

## **Effective Governance for Nutrition Programming:**

Lessons from Ethiopia and Nepal

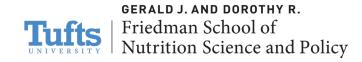
March 3, 202 I

**Robin Shrestha** 

**Eileen Kennedy** 

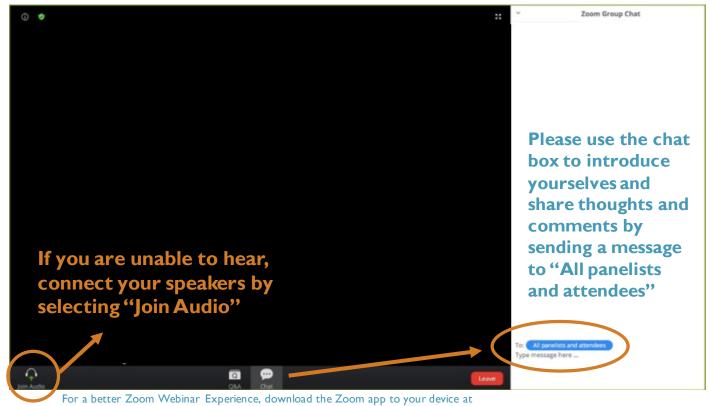
Shibani Ghosh Grace Namirembe







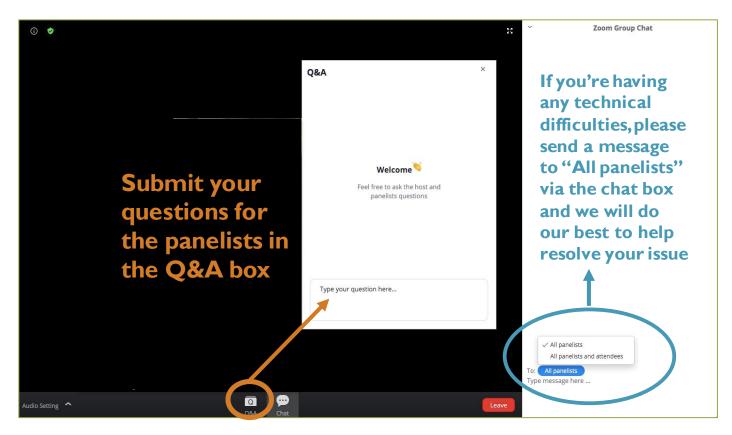
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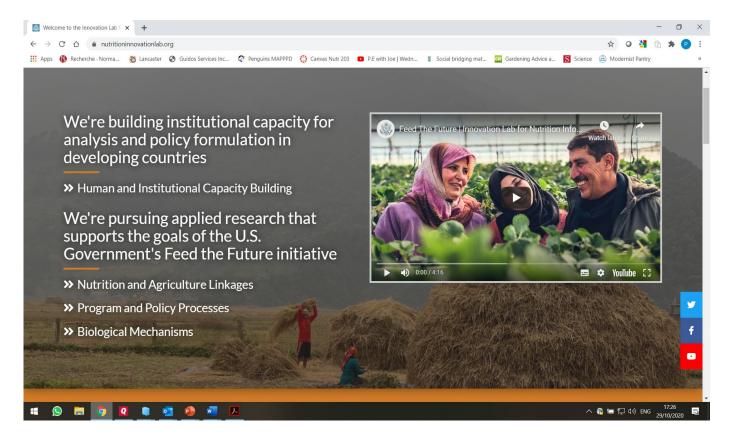


