



# MULTISECTORAL PLANNING FOR NUTRITION

## Assessing Country Capacity to Address Malnutrition

There is increasing global recognition that multisectoral nutrition efforts are key to development and to prevention of maternal and child deaths. At least 12 of the 17 Sustainable Development Goals (SDGs) contain indicators that are highly relevant to nutrition.<sup>1</sup> This is supported by global evidence, including the seminal Lancet series on maternal and child nutrition, which is championed by the global Scaling Up Nutrition (SUN) Movement and advocates for a multisectoral approach to tackling nutrition challenges to achieve a world free from malnutrition in all its forms by 2030. This entails not only improving access to nutritious and safe foods but also improving access to healthcare; education; water, sanitation and hygiene; women's empowerment; and more.

More than 60 SUN countries are in the process of developing or implementing their national multisectoral nutrition plans (MSNP) to achieve the nutrition-related SDGs. To ensure the success of a MSNP, it is paramount that a country has the capacity to work in a multisectoral manner around nutrition, measured by the nutrition knowledge, understanding, awareness, technical ability, management skills and adequacy of both human and financial resources. An understanding of a country's existing nutrition capacity and current gaps, as well as challenges, limitations and opportunities, is crucial to successful implementation of an MSNP. To gain this understanding, it is important that a country undertake a capacity assessment, sometimes conducted as part of a contextual analysis (as noted in Module 1 of the MQSUN+ toolkit on Multisectoral Planning for Nutrition).

<sup>1</sup> SUN. Nutrition and the Sustainable Development Goals. Scaling Up Nutrition website. Accessed August 27, 2020. <https://scalingupnutrition.org/nutrition/nutrition-and-the-sustainable-development-goals/>

### MQSUN+ Toolkit on Multisectoral Planning for Nutrition

This tool is part of a larger MQSUN+ toolkit—**Multisectoral Planning for Nutrition**. Divided into six modules, this toolkit provides guidance to countries to: initiate multisectoral planning (1), develop a multisectoral nutrition plan (2) and common results framework (3) and establish the appropriate financing (4), monitoring, evaluating and learning (5) and implementation (6) mechanisms for nutrition action at the country level. The guidance has been selected from what has been used and found to work well in different country contexts based on the MQSUN(+) experience. The toolkit can be used to gain an overview of multisectoral nutrition planning as a whole or to identify appropriate approaches and useful resources to support this country-led process at different stages.

The purpose of a capacity assessment for nutrition is to (1) understand the level of capacity available and the outstanding needs at national, subnational and local levels to enable scaling up of nutrition activities and (2) enable the development of strategic, relevant and specific recommendations to build the nutrition capacity of relevant service providers and institutions and create enabling environments at national, subnational and local levels for the successful implementation of the MSNP.

Adapted by Maximising the Quality of Scaling Up Nutrition Plus from the World Health Organization's [Landscape Analysis: Country Assessments](#) tool, this capacity assessment tool is an example of a rapid one that could be used with national-level stakeholders or adapted further for use at the subnational level.

Comprising a questionnaire, it is designed to be implemented through individual interviews with ministry staff, nutrition partners and stakeholder organisations. When setting up each of these interviews, it is useful to arrange to meet with a senior representative, who will be able to provide the overview of both the organisation's capacity and that of the existing nutrition coordination mechanisms in-country, as well as staff who are working directly on implementation of activities pertinent to nutrition.

When using this tool, it should be adapted to the context, based on what is already known within the country from any existing capacity assessments and following a [desk review of available policies, strategies and programmes](#) so that emphasis can be placed on any particular areas of concern. The tool enables information to be gathered and capacity needs in the following areas to be examined:

**Policies and guidelines:**

- Available nutrition policies and guidelines for nutrition, across nutrition and health areas and across sectors.
- Gaps in nutrition policies and guidelines, including integration across health areas and sectors.

**Budget and funding:**

- Budget allocation for nutrition and disbursement.
- Funding gaps.

**Nutrition coordination system:**

- Nomination of a national nutrition lead; position of that role and influence/ability to coordinate.
- Culture of consultations and collaboration (i.e. whether there is sharing of information between relevant ministries/departments, both horizontally and vertically, and whether it is inclusive and active).
- Stakeholder network coordination (existence/effectiveness of alliances and partnerships).

