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Mapping Information Systems for Nutrition in SUN Countries

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1. INTRODUCTION

National nutrition information systems are essential for assessing the current status and measuring changes in nutritional status of populations, tracking progress of actions taken to improve nutrition, and prioritizing efforts toward improving nutrition (Scaling Up Nutrition (SUN), 2014a). An accurate assessment of the nutrition situation allows governments and their development partners to make evidence-based decisions with regards to nutrition policy and program development. Nutrition information is useful for advocacy, planning, budgeting, program design, and monitoring and evaluation. Additionally having a greater understanding of nutrition-related needs and program reach allows for improved collaboration and efficiency amongst the various stakeholders (Food and Agriculture Organization (FAO), 2015).

The objective of this work is to map the information systems for nutrition in SUN countries in collaboration with other actors. Based on the information available, we seek to define a framework that will categorize the typology and state of advancement of the information systems/platforms in the SUN countries and identify specific needs.

The mapping research was carried out by a team of Nutrition International consultants during the period of July to December 2016, under the guidance of representatives from the SUN Movement Secretariat, and with the financial support of the TAN project (Nutrition International, formerly the Micronutrient Initiative).

2. METHODOLOGY

Information systems for nutrition are complex and vary widely across countries. We developed a list of indicators that were expected to correspond with the essential components of a functional and effective national nutrition information system.

2.1 Indicator Group Descriptions

Indicators were grouped under three components: 1) government commitment and enabling environment; 2) national assessment data; and 3) national performance monitoring data for nutrition (see Figure 1). The following section provides a detailed description of each group.

2.1.1 Government Commitment & Enabling Environment

The first component, Government Commitment & Enabling Environment, seeks to summarize the extent to which a country has established a governance mechanism to prioritize, collect, access and use data and information on nutrition. The majority of information is derived from government sources and is relied heavily upon by other stakeholders working to improve nutrition. The level of commitment that a government has in providing representative, complete and publicly accessible data on the nutrition situation contributes greatly to the development and implementation of effective nutrition policies, strategies and programmes.

We look first of all at each country's Common Results Framework (CRF) and determine whether there is an agreed Monitoring & Evaluation framework in place that includes specific nutrition indicators to monitor and evaluate the effectiveness of implemented programs (FAO, 2005). These documents are useful for clearly articulating the specific nutrition data to be gathered from multiple sources in order to inform multi-sectoral responses. Another indicator in this component assesses whether the country has conducted a budget analysis to review allocations for nutrition in the national budget in order to identify gaps and support resource mobilization.

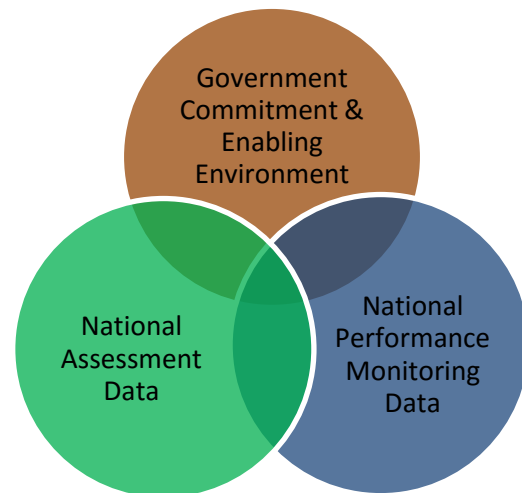


FIGURE 1: INFORMATION SYSTEMS FOR NUTRITION FRAMEWORK

SUN countries are aiming to meet by 2025 the World Health Assembly (WHA) global targets for improving maternal, infant and young child nutrition (WHO 2014a). Inclusion of these goals in national policies and strategies is essential for ensuring that information systems measure progress toward the agreed targets. We assess the number of WHA global nutrition targets included in the country's CRF and M&E Framework. We also assess whether the country is tracking progress in the prevention and control of major non-communicable diseases (NCD) using three nutrition-specific NCD targets: overweight and obesity in adults, diabetes and population salt intake.

Finally, as indicators of the coordination of nutrition information, we assess whether the government has designated a ministry or department to coordinate nutrition information from various sources, established a central repository for nutrition data and reports to be published and shared, and made this repository publicly accessible. We also assess whether a mapping of nutrition stakeholders has been conducted in order to improve coordination.

2.1.2 National Assessment Data

The second component, National Assessment Data, looks at what types of national surveys and surveillance systems are being used to provide an overall picture of the nutrition situation across the country. We assessed whether countries are collecting national population-based data using the Demographic Health Survey (DHS), the Multiple Indicator Cluster Survey (MICS) (UNICEF, 2013) or the Standardized Monitoring and Assessment of Relief and Transitions (SMART) survey methodology (national level only). In many countries, these surveys are the principal source of data on nutrition specific indicators including anthropometric measures, infant and young child feeding practices, and micronutrient intervention coverage (vitamin A and iron supplementation, iodized salt, zinc supplements for child diarrhea treatment) (DHS, 2016) as well as nutrition sensitive indicators such as water and sanitation practices, and quality and access to antenatal care (Hancioglu & Arnold, 2015).

We also assess whether a country has conducted a national micronutrient or fortification survey in the past ten years. These surveys are important sources of information on the prevalence and

distribution of micronutrient deficiencies (e.g. iron, folate, vitamin A, and iodine) in pregnant women, women of reproductive age, children under five years of age and other nutritionally vulnerable groups.

Other surveys, such as food consumption, food security or vulnerability mapping provide important information on national food-related issues. We assess whether the country has conducted some form of Household Consumption and Expenditure Survey (HCES) in the past five years, which include indicators of household food consumption. This includes the Living Standards Measurement Surveys that assess household food consumption, anthropometric measures and breastfeeding practices (World Bank, 2016). We also assess if a country has conducted food security and vulnerability mapping, conducted through various survey methods by the World Food Program, which provides data on food security concerns and vulnerable populations (WFP, 2016).

2.1.3 National Performance Monitoring Data

The third component, National Performance Monitoring Data, focuses on the systems in place to routinely monitor coverage of services and programmes in various sectors for accurate progress tracking and prioritization of future efforts (SUN, 2014b). Strong monitoring and reporting of programme performance requires robust and quality routine information systems (UNICEF 2014). As data sources, we look at both nutrition-specific interventions and programmes as well as other sectors relevant to nutrition.

For nutrition-specific interventions, we assess whether routine coverage data is collected for a shortlist of essential maternal and child nutrition interventions (Bhutta et al., 2013; WHO, 2013a). These include interventions delivered through health facilities and monitored through HMIS as well as other programme indicators for nutrition interventions that may be monitored through other means.

Information systems in other key sectors for nutrition are a valuable source of data for context-specific analyses. We assessed whether data is available from Management Information Systems in these other sectors, including health (HMIS), agriculture and food (AMIS), education (EMIS), water, sanitation and hygiene (WASH), social protection programmes and early childhood development.

2.2 Data Collection Process and Sources

To obtain data on each indicator for the 57 SUN countries, we searched on the internet for credible, up-to-date, and publicly available data sources. Wherever possible, we used sources that were comparable across countries. If no multi-country synthesized source of information was found, then we used country-specific sources, including government websites and reports, UN organization reports, research articles or other civil society organization reports.

A summary of the indicators assessed is shown below in Table 1. Appendix A provides a detailed list of the indicators along with how each one was defined and what data sources were used to collect information for each country.

TABLE 1: LIST OF KEY INDICATORS BY COMPONENT

1. GOVERNMENT COMMITMENT & ENABLING ENVIRONMENT

1.1 Policy & Planning Documents

Existence of Common Results Framework (CRF)
Existence of an agreed M&E framework
Budget analysis for nutrition completed

1.2 Global nutrition targets tracked

World Health Assembly global targets for nutrition
NCD nutrition-related targets

1.3 Institutionalization & coordination of nutrition information system

Government ministry/department designated for coordination
Central repository for information and reports
Publically accessible information
Stakeholder Mapping conducted

2. NATIONAL ASSESSMENT DATA

2.1 National health & demographic surveys

Demographic Health Survey
Multiple Indicator Cluster Survey
National SMART Surveys

2.2 Micronutrient/Fortification Survey

2.3 Other Food Surveys

Household Consumption & Expenditure Surveys
Food security and vulnerability assessment

3. NATIONAL PERFORMANCE MONITORING DATA

3.1 Nutrition specific interventions & programmes

Micronutrient supplementation during pregnancy
Food supplementation during pregnancy
Breastfeeding promotion
IYCF counseling
Vitamin A supplementation to children under 5 years
Detection & management of acute malnutrition children under 5
Fortification of staple foods

3.2 Sectoral platforms relevant for nutrition

Health sector (HMIS)
Agriculture and Food sector, including Early Warning Systems and food market monitoring
Education sector (EMIS)
Water, Sanitation and Hygiene (WASH) sector
Social Protection, including Safety Net Programs
Early Childhood Development

3. KEY FINDINGS

The following sections provide a summary of the results observed from the analysis of the data collected. A summary of the key indicators for all countries is included in Appendix B.

3.1 Government Commitment & Enabling Environment

3.1.1 Policy and Planning Documents

A **Common Results Framework** that includes a **Monitoring and Evaluation Framework** is useful for clearly articulating the specific nutrition data to be gathered from multiple sources in order to inform multi-sectoral responses. While 42 of 57 SUN countries have developed a Common Results Framework (at least in draft form), only 22 of these have an agreed Monitoring and Evaluation framework as part of those documents.

Based on a regional analysis of the data (see Table 2), countries in Latin America and South or Southeast Asia were more likely to have a Monitoring and Evaluation framework. Countries in West and Central Africa and West and Central Asia were less likely to have one.

About three quarters (43 of 57) of SUN countries have conducted at least once a budget analysis that reviews allocations for nutrition in the national budget. This helps identify gaps and supports resource mobilization for nutrition.

TABLE 2: REGIONAL ANALYSIS OF SUN COUNTRIES WITH M&E FRAMEWORKS

Region	% (n/N) with M&E Framework
Latin America/Carribbean	60 (3/5)
West/Central Africa	19 (3/16)
East/Southern Africa	45 (10/22)
West/Central Asia	0 (0/4)
South/Southeast Asia	60 (6/10)
Overall	39 (22/57)

3.1.2 Tracking Global Targets

SUN countries are aiming to meet by 2025 the **World Health Assembly (WHA) global targets for improving maternal, infant and young child nutrition**. Inclusion of these goals in national policies and strategies is essential for ensuring information systems measure progress toward the agreed targets. Countries are also encouraged to track progress in the **prevention and control of major non-communicable diseases (NCD)**, including three nutrition-specific indicators: the monitoring of overweight/obesity, prevalence of diabetes and levels of sodium intake.

As shown in Figure 3, 32 of the 57 SUN countries have explicitly stated at least one or more of the WHA global nutrition targets in their national nutrition policy and strategy documents to date. Only 9 countries have included all six targets. Figure 3 shows that the most commonly stated indicators were exclusive breastfeeding (28 countries), stunting in children U5 (27 countries) and maternal anemia (25 countries).

