized nutrient-dense food/fruit species	Expert as/if needed
		b. Identification of locally non available nutrient-dense food/fruits suited to the local climatic and soil conditions	Expert as/if needed
		c. Development of promotion/training materials on diversified production, varieties, labor-saving technologies, nutrient preservation during handling (harvesting, transport, storage and processing), multiple crop farming	Use FAO or other guidelines if available, if not hire an expert or outsource
		d. Promotion of integrated farming, e.g. vegetables with cereals, small fish with paddy etc.	
		e. Training of extension workers: venue, equipment, stationary, facilitators, per-diem, travel etc.	
		f. Training of the beneficiaries: venue, equipment, stationary, facilitators, per-diem, travel etc.	Include cost of expert if needed
		g. Provision seedlings, fertilizers, tools	As needed
		h. Social marketing and promotion of self-consumption of the identified/produced varieties (radio, pamphlets, posters etc.)	Cost will include contractual services for the material printing and airing
		i. Extension service	Additional extension service may be needed for specific/new variety/method
2	Bio-fortification	a. Investment cost of the selected bio-fortified crop	It should already be part of the main project cost, mentioned here for reference only
		b. Development/adaption of the training materials for the beneficiaries on farming and handling to ensure minimal nutrient loss during (harvesting, transport, storage and processing)	Use existing materials where/when available. Cost only needed for adaption/development as/when necessary
		c. Training of extension workers: venue, equipment, stationary, facilitators, per-diem, travel etc.	
		d. Training of the beneficiaries: venue, equipment, stationary, facilitators, per-diem, travel	Include cost of expert if/as needed
		e. Multiplication of the crop – establishment of nurseries	If nurseries already exist, especial efforts should be undertaken to ensure crops that can be multiplied locally should be promoted and supported
		f. Social marketing, promotion of consumption of the identified varieties (radio, pamphlets, posters etc.)	Cost will include contractual services for the material printing and airing
		g. Extensive service	Additional extension service may be needed for specific variety

3	Micro-nutrient fertilizers	a. Investment cost of the fertilizers	
		b. Development/adaption of the training materials for the beneficiaries on the safe use and storage of the fertilizers	Include cost of expert if/as needed
		c. Training of beneficiaries: venue, equipment, stationary, facilitators, per-diem, travel	
		d. Training of extension workers: venue, equipment, stationary, facilitators, per-diem, travel etc.	
		e. Extension service	Additional extension service may be needed to ensure proper use
4	Food Processing	a. Analysis of harvesting and storage processes (to assess nutrient loss, food loss and contaminants)	Harvesting and processing technique may be context specific. Some of these techniques can lead to nutrient loss of the crops and/or cause contamination with harmful fungi or/and insects. Expert may be needed to assess nutrient loss during these processes
		b. As/if needed development/adaption of training materials for harvesting and storage processes for minimizing nutrient loss, contaminants and quantity loss	Use existing materials where/when available. Cost only needed for adaption/development as/when necessary
		c. Training of the beneficiaries on the new techniques if applied: venue, equipment, stationary, facilitators, per-diem, travel	Include cost of expert if/as needed
		d. If/as necessary support for the equipment/technologies for harvesting and storage as far as possible with locally available low cost materials	Many traditional storage facilities/methods can lead to increase in toxins such as mycotoxin – which lead to stunting of young children, hence the need for improved storage facility
		e. Preparation and consumption	See details on the cooking demonstration for costing
		f. Use of edible oil-seed cake/meal for human consumption <ul style="list-style-type: none"> i. Identification of edible oil-seeds cake/meal for human consumption ii. Develop promotional materials for use of oil-seed cake/meal as nutritious food iii. Promotion of use of oil-seed cake/meal as nutritious food 	The cake/meal of soya-bean, sesame seeds after oil extractions are rich in proteins and other nutrients. Currently majority of the by-products are used as animal feeds. But there is a big opportunity to use the cakes as nutritious food. You may need an expert to evaluate the feasibility and design appropriate actions
		g. Analysis of currently used food processing and preservation methods	Include cost of expert if/as needed
		h. As/if needed training on malting, drying, pickling and curing at household level: venue, equipment, stationary, facilitators, per-diem, travel	
		i. If/as needed support to the equipment/technology for malting, drying, pickling and curing	Could be subsidy or full cost
		i. Fortification <ul style="list-style-type: none"> i. Partnership and establishment of linkage to the medium/large scale millers and other food industry that reaches significant proportion of the population (private sectors) ii. Financial assistance for equipment and fortificants (limited period of time) 	The cost of sprayer and fortificants are not much. Ideally it would be better to try to pass the cost of fortification to the industry itself from the beginning. However, if needed, subsidy could be provided

