



PATH/Heng Chivoan

MODULE 3: Developing a Common Results Framework

This module is structured around the defining characteristics of a common results framework (CRF) and the four steps detailed below, and is accompanied by featured tools and additional resources:

- 3.1 What is a Common Results Framework?
- 3.2 Engaging Stakeholders to Decide on a Way Forward
- 3.3 Gathering Input through Stakeholder Consultations
- 3.4 Conceptualising Targets, Indicators and other Components of the CRF
- 3.5 Building Sectoral Consensus through Stakeholder Workshops

Overview

This module describes the process of developing a CRF. A CRF may be developed before, after or in parallel with the development of a multisectoral nutrition plan (MSNP). *As such, it is recommended*

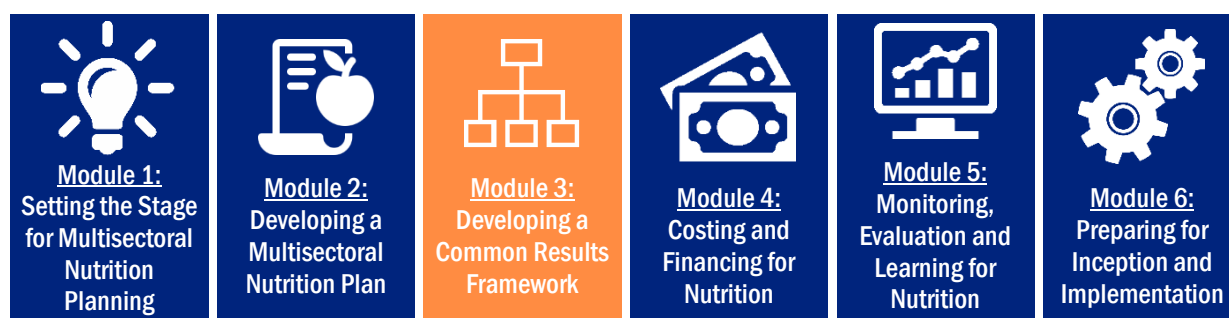


that this module be reviewed in conjunction with [Module 2](#), as there are overlapping considerations, processes and resources to keep in mind. A CRF lays out in detail the objectives, actions, targets and anticipated outputs and outcomes of an MSNP across a timeline, assigning clear roles and responsibilities. It is a vehicle for stakeholders to translate policy into action and results and to ensure accountability for planners and those most affected by malnutrition.¹ CRFs may look different across countries and can comprise a suite of documents or one main document. From Maximising the Quality of Scaling Up Nutrition Plus (MQSUN+) experience, the CRF is usually presented as a detailed logical framework, or logframe, which includes the full suite of nutrition actions and anticipated results.

Developing a CRF requires investment of time and resources. The process of quantifying anticipated results and targets and identifying relevant indicators, data sources and data-collection strategies can be logistically intensive. However, the process itself promotes ownership amongst stakeholders and provides an important foundation for results-based management through the mutual development of a comprehensive and powerful tool to promote and assess results.

Costing is an important consideration throughout the development of the CRF. The level of detail elaborated should be sufficient to allow it

to be costed once complete. It is helpful, where possible, to consider the costing methodology and requirements early on in the process (refer to [Module 4](#)).



In the process of developing a CRF, it is critically important to take into account four key crosscutting considerations: advocacy, gender, capacity building and the humanitarian response situation. Details on the relevance of these considerations for this step in the process are detailed below.

¹ Scaling Up Nutrition (SUN) website. Common Results Framework (CRF) page. Available at <https://scalingupnutrition.org/share-learn/planning-and-implementation/aligning-and-costing-nutrition-actions/>. Accessed 09 September 2020.

ADVOCACY

CRF development activities represent a period of intense stakeholder engagement and a time for stakeholders to significantly shape and contribute to the design of the interventions that will be carried out. This provides important opportunities within sectors/ministries and with partners in civil society, the private sector, the United Nations (UN) and the donor community to advocate for incorporating nutrition-sensitive action within sectoral or organisational strategies and policies and to better align sectoral plans with the MSNP and CRF.

The CRF itself, once finalised, can be used as an advocacy tool with funders (both government and donors), as it details interventions to be implemented and, once costed, presents clear and precise information about costs and finances needed to support specific interventions.

HUMANITARIAN RESPONSE

The step of identifying critical assumptions and risks within the CRF process brings specific attention to planning contingencies and ensuring risk mitigation strategies are considered during CRF development.

In addition, potential emergency response activities or ongoing [support to humanitarian interventions](#) to specific populations or areas of the country should be adequately incorporated into the CRF as a defined area of focus; if this represents a significant portion of nutrition-focused response, it might even form a strategic objective of the MSNP and CRF.

The governance structure and coordination mechanisms defined within the CRF should seek to include coordination with the Nutrition Cluster where this exists or activities to include coordination for emergency response.

GENDER

Throughout CRF development, [gender should be considered](#) in terms of ensuring adequate representation of men and women in all contributory activities and ensuring that the views of different genders are incorporated. Inclusion of ministries of women / women's affairs and any specialist civil society organisations or UN agencies/departments focused on gender should be encouraged, wherever possible.

The design of CRF interventions should use a gender lens and ensure that targeting of activities considers gender as a paramount issue across all strategic objectives, at each opportunity reflecting on how interventions will affect men, women, girls and boys and whether adaptations are needed to ensure a strong and equitable outcome for all groups. Planned interventions should reflect the gender dimensions of nutrition based on the needs identified in the contextual analysis (see [Module 1](#)). Once the CRF is drafted, any validation workshop should ensure discussion of gender-related issues and authenticate their inclusion in the plan.