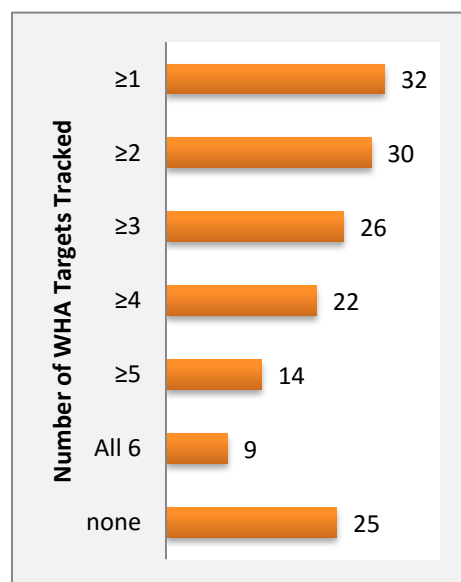


FIGURE 2: NUMBER OF SUN COUNTRIES TRACKING WHA TARGETS BY NUMBER OF TARGETS

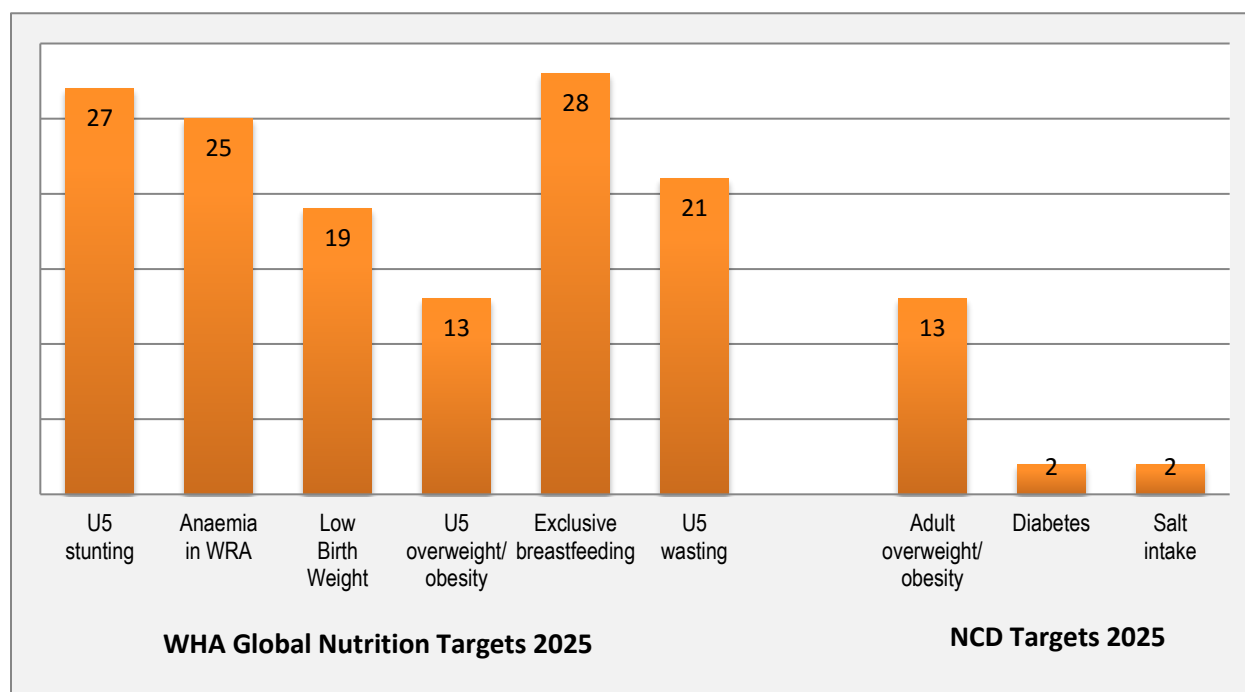


FIGURE 3: NUMBER OF COUNTRIES TRACKING GLOBAL NUTRITION TARGETS

Few countries have explicitly included NCD-related nutrition targets either (see Figure 3). Only 13 countries have committed to tracking overweight and obesity in children or adults. Tracking of diabetes prevalence and sodium intake is even less common, with only two countries including these indicators in their nutrition documents to date.

Half of the countries assessed released their national nutrition policies (or CRFs) prior to 2012, before the WHA global nutrition targets were endorsed. However, even when the analysis is limited to the 21 countries that revised and updated their national policy/strategy after 2012 (CRFs dated from 2013 onwards), the results do not change in any marked way (see Table 3).

TABLE 3: NUMBER OF COUNTRIES TRACKING GLOBAL NUTRITION TARGETS BY POLICY YEAR

WHA Target	Countries with CRF (N=42)	CRF dated 2013 or later (N=21)	CRF dated 2015 or later (N=4)
Stunting in children U5	23 (55%)	12 (52%)	4 (100%)
Anemia in WRA	20 (48%)	11 (48%)	4 (100%)
Low birthweight	17 (40%)	9 (39%)	2 (50%)
Overweight/obesity in children U5	11 (26%)	7 (30%)	3 (75%)
Exclusive breastfeeding	24 (57%)	12 (52%)	3 (75%)
Acute malnutrition in children U5	18 (43%)	11 (48%)	4 (100%)

3.1.3 Institutionalization and Coordination

Research on the degree of institutionalization of information systems for nutrition in these countries was difficult. Evidence of a designated coordinating department or ministry for nutrition information was found for 21 countries, often based on policy documents assigning responsibility for information coordination to specific government departments. A central

repository for nutrition data and reports that facilitates sharing information across sectors and programs was found in 21 countries as well, with 16 of these repositories being publicly accessible (i.e. available to the public online). However, many of the most recent documents in these repositories were several years old, suggesting poor timeliness of information sharing.

A review of stakeholders involved in nutrition actions across the country also helps ensure better coordination of information. A total of 36 SUN countries have conducted some form of stakeholder mapping, as described in Table 2 below.

TABLE 4: COUNTRIES WITH STAKEHOLDER MAPPING EXERCISES BY TYPE

Type of Stakeholder Mapping	Description	SUN Countries with Completed Mapping
Stakeholder and Nutrition Action Mapping (SUN PMT)	Multi-stakeholder (government, civil society, UN, donors) mapping of Core Nutrition Actions, including analysis of geographic and beneficiary coverage and delivery mechanism	Asia (2) – Lao PDR, Myanmar, Africa (11) – Burkina Faso, Burundi, Ethiopia, Ghana, Mali, Niger, Rwanda, Senegal, Somalia, Tanzania, Uganda Latin America (3) – Guatemala, Haiti, Peru
SUN Business Network*	Country landscaping includes: <ul style="list-style-type: none"> • Entry points for business in SUN Country plans • Private sector landscape (initiatives, key sectors) • Assessment of opportunities for development of National SUN Business Networks 	Asia (5) – Kyrgyz Republic, Pakistan, Philippines, Tajikistan, Vietnam, Africa (8) – Cote d’Ivoire, Ethiopia, Ghana, Mozambique, Nigeria, Senegal, Tanzania, Zambia
SUN Civil Society Network	Mapping of civil society actors and programmatic focus at national and sub-national levels. Beneficiary coverage and delivery may be included. Contribution to REACH mapping where present. <i>Rwanda and Nepal</i> – detailed mapping of good practices from civil society contributing to reducing malnutrition.	Asia (10) – Bangladesh, Kyrgyz Republic, Lao PDR, Cambodia, Myanmar, Nepal, Pakistan, Philippines, Tajikistan, Vietnam Africa (21) – Burkina Faso, Chad, Côte d’Ivoire, DRC, Ethiopia, Ghana, Guinea, Kenya, Madagascar, Malawi, Mali, Mozambique, Niger, Rwanda, Sénégal, Sierra Leone, Somalia, Tanzania, Uganda, Zambia, Zimbabwe Latin America (4) – Guatemala, Perú, El Salvador, Haiti
REACH stakeholder mapping	Multi-stakeholder (government, civil society, UN, donors) mapping of priority actions, including analysis of geographic and beneficiary coverage and delivery mechanisms.	Asia (2) – Bangladesh, Nepal, Africa (5) – Ghana, Mozambique, Sierra Leone, Somalia [†] , Tanzania
UN Inventory	Mapping of nutrition actions, investments, geographic areas covered and alignment to national priorities. Included: FAO, UNICEF, WFP, WHO, UNFPA	Asia (3) – Bangladesh, Myanmar, Philippines Africa (10) – Burkina Faso, Chad, DRC, Ghana, Guinea, Mali, Mozambique, Rwanda, Senegal, Tanzania Haiti

* Planned (and funded) before June 2017: Bangladesh, Rwanda, Costa Rica, Guatemala, El Salvador, Peru

† WFP and UNICEF have supported the government and nutrition partners to do a mapping of nutrition interventions by partners in different locations. This was not done in the formal SUN mechanism but under the nutrition cluster mechanism

The UN Network has done three different types of stakeholder mapping over the past five years. The most complete type of mapping is the Stakeholder and Action Mapping where they look at all stakeholders (except companies) and their respective nutrition actions, using a core set of actions as a guide. Where possible, these mapping exercises have included information from the Civil Society Alliances. The SUN Business Network is also conducting mapping exercises with their own constituency, with 10 countries that have completed this type of mapping and five additional countries in the planning stages. So far there are only five countries (Ethiopia, Ghana, Philippines, Senegal and Tanzania) that have had a stakeholder mapping conducted by the UN Network, Civil Society Network and Business Network. Tanzania and Ghana have had all types of stakeholder mapping conducted over the past years.

3.2 National Assessment Data

3.2.1 Population-based Multi-Sector Surveys

Nutrition has historically relied heavily on population-based surveys for collection of data (Kim, 2016). The majority of SUN countries (48/57) have conducted the DHS and 29 have conducted the MICS within the past five years.

Sixteen countries in sub-Saharan Africa and Haiti have recently conducted a national-level SMART survey, with many of these countries now using this methodology to assess nutrition indicators on an annual basis. None of the SUN countries in the other regions have conducted this type of national nutrition survey, based on our data sources.

Taken together, 55 of 57 SUN countries have collected nationally representative data on nutrition indicators within the past five years.

3.2.2 National Micronutrient Surveys

Although data on micronutrient indicators is sometimes collected as part of the above-mentioned surveys, many countries conduct national-level micronutrient surveys to provide important information on levels of vitamin and mineral deficiencies in specific population groups as well as more detailed information on the population’s knowledge, attitudes and practices in relation to micronutrient-focused interventions. Among SUN countries, 26 have collected data at a national scale specifically on micronutrients in the past 10 years, including those that have used the Fortification Assessment Coverage Toolkit (FACT) developed by GAIN to assess both large-scale food fortification (n=4), targeted food fortification (e.g. products aimed infants and young children; n=4) and USI (n=7). Regional analysis of this indicator shows that these surveys are most common in Asia region (see Table 5).

TABLE 5: REGIONAL ANALYSIS OF SUN COUNTRIES WITH NATIONAL MICRONUTRIENT SURVEY

Region	% (n/N)
Latin America/Carribbean	20 (1/5)
West/Central Africa	44 (7/16)
East/Southern Africa	32 (7/22)
West/Central Asia	75 (3/4)
South/Southeast Asia	80 (8/10)
Overall	46 (26/57)

3.2.3 National Food Surveys

Other national surveys, such as food consumption, food security or vulnerability mapping provide important information on national food-related issues. Household-level food consumption data is broadly available, with all 57 SUN countries having conducted some form of a Household Consumption and Expenditure Survey; 53 have data collected within the past five years.

The WFP manages a “one stop shop” website (<http://vam.wfp.org/>) with country-specific food security analysis information and reports from the most recent emergency and market assessments, baseline studies, and Monitoring, Updates and Bulletins on Food Security and Markets. Based on the information found in this database, 44 countries have some form of food security or vulnerability assessment mapping within the past five years.

3.3 National Performance Monitoring Data

The availability of administrative information across various sectors and nutrition-specific programs was very difficult to assess for the majority of countries. The global nutrition community generally relies on periodic survey data to provide service coverage trends over time. However, governments and other development actors require well-functioning management information systems in the various sectors to provide timely, accurate and comprehensive data to track program performance and identify potential bottlenecks to be addressed.