**Human resources for nutrition:**

- Availability of trained human resources across sectors and levels, from management to community implementation.
- Training and mentoring mechanisms for staff.
- Nutrition competency gaps.

**Nutrition information systems:**

- Nutrition indicators.

- Data-collection systems.
- Data for decision-making (reporting and accountability).

It is important when applying this tool that the interviewer asks open-ended questions rather than those that would elicit a yes/no answer in order to get more thorough answers. Prompts are provided in several questions to facilitate the discussion if the interviewee is not forthcoming and to ensure that no topics are missed.

## Dissemination of results

After conducting the capacity assessment and analysis of responses, findings and recommendations should be collated and organised into a report. Recommendations should focus on priority actions needed to develop the capacities to adequately implement the MSNP, by sector, at national and subnational levels and in the short, medium and long term, if possible. Findings and recommendations can be disseminated to all relevant governmental and nongovernmental stakeholders and should be used to influence planning and budgeting of capacity needs within the MSNP.

## Adapted capacity assessment tool

### Section 1: Policies and Guidelines

1.1 What are the key policies, strategies and action plans of importance to nutrition in the country?

*Allow the interviewee to answer without prompting the below options and ask them to be specific about what policies, strategies and action plans are of importance to nutrition in the country. The options below can be tailored to specific national policies/strategies:*

- National Development Strategy.
- National Health Strategy.
- Nutrition and Physical Activity Strategy.
- Social Protection Strategy.
- School Feeding Strategy.
- Food Security Programme.
- Law on Iodisation of Salt.
- Unknown.
- Other: \_\_\_\_\_

1.2 Do you feel that these identified policies, strategies and action plans adequately address the nutrition problems in the country?

Yes	No	Unknown
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1.2.1 If 'No', what is missing? *Allow the interviewee to answer without prompting the below options, and ask them to be specific about what is missing from each identified policy/strategy.*

- More strategies/ policies.
- Better coherence / complementarity between the different policies.

- c. Programmes to address nutrition challenges.
- d. Nutrition knowledge/ awareness.
- e. Knowledge/ awareness about linkages between nutrition and other sectors.
- f. Trained nutrition cadre.
- g. Nutrition guidelines.
- h. Nutrition programmes.
- i. Workforce to implement nutrition programmes.
- j. Political leadership/ guidance.
- k. Coordination between sectors involved.
- l. Funding dedicated to nutrition.
- m. Legislation around the improvement of nutritional status.
- n. Other: \_\_\_\_\_

1.3 Does your agency/ department implement these policies, strategies and action plans?

Yes	No	Unknown
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1.3.1 If 'Yes', which policy? *This list can be tailored to those available in-country:*

- a. National Development Strategy.
- b. National Health Strategy.
- c. Nutrition and Physical Activity Strategy.
- d. Social Protection Strategy, Concept of School Feeding.
- e. Food Security Programme.
- f. Law on Iodisation of Salt.

1.3.2 Can you tell us more about the programmes and interventions implemented by your agency?

Region	Type of activity	Target population and number targeted (if known)

1.3.3 If you do not currently implement programmes and interventions for nutrition, what do you feel is your agency's role in scaling up nutrition?

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1.4 Do you feel that there is adequate leadership in raising awareness of these policies and in coordinating efforts around these policies and implementing them?

Yes	No	Unknown
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1.4.1 If 'No', how do you think that awareness can be raised around nutrition policies and around coordination of efforts for nutrition policies?

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1.5 Are you familiar with the Scaling Up Nutrition (SUN) Movement and its role in the country?

- a. It is a funding agency.
- b. It is a Movement to strengthen political commitments and accountability for global nutrition commitments through voluntary membership.
- c. All stakeholders supporting the SUN Movement are committed to the idea that nutrition impact can be scaled up in a faster, more equitable and sustainable way by transforming individual behaviour to align with national nutrition priorities.
- d. Unknown.

1.6 Are you familiar with what the First 1,000 Days is?

- a. The time between a woman's pregnancy and her child's second birthday.
- b. The most critical period of growth and development in a child's life.
- c. The period when proper nutrition provides the essential building blocks for brain development, healthy growth and a strong immune system.
- d. Unknown.