CAPACITY BUILDING

During CRF development, facilitatory workshops or one-to-one discussions with representatives of different sectors can build understanding and enhance the capacity of stakeholders to fully comprehend their roles in nutrition and to adequately contribute to the CRF. This capacity development can lead to enhanced ownership and strong implementation of the MSNP from all sectors.

Within the CRF itself, [capacity gaps and weaknesses identified during the contextual analysis](#) should be addressed through specific activities and interventions. These may be integrated within each strategic objective as discrete activities and/or developed as a capacity-development package under a specific strategic objective or outcome. Capacity may need to be built in terms of improving sectoral nutrition knowledge, skills and practice, as well as governance skills for leadership and coordination of multisectoral nutrition. Capacity-development interventions can be designed as 'in-service' interventions, such as training opportunities or exchange/learning visits, as well as structured into pre-service approaches through incorporating nutrition modules/diplomas/degrees into university and vocational training curricula to build cadres for a nutritionally competent workforce.

3.1 What is a Common Results Framework?

A CRF is a single and agreed set of expected (or common) results generated through the effective engagement of different sectors of government and the multiple nongovernmental actors who have capacity to influence nutrition.² This set of results should be based on the national goals and targets for nutrition (as detailed in the MSNP) and reflect the ways in which different sectors and actors can best contribute to the achievement of these targets through their individual and collective actions. The CRF differs from an MSNP in that it provides more detail on specific numbers and targets, capacity, data sources and data-collection approaches (though this information may also be provided or further elaborated on in a monitoring and evaluation (M&E)/M&E and learning (MEL) framework or plan, as noted in [Module 5](#)).

A CRF—similar to a logframe—details allocation of responsibilities for implementation of activities and achievement of results amongst different sectors. It articulates the different levels, or chains, of expected results along with the inputs and process to achieve them. The results typically comprise the longer-term strategic objectives (or goals); the impacts on health and nutrition measures, such as rates of malnutrition; and the intermediate outcomes and outputs that precede, and lead to, their achievement. Refer to the **country example from Yemen below**.

Typical Components of a Common Results Framework

Similar to a logframe, a CRF generally includes the following (although there are variations in approaches and terminology):

- > **Inputs**, which can be considered as the resources needed to conduct the interventions or activities (such as funding, personnel, equipment, supplies and infrastructure).
- > **Activities** or interventions, which are planned to be delivered, such as the goods and services to be provided and by whom, where and when, and targeting which groups.
- > **Outputs**, which is the direct product or deliverable of the activities (for example, nutrition supplements distributed, number of people trained / number of community-awareness sessions provided).
- > **Outcomes**, which refer to the benefits of any particular outputs to the target population (such as having improved nutrient intake or beneficiary knowledge).
- > **Impact**, which refers to evidence on whether outcomes are influencing longer-term strategic objectives or goals (for example, increased prevalence of exclusive breastfeeding or reduction in malnutrition prevalence).

The end goal is for the CRF to create a strong foundation detailing measurable milestones to guide collective implementation. A secondary but important end goal for the CRF is to support resource allocation for nutrition by detailing resource requirements, triggering allocation and facilitating the tracking of resource allocation. Further guidance on this topic is provided in [Module 4](#). In the meantime, consulting MQSUN+'s [Assessing Readiness for Costing Guidance Note](#) may be helpful to situate the CRF as a country moves forward.

² SUN Movement Secretariat (SMS). *SUN Movement Annual Progress Report*. Geneva; SMS; 2014. Available at http://scalingupnutrition.org/wp-content/uploads/2014/11/SUN_Progress-Report_ENG_20141024_web_pages03.pdf.



COUNTRY EXAMPLE OF A COMMON RESULTS FRAMEWORK: YEMEN

After updating its contextual analysis using results of new surveys and data, Yemen continued its multisectoral planning process by identifying priority indicators, interventions and targets and conducting a costing readiness assessment of these priority interventions, which spurred in-country stakeholders to further refine their CRF and collect the required costing data. In 2018, Yemen finalised their costed [common results framework](#) as part of the process of developing their [Multisectoral Nutrition Action Plan \(2020-2023\)](#).

3.2 Engaging Stakeholders to Decide on a Way Forward

As noted in [Module 2](#), it will be necessary to engage with stakeholders in the process of developing a CRF ([Figure 1](#)) so as to ensure buy-in from the beginning that will carry throughout implementation.

EXAMPLES OF POSSIBLE NUTRITION STAKEHOLDERS

Government/public sector

- > Overarching multisectoral entities: planning and development—including the SUN steering committee and the multi-stakeholder platform for nutrition—finance, local development or administration, parliamentarians, etc.
- > Sectoral representatives: ministries of health; water, sanitation and hygiene; agriculture; irrigation; livestock; fisheries; education; social affairs/ protection; economic development; planning; local development; women's affairs; youth; labour; energy; information; culture; commerce and industry; disaster management; finance; statistics; etc.
- > Local, subnational or district government.