3.3.1 Nutrition specific interventions & programmes

Based on the data found, nutrition-specific interventions tend to be delivered and monitored through a sectoral service delivery platform (e.g. through health facilities or schools) or a stand-alone nutrition program. Several key nutrition interventions that we assessed are delivered through health facilities and therefore can be tracked through the government’s health management information system (HMIS). However, most country HMIS were not publicly accessible and many of the nutrition policies/ strategies did not clearly state whether and how frequently these key nutrition indicators were monitored through the HMIS.

As shown in Figure 4, we could only confirm for 18 countries that micronutrient supplementation delivered to pregnant women through ANC services was being monitored on a monthly basis through the HMIS. For breastfeeding and IYCF counseling services delivered at the health facility level, results from the NutriDash 2015 database showed that 33 and 27 countries, respectively, reported monitoring these indicators in their HMIS (UNICEF, 2016). Management of acute malnutrition was also tracked by 32 countries as part of their HMIS, based in large part on data reported by countries in the NutriDash 2015 database.

Information on nutrition programme-based monitoring data also varied by intervention. UNICEF maintains a global database for vitamin A supplementation to children 6-59 months of age delivered through campaigns or child health weeks.¹ Based on this database, 48 SUN countries reported coverage data for the most recent two rounds of coverage.

¹ http://data.unicef.org/wp-content/uploads/2015/12/child-nutrition_vitamin-A-supplementation.xlsx

Assessment of community-based management of acute malnutrition (CMAM) program coverage is often carried out in a parallel manner to government facility-based monitoring. Based on reports published by the Coverage Monitoring Network, a consortium of NGOs who implement CMAM programmes that collects and shares coverage assessment reports on their website², at least 28 SUN countries have recently assessed CMAM programme coverage at a subnational level.

While provision of protein and energy supplements to women during pregnancy is a recommended intervention, few countries have established programmes and information on coverage monitoring was scarce. A total of nine SUN countries included an indicator tracking the proportion of pregnant (and lactating) women receiving food supplements or fortified foods in their M&E frameworks.

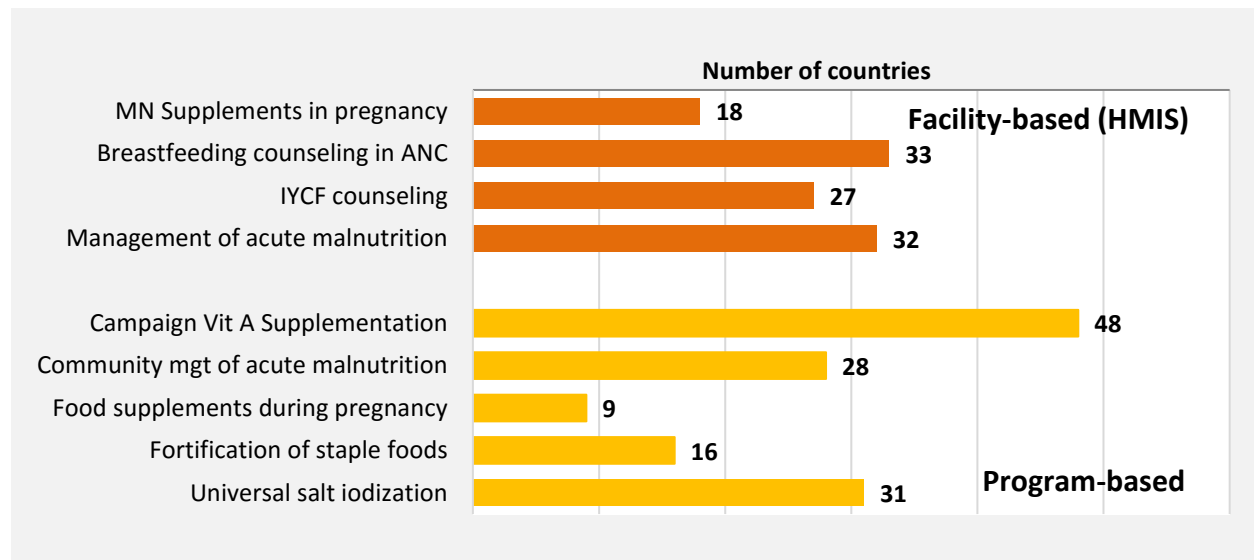


FIGURE 4: NUMBER OF COUNTRIES COLLECTING ROUTINE MONITORING DATA ON NUTRITION-SPECIFIC INTERVENTIONS

Although the majority of SUN countries have fortification programmes, each country has different regulatory bodies that enforce and monitor these efforts (Luthringer et al., 2015). The extent to which monitoring is done and what it actually entails varies greatly across countries and few countries have established routine information systems to track coverage of fortified foods (Greg Garrett, personal communication). Based on our review of SUN country M&E frameworks, 16 countries have included indicators to monitor the fortification of staple foods. UNICEF has also assessed whether countries have established a monitoring system to track universal salt iodization (USI) programme activities as part of the NutriDash database. NutriDash 2015 results reveal that 31 SUN countries report having established such a monitoring system; however, only 22 of these countries confirmed that this monitoring data is actually reported and used for corrective action and adjustments.

3.3.2 Sectoral platforms relevant for nutrition

Management information systems are established for most sectors relevant for nutrition but there were few sources of consolidated data across countries on these systems.

² <http://www.coverage-monitoring.org/>

3.3.2.1 Health

All SUN countries have established health management information systems (HMIS) and most track key nutrition indicators as part of these systems, as discussed above. In Peru and Guatemala, reports on HMIS data are published online regularly. However, this is not the norm for most countries assessed in this study – the reality is that public access to HMIS data is limited and timely reporting of results is uncommon.

3.3.2.2 Agriculture and Food Systems

In the agriculture and food sector, there are more variable types of information systems and no centralized tracking of the systems themselves was found. However, the FAO website provides a wealth of food and agriculture data for all SUN countries on FAOSTAT (<http://www.fao.org/faostat/>), including data on agricultural production, food balance sheets, food security indicators and many others. Many SUN countries have Early Warning Systems in place; our research only identified 12 country systems specifically. Food price monitoring is another type of information monitoring that is done on a regular basis and provides useful data on food security trends. Based on the FAO's data sources for food price monitoring, 49 countries have a designated government institution or other organization that collects this information on a monthly or quarterly basis.

3.3.2.3 Education

The education sector collects information on an annual basis in most SUN countries, often through an annual school census and/or routine monitoring systems. Education Management Information Systems (EMIS) were identified in 55 SUN countries, either directly through the Ministry of Education's information on the internet or via a list of World Bank-supported country projects that included EMIS components. Types of data available may include school mapping, annual age- and gender-specific enrollment figures, class size, teacher to student ratios, completion rates, national assessments of learning outcomes and adult literacy rates. Some national nutrition policies include specific education-related indicators such as the proportion of schools implementing food and nutrition policies or covered by school feeding programs as well as monitoring of the nutritional status of school children. However, reliable, relevant, and easily accessible information about schools, enrollments and educational outcomes is still lacking in many countries (World Bank 2014).

3.3.2.4 Water, Sanitation and Hygiene (WASH)

National information systems in the WASH sector are also highly variable and difficult to assess across countries. Coverage data are normally assessed through periodic household surveys and this data is most useful for contextual assessments. WASH-related indicators were found in 13 SUN country nutrition policy and strategy documents.

The UN Water Global Analysis and Assessment of Sanitation and Drinking-Water (GLAAS) conducts periodic surveys to provide policy- and decision-makers at all levels with a reliable, easily accessible, comprehensive and global analysis of the investments and enabling environment to make informed decisions for sanitation, drinking-water and hygiene (WHO, n.d.). In the 2011 and 2014 surveys, the assessment included questions about national information systems for sanitation and drinking water.

As summarized in Table 6, there has been an increase between 2011 and 2014 in the number of SUN countries with information collected and used for decision-making for both sanitation and

drinking water. Among the 48 SUN countries with GLAAS data in 2014, 36 countries reported having data available in the health sector to identify public health priorities for reducing WASH-related diseases. Data for sanitation and drinking water policy and strategy decision-making were reportedly available in 29 and 38 countries, respectively.

Overall, we found evidence of some form of WASH data collection and use for decision-making in 47 SUN countries (92% of countries with data; n=6 countries with no data).

TABLE 6: SUMMARY OF SUN COUNTRY WASH INFORMATION SYSTEM DATA FROM GLAAS SURVEYS

Year	Sector	Indicator	Results for SUN Countries
2011 (N=46 SUN countries)	Sanitation	National information system that covers sanitation and that is used to inform decisions/ strategy and resource allocation for sanitation (rural)	Yes and used =13 countries Under development = 20 countries No = 13 countries
	Water	National information system that covers drinking-water and that is used to inform decisions/strategy and resource allocation for drinking-water (rural)	Yes and used = 21 countries Under development = 19 No = 6
2014 (N=48 SUN countries)	Health Sector	Data collected and used in the health sector... ...to identify public health priorities for reducing WASH related diseases ...to respond to WASH related disease outbreaks	Data available & analysed through MIS and used for decisions: 36 countries 40 countries
	Sanitation	Data collected and used for decision-making for sanitation... ...policy and strategy ... resource allocation	29 countries 24 countries
	Drinking water	Data collected and used for decision-making for drinking-water... ...policy and strategy ...national standards ...resource allocation	38 countries 37 countries 33 countries

Sources: WHO (2012) UN-water global annual assessment of sanitation and drinking-water (GLAAS) 2012 report: the challenge of extending and sustaining services. http://www.who.int/entity/water_sanitation_health/publications/glaas_report_2012/en/index.html

WHO (2014) UN-Water Global Analysis and Assessment of Sanitation and Drinking-Water (GLAAS) 2014 report: Investing in water and sanitation: Increasing access, reducing inequalities. <http://apps.who.int/iris/handle/10665/139735>

3.3.2.5 Social Protection

There is increasing attention given to the role of **social protection programmes**, specifically **social safety nets**, in terms of their potential to benefit maternal and child nutrition and development. Safety nets are defined as noncontributory transfer programs targeted to the poor or vulnerable, with the aim to increase households' consumption of basic commodities and essential services (Monchuk, 2014). Safety nets are a subset of broader social protection programs along with social insurance and social legislation. The most common examples of safety net programmes in SUN countries vary by region. For example, while national poverty-targeted cash transfer programs are common in Latin American countries, they are not yet implemented at a large scale in African countries. A recent review of the current status of safety

net programmes in Africa found that the most common kinds of programs in this region are school feeding programs, public works programs, in-kind emergency and non-emergency programs, categorical transfer programs and general subsidies (Monchuk 2014).

Safety net program information systems also vary widely across countries. Monchuk’s (2014) review of safety net programs in Africa concluded that lack of basic program information systems and data is a crucial weakness among the majority of them. “Many countries do not have accurate administrative data on the number of beneficiaries reached and benefit levels provided by each of the programs. Programs that distribute food, for instance, in response to emergencies, particularly lack data.” (Monchuk, 2014, p. 6) However, she also notes that advances in information and communication technology are providing opportunities for African countries to establish improved management information systems.

The extent of development of safety net systems in SUN countries in Africa is summarized in Table 7.