		<ul style="list-style-type: none"> iii. Technical support to the millers to ensure application of standardized fortification methods iv. Creating enabling policy environment for the millers e.g. legislation, subsidy limited period of time etc. v. Technical support to the miller in promotion and social mobilization of fortified staples and other widely consumed commodities 	<p>for the procurement of the sprayer and fortificants. The cost of the fortificants should be passed onto the consumer with time. Cost for fortification of dry and non-oily item with 14 different nutrients that meet an average adult male requirement is 0.01 USD a day, i.e, 4 USD per year (<i>data source: WHO</i>). Cost of the sprayer depends on size, but an average cost USD 10,000</p>
		<ul style="list-style-type: none"> k. Industrial refining/processing <ul style="list-style-type: none"> i. Promoting use of food preservers/stabilizers which minimizes increase caloric and fat contents of the main product ii. Training/technical support to the industry/personnel on the process of not using fattening (e.g. sugar, oil) and unhealthy additives (e.g. sugar, oil, salt) iii. Technical support to labelling as/if required 	<p>High amount of fat/oil, sugar and salt intake one of the leading cause of over-weight and obesity – which in turn is responsible for death and disease at young age among adults. The package should include label indicating the amount of these items per 100 g and per package</p>
5	<p>Trading and Marketing: <i>trading and marketing should be promoted for surplus only, household consumption of the nutrient-dense food should be primary target</i></p>	<ul style="list-style-type: none"> a. Promotion for availability and marketing of nutrient-dense food in local markets b. Social marketing to increase demand - community education and promotion of consumption through mass media regarding availability nutrient-dense food in the local market c. Subsidy for targeted household/beneficiaries (as/if necessary) d. Support for packaging in small quantities (as/if applicable) 	<p>Cost will include contractual services for the material printing and airing</p> <p>Establish linkage with government subsidy programme, where available/feasible</p> <p>For initial period – short duration until the cost can be passed to the consumers</p>
6	<p>Promotion, education, counselling and behavior change communication</p>	<ul style="list-style-type: none"> a. Knowledge Attitude Practice study (<i>for detail of topic to cover – refer to 'new ORMS indicators' guideline</i>) <ul style="list-style-type: none"> i. Personnel – technical expert, surveyors ii. Per diem & travel. iii. Tools b. Material development/adaption: posters, training, videos, documentaries and other BCC and counselling aids – e.g. flash cards, recipe etc. <ul style="list-style-type: none"> i. Personnel and/or contractual service if outsourced ii. Audio/visual equipment (<i>if/as necessary</i>) c. Execution <ul style="list-style-type: none"> i. Training of the programme management unit key personals ii. Training of the trainers iii. Training of the front-line workers e.g. extension workers and/or community health workers, influential community leaders iv. Per-diem/honorarium and travel cost for front-line workers or/and community volunteers to travel back and forth targeted community v. BCC/education/counselling with/to beneficiaries (men, women, youth, elderly) – at least 3 times per year per beneficiary – this is better done through local groups of men, women, youth to make the communication 	<p>Baseline and yearly follow-ups for monitoring project impact and adjusting as/if necessary</p> <p>Ministry of Health may already have materials that are used locally, assess the usefulness of the existing materials first</p> <p>Ministry of health, UN agency or NGOs may be conducting similar BCC in the area. Coordinate with these institution first and plan joint activity if applicable. BCC communication is most effective when done face-to-face and one-on-one. However, one-on-one will be expensive, so a group approach should be planned. There may be existing women's group, mother's group or any</p>