1.7 Are you familiar with nutrition-specific interventions?

- a. Interventions that target the immediate causes of undernutrition (inadequate dietary intake and ill health).
- b. Malaria prevention, diagnosis and treatment.
- c. Helminth prevention and control.
- d. Promotion of dietary diversity.
- e. Infant and young child feeding activities:
  - i. Promotion of exclusive and optimum breastfeeding.
  - ii. Appropriate complementary feeding and responsive feeding practices and stimulation.
- f. Micronutrient supplementation and fortification:
  - i. Iron-folic acid supplementation.
  - ii. Vitamin A supplementation.
  - iii. Home fortification with micronutrient powders.
  - iv. Industrial food fortification.
- g. Delayed cord clamping.
- h. Unknown.

1.8 Are you familiar with nutrition-sensitive interventions?

- a. Agriculture and food security.
- b. Social safety nets.
- c. Early child development.
- d. Maternal mental health.
- e. Women's empowerment.
- f. Child protection.
- g. Classroom education on nutrition.
- h. Water and sanitation.
- i. Health and family planning services.
- j. Biofortification.
- k. Unknown.

## Section 2: Budget and Funding

2.1 Do you feel that there is adequate funding available to tackle the nutrition challenges being faced in the country?

Yes	No	Unknown
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2.1.1 If 'No', where do you feel funding is missing to adequately tackle the nutrition challenges being faced in the country?

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2.2 What, in your opinion, are the priority areas requiring funding? *Allow the interviewee to answer without prompting the below options.*

- a. Food security.
- b. Food safety.
- c. Food diversity.
- d. Food production.
- e. Improved health services.
- f. Nutrition awareness.
- g. Appointment of more nutrition workers.
- h. Provision of nutrition training.
- i. Expanded nutrition programmes.
- j. Strengthening of government coordination mechanism.
- k. Other: \_\_\_\_\_

2.3 Is nutrition (or related activities) included in your agency's annual budget?

Yes	No	Unknown
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2.3.1 If **'Yes'**, what programmes are funded? *Try to get an impression of the scale of funding in terms of amount of funds or proportion of population served:*

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- a. Infant and young child feeding practices.
- b. Breastfeeding.
- c. Complimentary feeding.
- d. Vaccinations.
- e. Nutrition counselling.
- f. Micronutrient supplementation (vitamin A, zinc, iron-folic acid, iron).
- g. Fortification.
- h. Treatment of severe acute and/or moderate acute malnutrition.
- i. Production of diverse foods.
- j. Livestock/ dairy production.
- k. Women's groups.
- l. Credit programmes for women.
- m. Nutrition education.
- n. Nutrition training.
- o. Promotion of handwashing with soap.
- p. Promotion of safe disposal of faeces.
- q. Water safety.
- r. Other: \_\_\_\_\_

### Section 3: Nutrition Coordination System

3.1 Are there any coordination mechanisms (e.g. committees, task force or interagency working groups) that address nutrition at the national level?

Yes	No	Unknown
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If the respondent answers **'No'** or **'Unknown'**, please proceed to question 3.3.

3.1.1 If **'Yes'**, list of all nutrition-related coordination mechanisms (e.g. committees, task force or interagency working groups) and record how your agency participates.

	Coordination mechanism	How does your agency participate?
1		
2		
3		



4		
5		
6		

If no coordination mechanisms are identified, probe for any emergency coordination mechanisms that might be set up quickly if/when nutrition emergencies occur.

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3.2 How often do you or a representative of your agency attend the meetings of coordination mechanism?

Every week	Every month	Every 2–3 months	Less often
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3.3 If your agency never or seldom participates in any of the existing nutrition coordination mechanisms, why not?

- a. Sector has no role to play in nutrition.
- b. No nutrition officer / no qualified staff.
- c. Nutrition is not a priority.
- d. No budget for nutrition.
- e. Other: \_\_\_\_\_

3.4 What do you see as the major benefits of coordinating nutrition actions in the country?

- a. Efficient way to tackle nutrition challenges.
- b. Effective implementation.
- c. Pooled resources.
- d. Shared expertise.
- e. Shared responsibility.
- f. Increased awareness of nutrition actions.
- g. Other: \_\_\_\_\_

3.5 What do you see as the major problems or challenges of the coordination of nutrition actions?

- a. Coordinating with other sectors.
- b. Coordination within sectors between national and subnational levels.
- c. Unclear roles and responsibilities.
- d. Lack of leadership for nutrition.
- e. Lack of guidelines for nutrition activities.
- f. Lack of budget allocation.
- g. Lack of support from centre.
- h. Limited workforce.
- i. Lack of expertise.
- j. Lack of training and training resources.



k. Absence of nutrition as a priority.

l. Other: \_\_\_\_\_

3.6 Does your agency also operate at subnational levels (province/ district/ village)?

Yes	No	Unknown
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3.6.1 If 'Yes', how often do you meet with subnational-level coordinators (province/district/ village)?