TABLE 7: COUNTRY TYPOLOGY BASED ON THE EXTENT OF DEVELOPMENT OF THE SAFETY NET SYSTEM (ADAPTED FROM MONCHUK 2014)

Status of safety net system	Criteria for categorization	SUN Countries
Level 1, national safety net system in place	Has adequate policies and delivery capacity	Botswana, Namibia
Level 2, safety net system development in progress	Has one or more programs in place and has harmonized donor involvement working toward a consolidated safety net system	Ethiopia, Ghana, Kenya, Lesotho, Mali, Mozambique, Niger, Rwanda, Swaziland, Tanzania, Uganda
Level 3, no solid plans for a national safety net system	Has some individual projects or elements of programs or is putting such projects in place	Benin, Burkina Faso, Comoros, DRC, Liberia, Madagascar, Malawi, Nigeria, Senegal, Sierra Leone, Sudan, Togo, Zambia, Zimbabwe
Level 4, no adequate safety net programs in place	Does not have adequate safety net programs or mechanisms to support vulnerable groups	Cameroon, Chad, Congo, Cote d’Ivoire, Gambia, Guinea, Mauritania, Somalia, South Sudan

Note: The review was based on World Bank 2011 data. Some SUN countries are missing in this table because of lack of data (Burundi, Guinea-Bissau).

The Asian Development Bank has also published a review of social protection programs among its member countries, as part of a project that sought to update and improve the Social Protection Index (ADB 2015). By 2012, 35 country reports providing information and data on publicly-financed social protection programs covering the period of 2008-2010 were completed.³ In most cases, the country reports stated whether information was available on the social protection programs, what were the sources of this information and how monitoring data were managed. However, this information has not been summarized in a standard manner across countries and therefore our results are based on broad qualitative assessments of whether monitoring data is collected or not, without any evaluation of how it is disseminated or used.

Based on our review of these country assessments (Monchuk 2014; ADB 2015), 31 SUN countries were considered to have established or emerging safety net systems in place by 2010-

³ Asian Development Bank. Regional: Updating and Improving the Social Protection Index. <https://www.adb.org/projects/44152-012/main#project-overview> (accessed 21 January 2017)

11 and some information on these programmes, although most information systems needed strengthening. In 24 countries, there was either no adequate national safety net system in place or information systems were absent at the time of the assessment. No data was found on safety nets for two SUN countries. It is important to note, however, that these assessments are several years old and the current situation may have improved. We were unable to find a standardized assessment based on more recent data.

3.3.2.6 Early Childhood Development

Information systems to track Early Childhood Development (ECD) indicators are in the process of being developed in many SUN countries as they develop specific ECD policies and strategies to enhance programming in this area.

The Systems Approach for Better Education Results (SABER)-Early Childhood Development initiative (<http://saber.worldbank.org/>) has published an analysis of existing ECD policies and programs across a number of countries, including 17 SUN countries, as shown in Table 8 (World Bank, 2013). Ratings include a specific assessment of data availability (both administrative and survey data) and systems to monitor ECD outcomes. These ratings were used to assess the level of development of ECD information systems in these countries, including availability of survey and administrative data. Administrative data is important for providing information on service uptake levels and access to services by entire populations or subgroups. The SABER-ECD reports revealed that all 17 of the SUN countries assessed collect some form of data on ECD access, whether through administrative systems (often a sub-component of the national EMIS) and/or annual survey data (e.g. Annual Statistics for Education). Some also collect data on ECD outcomes.

Overall, we found evidence of existing or developing information systems for ECD in 24 SUN countries. For the other SUN countries, no publicly available data was found on information systems for ECD.

TABLE 8: LEVEL OF DEVELOPMENT FOR EARLY CHILDHOOD DEVELOPMENT INDICATORS IN SELECTED SUN COUNTRIES

Country	Year	1.0	2.0	3.0	3.1 Data Availability	3.2 Quality Standards	3.3 Compliance with Standards
		Establishing an Enabling Environment	Implementing Widely	Monitoring & Assuring Quality			
Burkina Faso	2014	Emerging	Emerging	Emerging	Latent	Emerging	Latent
DRC	2014	Emerging	Emerging	Emerging	Latent	Established	Established
Gambia	2013	Emerging	Emerging	Emerging	Emerging	Emerging	Latent
Guinea	2013	Emerging	Latent	Emerging	Emerging	Emerging	Latent
Indonesia	2015	Established	Emerging	Emerging	Established	Established	Latent
Kyrgyz Republic	2013	Emerging	Emerging	Emerging	Emerging	Emerging	Latent
Liberia	2012	Latent	Emerging	Latent	Latent	Latent	Latent
Malawi	2015	Emerging	Emerging	Emerging	Latent	Emerging	Emerging
Mali	2013	Latent	Emerging	Emerging	Latent	Emerging	Emerging
Nepal	2013	Emerging	Emerging	Emerging	Emerging	Established	Emerging
Nigeria	2013	Emerging	Emerging	Latent	Latent	Emerging	Latent
Sierra Leone	2013	Latent	Latent	Latent	Latent	Latent	Latent
Tajikistan	2013	Emerging	Emerging	Emerging	Emerging	Emerging	Emerging
Tanzania	2012	Emerging	Emerging	Established	Emerging	Established	Emerging

Togo	2013	Emerging	Emerging	Emerging	Latent	Emerging	Emerging
Uganda	2012	Emerging	Emerging	Emerging	Emerging	Emerging	Latent
Yemen	2010	Emerging	Latent	Emerging	Emerging	Emerging	Latent

Source: SABER Early Childhood Development Ratings & Data, <http://saber.worldbank.org/index.cfm?indx=8&pd=6&sub=1>
(accessed 21 January 2017)

4. DISCUSSION

The majority of SUN countries (42/57) have demonstrated a strong commitment to establishing national nutrition policies and strategies, an important first step in providing guidance to national information systems for nutrition. However, only half of these policies (22/42) currently include a monitoring & evaluation framework which would guide more specifically the priority indicators to track and assign responsibilities for data collection. Only about one third of countries (21/57) have also clearly designated a government ministry and/or department to coordinate nutrition information gathering, reporting and sharing. Stakeholder mapping is gaining momentum with support from the SUN Networks (i.e. UN Network, Civil Society Network and Business Network) and is expected to further strengthen coordination.

Supporting countries to develop multi-sectoral M&E frameworks for nutrition and invest further in national-level coordination of nutrition information is recommended.

Measuring progress toward meeting the World Health Assembly (WHA) 2025 global targets for improving maternal, infant and young child nutrition is currently achieved through conducting national demographic and health surveys, such as DHS and MICS, every 3-5 years. However, only one third of SUN country national nutrition policies explicitly refer to measuring the WHA six target indicators, and only 13 of 57 countries have committed to tracking overweight and obesity in children and adults. **There is a clear need for SUN countries to include the WHA targets for maternal, infant and young children for 2025 and the diet-relevant targets for preventing and controlling non-communicable diseases. These goals are at the core of the International Conference on Nutrition 2 (ICN2) Framework for Action and integral for achieving the Sustainable Development Goals.** Most notably, this gap was also highlighted as a gap in the WHO global nutrition policy review in 2010 (WHO, 2013b) and in the 2016 Global Nutrition Report.

Nearly all SUN countries (55/57) have **nationally representative survey data on nutrition indicators** from DHS and/or MICS within the past five years. These surveys cover the WHA targets as well as the key indicators for maternal, infant and young child nutrition (WHO 2014b). **Data from recent surveys should be better used for setting targets and for programming purposes. The limited number of countries with established targets and M&E seems to suggest a gap between data collection and effective use.**

Several SUN countries have begun using SMART survey methods to conduct more frequent (often annual) national assessments of nutrition status. For example, nine SUN countries in the West and Central Africa Region have recently conducted a national SMART survey, supported by UNICEF Western and Central Africa Regional Office (WCARO) that has committed to at least one nutrition survey per year following SMART guidelines and has conducted national surveys annually or every two years in most countries in the region (ACF 2016). Technical and financial support for SMART surveys is also growing (ACF, 2015). Anecdotal evidence suggests SMART surveys are a cost-effective way to fill specific nutrition information gaps on a more frequent basis, with high quality data collection completed in one month and preliminary results reported one month after completion of the survey. **It is worth assessing whether annual nutrition surveys such as SMART surveys are providing sufficient breadth of indicators for tracking progress of the key indicators outlined in the Global Monitoring**

Framework on Maternal, Infant and Young Child Nutrition (WHO 2014b) and what are the main advantages and disadvantages of this approach. It is also important to verify whether timely data from annual surveys are used for advocacy, resource mobilization and programming.

Micronutrient deficiencies are a public health problem in most SUN countries but few have nutrition surveillance systems that adequately assess micronutrient deficiency prevalence and distribution among vulnerable groups. Our results show that nearly half of SUN countries (22/57) have data within the past 10 years on micronutrient deficiency prevalence and there is a growing interest in and capacity for food fortification coverage assessments, supported by GAIN. However, program performance monitoring data on micronutrient interventions is not yet well-established, with the exception of two major programs: biannual vitamin A supplementation campaigns and universal salt iodization. One surprising gap was the lack of clear indication in national policies and strategies regarding the coverage monitoring of micronutrient supplementation for women in pregnancy.

In terms of **information on food systems in SUN countries**, food consumption data are universally available and the vast majority of SUN countries also have recent data on population food security indicators. What is not captured in this assessment is the extent to which governments and other development actors effectively use this information for strengthening nutrition program design and implementation. A recent global nutrition policy review observed that although food security was mentioned as part of nutrition-relevant policies in most countries, many food security strategies did not include nutrition goals or actions to address nutrition issues (WHO, 2015b). **The review suggest the need for improved access and use of data on food systems to inform decisions that have an impact on nutrition.**

Nutrition surveillance systems that collect regular and representative primary nutritional data can provide timely information for policy and programme decisions (Tuffrey, 2016). However, similar to other studies, **systematic processes for the detection and surveillance of acute malnutrition were found in only a few SUN countries and were difficult to classify due to a wide range of methods and situations.** Many countries appear to monitor acute malnutrition cases through routine reporting by health facilities (i.e. HMIS) of growth monitoring activities or outpatient consultations, with no active detection mechanisms in place.

Routine performance monitoring of the nutrition-specific interventions assessed in this mapping exercise is predominantly carried out through existing HMIS or parallel program-based monitoring systems. There are only a few SUN countries where these data are collated and kept in one place to facilitate coordination and tracking. “The importance of the routine monitoring of nutrition—inputs, processes, and outcomes—is sorely lacking and must be strengthened if governments and their development partners are to achieve the goals set out in national nutrition action plans (NNAPs) and the wider SDGs” (Lamstein et al., 2016, p.S112). There are good models in countries like Peru and Guatemala of progressive information platforms for nutrition and the use of technology by government ministries to facilitate the real-time monitoring of nutrition outcomes and programme coverage and quality (forthcoming reports). However, building capacity at local, regional and national levels to effectively use this information remains a challenge in these two countries.

One major strength of the SUN Movement is its focus on supporting countries to develop and implement multisectoral approaches to addressing nutrition. An approach that systematically and comprehensively engages multiple ministries and development actors is expected to be one of the most effective ways to address malnutrition (Lamstein et al., 2016). This mapping exercise confirms that **there exist many sectoral information systems relevant for nutrition policy and program design in SUN countries**. Furthermore, there are many initiatives underway that aim to strengthen national information systems in these other sectors, complementing the work being done in this regard for nutrition (Kim, 2016). Building human resource capacity and increasing government investment in management information systems across all sectors is expected to strengthen the enabling environment for accelerated reduction of malnutrition (Gillespie et al., 2013).