Partners

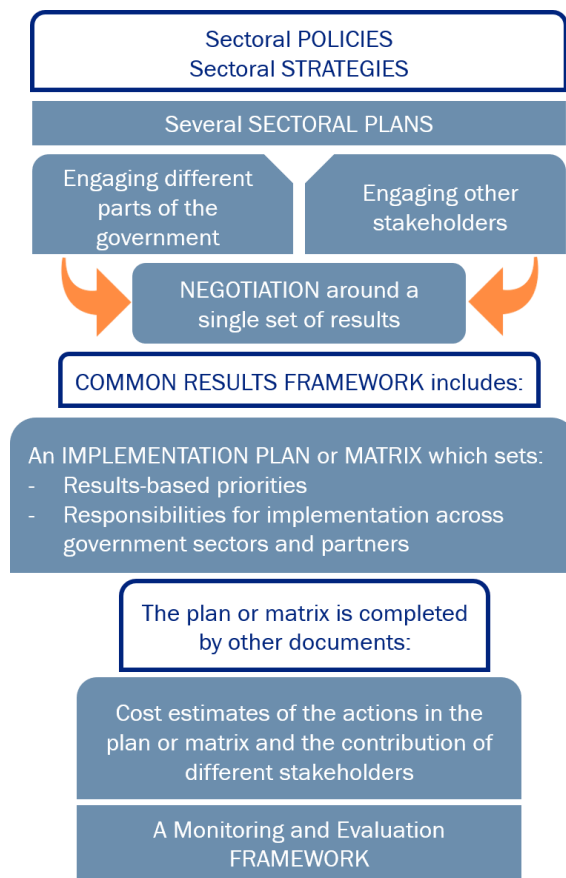
- > UN agencies: United Nations Children's Fund (UNICEF), World Health Organization (WHO), World Food Programme, Food and Agriculture Org., International Fund for Agricultural Development, UN Population Fund / UN Women, UN Development Programme, etc.
- > Donors: US Agency for International Development, UK Department for International Development, European Union, German Corporation for International Cooperation, World Bank, African Development Bank, Asian Development Bank, etc.
- > International/national nongovernmental organisations or civil society organisations: Save the Children International, FHI360, Helen Keller International, etc.
- > Private sector (business).
- > Academia and research.
- > Journalists and Nutrition Champions.

To initiate this process, there are a number of key considerations for stakeholders to keep in mind to ensure a strong and cohesive CRF, primarily that the process involves:


- > **Examining what key sectors are already doing in regard to nutrition**, in that a CRF should not create an entirely new set of interventions but should identify what is already in place and work to improve coordination within and across sectors.
- > **Building upon existing interventions/actions where needed** to improve nutrition sensitivity, as well as coordination.
- > **Creating new actions to fill gaps** and aligning those with the larger theory of change (TOC).

In keeping with the above key considerations, it would be beneficial to refer to the findings from any conducted [situational analysis](#), [policy framework analysis](#) or [stakeholder mapping](#) to appropriately understand the country context. These discussions will often occur in parallel with discussions on the MSNP. Discussion on these issues should include questions around the following: *Why would a particular intervention lead to the outputs identified and the outcomes expected? How does it link with the ultimate objective?* This participatory discussion serves a critical role in building consensus and ownership around shared objectives and clarifying different interpretations of the elements of the hypothesis.

Figure 1. Developing a common results framework.



Source: SUN website. What is a Common Results Framework page. Accessed from: <https://scalingupnutrition.org/share-learn/planning-and-implementation/aligning-and-costing-nutrition-actions/>



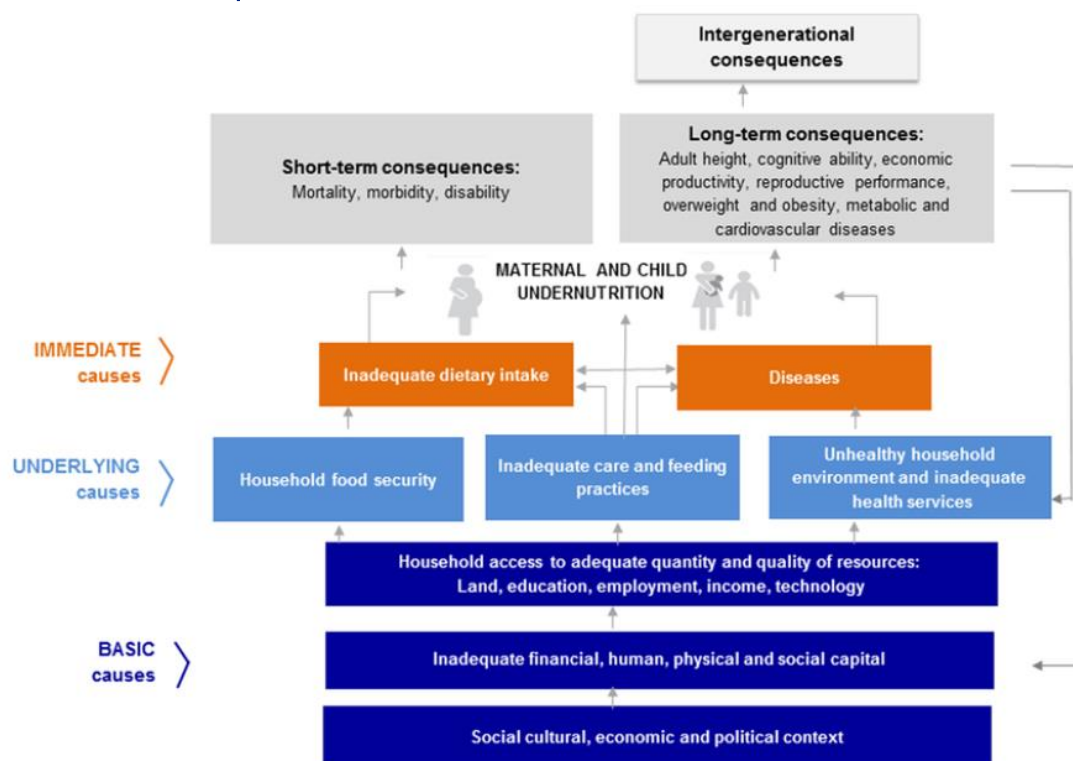
UN Network for SUN's [Compendium of Actions for Nutrition](#) is a practical resource which comprehensively compiles, in one place, a concise description of possible nutrition actions. It can assist countries in considering which interventions are most appropriate within a nutrition plan and/or how to ensure the interventions included are nutrition-sensitive.