## **Q&A AND CHAT**

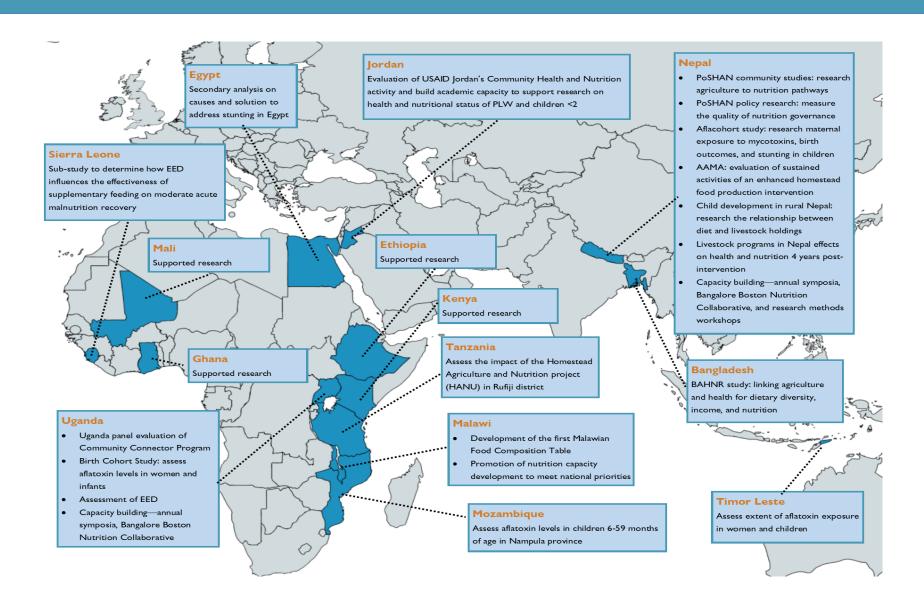




### FEED THE FUTURE INNOVATION LAB FOR NUTRITION

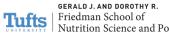


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### **GLOBAL AND LOCAL PARTNERS**











































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assistance limited













































## WEBINAR SERIES

## WEDNESDAY, MARCH 3RD 9:00AM - 10:30AM (ET)

# Effective Governance for Nutrition Programming: Lessons from Ethiopia and Nepal



Tufts University



Tufts University



Tufts University



Tufts University

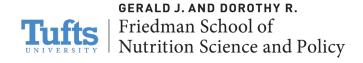




## Nutrition Policy and Governance in Ethiopia: What Difference Does Five Years Make?

Eileen Kennedy, Tufts University



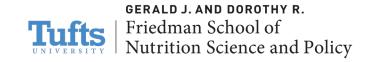




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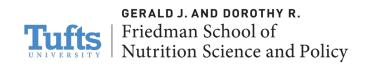




#### **BACKGROUND**

- Scaling Up Nutrition SUN
  - Sept 2010 Official Launch; NYC UN General Assembly Meeting
  - Sec. of State Hillary Clinton
  - Research Based Lancet Series
  - Multi sector approach nutrition sensitive and nutrition specific
  - Country Owned originates from country priorities
  - "Early Riser Countries" Ethiopia, Nepal



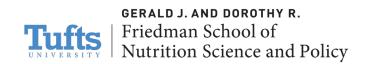




#### ETHIOPIA EXPERIENCE

- National Nutrition Strategy: Jan 2008
- National Nutrition Program 1: 2008 2015
- National Nutrition Program 2: 2016 2020
- National Food and Nutrition Policy: 2018



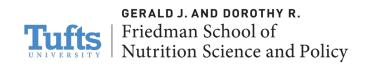




## PROJECTS: USAID FUNDED

- ENGINE Empowering New Generations to Improve Nutrition and Economic Opportunities: 2011 -2016
- Growth through Nutrition: 2016-2021
- ENGINE and Growth through Nutrition multi sector approach to improving health and nutrition; specific focus on first 1000 days – pregnant women and children under age 2.