5. CONCLUSION

This mapping exercise provides a useful overview of the current status of information systems for nutrition across SUN countries. It shows that there are available data and information but their full use might be limited due to existing gaps in terms of data prioritization (e.g. lack of nutrition targets and agreed M&E Frameworks), data coordination (e.g. recognized agency) and data access (e.g. lack of publicly accessible integrated databases for nutrition).

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ANNEX A: DETAILED LIST OF INDICATOR DEFINITIONS AND SOURCES OF DATA

INDICATOR	DEFINITION	SOURCE
1. GOVERNMENT COMMITMENT & ENABLING ENVIRONMENT		
1.1 Policy & Planning Documents		
1.1.1 Existence of Common Results Framework (CRF)	A Common Results Framework has been developed (including draft documents), based on records kept by the SUN Movement Secretariat	SMS records
1.1.2 Existence of an agreed M&E framework	A Monitoring and Evaluation framework has been developed, based on records kept by the SUN Movement Secretariat	SMS records (SUN M&E Frameworks tracking document)
1.1.3 Budget analysis for nutrition completed	Country did the SUN budget analysis, based on records kept by the SUN Movement Secretariat	SMS records
1.2 Global nutrition targets tracked		
1.2.1 World Health Assembly global targets for nutrition	WHA targets are explicitly mentioned in country policy/strategy documents as key indicators to be assessed <i>[NB: not verified if actually being tracked]:</i> <ul style="list-style-type: none"> • Stunting in children under five years • Anemia in women of reproductive age • Birth weight in newborns • Overweight in children under five years • Breastfeeding in children under six months • Acute Malnutrition in children under five years 	Country CRF or M&E Framework
1.2.2 NCD nutrition-related targets	Indicators are explicitly mentioned in country policy/strategy documents as key indicators to be assessed <i>[NB: not verified if actually being tracked]:</i> <ul style="list-style-type: none"> • Overweight/Obesity in adults (or at least among women of reproductive age) • Diabetes • Salt intake 	Country CRF or M&E Framework
1.3 Institutionalization & coordination of nutrition information system		
1.3.1 Government ministry/department designated for coordination	Government ministry/department responsible for managing or coordinating the national nutrition information system	Consultant analysis of information available on country-specific websites
1.3.2 Central repository for information and reports	Central repository exists online, reports/data are relatively recent (2-3 years) and links to data/reports are functional	Consultant analysis of information available on country-specific websites
1.3.3 Publically accessible information	Data accessible to the public (no login/password required)	Consultant attempt to access reports or data in country's online repository
1.3.4 Stakeholder Mapping conducted	At least one type of national stakeholder mapping for nutrition has been conducted	
1.3.4.1 Done by SUN Civil Society Network	National stakeholder mapping conducted by the SUN Civil Society Network	SUN Civil Society Network
1.3.4.2 Done by SUN Business Network	National stakeholder mapping conducted by the SUN Business Network	SUN Business Network
1.3.4.3 Done by UN Network	Includes REACH Mapping, UN Inventory, and Stakeholder and Action Mapping	UN Network
2. NATIONAL ASSESSMENT DATA		
2.1 National health & demographic surveys		
2.1.1 Demographic Health Survey	DHS conducted within the past 5 years (2010 or more recent)	DHS Program (dhsprogram.com)
2.1.2 Multiple Indicator Cluster Survey	MICS conducted within the past 5 years (2010 or more recent)	UNICEF http://mics.unicef.org/surveys
2.1.3 National SMART Surveys	Evidence that country has ever conducted a SMART survey at a national scale	NIPN Country Reports; SMART Year in Review 2015

INDICATOR	DEFINITION	SOURCE
2.2 Micronutrient/Fortification Survey	A nationally representative assessment of at least one micronutrient or fortification, with data collection within the past 10 years (2005 or more recent). DHS/MICS survey data on micronutrient status was not included here.	Consultant analysis of information available online, includes tracking of micronutrient surveys by iZinCG (http://www.izincg.org/countries-serum-zinc-data/). GAIN (FACT surveys) – personal communication with Greg Garrett & Valerie Neufeld
2.3 National Food Surveys		
2.3.1 Food Consumption Surveys	A national household survey conducted within the last 5 years that includes assessment of food consumption data. Household Consumption & Expenditure Survey encompasses different types of surveys, such as household income and expenditure surveys, household expenditure surveys, household budget surveys, and Living Standard Measurement Studies.	International Household Survey Network (IHSN) Survey Catalog (http://catalog.ihsn.org/index.php/catalog), World Bank Living Standard Measurement Study
2.3.2 Food security and vulnerability assessment	National assessment of food security or vulnerability mapping conducted within the past 5 years (2010 or more recent), Including WFP mobile Vulnerability Analysis and Mapping (VAM), CFSVA, CFSS, FSVA.	WFP http://vam.wfp.org/ https://www.wfp.org/food-security/assessments/comprehensive-food-security-vulnerability-analysis
3. NATIONAL PERFORMANCE MONITORING DATA		
3.1 Nutrition specific interventions & programmes⁴		
3.1.1 Micronutrient supplementation during pregnancy	Any form of micronutrient supplementation provided through health facilities to pregnant women (normally through ANC visits)	National M&E Framework, HMIS
3.1.2 Food supplementation during pregnancy	Any type of protein/energy food supplementation provided to pregnant women	National M&E Framework
3.1.3 Breastfeeding promotion		
3.1.3.1 Facility-based (HMIS)	Country-reported data on whether breastfeeding counseling in antenatal care indicator is monitored and/or reported in the health management information system	Nutridash 2015 (Unicef), National M&E Framework
3.1.3.2 Community level	Country-reported data on whether breastfeeding counseling in antenatal care indicator is monitored and/or reported at the community level	Nutridash 2015 (Unicef)
3.1.4 IYCF counseling		
3.1.4.1 Facility-based (HMIS)	Country-reported data on whether IYCF counseling for mothers of children 0-24 months indicator is monitored and/or reported in the health management information system	National M&E Framework, Nutridash 2015 (Unicef)
3.1.4.2 Community level	Country-reported data on whether IYCF counseling for mothers of children 0-24 months indicator is monitored and/or reported at the community level	Nutridash 2015 (Unicef)
3.1.5 Vitamin A supplementation to children under 5 years		
3.1.5.1 Facility-based (HMIS)	Vitamin A supplement delivery to children under 5 years monitored through health facility-based services	HMIS or National M&E Framework
3.1.5.2 Campaign/Health Weeks	Country has documented VAS coverage in 2014 (database updated Nov-2015)	Unicef Vitamin A Supplementation Global Database (http://data.unicef.org/wp-content/uploads/2015/12/child-nutrition_vitamin-a-supplementation.xlsx) (no data available for Guinea, Kyrgyzstan, Namibia, PNG, Togo & Zambia)

⁴ National M&E Framework (or other policy or strategy documents), HMIS (based on data collection forms or reports available on the internet; most HMIS are password-protected)

INDICATOR	DEFINITION	SOURCE
3.1.6 Detection and management of acute malnutrition children under 5		
3.1.6.1 Detection/ surveillance of acute malnutrition	National system of surveillance of acute malnutrition, either stand-alone or facility-based	Country sources (Google search for country information on national surveillance system) National M&E Framework Nutridash 2015 (Unicef)
3.1.6.2 Facility-based management of acute malnutrition (coverage)	Country-reported data on whether severe acute malnutrition (SAM) outpatient admissions are reported in the health management information system	HMIS National M&E Framework
3.1.6.3 CMAM coverage (Coverage Monitoring Network)	Coverage of Community-based Management of Acute Malnutrition programmes has been assessed	Based on information available online, including the Coverage Monitoring Network (http://www.coverage-monitoring.org/)
3.1.7 Fortification of staple foods	Monitoring of staple food fortification	National M&E Framework; Food Fortification Initiative (http://www.ffinetwork.org/)
3.1.7.1 Monitoring system to track USI programme activities	Country-reported data on presence of monitoring system to track universal salt iodization (USI) programme activities	Nutridash 2015 (Unicef)
3.2 Sectoral platforms relevant for nutrition		
3.2.1 HMIS	Health Management Information System established	Country sources (Google search for evidence of HMIS)
3.2.2 Agriculture and Food sector	Agricultural Management Information System established	Country sources (Google search for evidence of AMIS)
3.2.2.1 Early Warning system	Early Warning system established	Country sources (Google search for evidence of Early Warning system)
3.2.2.2 Food markets	Government institution that monitors food prices	Data sources listed by FAOSTAT for food price monitoring http://www.fao.org/giews/food-prices/data-partners/en/
3.2.3 Education sector	Education Management Information System established	Country sources (internet search for evidence of EMIS); World Bank projects with EMIS components http://datatopics.worldbank.org/education/files/EducationProjects/EmisActivityList.xlsx
3.2.4 Water, Sanitation and Hygiene (WASH) sector	Existence of a national information system for drinking-water or sanitation (data available for decision-making in at least one of the component areas)	WHO (2014) UN-Water Global Analysis and Assessment of Sanitation and Drinking-Water (GLAAS) 2014 report: Investing in water and sanitation: Increasing access, reducing inequalities. http://apps.who.int/iris/handle/10665/139735
	GLAAS scoring: 0=Only limited data collected and limited availability 0.2=Partial data available, but not generally used 0.7=Data available and analysed through a management information system and used for a minority of decisions 1.0=Data available and analysed through a management information system and used for a majority of decisions	Country sources (internet search for evidence of WASH MIS)
3.2.4.1 Data for public health priority setting to reduce WASH related disease	Country score for level of data availability and use: Question B4a - Are data collected and used in the health sector to identify public health priorities for reducing WASH related diseases?	WHO GLAAS 2014 country survey database
3.2.4.1 Data for health sector response to WASH-related disease outbreaks	Country score for level of data availability and use: Question B4b. Are data collected and used in the health sector to respond to WASH related disease outbreaks?	WHO GLAAS 2014 country survey database
3.2.4.2 Sanitation data for policy & strategy decision-making	Country score for level of data availability and use: Question B4c - Are data collected and used for decision-making for sanitation policy and strategy?	WHO GLAAS 2014 country survey database
3.2.4.2 Sanitation data for resource allocation decision-making	Country score for level of data availability and use: Question B4d. Are data collected and used for decision-making for sanitation resource allocation?	WHO GLAAS 2014 country survey database

INDICATOR	DEFINITION	SOURCE
3.2.4.3 Drinking water data for policy & strategy decision-making	Country score for level of data availability and use: Question B4e - Are data collected and used for decision-making for drinking-water policy and strategy?	WHO GLAAS 2014 country survey database
3.2.4.3 Drinking water data for national standards decision-making	Country score for level of data availability and use: Question B4f. Are data collected and used for decision-making for drinking-water national standards?	WHO GLAAS 2014 country survey database
3.2.4.3 Drinking water data availability for resource allocation decision-making	Country score for level of data availability and use: Question B4g. Are data collected and used for decision-making for drinking-water resource allocation?	WHO GLAAS 2014 country survey database
3.2.5 Safety Net Programs	Availability of data on safety net programme access, coverage or other relevant information	<p>Monchuk, Victoria. 2013. Reducing Poverty and Investing in People: The New Role of Safety Nets in Africa. Directions in Development. Washington, DC: World Bank.</p> <p>Asian Development Bank (2012) Country Reports related to Updating and Improving the Social Protection Index</p> <p>Country sources (internet search for information on country monitoring systems)</p>
3.2.6 Early Childhood Development	Availability of data at the national level on ECD programme access, coverage, child outcomes or other relevant information	<p>SABER-Early Childhood Development Ratings, including specific assessment of data availability (both administrative and survey data) and systems to monitor ECD outcomes. Country reports available for 17 SUN countries: Burkina Faso (2014), DRC (2014), Gambia (2013), Guinea (2013), Indonesia (2015), Kyrgyz Republic (2013), Liberia (2012), Malawi (2015), Mali (2013), Nepal (2013), Nigeria (2013), Sierra Leone (2013), Tajikistan (2013), Tanzania (2012), Togo (2013), Uganda (2012), Yemen (2010)</p> <p>World Bank projects with EMIS components specifically for pre-primary level</p> <p>http://datatopics.worldbank.org/education/files/EducationProjects/EmisActivityList.xlsx</p>