		more effective – associate cost should be budgeted as/if needed	other community grouping. BCC can be done in collaboration with these existing groups to produce better results
		d. Monitoring i. Personnel ii. Travel, per-diem iii. Discussion with the community – findings of the monitoring iv. Refining the tools as necessary	Monitoring in change of practices is important to achieve intended outcome, hence household/community visits for monitoring at least 3 times a year is recommended until habits/practices changes are observed
7	Backyard poultry and small animals/insects	a. Identification of the locally consumed/acceptable small animals, insects and birds, e.g. small ruminants, rabbit, pig, guinea-pig, locust, bees, forest-rat etc.	Include cost of expert if/as needed
		b. Study of best practices in back-yard poultry, small animals rearing and honey production in the local context	Include cost of expert if/as needed
		c. Development/adaption of training materials on feeds production and construction of bird nest/coop, pens/barn/housing and insects keeping facility with locally available materials	Use FAO or other guidelines if available, if not, hire an expert as/if needed. It could be outsourced if needed
		d. Development/adaption of training materials on poultry, small animal rearing, bee and other insect keeping, including feeds and bird/animal health – incorporate best practices	Use FAO or other guidelines if available, or hire an expert as/if needed. It could be outsourced if needed
		e. Material for coop, pen/barn/housing etc. construction support	As/where applicable or subsidy arrangement with the government
		f. Feeds suited to the selected species	As/where applicable, or one time support, or subsidy arrangement with the government
		g. Water supply for the animals during lean season if needed	
		h. Training and refresher training to the beneficiaries: venue, equipment, stationary, facilitators, per-diem, travel	Include cost of expert if/as needed
		i. Extension services, vaccine and pest control	If not already existing in the local extensive services
		j. Behavior change communication, nutrition education, and cooking demonstration	Refer to BCC and cooking demonstration costing for detail costs
		k. Monitoring visits (time, personnel)	Ensure extensive services is being provided, beneficiary are using correct practice, procedures
8	Vegetable/fruit garden	a. Nutrient quality assessment of locally available vegetables and fruits requiring limited space for growth (expert)	Include cost of expert if/as needed
		b. Assessment of suitability/acceptability of introducing new nutrient-dense vegetables and fruits suited to the local soil and climate to/by the communities/households	Include cost of expert if/as needed
		c. Seeds and/or sampling	
		d. Water supply facility	
		e. Fertilizer and pesticides	
		f. Based on the above assessment – development of training/information dissemination materials	Use FAO or other guidelines if available if not include cost of expert if/as needed
		g. Printing of training/information materials	If/as needed
		h. Training of extension workers: venue, equipment, stationary, facilitators, per-diem, travel etc.	

		i. Information dissemination/training of beneficiary: venue, equipment, stationary, facilitators, per-diem, travel	Include cost of facilitator if/as needed
		j. Extension service provision on continuous basis at least for the first XX years	Incorporate the new techniques (if applied) in the existing extensive service
		k. Behavior change communication, nutrition education (refer to BCC costing details)	
9	Cooking demonstration	a. Assessment and understanding of the local food choices and recipes – consultant/personnel	Include cost of expert if/as needed
		b. Assessment of knowledge, attitude and practices surveys <ul style="list-style-type: none"> i. Technical expert - method and questionnaire development ii. Hiring and training of the data collectors iii. Data collection- time, travel iv. Analysis, discussion with the community of the findings, report preparation 	
		c. Development of the recipe suited to local taste <ul style="list-style-type: none"> i. Personnel/cook ii. Commodities iii. Fuel iv. Utensils v. Etc. 	Include cost of expert if/as needed
		d. Recipe dissemination <ul style="list-style-type: none"> i. Pamphlet/flip chart printing ii. Recipe demonstration sessions with participation of and discussion with beneficiary 	Include cost of expert if/as needed
		e. Behavior change communication and nutrition education (refer to BCC costing details)	
		f. Monitoring visits <ul style="list-style-type: none"> i. +Personnel – time, per-diem, travel as required 	Household visit to assess change in beneficiaries culinary practices
10	Livestock/Poultry	a. Assessment of local food and culinary habits – e.g. young children may not be fed any meat until they are older, women may eat last and may not have adequate quantity left to eat, main – nutrient-rich organs not be eaten, produces may be all sold and not eaten at home etc.	Include cost of expert if/as needed
		b. Promotion of home-consumption of the meat/milk/eggs from the project outputs if required, especially among children and women	Refer BCC/nutrition education for further action and associated cost
11	Aquaculture	a. Identification of locally available aquatic species that are consumable but not consumed due to the tradition and local culinary/food practices	Include cost of expert if/as needed
		b. Poly-culture: identify and combination of commercial larger fishes with smaller fish, or other aquatic species that are compatible with one another for home/self-consumption	Include cost of expert if/as needed
		c. Identification of suitable preservation techniques for local fish/aquatic species that minimize nutrient loss	Include cost of expert if/as needed
		d. Promotion of consumption of other edible aquatic species and poly culture – communication materials, air-time, posters, pamphlets etc.	
		e. Training of extension workers: venue, equipment, stationary, facilitators, per-diem, travel etc.	
		f. Identify means of minimizing post-harvest loss	
		g. Development training materials and train beneficiaries on poly culture, minimizing post-harvest loss and preservation techniques – experts, materials, venues, travel etc.	
		c. Provision of hatchlings, larvae, fry etc. to the beneficiaries – as/if needed	
		d. Provision of extension services if not already available	