The development of a TOC or conceptual model can provide an initial framework for the CRF and can be used to illustrate how the key actions of each sector and various actors will combine to achieve individual strategic objectives and how those objectives together attain a common goal. This is an important first step to form both the CRF and MSNP narrative (refer to [Module 2](#))—depending on which document is initially developed.

As well, this TOC / conceptual model diagram can be further elaborated to depict the overall CRF: the process by which the MSNP activities will lead to outputs; why those outputs are likely to lead to the immediate or intermediate outcomes; how the outcomes lead to health or other impacts; and how those impacts achieve longer-term strategic objectives. This can help sectors understand which of their sectoral priorities/actions fit within the nutrition TOC and how. The TOC diagram can assist in visualising the process and stimulate discussion on the length of time needed to achieve each outcome, which will help to define what can realistically be achieved within the time frame of the MSNP (see [Annex 3](#) for examples from Gabon and Nepal).

A country's nutrition TOC model is usually adapted from the UNICEF conceptual framework ([Figure 2](#)) and/or the [Lancet framework](#).

Figure 2. The UNICEF conceptual framework of undernutrition.



Source: UNICEF. UNICEF's Approach to Scaling Up Nutrition. New York, NY; 2015. Accessed from: https://www.unicef.org/nutrition/files/Unicef_Nutrition_Strategy.pdf.

More specifically, the CRF should describe in detail:

- > The expected results demonstrating improvement of nutritional status, based on national/international targets (e.g. World Health Assembly (WHA) [Global Nutrition Targets](#), UN [Sustainable Development Goals \(SDGs\)](#)).
- > Defined populations in which these improvements will be seen (e.g. first 1,000 days, children 0 to 59 months of age).
- > The interventions necessary to achieve the results with clear indications on the current coverage level and the target coverage.
- > The responsibilities of government line ministries / sectors for implementing the interventions.
- > The roles and responsibilities of nongovernmental partners.

To initiate this engagement process, stakeholder consultations can be used for the purpose of gathering inputs—the components that will help make up the CRF. Then, you can turn towards holding stakeholder consultation workshops so as to build sectoral consensus. Ultimately, this step will ensure that the CRF is well thought out, that it takes into account any existing relevant work in the country and that those who are most critical to successfully carrying out the CRF are a part of the process from the start.

3.3 Gathering Input through Stakeholder Consultations

Developing a CRF is a consultative and collaborative process and requires bringing together representatives across sectors to jointly define a common nutrition goal, as well as realistic and achievable inputs, actions or interventions, outputs, desired outcomes and impact, to be specified in the CRF. The process for engaging stakeholders can vary from country to country.

As noted in [Modules 1](#) and [2](#), consolidating the information gathered from consultations with stakeholders is essential to ensure early engagement of those who are to be the most involved with the MSNP and CRF implementation and ensure that realistic and achievable actions, outputs, outcomes and impact are specified in the CRF.

These consultations may take shape in a number of ways: meetings with individual stakeholders by a nominated CRF lead person or group; setting up working groups within ministries; conducting stakeholder consultations workshops; making use of interagency sectoral coordination groups; or making use of SUN networks, where they exist. Consultations should take place with government departments and subnational government representatives, as well as key development partners with ongoing nutrition-related programmes (e.g. UN agencies, donors and NGOs / civil society, academia and private sector representatives).



PATRY Evelyn Hockstein



MQSUN⁺'s Stakeholder Consultation tool provides guidance for the purpose of consulting with stakeholders in preparation for the development of a MSNP/CRF. It offers the methodology for holding consultations, in addition to a sample workshop agenda and examples of potential nutrition stakeholders.

To facilitate data gathering, focal persons can be appointed for each sector to collate the relevant data from their colleagues (e.g. agriculture/food security/food systems; health; water, sanitation and hygiene; education; social protection). It is important that these focal persons gather information

from multiple stakeholders, including government departments, UN agencies, bilateral donors and civil society, as well as the private sector and academia, where applicable and feasible.

Formats can be provided to stakeholders to guide completion of the relevant information in as much detail as possible as required for the CRF. It is important to have in mind from the start that all the activities included in the CRF will need to be costed, and therefore an adequate level of detail will be required to facilitate that process. The below featured tool can be shared from the beginning of the CRF development process to streamline data inputs.



MQSUN+'s [Assessing Readiness for Costing guidance note](#) provides not only a tool for assessing readiness for costing but also guidance and an **Excel® template** to serve as a framework for capturing the necessary details on a CRF's intended strategic objectives, activities and targets to ensure the required details are collected and included from the start.

SUBNATIONAL ENGAGEMENT DURING CRF DEVELOPMENT

Consider subnational engagement during CRF development to incorporate vital inputs from the subnational and community levels to ground the CRF in the operational reality and ensure appropriate interventions are adequately represented.

Engagement of subnational stakeholders/actors can be facilitated through conducting a series of subnational workshops to gather inputs for the CRF at the start and/or to review a series of drafts of a CRF which has been initiated at the national level.

The process will depend on the level of decentralisation in the country and the established processes for planning, strategising, discussing and communicating between the national and subnational levels.