ANNEX B: SUMMARY OF COUNTRY DATA

TABLE I: SUMMARY OF COUNTRY DATA FOR GOVERNMENT COMMITMENT AND ENABLING ENVIRONMENT INDICATORS

TABLE II: SUMMARY OF COUNTRY DATA FOR NATIONAL ASSESSMENT DATA INDICATORS

TABLE III: SUMMARY OF COUNTRY DATA FOR NATIONAL PERFORMANCE MONITORING INDICATORS

TABLE I: SUMMARY OF COUNTRY DATA FOR GOVERNMENT COMMITMENT AND ENABLING ENVIRONMENT INDICATORS

Country	1.1 Policy & Planning Documents			1.2 Tracking Global Nutrition Targets									1.3 Institutionalization & coordination			
	Common Results Framework	M&E Framework	Budget exercise completed	Stunting	Wasting	Overweight Children	Low Birth Weight	Exclusive Breast feeding	Maternal Anemia	Overweight Adults	Diabetes	Salt Intake	Designated coordinating body	Central repository	Publicly accessible	Stakeholder Mapping
# countries	42	22	43	27	21	13	19	28	25	13	2	2	24	21	16	36
% (N=57)	74%	39%	75%	47%	37%	23%	33%	49%	44%	23%	4%	4%	42%	37%	28%	63%
Bangladesh	0	0	1	1	0	0	0	1	1	0	0	0	1	1	1	1
Benin	1	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0
Botswana	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Burkina Faso	1	0	1	1	1	0	0	1	0	0	0	0	1	1	1	1
Burundi	1	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0
Cambodia	1	0	0	1	1	0	0	1	1	1	0	0	1	0	0	1
Cameroon	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Chad	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Comoros	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Congo	1	1	1	1	1	0	0	0	1	0	0	0	0	0	0	0
Costa Rica	1	1	1	0	0	0	0	0	0	0	0	0	1	0	0	0
Cote d'Ivoire	1	1	1	0	0	0	0	0	0	0	0	0	1	0	0	1
DR Congo	1	0	1	0	0	0	0	0	0	0	0	0	1	1	1	1
El Salvador	1	0	1	0	0	1	0	1	0	1	0	0	1	1	1	1
Ethiopia	1	1	1	1	1	0	1	1	1	0	0	0	0	0	0	1
Gambia	1	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0
Ghana	1	0	1	0	0	0	0	0	0	0	0	0	1	0	0	1
Guatemala	1	1	1	1	1	1	0	1	1	1	0	0	1	1	1	1
Guinea	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Guinea-Bissau	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Haiti	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Indonesia	1	1	1	1	0	0	0	1	0	0	0	0	0	0	0	0
Kenya	1	1	1	1	1	1	1	1	1	1	0	0	1	1	1	1
Kyrgyzstan	1	?	1	?	?	?	?	?	?	?	?	?	0	0	0	1
Lao PDR	1	1	1	1	1	1	1	1	1	0	0	0	1	1	1	1
Lesotho	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Liberia	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Madagascar	1	1	1	1	1	0	1	1	0	0	0	0	1	0	0	1
Malawi	1	1	?	1	1	1	1	1	1	1	0	0	1	1	1	1
Mali	1	0	0	1	1	0	0	1	1	0	0	0	1	1	1	1
Mauritania	0	0	1	0	0	0	0	1	1	0	0	0	0	1	1	0
Mozambique	1	1	1	1	1	0	0	1	1	0	0	0	1	1	0	1
Myanmar	1	0	0	1	1	1	1	1	1	1	0	1	0	1	1	1
Namibia	1	1	1	1	0	0	1	1	1	1	0	0	?	0	0	0
Nepal	1	1	1	1	1	0	1	1	1	0	0	0	0	0	0	1
Niger	1	1	0	1	1	0	0	1	1	1	0	0	0	0	0	1
Nigeria	0	1	1	1	1	1	1	1	1	0	0	0	1	0	0	1
Pakistan	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Papua New Guinea	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Country	1.1 Policy & Planning Documents			1.2 Tracking Global Nutrition Targets									1.3 Institutionalization & coordination			
	Common Results Framework	M&E Framework	Budget exercise completed	Stunting	Wasting	Overweight Children	Low Birth Weight	Exclusive Breast feeding	Maternal Anemia	Overweight Adults	Diabetes	Salt Intake	Designated coordinating body	Central repository	Publicly accessible	Stakeholder Mapping
Peru	1	1	1	1	0	0	1	1	0	0	0	0	1	1	1	1
Philippines	1	1	1	1	1	1	1	0	1	1	0	0	1	1	1	1
Rwanda	1	1	0	1	1	1	1	1	1	0	0	0	1	1	0	1
Senegal	0	0	?	0	0	0	0	0	0	0	0	0	0	0	0	1
Sierra Leone	1	0	1	1	1	1	1	1	1	1	1	0	0	0	0	1
Somalia	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1
South Sudan	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Sri Lanka	1	1	1	1	1	1	1	1	1	1	0	0	?	0	0	0
Sudan	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Swaziland	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tajikistan	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Tanzania	1	0	?	1	1	0	0	1	1	0	0	0	1	1	0	1
Togo	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Uganda	1	0	1	1	0	0	1	1	1	0	0	0	1	1	0	1
Vietnam	1	1	1	1	0	1	1	1	1	1	0	0	1	1	1	1
Yemen	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Zambia	1	1	1	0	0	0	1	0	1	0	0	0	1	1	1	1
Zimbabwe	1	1	0	1	1	1	1	1	1	1	1	1	1	0	0	1

Abbreviations: M&E = Monitoring & Evaluation

TABLE II: SUMMARY OF COUNTRY DATA FOR NATIONAL ASSESSMENT DATA INDICATORS

Country	2.1 National Health & Demographic Surveys				2.2 Micronutrient Survey	2.3 National Food Surveys	
	DHS	MICS	SMART	Any 1 of 3		HCES	Food Security- VAM
# of countries	48	29	16	55	26	53	44
% (out of 57)	84%	51%	28%	96%	46%	93%	77%
Bangladesh	1	1	0	1	1	1	0
Benin	1	1	0	1	0	1	1
Botswana	0	0	0	0	0	1	0
Burkina Faso	1	0	1	1	1	1	1
Burundi	1	0	?	1	0	1	0
Cambodia	1	0	0	1	1	1	0
Cameroon	1	1	0	1	1	0	1
Chad	1	1	1	1	0	1	1
Comoros	1	0	0	1	0	1	0
Congo	1	1	0	1	0	1	1
Costa Rica	0	1	0	1	0	1	0
Cote d'Ivoire	1	1	0	1	0	0	0
Dem Rep of Congo	1	1	1	1	0	0	1
El Salvador	1	1	?	1	0	1	1
Ethiopia	1	0	0	1	1	1	1
Gambia	1	1	1	1	0	1	1
Ghana	1	1	0	1	1	1	1
Guatemala	1	0	0	1	1	1	0
Guinea	1	1	1	1	0	1	1
Guinea-Bissau	0	1	0	1	0	1	1
Haiti	1	0	1	1	0	1	1
Indonesia	1	0	0	1	1	1	1
Kenya	1	0	1	1	1	1	1
Kyrgyzstan	1	1	0	1	1	1	1
Lao PDR	1	1	0	1	0	1	0
Lesotho	1	0	?	1	0	1	1
Liberia	1	0	0	1	1	1	1
Madagascar	0	0	1	1	0	1	1
Malawi	1	1	0	1	1	1	1
Mali	1	1	1	1	0	1	1
Mauritania	0	1	?	1	0	1	1
Mozambique	1	0	0	1	0	1	1
Myanmar	1	1	0	1	1	1	1
Namibia	1	0	0	1	0	1	1
Nepal	1	1	0	1	1	1	1
Niger	1	0	1	1	1	1	1
Nigeria	1	1	1	1	0	1	1
Pakistan	1	1	0	1	1	1	1
Papua New Guinea	1	0	0	1	0	1	0
Peru	1	0	0	1	0	1	0
Philippines	1	0	0	1	1	1	0
Rwanda	1	0	0	1	0	1	1
Senegal	2	0	1	1	1	1	1
Sierra Leone	1	1	1	1	1	1	1
Somalia	0	0	0	0	1	1	1
South Sudan	0	1	1	1	0	1	1
Sri Lanka	1	0	0	1	1	1	1

Country	2.1 National Health & Demographic Surveys				2.2	2.3 National Food Surveys	
	DHS	MICS	SMART	Any 1 of 3	Micronutrient Survey	HCES	Food Security- VAM
Sudan	0	1	0	1	0	0	1
Swaziland	0	1	0	1	0	1	1
Tajikistan	1	0	0	1	1	1	1
Tanzania	1	0	1	1	1	1	1
Togo	1	1	1	1	0	1	1
Uganda	1	0	0	1	1	1	1
Vietnam	0	1	0	1	1	1	0
Yemen	1	0	0	1	0	1	1
Zambia	1	0	0	1	0	1	1
Zimbabwe	1	1	0	1	1	1	1

Abbreviations: DHS = Demographic and Health Survey; MICS = Multiple Indicator Cluster Survey; SMART = Standardized Monitoring and Assessment of Relief and Transitions survey; HCES = Household Consumption and Expenditure Survey; VAM = Vulnerability Assessment Mapping