12	Horticulture	a. Assessment of the nutrient density/value of the selected fruit/s – select nutrient-dense fruits	Include cost of expert if/as needed
		b. Promotion of home-consumption of fruits from the project outputs, if required, especially among children and women	Refer BCC/nutrition education for further action and associated cost
13	Natural Resource/Agroforestry	a. Identification of edible nutrient-dense forest products on use currently and identification of viable new nutrient-dense commodity in the local forest	If/as necessary expert may be needed to identify the species
		b. Identification of nutrient-dense edible produces (fruits, nuts, roots, leaves, seeds) which can be grown/viable in combination with the trees that are part of the agroforestry project	If/as necessary expert may be needed to identify the species
		c. Training of extension workers: venue, equipment, stationary, facilitators, per-diem, travel etc.	As/if needed
		d. Provision of seeds/saplings of the identified commodity	
		e. Provision of training if/as necessary for cultivation	
		f. Promoting consumption of the produce (mass media, BCC, church, mosque etc.)	
		g. Provision of extension services if not already available	
14	Irrigation	a. For large scale project – <i>refer the aquaculture section</i>	
		b. Construction of small pond as by-shoot of the canals for aquaculture for home consumption where feasible and promote aquaculture – and <i>refer to aquaculture section for further details</i>	If/as needed include cost of an expert
15	Infrastructure /Water	a. Assessment of local personal hygiene practices, access to safe drinking water and waste disposal facilities	Include cost of expert if/as needed – could be part of KAP
		b. Provision of safe drinking water within 30 minutes of homestead to and from	
		c. If/as needed provision of waste disposal construction materials	
		d. If/as needed technical support/training for construction of safe waste disposal facilities	
		e. Behavior change communication/training on WASH, including treatment of water as/where needed (e.g. boiling, use of sun to kill bacteria etc.) to the targeted household members	Refer to details of cost of BCC
16	Output and outcome monitoring and reporting	a. Baseline survey, follow-up and end-line surveys on MDD-W and/or KAP <ul style="list-style-type: none"> i. Lead consultant/expert ii. Survey questionnaire translation to the local language iii. Data collection team iv. Training of the data collection team v. Field work – travel, per-diem vi. Data entry personnel vii. Food models if/as needed 	Baseline has to be conducted prior to the start of any activity, a midline survey is recommended 2-3 times during the course of the project to monitor any change and end-line survey should be conducted to assess overall impact of the project.

Annex 10. Terms of Reference for project nutrition focal point and nutrition specialist

The project may contract a nutrition focal point or a nutrition specialist as part of the PMU staff.

A nutrition specialist – with explicit technical qualification and experience – should be prioritized if 100% of this staff time should be dedicated to the roles and responsibilities on nutrition. Alternatively, the project could appoint any of the project staff/officer (such as the M&E, gender, climate or community specialist) to also act as nutrition focal point; in this case, the technical background of the nutrition focal point will vary depending on the project's focus and context and the staff time as dedicated to the roles and responsibilities on nutrition will be project specific.