3.4 Conceptualising Targets, Indicators and other Components of the CRF

The process of setting targets and defining indicators for the strategic objectives and related activities is a critical step in the CRF because it defines what will be implemented and reported on as stakeholders are held accountable for the indicators' performance, or lack thereof. Each strategic objective identified in the MSNP or CRF must have at least one output and outcome indicator as a sentinel measure of progress related to that objective. Creating a robust set of indicators and targets in the CRF helps ensure that the MSNP is strong.

The [contextual analysis](#), supported by inputs from the multisectoral stakeholders (Section 3.3), should inform the priorities reflected in the CRF. Actions should include both nutrition-specific and

nutrition-sensitive investments,³ as well as actions to strengthen governance (including coordination and leadership, M&E, capacity development, communication and advocacy) at the policy level and national, subnational and community levels, and across sectors.

To guide this process, the [SDG](#) and [WHA](#) nutrition targets can be used and adapted to context. The latest available data from national surveys can be used to formulate baseline indicators from which to define specific targets. However, it is important to look at trends in the national nutrition data to examine the rate of reduction in prevalence of malnutrition over the past five to ten years to determine what is feasible in the country context so as to avoid setting unachievable targets. SUN's [Monitoring, Evaluation, Accountability and Learning dashboards](#) also provide data that be used to inform the selection of key nutrition indicators. A decision may be taken to focus on a subset of the global targets and/or to prioritise targets that are most important in the prevailing context. It is also critical to review existing commitments and targets included in any relevant policies or plans. These can be included and built upon to ensure consistency and robustness.



PAH/Doune Porter

WHA's Global Nutrition Targets 2025 have been revised to 2030. 'These targets are, by 2030:

- > 50% Reduction in the number of children under-five who are stunted.
- > 50% Reduction of anaemia in women of reproductive age.
- > 30% Reduction in low birth weight.
- > Reduce and maintain childhood overweight to less than 3%.
- > Increase the rate of exclusive breastfeeding in the first 6 months up to at least 70%.
- > Reduce and maintain childhood wasting to less than 3%.⁴

SDG 2 (Zero Hunger) targets⁵ include:

- > Target 2.1: Universal access to safe and nutritious food.
- > Target 2.2: End all forms of malnutrition.
- > Additional nutrition-sensitive targets are available on the [SDG tracker](#).

The above international targets may represent those, amongst others, that have been integrated into the MSNP. Once the impact targets are set, the following steps⁶ can be carried out to complete the various sections of the CRF:

³ The *Compendium of Actions for Nutrition* is a useful resource to help with defining nutrition sensitive actions: <https://www.reachpartnership.org/documents/312104/fa572e1e-b8a9-48bf-89c0-cd3afb203c60>.

⁴ WHO, UNICEF. *The Extension of the 2025 Maternal, Infant and Young Child Nutrition Targets to 2030: Discussion Paper*. Geneva, New York: WHO, UNICEF; n.d.: 12. Available at <https://www.who.int/nutrition/global-target-2025/discussion-paper-extension-targets-2030.pdf?ua=1>.

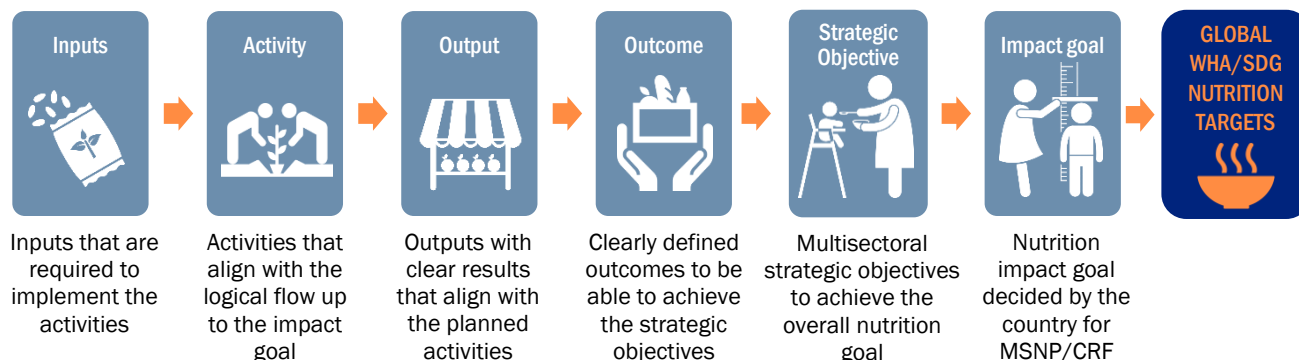
⁵ Sustainable Development Tracker website. SDG 2: Zero Hunger page. <https://sdg-tracker.org/zero-hunger>. Accessed 10 October 2020.

⁶ These steps are adapted/taken from: Independent Evaluation Group (IEG), World Bank. *Designing a Results Framework for Achieving Results: A How-To Guide*. Washington, DC: IEG, World Bank; 2012. Available at

Step 1. Establish strategic objectives to attain the targets

The CRF is focused on a number of strategic objectives (usually approximately five, but it can be more or less), each of which is commonly supported by outcomes, outputs and a set of activities and inputs, which together contribute to achievement of the strategic objective (Figure 3). These may already be defined in an MSNP or strategic document (see Section 2.3 in Module 2).

Figure 3. The results chain of nutrition actions, as indicated in the MSNP/CRF.



Step 2. Define inputs, activities, outputs, outcomes and impact

Discussion of the TOC, as previously noted, should help to identify the inputs, activities, outputs and outcomes that must be achieved in order to attain each strategic objective. Many of these may also be readily available in existing sector plans or discussed in relation to the MSNP and can be adopted in the CRF. Typically, a large number of relevant intermediate results (outputs and outcomes) can be identified by a diverse group of stakeholders, so an important task in developing a CRF is to reach consensus on a *small core set of critical outcomes*.