TABLE III: SUMMARY OF COUNTRY DATA FOR NATIONAL PERFORMANCE MONITORING INDICATORS

Country	3.1 Nutrition specific program performance monitoring										3.2 Sectoral platforms relevant to nutrition				
	Facility-based				Nutrition Programmes					Health MIS	Agriculture MIS	Education MIS	WASH	Social Protection (Safety Nets)	Early Childhood Development
	MN supplements in pregnancy	Breast feeding promotion	IYCF counseling	Mgt of acute malnutrition	VAS campaign/ health weeks	CMAM coverage	Food supplements in pregnancy	Fortified staple foods	USI program monitoring						
# countries	18	34	28	33	48	28	9	16	31	57	49	55	47	31	24
% (out of 57)	32%	60%	49%	58%	89%	49%	16%	27%	54%	100%	86%	96%	82%	54%	42%
Bangladesh	1	1	1	1	1	1	0	0	1	1	1	1	1	1	1
Benin	0	0	0	1	1	?	0	0	1	1	1	1	1	0	?
Botswana	0	0	0	0	1	0	0	0	0	1	?	1	?	1	?
Burkina Faso	0	0	0	1	1	1	0	1	1	1	1	1	1	0	1
Burundi	1	1	1	1	1	?	1	0	1	1	1	1	1	1	?
Cambodia	1	1	1	1	1	?	0	1	1	1	1	1	1	1	?
Cameroon	0	0	0	1	1	1	0	0	?	1	1	1	1	0	?
Chad	0	0	0	1	1	1	0	0	0	1	?	1	1	0	?
Comoros	0	0	0	?	1	0	0	0	0	1	?	1	?	0	?
Congo	?	1	0	1	1	?	1	0	0	1	0	0	1	1	0
Costa Rica	0	0	0	?	n/a	?	0	0	?	1	1	1	1	1	?
Cote d'Ivoire	1	0	0	1	1	0	0	0	0	1	?	0	1	0	?
Dem Rep of Congo	1	1	1	1	1	?	0	0	1	1	1	1	0	0	1
El Salvador	0	1	0	?	n/a	*	0	0	0	1	1	1	1	1	?
Ethiopia	0	1	0	1	1	1	0	1	1	1	1	1	1	1	?
Gambia	0	1	0	1	1	1	0	0	1	1	?	1	1	0	1
Ghana	0	1	1	1	1	1	0	0	?	1	1	1	1	1	?
Guatemala	1	1	1	1	1	0	1	1	1	1	1	1	1	1	1
Guinea	0	0	1	0	0	*	0	0	0	1	1	1	1	0	1
Guinea-Bissau	0	1	1	0	1	?	0	0	1	1	?	1	0	?	?
Haiti	0	0	1	1	1	1	0	0	0	1	1	1	0	1	1
Indonesia	1	0	0	0	1	0	1	1	0	1	1	1	1	1	1
Kenya	1	1	0	1	1	1	1	1	1	1	1	1	1	1	?
Kyrgyzstan	?	1	0	?	0	0	?	?	0	1	1	1	1	?	1
Lao PDR	0	0	0	0	1	0	1	0	1	1	1	1	1	1	1
Lesotho	0	1	0	1	1	0	0	0	?	1	1	1	1	1	?
Liberia	0	1	1	0	1	?	0	0	1	1	1	1	1	0	1
Madagascar	1	1	1	1	1	0	0	1	?	1	1	1	1	0	?
Malawi	1	1	1	1	1	1	0	0	1	1	1	1	1	0	1
Mali	1	1	1	1	1	1	0	1	1	1	1	1	1	1	1
Mauritania	1	1	1	1	1	1	0	1	1	1	1	1	0	0	?
Mozambique	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Myanmar	1	1	1	0	1	1	0	1	1	1	1	1	1	0	?
Namibia	0	1	0	?	0	0	1	0	0	1	1	1	?	1	?
Nepal	1	1	1	1	1	1	0	1	1	1	1	1	1	1	1
Niger	0	1	1	1	1	1	0	0	1	1	1	1	1	1	?
Nigeria	1	1	1	1	1	1	0	0	1	1	1	1	1	0	1
Pakistan	0	1	1	0	1	1	0	0	1	1	1	1	1	1	?
Papua New Guinea	0	0	0	0	0	0	0	0	0	1	?	1	?	0	?
Peru	1	0	0	0	n/a	0	0	0	1	1	1	1	1	1	1
Philippines	?	1	1	1	1	1	?	?	1	1	1	1	1	1	0

Country	3.1 Nutrition specific program performance monitoring					3.2 Sectoral platforms relevant to nutrition									
	Facility-based				Nutrition Programmes					Health MIS	Agriculture MIS	Education MIS	WASH	Social Protection (Safety Nets)	Early Childhood Development
	MN supplements in pregnancy	Breast feeding promotion	IYCF counseling	Mgt of acute malnutrition	VAS campaign/health weeks	CMAM coverage	Food supplements in pregnancy	Fortified staple foods	USI program monitoring						
Rwanda	0	0	0	1	1	1	?	1	?	1	1	1	1	1	?
Senegal	0	0	1	1	1	1	0	0	1	1	1	1	1	0	?
Sierra Leone	0	1	0	1	1	1	0	0	?	1	1	1	1	0	1
Somalia	0	0	0	?	1	1	0	0	0	1	1	1	?	0	?
South Sudan	0	0	0	?	1	1	0	0	?	1	1	1	1	0	?
Sri Lanka	1	1	0	0	1	0	1	0	1	1	1	1	1	1	1
Sudan	0	1	1	?	1	1	0	0	?	1	1	1	1	0	?
Swaziland	0	0	0	0	1	0	0	0	?	1	1	1	?	0	?
Tajikistan	0	0	1	0	1	0	0	0	0	1	1	1	1	1	1
Tanzania	0	1	1	1	1	0	0	0	1	1	1	1	1	1	1
Togo	0	0	0	1	0	0	0	0	1	1	1	1	1	0	1
Uganda	0	1	1	?	1	1	0	0	0	1	1	1	1	1	1
Vietnam	0	1	1	0	1	0	0	1	1	1	1	1	1	1	?
Yemen	0	0	0	?	1	1	0	0	?	1	1	1	1	1	1
Zambia	1	1	1	1	0	1	0	1	1	1	1	1	1	1	?
Zimbabwe	0	0	0	1	1	0	0	1	1	1	1	1	1	0	?

Abbreviations: MN = micronutrient; IYCF = infant and young child feeding; VAS = vitamin A supplementation; CMAM = community management of acute malnutrition; USI = universal salt iodization; MIS = management information system; WASH = water, sanitation and hygiene

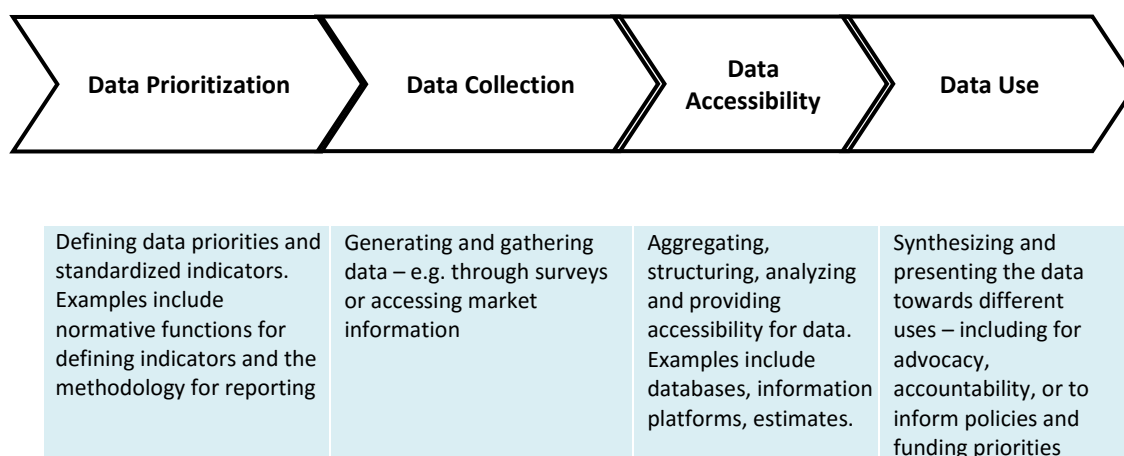
ANNEX C: UPDATED OVERVIEW OF GLOBAL DATA & ACCOUNTABILITY INITIATIVES FOR NUTRITION

Updated overview of global data & accountability initiatives for nutrition

This document presents an updated overview of the mapping exercise on global data and accountability initiatives for nutrition commissioned by the SUN Donor Network with the financial support from the Bill and Melinda Gates Foundation⁵. The update is prepared in the context of the work the Micronutrient Initiative and the Scaling Up Nutrition Secretariat are conducting towards the identification of countries' priorities around data gaps in nutrition and the assessment of the response capacity from global and regional facilities/actors.

Data Value Chain

The figure below shows a data value chain proposed by the Bill and Melinda Gates Foundation⁶ that can be utilized to map initiatives working on global data and accountability in nutrition.



Global and Regional Initiatives

Data Prioritization

Initiative / Implementing organization	Description	Status	Update (Nov 2016)
Global Monitoring Framework on Maternal, Infant and Young Child Nutrition <i>WHO with partners</i>	Framework for monitoring progress on the <i>Comprehensive Implementation Plan on Maternal, Infant and Young Child Nutrition (MIYCN)</i> and the “WHA Targets.”	Core set of indicators approved at 67 th and 68 th WHAs, with 21 indicators. Further work is on-going, including on the monitoring and reporting guidelines.	No update.

⁵ Kim D. Mapping Exercise Global Data and Accountability Initiatives for Nutrition. June, 2016.

⁶ Taken from: Rawat R and Piwoz, E. Strengthening nutrition data and information systems: A blueprint for action. Initiatives to Address Data Gaps in Nutrition. Micronutrient Forum Pre-conference Symposium. Cancun, Mexico. October 23, 2016.

Initiative / Implementing organization	Description	Status	Update (Nov 2016)
WHO/UNICEF Technical Advisory Group on Nutrition Monitoring (TEAM) <i>WHO & UNICEF with partners</i>	Providing advice on how to enhance nutrition monitoring at all levels, identify emerging research questions and needs related to nutrition monitoring, and recommend actions to develop indicators and methods. The TEAM is – amongst other tasks – taking forward the completion of the	Established in 2015, with two meetings convened to date. Work is on-going.	No update.
Compendium of Indicators for Nutrition-Sensitive Agriculture <i>FAO</i>	Will describe a range of indicators that can be used to monitor and evaluate the nutrition-related impacts of investments in agriculture and rural development.	Planned for publication in 2016.	Published. Can be downloaded at: http://www.fao.org/3/a-i6275e.pdf

Data Creation and Collection

Initiative / Implementing organization	Description	Status	Update (Nov 2016)
Primary data collection tools			
Demographic and Health Surveys (DHS) <i>USAID program, implemented by a consortium led by ICF</i>	Nationally representative household surveys that collect and provide access to data for a wide range of monitoring and impact evaluation indicators in the areas of population, health and nutrition.	On-going. Surveys have been carried out in over 90 countries.	No update.
Multiple Indicator Cluster Surveys (MICS) <i>UNICEF</i>	Surveys implemented by countries under a program developed and managed by UNICEF to provide internationally comparable, statistically rigorous data on the situation of women and children.	On-going. Surveys carried out in over 109 countries to date. Current round (MICS5) was launched in 2012. MICS6 round will be launched in 2016.	MICS6 is currently in the phase of survey design. Surveys will be conducted in 2017-18 in the following countries: Democratic People's Republic of Korea, Lao People's Democratic Republic, Argentina, Costa Rica, Suriname, Iraq, Central African Republic, Democratic Republic of the Congo, Equatorial Guinea, Gambia, Ghana, Sierra Leone, Togo, Chad and
Standardized Monitoring and Assessment of Relief and Transitions (SMART survey) <i>Hosted by ACF Canada</i>	A standardized, simplified household-level survey methodology that provides representative and accurate nutrition and mortality data for effective decision-making and resource allocation. Initially developed for emergency settings, but are now also for use in non-emergency environments, where there is a lack of nutrition information, or a lack of focus on chronic malnutrition.	Launched in 2002. On-going.	No update.

