Guidance Note: Step 2 (categorization) and Step 3 (weighting)

Step 2 – categorization of budget allocations identified in key selected sectors

This requires: 1) close consultation with sectoral stakeholders, who know the content of the identified budget allocations through the key word search and/or; 2) provision of the programme description to get a better understanding on how the programme contributes to nutrition-sensitive outcomes, which are explicit in the design through activities, indicators, expected results or target populations.

Budget allocations categorized as "nutrition-specific"

Budget allocations that are specific to nutrition would be those that are within a nutrition department or a nutrition program or a so-called nutrition budget line¹. *All* resources (finance, assets and human) in the identified budget allocation should be clearly devoted towards a clearly mentioned nutrition objective or outcome.

Interventions or programmes could be categorized as "nutrition-specific (high-impact)²" if they clearly address the immediate determinants of fetal and child nutrition and development – adequate food and nutrient intake, feeding, caregiving and parenting practices, and low burden of infectious diseases. Examples include: adolescent, preconception, and maternal health and nutrition; maternal dietary or micronutrient supplementation; promotion of optimum breastfeeding; complementary feeding and responsive feeding practices and stimulation; dietary supplementation; diversification and micronutrient supplementation or fortification for children; treatment of severe acute malnutrition; disease prevention and management; nutrition in emergencies.

Budget allocations categorized as "nutrition-sensitive"

health and family planning services.

Budget allocations that are relevant to nutrition are those that clearly mention a *nutrition objective* and/or outcome and/or action as part of an integrated program or as part of a department mandate. Interventions or programmes are categorized as "nutrition-sensitive" if they address the underlying determinants of fetal and child nutrition and development— food security; adequate caregiving resources at the maternal, household and community levels; and access to health services and a safe and hygienic environment—and incorporate specific nutrition goals and actions.

potentially increasing their scale, coverage, and effectiveness

Examples include: agriculture and food security; social safety nets; early child development; maternal mental health; women's empowerment; child protection; schooling; water, sanitation, and hygiene;

Nutrition-sensitive programmes can serve as delivery platforms for nutrition-specific interventions,

Useful reference material: Annex 1: Nutrition-sensitive outcomes (SUN Donor Network)

¹ Budget lines concentrate interventions that are specific to nutrition. This makes the tracking a much easier process but the availability of budget lines depend on the format of the budget. Governments may choose to reflect investments that are specific to nutrition at the department level, at the programme level or at the activity level. Similarly, for those Governments that provide information on targets or outputs linked to budget allocations, information on nutrition interventions might be provided at the purpose level linked to numerous budget lines for different items.

² Ruel M. T., and Alderman H. 2013 "Nutrition-sensitive interventions and programmes: how can they help to accelerate progress in improving maternal and child nutrition?" *The Lancet 382 (9891), 536-551*

Step 3 – weighting of budget allocations identified in key selected sectors

Each country will need to make a judgement call and explain the reasons of their weighting. Countries will be in the best position to assign a weight to programmes and departments based on their knowledge of the types of malnutrition and the key determinants. The emphasis on key determinants may differ significantly across countries and will depend very much on the prevalence level of key determinants at national and sub-national level (e.g. prevalence of female education; prevalence of people affected by HIV/AIDS; prevalence of skilled attendant at birth; prevalence of early childbearing: births by age 18; improved sanitation coverage; prevalence of undernourished population; etc.).

The **Nutrition Country Profiles**³ developed by the Global Nutrition Report can help to get a comprehensive overview on under-nutrition outcomes (poor height attainment, thinness, micronutrient deficits) and outcomes related to other forms of malnutrition such as overweight, obesity and some diet related non-communicable disease. All age groups are covered: children and women of childbearing and all other adults. Determinants of good nutrition are covered at the immediate level (nutrition-specific intervention and practice coverage) and the underlying level (poverty, inequality, food security, water and sanitation, health access and girls enrollment rate). Finally the Profiles describe how enabling the environment is for nutrition improvement (policies, legislation, spending, institutional transformation and levels of government commitment).

Option 1: 25% weight assigned to all budget allocations categorized as "nutrition-sensitive"

The assignment of a 25% weight for all "nutrition-sensitive" budget allocations is a practical way to move forward *if* the analyzed budgets are not articulated at the program level or if the identified programmes or departments do not provide sufficient details on the expected outcomes and outputs.

Option 2: weighting of budget allocations categorized as "nutrition-sensitive" (sub-categories 75%, 50% and 25%)

A more refined weighting *could* be applied *if* the analyzed budgets are articulated at program level and if the identified programmes and departments provide details on the expected outcomes, outputs, types of interventions, target groups, etc.