PRIORISATION OF NUTRITION ACTION

As noted in Module 2, prioritisation starts from the [contextual analysis](#), which can help to identify:

- > Priority nutrition challenges (e.g. wasting, stunting-specific micronutrient deficiencies, overnutrition/obesity).
- > Vulnerable groups.
- > High-burden geographic regions in the country.
- > Priority actions to address the identified challenges.
- > Key stakeholders and their respective roles.

Convergence is the “successful reach of nutrition-related programmes from relevant sectors to address the key determinants of poor nutrition for the same household, same woman, and same child in the first 1,000 days from conception until the child’s second birthday”ⁱ—primarily ensuring to reach the most at-risk and vulnerable population groups. This is a key consideration to keep in mind to effectively prioritise key target groups and interventions.

ⁱ World Health Organization. Global Nutrition Targets 2025: Policy brief series. Geneva: World Health Organization; 2014. https://www.who.int/nutrition/publications/globaltargets2025_policybrief_overview/en/.

Convergence is an important consideration at this stage, and agreement should be reached on which population groups will be targeted and the number of people who should/can be reached by the interventions, considering the coverage of outputs that can be attained. This discussion should involve some aspiration to scale up nutrition interventions to all those who need them, tempered by the feasibility of doing so, particularly in consideration of resource constraints (human and financial), to reach a realistic and achievable target.⁷

Step 3: Assign roles and responsibilities

Each intervention and its outcome should be assigned to a key stakeholder(s) who bears overall responsibility for implementation, achievement and reporting on the intervention. This is typically the responsible ministry, or for crosscutting or multisectoral interventions, responsibility may be shared. Supporting or contributing stakeholders should also be documented in the CRF to ensure there is clarity on who will be engaged in each activity.

Step 4. Identify critical assumptions and risks

For each output and outcome in the results chain, assumptions related to external factors (e.g. political environment, economy, climate change) that could carry risks should be explicitly noted.

If some of these critical assumptions are beyond the control of stakeholders and pose a high risk to successful implementation of the MSNP, selected interventions may need to be reconsidered or adjusted, or a contingency plan or risk mitigation plan should be developed.

Step 5. Review available data sources and specify indicators

Where possible, measurement strategies should be based on existing data sources or established data-collection methodologies, such as administrative databases of the engaged sectors or regularly implemented surveys (e.g. national nutrition surveys, Demographic and Health Surveys, Health Management Information Systems or agriculture information systems, social protection databases, etc.). When defining specific indicators for desired targets and outcomes, data sources should simultaneously be identified that could be used to measure desired changes.

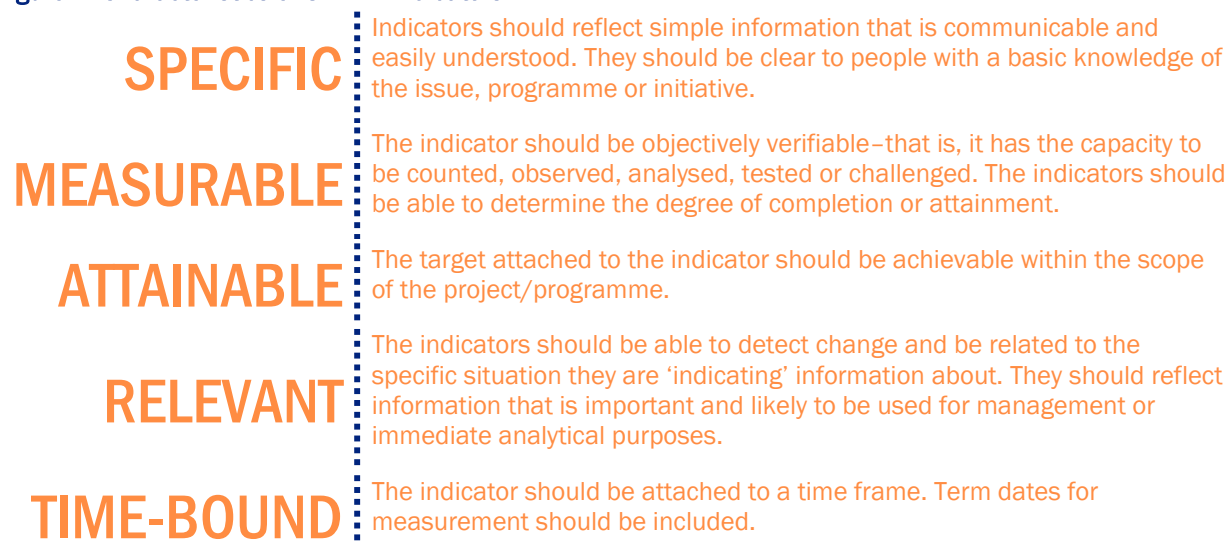
During development of a CRF, gaps in the availability of information are often identified. Additional interventions may need to be included within the CRF to improve the availability, validity and reliability of information, perhaps through the development of a robust reporting, MEL system in support of the nutrition information system (refer to [Module 5](#)), or more simply by including additional indicators within an existing information system.

Step 6. Assign indicators and data sources for each level of result

Strategic objectives, intermediate outcomes and their contributing inputs and outputs need to be translated into a set of *measurable indicators* to establish whether progress is being achieved. Alongside activity or output indicators, these will form the foundation for the MEL framework of the MSNP. Each indicator focuses on one or more characteristics of the outcome. A measure expresses an indicator's value quantitatively or qualitatively using SMART criteria ([Figure 4](#)) so that progress to reach them can easily be monitored:

⁷ World Bank. Designing a results framework for achieving results: a how-to guide. Washington, DC: World Bank; 2012. <http://documents.worldbank.org/curated/en/331541563854787772/pdf/Designing-a-Results-Framework-for-Achieving-Results-A-How-to-Guide.pdf>.