Overall, the nutrition focal point/ specialist will have to ensure that nutrition is adequately integrated in the project documents; facilitate the implementation of nutrition-sensitive activities in close collaboration with relevant stakeholders and implementing partners and; support the Project manager/ Coordinator to establish local partnerships on nutrition. S/he will also have to work collaboratively with the project technical experts including gender, climate, youth and, if relevant, indigenous peoples.

Nutrition Focal Point

Main responsibility: The nutrition focal point will be identified by the Project Coordinator and will be responsible for the coordination and facilitation of implementation of the nutrition interventions defined in project/programme at national, sub-national and community levels. S/he will work closely with the IFAD nutrition focal points to ensure effective operations of nutrition mainstreaming in project investments. The staff time as dedicated to the roles and responsibilities on nutrition will be project-specific and in line with the project context.

Specific duties:

- In close liaison with other PMU staff, ensure adequate integration of nutrition in the project documents such as: Project Implementation Manual, M&E system, Annual Work Plan and Budget and progress reports;
- In close liaison with the M&E officer, ensure that nutrition indicators are tracked and reported on a regular basis (along with other project reporting schedules);
- In close liaison with the IFAD staff, support the documentation of best practices and lessons learned for in-country and global dissemination;
- Bring the capacity needs of PMU staff and the project implementers on nutrition to the attention of the Project coordinator and IFAD staff;
- Establish close contact with the nutrition focal point in the lead implementing agency (e.g. Ministry of Agriculture) as a means to keep the project up-to-date, ensure close coordination with other nutrition initiatives and share IFAD project progress with other stakeholders through existing multi-sectoral nutrition coordination mechanisms at national and local levels;
- Support the coordinator to establish local partnerships on nutrition (UN, Private sector, CSO) to support implementation and technical assistance;
- Facilitate the implementation of nutrition-sensitive activities in close collaboration with relevant stakeholders and implementing partners (e.g. extension workers, community service providers, partner organizations, etc.);
- Advocate for retrofitting of nutrition in project components/activities with potential to be made nutrition-sensitive;
- Participate in project supervision missions and ensure implementation of the mission's recommendations related to nutrition;
- Work collaboratively with the technical experts on gender, youth and climate in the implementation and documentation of interface on nutrition outcomes.

Nutrition specialist

Main responsibility: The nutrition specialist will be engaged in the PMU as a dedicated expert and focal point on nutrition with the responsibilities to coordinate and facilitate the implementation of the nutrition interventions defined in project/programme at national, sub-national and community levels. He/she will work closely with the IFAD nutrition focal points (country and regional) to ensure the operationalization of nutrition mainstreaming in the project investments. In general, 100 % of this staff time should be dedicated to the roles and responsibilities on nutrition.

Specific duties:

- Conduct the analysis of food security and nutrition situation in the project locations and develop the project's nutrition strategy;
- In close liaison with other PMU staff, ensure adequate integration of nutrition in the Project documents such as Project Implementation Manual during the start-up phase, M & E system, Annual Work Plan and Budget and Progress reports;
- In collaboration with the project M&E specialist, ensure adequate data collection on nutrition indicators and entry in the Project's M&E database (e.g. develop terms of reference for baseline/endline studies, design additional studies including food and nutrition survey or food Knowledge Attitudes and Practice survey);
- In close liaison with the IFAD staff, support the documentation of best practices and lessons learned for in-country and global dissemination;
- Establish and maintain working relationships with the line ministries (such as health, gender, education) to build synergy in nutrition-sensitive interventions in project interventions and establish coordination mechanisms;
- Support the coordinator to establish local partnerships on nutrition (UN, Private sector, CSO) to support implementation and technical assistance;
- Facilitate the implementation of nutrition activities in close collaboration with relevant stakeholders (e.g., implementing partners, extension workers, community service providers);
- Develop a nutrition communication strategy in the project interventions, including development of campaign messages, training events/forum, materials;
- Coordinate capacity building and training sessions on nutrition-sensitive interventions for project staff, implementers and extension workers;
- Track and document substantive data and information on food security and nutrition indicators and maintain regular progress reporting especially at supervision, midterm and completion;
- Work collaboratively with the project technical experts including gender, youth and climate in the implementation and documentation of interface on nutrition outcomes;
- Perform other duties as required in the overall operations of the project.