Initiative / Implementing organization	Description	Status	Update (Nov 2016)
Food balance sheets <i>FAO</i>	Provide estimates of the quantities of food available for human consumption in a country, using data on food supply and their nutritional and caloric content.	On-going.	New beta version: http://www.fao.org/faostat/en/#data/FBS
Voices of the Hungry / Food Insecurity Experience Scale (FIES) <i>FAO</i>	Utilizes an experience-based tool that is incorporated into the <i>Gallup World Poll</i> to help measure food insecurity worldwide. Will be used as the basis for reporting against SDG indicator 2.1.2 (prevalence of moderate and severe food insecurity).	Launched in 2013. The FIES has been incorporated into the Gallup World Poll since 2014.	No update.
Agricultural and Rural Integrated Survey (AGRIS) <i>FAO</i>	A farm-based modular multi-year survey program, designed as a cost-effective way for national statistical agencies to accelerate the production of quality disaggregated data on the technical, economic, environmental and social dimensions of agricultural holdings. Will serve as one of the primary means for collecting data on SDG indicators 2.3.1 (on smallholder farm productivity), 2.3.2 (on smallholder incomes) and 2.4.1 (on sustainable agricultural practices).	On-going.	No update.
Initiative / Implementing organization	Description	Status	Update (Nov 2016)
Global Databases			
Global Database on Child Growth and Malnutrition <i>WHO</i>	A compilation of standardized child growth and malnutrition data from nutritional surveys conducted around the world.	On-going	No update.
Nutrition Landscape Information System (NLIS) <i>WHO</i>	Brings together all existing WHO Global Nutrition Databases dynamically, as well as other existing food and nutrition-related data from partner agencies into a web-based tool.	On-going	No update.
Global database on the Implementation of Nutrition Action (GINA) <i>WHO</i>	Compiles information on nutrition policies and actions, including commitments made, actions taken and lessons learned.	Initiated in 2010, and currently on-going	No update.
Other WHO-maintained nutrition databases <i>WHO</i>	<ul style="list-style-type: none"> Global Database on Body Mass Index Vitamin and Mineral Nutrition Information System (VMNIS) Global Data Bank on Infant and Young Child Feeding 	WHO may discontinue maintenance of the Databank on Infant and Young Child Feeding (with UNICEF retaining the lead role in maintaining the database on this topic)	VMNIS currently being expanded and updated

Initiative / Implementing organization	Description	Status	Update (Nov 2016)
UNICEF global databases <i>UNICEF</i>	UNICEF maintains a series of global databases and offers access to global datasets on malnutrition, infant and young child feeding, iodized salt consumption, low birth weight and vitamin A supplementation.	On-going.	No update.
NutriDash <i>UNICEF</i>	A web-based database that collates country-level program output data to help improve the availability of information on the reach and progress of programs.	On-going. Access to the 2013 data is available to UNICEF staff. A Global Report from the 2013 pilot year is publicly available.	No update.
Global Individual Food consumption data Tool (GIFT) <i>FAO/WHO</i>	Will contain individual quantitative food consumption data from countries, made accessible online through an interactive web platform.	Initiated as a pilot in 2014. Dissemination platform expected to be available as a global tool by 2018.	No update.
Global Repository on Food Fortification Co-led by GAIN, IGN, FFI and Micronutrient Forum	GAIN, IGN, FFI and Micronutrient Forum are leading a process to agree common indicators for fortification among all major partners and establishing a process for regular collection and reporting, applicable to multiple nutrients and food vehicles, at national and global levels. This will be stored in an interactive, online global repository for the sector.	Only started in March 2016	Indicators developed in 2016, data compilation from all four agencies completed and backend software development initiated. Plans are to launch database by June 2017.
Tracking tools, reports and accountability tools			
UNICEF-WHO-World Bank Joint Child Malnutrition Estimates	Provide joint global and regional estimates on child stunting, underweight, overweight, wasting and severe wasting. An inter-agency team regularly updates estimates, and the underlying datasets are available publicly.	On-going, with new estimates provided on an annual basis.	The inter-agency team released new joint estimates of child stunting, overweight, underweight, wasting and severe wasting in September 2016 (2016 edition). http://www.who.int/nut-reporting/estimates2016
Tracking tool for WHA targets <i>WHO, in collaboration with UNICEF and EC</i>	Web-based tool to track progress against WHA targets, with 1) country indicator profiles; 2) indicator mapping and 3) global and regional overviews.	On-going.	Most recent version released November 2016: https://extranet.who.int/sree/Reports?op=vs&path=%2FWHO_HQ_Reports/G16/PROD/EXT/Targets_Menu&VSPARAM_varLanguage=F&VSPARAM_v

Initiative / Implementing organization	Description	Status	Update (Nov 2016)
State of Food Insecurity in the World (SOFI) <i>FAO, IFAD and WFP</i>	An annual report that presents updated estimates of undernourishment in the world, and progress towards MDG1 and 1996 World Food Summit hunger targets.	On-going. Discussions currently underway with UNICEF and WHO to potentially broaden the scope of SOFI, which had previously focused on food security, to also cover nutrition.	No update.
Scaling up Nutrition (SUN) Movement Annual Progress Reports <i>SUN Movement</i>	To date, these have compiled self-reported assessments from countries around four areas: 1) bringing people together into a shared space for action; 2) ensuring a coherent policy and legal framework; 3) aligning actions around a Common Results Framework; and 4) financial tracking and resource mobilization.	Will continue with some changes as the SUN Country Joint Assessment of Progress and Priority Setting Exercise (as part of a broader process to develop the Movement's monitoring system for the 2016-2020 monitoring framework).	SUN Movement Progress Report 2016: http://docs.scalingupnutrition.org/wp-content/uploads/2016/11/SUN_Report_20161129_web_All.pdf
Global Nutrition Report (GNR) <i>IFPRI et al</i>	Assesses the progress of the 193 UN member states in meeting global nutrition targets established by the WHA, and documents how well countries, donors, NGOs, businesses and others are meeting commitments made at the N4G summit in 2013.	First launched in 2013, with annual reports since then. 2016 report scheduled for release autumn 2016.	2016 report released on June, 2016: http://www.ifpri.org/cdmref/p15738coll2/id/130354/filename/130565.pdf
Global Hunger Index (GHI) <i>IFPRI, with Welthungerhilfe and Concern Worldwide</i>	Designed to comprehensively measure and track hunger globally and by country and region. Tracks 117 countries against 4 component indicators (malnourishment, child wasting, child stunting and child mortality). Aim is to draw attention and stimulate political discussion on hunger.	First published in 2006 and published annually one week before World Food Day (16 October).	2016 report released on October 2016: http://www.ifpri.org/cdmref/p15738coll2/id/130707/filename/130918.pdf Interactive map: http://ghi.ifpri.org
Access to Nutrition Index (ATNI) <i>Access to Nutrition Foundation</i>	Seeks to stimulate dialogue about how food and beverage manufacturers can improve their nutrition practices by benchmarking their approach to nutrition against peers, and by identifying areas for improvement.	Originally developed by GAIN, and managed by the Access to Nutrition Foundation since 2013. Index published every 2 years.	2016 Global Index report released on January 2016: https://www.accesstonutrition.org/sites/2016.atniindex.org/files/atni-global-index-2016_2.pdf 2016 Index: https://www.accesstonutrition.org/files/2016_2.pdf
SDG2 Accountability Framework Working Group <i>GODAN, ONE et al</i>	Developing a tool to track the progress of global, regional and national commitments from different stakeholders, in the areas of agriculture, food security and nutrition. Will also look at the data, policy and financing gaps required to achieve SDG2 by 2030.	Discussions initiated in 2016 by ONE, and currently taken forward as a GODAN Working Group.	No update.

Initiative / Implementing organization	Description	Status	Update (Nov 2016)
Initiatives to improve data collection and accessibility			
International Dietary Data Expansion Project (INDDEx) <i>Tufts University with FAO and IFPRI</i>	Developing new technologies and methodologies to 1) standardize and streamline the collection and analysis of individual-level dietary data; 2) improve the design and use of the food data collected in HCESSs; 3) demonstrate how to appropriately use fit-for-purpose indicators and analyses; and 4) develop guidance and tools to facilitate adoption of the advancements and new methodologies developed under the INDDEx project.	Initiated in January 2015, with a current project timeline and budget through 2018.	No update.
Accelerating Nutrition Improvements in Sub-Saharan Africa (ANI) <i>WHO</i>	Supporting sub-Saharan African countries to improve nutrition surveillance activities through strengthening health information systems.	Initiated in 2012, with activities taking place in 11 countries. Potential scale-out to further countries (TBD).	No update.
Fortification Assessment Coverage Tool (FACT) <i>GAIN</i>	A survey instrument for carrying out coverage assessments of both population-based (e.g. staple food) and targeted (e.g. point-of-use fortificants or supplements) fortification programs. The tool was developed to assist stakeholders in achieving greater program impact by assessing coverage and identifying program barriers and potential ways to address them.	Initiated in 2013. Data collected in over ten countries to date. An extensive dissemination is planned over the coming year, and a final FACT toolkit will be made publicly available.	No update.

Data Analysis, Translation & Dissemination and Decision Making

Initiative / Implementing organization	Description	Status	Update (Nov 2016)
Initiatives to build in-country information platforms and capacity			
National Evaluation Platforms (NEP) <i>Johns Hopkins University, with national partners</i>	Working with countries to systematically compile and rigorously analyze data from different sources and utilize these towards answering critical evaluation questions regarding their nutrition programs and needs.	Work in four countries (Malawi, Mozambique, Tanzania and Mali) commenced in 2014 and will likely be complete in mid-2017, with additional work late 2017 to complete the packaging of tools and materials.	In 2016, all four countries are embarking on Cycle 2 of NEP.

Initiative / Implementing organization	Description	Status	Update (Nov 2016)
<p>National Information Platforms for Nutrition (NIPN)</p> <p><i>EU project implemented by Agrinatura EEIG and national partners</i></p>	<p>Providing support to countries in the SUN Movement to strengthen their capacity to bring together existing information on nutritional status with information on factors that influence nutritional outcomes, including policies, programs and investments. In doing so, it aims to help countries to track progress against global targets, analyze data to better understand how malnutrition can be prevented and to inform national policies and improve programs and outcomes.</p>	<p>Original project timeline 2015-2019. Work initiated in Bangladesh, Ethiopia, Kenya, Laos, Niger and Uganda.</p>	<p>No update.</p>
<p>Integrated Food Security Phase Classification (IPC)</p> <p><i>Hosted by FAO, implemented by a multi-stakeholder partnership</i></p>	<p>Uses a set of standardized tools to provide a common approach for classifying the severity and magnitude of food security and malnutrition in countries. IPC's tools are intended to help improve the ability to analyze and make decisions on food security and nutrition, and to promote effective and accessible communication for decision-makers based on the analyses.</p>	<p>Current 2014-2018 IPC Action Plan has the aim of supporting implementation of the IPC in 51 target countries.</p>	<p>No update.</p>
Partnership and innovation platforms			
<p>Global Open Data for Agriculture and Nutrition (GODAN)</p> <p><i>Network of partners, facilitated by a secretariat hosted by CABI</i></p>	<p>Facilitates and convenes partners to tackle the various dimensions of the obstacles facing open data. GODAN provides platforms for partners to collaborate share ideas and experiences and to find ways forward on how open data can be used to solve key issues and challenges in the agriculture and nutrition sectors.</p>	<p>Operational since 2015, with a recently approved 5- year work plan covering 2016-2020.</p>	<p>In 2016 first global conference (GODAN Summit 2016) to discuss the role of open data for agriculture and nutrition.</p>
<p>Global Partnership for Sustainable Development Data (GPSDD)</p> <p><i>Multi-stakeholder partnership with a secretariat hosted by UN Foundation</i></p>	<p>A global network of governments, NGOs and businesses working together to support data-driven decision- making towards the SDGs, by making data more open, accessible and usable, and by helping to fill data gaps.</p>	<p>UN Foundation selected to host partnership in November 2015. Secretariat and working groups currently in process of being set up.</p>	<p>No update.</p>
<p>Global Pulse</p> <p><i>Secretariat connected to the office of the UNSG, working with UN agencies and multi-stakeholder partners</i></p>	<p>An innovation initiative of the UNSG to accelerate discovery, development and scaled adoption of big data innovation for sustainable development and humanitarian action.</p>	<p>Launched in 2009, with on-going projects. Set-up potentially to be revisited under new SG.</p>	<p>No update.</p>