Figure 4. Characteristics of SMART indicators.



Source: Adapted from Independent Evaluation Group, World Bank. Designing a Results Framework for Achieving Results: A How-To Guide. 2012: 33. Available at <http://documents1.worldbank.org/curated/en/331541563854787772/pdf/Designing-a-Results-Framework-for-Achieving-Results-A-How-to-Guide.pdf#page=35>.

The following considerations will help guide this process:

- > A strategic objective (or intermediate outcome) might need more than one indicator to measure both its qualitative and quantitative aspects.
- > A minimal number of indicators should be selected. More information is not necessarily better, and a large set of indicators will be burdensome to track. The following are useful questions to ask: *Is this indicator absolutely necessary to measure whether progress towards the strategic objective is being achieved? Will it create additional burdens on the respondents or on the staff collecting the data? How will this indicator help with monitoring, management and evaluation?* Having multiple stakeholder opinions on the design of the CRF provides an opportunity for discussion and eventual consensus on what good indicators and measures are and what number of indicators will suffice.

Step 7: Review and refine indicators in readiness for costing of the CRF

Once the activities and indicators are selected and integrated into the CRF, it is necessary to determine whether the CRF contains the level of detail and information required for costing. Conducting a [costing readiness assessment](#) allows identification of any gaps or issues and highlights whether any of the activities under each result area requires additional detail or restructuring to permit costing to take place. Further detail on this assessment is provided in [Module 4](#).

Step 8. Establish a performance monitoring plan and a communication plan

The next step in designing a CRF is to plan how it will be operationalised to monitor progress and assess what the effects of interventions are and how that information will be disseminated. A comprehensive MEL framework is usually prepared, which may include components around accountability and learning (refer to [Module 5](#)).

3.5 Building Sectoral Consensus through Stakeholder Workshops

Whilst initial gathering of inputs for the CRF can take place in small groups and through document-sharing over email or through individual consultation, this process can often be slow and inefficient. In such cases, efforts can be complemented by holding a two-to-three-day facilitated workshop where stakeholders from across sectors can sit together and work in small groups to come to a consensus on the specific details of the CRF (see **country case study for Gabon** below and an example from Yemen in [Annex 2](#)). *This process often occurs simultaneously with consensus-building workshops on the MSNP narrative.* For such a workshop, it is important to engage the appropriate cadre from government ministries who have the relevant level of knowledge and detail to provide inputs on intervention types, approximate beneficiary numbers, capacity, etc. Participants need to arrive at the workshop prepared with four types of information:

- > A common understanding of the nutrition challenges that the MSNP and CRF are intended to address.
- > An initial TOC in which they can situate their sectoral/organisational role.
- > A working knowledge of the evidence required for measuring and assessing desired outcomes and impacts.
- > Available data sources and proven data-collection approaches relevant for the CRF.

The structure of this workshop is likely to include plenary presentation on the outline of the CRF and the nutrition strategic objectives or goals already agreed. This may include a brief presentation on the overview of an existing MSNP or national nutrition policy, for example. Then the majority of the workshop/retreat will involve working sessions of small groups to develop the specific content of the CRF, including structured sessions on inputs, processes, interventions or actions, outputs, outcomes and impact. Groups should gather in plenary at regular intervals to share their progress and incorporate comments from the wider group so that all stakeholders gain a good understanding of the complementary actions of others and of each part of the CRF. At the end of the workshop, the consolidation of all the work done should be presented in the shape of an updated draft of the CRF (refer to [Figure 5](#) for an example of a workshop agenda).

Additional clarification and confirmation of the CRF can be conducted through supplementary meetings with individual stakeholders, working groups within ministries, interagency sectoral coordination groups or existing SUN networks. As the CRF often accompanies the MSNP as the primary planning document(s) for the country's nutrition agenda, it may also be presented at the validation workshop for the MSNP—whereby sectors and stakeholders have a last chance to debate any issues of concern before agreeing to endorse the MSNP/CRF in acceptance of their roles and responsibilities in implementing it. *Formal endorsement by government ministries across the engaged sectors should then be achieved through signing of the MSNP (and thus the accompanying*



PAH/Doane Porter

CRF), preferably by the minister of each sector, followed by final sign-off by the SUN Focal Point or senior country representative leading the process.

Note that [Modules 1 and 2](#) provide guidance on awareness-raising and initial stakeholder workshops to bring people to a common understanding on nutrition, which can be implemented prior to this working retreat if stakeholders are not yet adequately aware of their role in working towards nutrition goals for the country.



COUNTRY CASE STUDY

Engaging nutrition stakeholders to develop a multisectoral nutrition plan and common results framework in Gabon

The Government of Gabon has developed a National Food and Nutritional Security Policy (PNSAN 2017-2025) and has formed a multisectoral, multi-stakeholder platform, which is actively working on the implementation of the PNSAN. As a prelude to the implementation of the PNSAN, the country recognised the need for defining the expected outcomes for each of the strategic objectives outlined in the policy, including specific details such as targeted populations, number of targeted people, definition of interventions, timing of implementation and indicators for M&E.

The country, through technical assistance provided by MQSUN+, conducted stakeholder consultations and meetings to transform the specific elements of the strategic objectives and priorities identified in the PNSAN into an MSNP and CRF with concrete, quantified, targeted actions with start and end dates of execution.