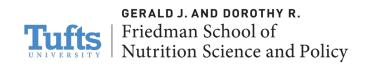


### **DESIGN**

Two studies – semi quantitative, structured interviews; key informants

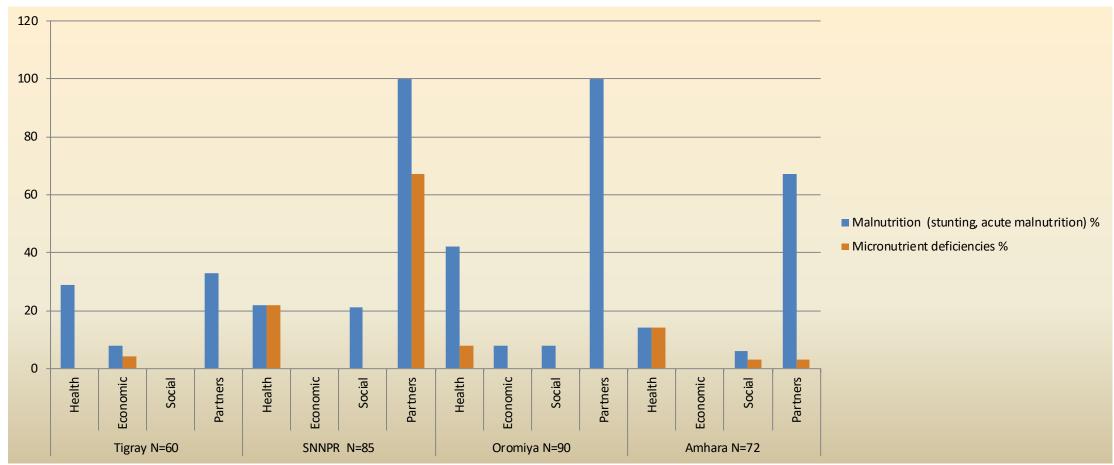
 Both studies, same 4 regions of Ethiopia – Amhara, Oromia, Tigray, SNNP



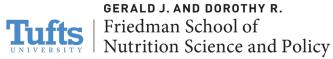




## MAJOR NUTRITIONAL PROBLEM BY REGION: ENGINE









## DO YOU FEELTHAT YOUR OFFICE/DEPARTMENT IS CONSULTED ON NUTRITION ISSUES: **ENGINE**

Region	Sectors	Consulted %	Not consulted	Don't know
			%	
Tigray	Health	71	29	0
N=60	Economic	52	48	0
	Social	42	54	4
	Partners	100	0	0
SNNPRS	Health	78	22	0
N=85	Economic	46	51	5
	Social	56	41	0
	Partners	100	0	0
Oromia	Health	83	33	0
N=90	Economic	16	65	3
	Social	13	61	3
	Partners	100	0	0
Amhara	Health	86	14	0
N=72	Economic	16	77	6
	Social	25	72	3
	Partners	67	0	0



## DO YOU FEEL THAT THERE IS SUFFICIENT ATTENTION AND RESOURCES FOCUSED ON NUTRITION TODAY: **ENGINE**

Region	Sectors	Yes %	No %	Don't know
Tigray	Health	100	0	0
N=60	Economic	36	56	8
	Social	21	79	0
	Partners	33	67	0
SNNPRS	Health	56	33	11
N=85	Economic	26	67	5
	Social	32	71	0
	Partners (	67	33	0
Oromia	Health	17	75	8
N=90	Economic	11	59	30
	Social	18	71	11
	Partners	67	33	0
Amhara	Health	86	14	0
N=72	Economic	10	90	0
	Social	16	84	0
	Partners	33	67	0

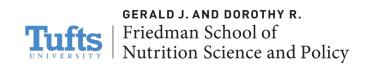


### DIFFERENT PERCEPTIONS

 "In my opinion, nutrition received sufficient attention and enough resources are also allocated to implementing nutrition programs as the economy of the country allows." Amhara, Woreda Health Bureau

 "Attention is not given in terms of budget and man-power, the nutrition issue is only performed by the health sector." Amhara Regional Bureau







## GOVERNMENT RESOURCES PRIORITIZED TO USE WITHIN REGION: **ENGINE**

Region	Prioritie	S								
	1 <sup>st</sup> Prior	ity		2 <sup>nd</sup> Priori	2 <sup>nd</sup> Priority			3 <sup>rd</sup> Priority		
	Health	Agriculture	Education	Health	Agriculture	Education	Health	Agriculture	Education	
	%	%	%	%	%	%	%	%	%	
Amhara N=72	1	76	8	32	10	44	47	3	29	
Tigray N=60	7	63	2	32	15	40	32	7	25	
SNNPR N=85	6	67	8	40	5	20	24	11	28	
Oromia N=90	12	44	11	31	16	20	20	13	33	