Minimum qualifications and experience for Nutrition Specialist:

- ✓ Advanced University/college degree from an accredited institution in the field of Human Nutrition, food science or equivalent in a field related to food security.
- ✓ At least 2 years of experience in, and demonstrated understanding of food and nutrition initiatives in rural development. Knowledge of and experience in the country is preferable.
- ✓ Experience in training and capacity building is required. Knowledge on the interactions between nutrition, gender, youth and climate change is strongly desirable.
- ✓ Experience of interacting with a variety of internal and external stakeholders is desirable.
- ✓ Strong project management and coordination skills; and basic knowledge on M&E is desirable.

Additional resources and learning materials

Topic	Resources
Nutrition-sensitive programming	FAO (2015), <i>Designing nutrition-sensitive agriculture investments. Checklist and guidance for programme formulation</i> . Provides detailed guidelines on how to carry out a nutrition situation appraisal including questionnaires for interviews and a comprehensive list of secondary sources of information. http://www.fao.org/3/a-i5107e.pdf
	FAO (2017), <i>Nutrition-sensitive agriculture and food systems in practice. Options for interventions</i> . Offers a list of food system-based intervention options that have great potential to improve nutrition and a sets concrete entry points for maximizing the impact of each of these interventions. http://www.fao.org/3/a-i7848e.pdf
	World Bank (2012), <i>Prioritizing Nutrition in Agriculture and Rural Development, Guiding Principles for Operational investments</i> . Provides a set of guiding principles for incorporating nutrition goals into the design and implementation of agricultural and rural development projects. https://openknowledge.worldbank.org/bitstream/handle/10986/13571/NonAsciiFileName0.pdf?sequence=1&isAllowed=y
	WFP (2017), <i>Unlocking WFP's potential, Guidance for nutrition-sensitive programming</i> . Outlines clear steps to formulate nutrition-sensitive operations, including methods and tools to inform a nutrition-sensitive analysis. https://docs.wfp.org/api/documents/WFP-0000022216/download/
Nutrition-sensitive indicators	FAO (2016), <i>Compendium of indicators for nutrition-sensitive agriculture</i> . Covers a bunch of different topics, such as diet quality at individual level and food access at household level, and type of investments, from income-generation to natural resource management practices, health and sanitation, from women's empowerment to food production and availability. http://www.fao.org/3/a-i6275e.pdf
	FAO and FHI 360 (2016) <i>Minimum Dietary Diversity for Women: A Guide for Measurement</i> . Provides clear instructions on how to apply, analyze and interpret the MDD-W. http://www.fao.org/3/a-i5486e.pdf
	SARD-Initiative, FAO (2006), <i>Cultural indicators of Indigenous Peoples' food and agro-ecological system</i> . Offers a set of indicators to assess Indigenous Peoples' food and agro-ecological systems for policy, planning and advocacy purposes. The list of indicators results from a collective work with Indigenous Peoples' representatives and they were agreed upon consensus during Global Consultations and meetings. http://www.fao.org/tempref/docrep/fao/011/ak243e/ak243e00.pdf
	Tebtebba Foundation (2008), <i>Indicators relevant for Indigenous Peoples: a Resource Book</i> . Based on a collaborative effort, this resource book offers a strategic framework of indicators relevant to indigenous peoples in different thematic areas, including food security.
Integrated Homestead Food Production	IFAD (2015), <i>Toolkit: Integrated Homestead Food Production (IHFP)</i> . This toolkit offers operational guidance on how to design and implement projects that incorporate IHFP into IFAD investment projects. The Toolkit comprises a Teaser, a How To do Note and Lessons learned on past experiences on IHFP. https://www.ifad.org/en/web/knowledge/publication/asset/39385352
Nutrition-sensitive value chains	IFAD (2018), <i>Toolkit: Nutrition-Sensitive Value Chains: a guide for project design, Volume I and Volume II</i> . It provides guidance on how to design nutrition-sensitive value chains for smallholder farmers in the frame of agriculture development projects. The guide comprises two volumes: Volume I provides validated step-by step guidance for project design, while its companion Volume II presents practical resources, tools and templates to be used at each step of the design process. Volume I: https://www.ifad.org/documents/38714170/40804965/NSVC+A+guide+for+project+design+++Vol.+I.+Web+filepdf.pdf/5177a3c0-a148-4b1f-8fff-967a42f51ce8 Volume II: https://www.ifad.org/documents/38714170/40804965/Nutrition+guide+Vol.II.pdf/2c1abcdd-3cb7-4d94-a609-f5d048b078b4