Useful reference material: Annex 2: Table based on examples taken from documents submitted by participating countries

2

³ http://globalnutritionreport.org/the-data/nutrition-country-profiles/

Annex 1: Nutrition-sensitive outcomes⁴

These outcomes, used to gauge the degree of nutrition sensitivity, are drawn from the nutrition conceptual framework (UNICEF 1990), the Reference Document "Addressing Undernutrition in External Assistance" (EC 2011) and the SUN Movement Strategy 2012-2015.

A. At individual level (children or adolescent girls or women):

- Increase purchasing power of women (examples: safety nets, cash transfers)
- Improve access to nutritious food of women, adolescent girls and/or children (examples: agriculture/livestock diversification, biofortification, food safety, increased access to markets)
- Improve the diet in quality and/or quantity for women, adolescent girls or children (examples: promotion of quality/diversity, nutritious diets, quantity/ energy intake in food insecure households, stability, micronutrient intake, vouchers, access to markets)
- Improve access of women or adolescent girls or children to primary healthcare (examples: maternal health care, child healthcare, reproductive healthcare, supplementation, therapeutic feeding, support to breastfeeding)
- Improve access to childcare (i.e. childcare not supplied through the health services)
- Improve women or adolescent girls or children access to water, sanitation and hygiene (examples: access to latrines, access to safe water, improvement of hygiene)
- Improve access to education/school for adolescent girls
- Improve knowledge/awareness on Nutrition for relevant audiences (examples: inclusions of nutritional education in the curriculum for primary and secondary education, TV and radio spots addressing vulnerable households and decision makers, nutrition awareness campaigns ...)
- Improve empowerment of women (examples: access to credit, women based smallholder agriculture, support to women's groups)

B. National level:

- Improved governance of nutrition (examples: increased coordination of actors and policies for nutrition, establishment of budgets specifically contributing to nutrition, improvement of institutional arrangements for nutrition, improved nutrition information systems, integration of nutrition in policies and systems)
- Increase nutrition sensitive legislation (examples: food fortification legislation, right to food, legislation for the implementation of the Code of Marketing of Breast-Milk Substitutes, food safety)

C. Research

Increased research with nutrition objectives

⁴ SUN Donor Network (December 2013): Methodology and Guidance Note to Track Global Investments in Nutrition

Annex 2: Weighting table

Assigned weight	Justification	Examples
100%	Only allocations identified as nutrition-specific All resources (finance, assets and human) in the identified budget allocation are devoted towards a clearly mentioned nutrition objective or outcome. The identified budget allocation describes a well-defined sectoral intervention with high-impact evidence (2013 Lancet Series)	 National Food and Nutrition Commission; Management of Malnutrition; Micronutrient supplementation program Infant & Young Child Feeding Counselling Nutrition support program Food consumption and nutrition assessment
75%*	The identified budget allocation clearly mentions a nutrition objective and/or outcome and/or action as part of an integrated program or department mandate. The identified budget allocation describes a well-defined intervention / action that addresses an immediate determinant of fetal and child nutrition (e.g. nutrient intake) and/or specifically targets children, women of reproductive age and households that are at highest risk of malnutrition	 Block allocation for multi-sectoral nutrition intervention; Integration of Health Services Delivery with special focus on MNCH, LHW, EPI and Nutrition Integrated Reproductive Maternal, Newborn, Child Health & Nutrition Program Nutrition and public health surveillance system Food safety inspection Kitchen gardening – a way to safe & nutritious vegetables
50%*	The identified budget allocation describes a well-defined sector-wide program or department that clearly addresses an underlying determinant of fetal and child nutrition and specifically targets children, women of reproductive age and households at high-risk of malnutrition	 Introduction of Early Childhood Education National program for Family Planning & Primary Health Care Conditional cash transfer to keep adolescents in the education systems Promotion of girls education National reproductive health program
25%*	The identified budget allocation describes a sectorwide program or department that clearly addresses underlying determinants of fetal and child nutrition and development. The program or department works at the 'environment' or 'population' level by addressing characteristics that are related to the effectiveness of a nutrition outcome (e.g. maternal or parental education, access to health services, safe and hygienic environment, etc.).	 Agriculture improvement for food security Improved storage structures Revamping agriculture extension services Support to elementary and secondary education Water supply schemes Income support program Social welfare support Women development National TB control program National HIV/AIDS control program

Note 1: all examples are taken from documents submitted by participating countries.

Note *: 75%, 50% and 25% apply only to nutrition-sensitive allocations (all nutrition-specific allocations are given a weight of 100%)