Every week	Every month	Every 2–3 months	Less often
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3.7 If you are working with partners to implement nutrition programmes, please describe any successful partnerships and why you consider them to be successful.

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3.8 In your opinion, how could stakeholders and partners be encouraged to work together to better scale up nutrition actions?

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## Section 4: Human Resources for Nutrition

4.1 Does your department have staff dedicated to managing or implementing nutrition programmes and activities?

Yes	No	Unknown
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4.1.1 If 'Yes', approximately how many staff work full-time or part-time on nutrition at different levels?

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4.2 Do you feel your department has appropriately trained staff to manage/ implement nutrition-related actions?

Yes	No	Unknown
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4.3 Have you participated in nutrition training in the past two years?

Yes	No	Unknown
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4.3.1 If 'Yes', what were the topics of these training events, who organised them and when?

Type of training	Organiser / Facilitator	Dates

4.3.2 If 'No', why not?

- a. No nutrition programmes.
- b. No funding for nutrition programmes.
- c. No staff available for nutrition.
- d. Other: \_\_\_\_\_

4.4 Is there any system for follow-up training or monitoring of the effect of training provided, such as on-site or refresher training?

Yes	No	Unknown
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4.5 Are these trainings offered to all staff working in nutrition/nutrition-related programmes?

Yes	No	Unknown
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4.6 Is your department supported by nutrition experts/consultants/staff from an international or national nongovernmental organisation?

Yes	No	Unknown
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4.6.1 If 'Yes', which one(s)?

- a. UNICEF
- b. WHO
- c. WFP
- d. FAO
- e. USAID
- f. FCDO
- g. GIZ
- h. EU
- i. Russian Federation
- j. JICA
- k. AKDN
- l. Other: \_\_\_\_\_

4.7 If nutrition services were to be *scaled up* and expanded in the country, do you think that there are enough nutritionists or staff with training in nutrition at the different levels (national, provincial or regional, district and community) in the country?

Yes	No	Unknown
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4.8 If nutrition services were to be *scaled up* and expanded in the country, what kind of capacities and competencies do you think would be required?

- a. Awareness of types of malnutrition.
- b. Nutrition counselling and awareness raising.
- c. Multisectoral approach to improving nutrition.
- d. Linkages of nutrition with other sectors (agriculture; education; women's development; water, sanitation and hygiene; etc.).
- e. Roles and responsibilities of sectors in scaling up nutrition.
- f. Budget planning for nutrition.
- g. Nutrition research methods.
- h. Management skills.
- i. Coordination skills.
- j. Leadership skills.
- k. Communications skills.
- l. Nutrition linkage with other sectors.
- m. Nutrition knowledge.
- n. Nutrition-specific actions.
- o. Management of information systems.
- p. Certification/ Degree programmes in nutrition.
- q. Other: \_\_\_\_\_

## Section 5: Nutrition Information System

5.1 Does your agency collect data relevant to nutrition?

Yes	No	Unknown
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5.1.1 If **'Yes'**, what types of information and data on nutrition does your agency collect? Please describe which nutrition indicators are collected, who the target population groups surveyed are and how often data are collected.

Nutrition indicators	Target population group	Frequency of data collection

5.2 How does your agency use the collected data?

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5.3 Does your agency use other available nutrition data?

Yes	No	Unknown
Please describe:		

5.4 Does your agency report data to a national or central system? Which system is this, and how often do you report?

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5.5 What reports do you receive back once your data are compiled with that of other departments or agencies?

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5.6 How/where are these reports/data discussed, and what sort of action (if any) is taken in response to the findings?

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5.7 Is there nutrition information that you do not have but that you would like to have to help you plan and implement your nutrition-related work more effectively?

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## About MQSUN+

MQSUN+ provides technical assistance (TA) and knowledge services to the UK Foreign, Commonwealth and Development Office (FCDO) and the Scaling Up Nutrition (SUN) Movement Secretariat (SMS) in support of pro-poor programmes in nutrition. MQSUN+ services are resourced by a consortium of five non-state organisations leading in the field of nutrition.

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