Nutrition and Climate change	<p>IFAD (2017), <i>The Nutrition advantage. Harnessing the nutrition co-benefit of climate-resilient agriculture</i>. It provides a review on the nutrition and climate change nexus based on project documentation and literature. https://www.ifad.org/documents/38714170/40321185/Nutrition_Advantage_web.pdf/219cc7b6-db5b-4b30-a3ab-85cd73797541</p>
Gender and Nutrition	<p>SPRING (2017), <i>Training manual on Gender and Nutrition (only in FRENCH)</i>, SPRING. Based on SPRING's experience in Senegal, the manual offers guidance on how to address the gender equality and women's empowerment in nutrition and agriculture. https://www.spring-nutrition.org/sites/default/files/publications/tools/spring_sn_genre_manuel_nutrition.pdf</p>
Neglected, Underutilized Species and Indigenous Peoples	<p><i>Operational Framework on Supporting Nutrition-Sensitive Agriculture through Neglected and Underutilized Species</i> Stefano Padulosi, Phrang Roy and Francisco J. Rosado-May – Bioversity International, IFAD, Canada Language: EN FR SP https://www.ifad.org/en/web/knowledge/publication/asset/41245090</p> <p><i>Fighting Poverty, Hunger and Malnutrition with Neglected and Underutilized Species – Bioversity International, IFAD, CIAT, Canada</i> https://www.bioversityinternational.org/fileadmin/migrated/uploads/tx_news/Fighting_poverty_hunger_and_malnutrition_with_neglected_and_underutilized_species_NUS_1671_03.pdf Language: EN</p>
Topic	E-learning and training modules
FAO: Nutrition, Food Security and Livelihoods: Basic concepts	<p>This 35-minute module addresses the basic terms and concepts relating to food and nutrition, malnutrition, food security and livelihoods. http://www.fao.org/elearning/#/elc/en/course/NFSLBC Language: EN</p>
FAO: Improving Nutrition through Agriculture and Food Systems	<p>This course illustrates the linkages between agriculture, food systems and nutrition. It describes benefits and opportunities for integrating nutrition into food system policies, investments and programmes. http://www.fao.org/elearning/#/elc/en/course/NFS Languages: EN- FR- RU</p>
FAO: How to conduct a Nutrition Situation Analysis	<p>This course aims to develop capacities for designing, implementing, monitoring and evaluating nutrition-sensitive food and agriculture policies, strategies, plans and programmes. http://www.fao.org/elearning/#/elc/en/course/NSA Language: EN</p>
FAO: Agreeing on causes of malnutrition for joint action	<p>This is self-training tool. It guides users through the simulation of a workshop process in the fictional country of Namambar. You will learn how to use a methodology based on malnutrition problem-and-solution trees to support joint planning for combating food insecurity and malnutrition. http://www.fao.org/elearning/#/elc/en/course/ACMJA Language: EN</p>
FAO, IFAD, WFP, Bioversity: Sustainable Food Value Chains for Nutrition	<p>This course aims to develop capacities for designing sustainable food value chains for nutrition. Through a step-by-step process, you will learn how to develop nutrition-sensitive value chains, along the whole pathway (from production to consumption). https://www.ifad.org/en/web/knowledge/publication/asset/39438327</p>
FANTA and Michigan State University	<p>This course is designed for programme managers and project staff as well as government officials engaged in agriculture, nutrition, or multisectoral work who want to learn how to plan, design, and implement integrated agriculture and nutrition programming. https://www.fantaproject.org/tools/nutrition-sensitive-agriculture-programming-online-training-course Language: EN</p>



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