Stakeholder engagement began with 12 bilateral meetings with nutrition partners to discuss concerns about operationalisation of the PNSAN, acquire existing policy opportunities and strategies to assist development of the CRF and identify points of action to strengthen nutrition partnerships in the country. Stakeholders included government institutions (the Ministries of Agriculture, Social Welfare, Social Protection and Family, etc.), UN agencies (Food and Agriculture Organization, UNICEF, WHO), and key nutrition point persons, such as the SUN Focal Point and the Gabon Nutrition Champion. Some of the recommendations from these meetings included providing nutrition awareness raising, understanding sectoral roles and responsibilities, facilitating inclusion of civil society and the private sector, creating and promoting legislation to improve nutrition, integrating nutrition-sensitive actions into sectoral policies and initiating urban nutrition programmes to combat obesity, amongst others.

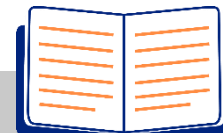
The bilateral meetings were followed by two nutrition stakeholder consultation workshops. The first workshop, attended by 30 partners from state and non-state institutions, focused on awareness raising around the nutrition situation in Gabon, the structures and actions of the SUN Movement, the importance of a multisectoral approach to nutrition, the purpose of developing a CRF and, finally, development of a road map that sets out roles and responsibilities for the CRF development process. The second workshop was held over two days with members of the PNSAN's sectoral platform to thoroughly review each of the strategic objectives in the PNSAN; define targets, indicators and activities for each objective; and further identify next steps and a timetable for completing the CRF. By the end of the consultative process, the team had raised awareness of the nutrition situation, developed a draft CRF and created a plan for moving forward with the PNSAN implementation process.

Figure 5. Example agenda for a two-day consensus-building workshop for a CRF.

Day 1	
30 minutes	Arrival and introductions
15 minutes	Opening remarks
60 minutes	High-level overview , including (<i>presentations</i>): <ul style="list-style-type: none"> - Updates on nutrition planning activities & objectives of the MSNP/CRF - Workshop objectives, overview of scope of work and related policy context - Draft CRF, including goal & expected impact of MSNP/CRF
Break	
30 minutes	Consultative process for the development of the MSNP/CRF (<i>presentation or panel discussion</i>)
90–120 minutes	Overview of strategic objectives: priority areas, activities and targets (<i>presentations with small group discussions or Q&A session</i>) <i>Note: allocate 45–60 minutes for group discussions / Q&A</i>
Lunch Break	
90–120 minutes	Rolling out the MSNP/CRF , including: <ul style="list-style-type: none"> - Implementing agencies, including accountability & coordination and service delivery structures - Prioritising and targeting vulnerable groups - Capacity assessment, strategising and development - Monitoring, evaluation and learning (<i>presentations with small group discussions or Q&A session</i>) <i>Note: allocate 45–60 minutes for group discussions / Q&A</i>
30 minutes	Wrap-up and next steps
Day 2	
30 minutes	Arrival and introductions
15 minutes	Opening remarks
30 minutes	Overview of the day's objectives for costing validation (<i>presentation</i>)
45 minutes	Costing readiness assessment (<i>presentation</i>)
Break	
120 minutes	Small group discussions by CRF strategic objectives to detail activities, set annual targets and verify costing estimates
Lunch Break	
60 minutes	Small group presentations & next steps for each line ministry
15 minutes	Wrap-up and next steps

Abbreviations: CRF, common results framework; MSNP, multisectoral nutrition plan.

Additional Guidance to Develop a Common Results Framework



Resources

SUN Movement website. Common Results Framework (CRF) page. Available at <https://scalingupnutrition.org/share-learn/planning-and-implementation/aligning-and-costing-nutrition-actions/>. Accessed 20 September 2020.

Walters T, Dolan C, Shoham J. *Understanding the SUN Movement CRF: Lessons Learned From Five Countries*. Oxford: Emergency Nutrition Network; 2015. Available at https://scalingupnutrition.org/wp-content/uploads/2016/04/ENN-SUN-CRF-Report_Dec-2015_Share.pdf.

WHO website. E-Library of Evidence for Nutrition Actions (eLENA) page. Available at <https://www.who.int/elena/titles/en/>. Accessed 20 September 2020.

WHO. *Essential Nutrition Actions: Mainstreaming Nutrition Through the Life Course*. Geneva: WHO; 2019. Available at <https://www.who.int/publications/i/item/9789241515856>.

Tools

WHO website. Nutrition Landscape Information System page. Available at <https://www.who.int/nutrition/nlis/en/>. Accessed 20 September 2020.

UN Network for SUN / REACH [Renewed Efforts Against Child Hunger and Undernutrition] Secretariat. *Compendium of Actions for Nutrition*. Rome: World Food Programme; 2016. Available at <https://www.reachpartnership.org/documents/312104/fa572e1e-b8a9-48bf-89c0-cd3afb203c60>.

About MQSUN+

MQSUN+ provides technical assistance (TA) and knowledge services to the UK's 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.

Acknowledgements

This toolkit was produced by Silvia Kaufmann, Tamsin Walters, Barb Koloshuk, Amanda Coile, Carrie Hemminger, Monica Kothari and Michelle Martinez at PATH. Special thanks to the MQSUN+ core team and consultant teams, the SUN countries we have partnered with and the SMS—all who have contributed to these key learnings and the successful TA we have provided to scaling up nutrition efforts.

MQSUN+ cannot be held responsible for errors or any consequences arising from the use of information contained in this brief. This document was produced by MQSUN+ through support provided by UK aid and the UK Government; however, the views expressed herein do not necessarily reflect the UK Government's official policies.