## KNOWLEDGE OF NNS AND ORGANIZATIONAL INVOLVEMENT, BY REGION AND SECTOR: **ENGINE**

Region	Sectors	Do you ki	now NNS?	If Yes, howy	If Yes, how your organization involved?			tion more involv	ed in NNS
		Yes %	No %	Planning %	Implementation %	M&E %	Health %	Agriculture %	Education %
Tigray	Health	14	86	100	100	100	100	0	0
N=60	Economic	4	96	0	0	0	0	0	0
	Social	4	96	0	50	50	100	100	50
	Partners (	67	33	0	67	0	67	0	0
SNNPRS	Health	33	56	0	100	0	67		
N=85	Economic	13	87	0	100	0	100	100	20
	Social	18	85	0	100	0	100	83	33
	Partners (	100	0	0	100	0	3	3	33
Oromia	Health	50	50	17	83	0	100	0	0
N=90	Economic	8	86	0	2	0	100	0	0
	Social	3	82	0	1	0	0	0	0
	Partners (	100	0	33	100	0	67	33	0
Amhara	Health	86	14	33	83	17	83	67	67
N=72	Economic	16	84	20	100	0	100	100	80
	Social	9	91	0	67	33	67	33	33
	Partners (	67	0	50	100	0	50	100	0



## MAJOR CHALLENGES DURING IMPLEMENTATION OF NNS, BY REGION AND SECTOR: **ENGINE**

Region	Major NNS i	mplementation	challenges			
	Budget shortage %	Lack of nutrition professionals %	Lack of attention %	Low awareness %	Coordination problem %	Others
Tigray N=6	33	33	0	83	17	83
SNNPR N=17	35	47	29	71	53	18
Oromia N=14	14	14	29	29	29	0
Amhara (N=16	38	6	44	25	25	25



## MAJOR CHALLENGES IN COLLABORATION AND COORDINATION NUTRITION, BY REGION AND SECTORS: **ENGINE**

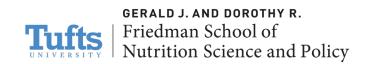
Region	Sectors	Major collaboration and coordination challenges							
		Budget shortage %	Lack of nutrition professiona Is %	Lack of attention %	Low awareness in sectors %	Poor Community awareness %	No challenge %	Absence of structure and ownership %	Others
Amhara	Health	14	14	29	14	0	0	0	29
N=72	Economic	39	3	13	13	0	0	0	19
	Social	16	22	22	25	0	0	0	16
	Partners	0	0	0	0	0	0	0	0
Tigray	Health	71	43	29	57	43	0	29	57
N=60	Economic	12	12	28	20	16	8	12	12
	Social	25	25	25	29	21	8	4	17
	Partners	<u> </u>	33	33	67	67	0	0	67
SNNPR	Health	22	22	33	22	56	0	11	0
N=85	Economic	18	13	21	23	33	0	41	8
	Social	18	21	29	26	35	0	32	9
	Partners	67	33	67	33	33	0	67	67
Oromia	Health	17	0	25	58	8	33	0	0
N=90	Economic	16	5	16	11	3	0	0	8
	Social	18	21	29	11	8	26	0	0
	Partners	33	33	33	33	0	33	0	0



#### **GROWTH THROUGH NUTRITION**

- \* Year 4 of ENGINE, woredas selected to serve as models of multisectoral nutrition coordination = **Model Woredas (4)**
- Model woredas based on receiving full package of intervention: livelihood, WASH, SBCC; commitment of woreda leaders to implementation of the NNP. Project supported the establishment of multi sector coordination bodies through frequent technical and financial support; supportive supervision – usually monthly
- Non model woredas (4) some support for establishing coordination bodies but not full package of services
- Non-ENGINE woredas (4)







## MAJOR NUTRITION PROBLEMS – **GROWTHTHROUGH NUTRITION STUDY**

What is your understanding of the nutrition problems of this woreda?	Model Woredas n=23	Non-Model Woredas n=24	Non-ENGINE Woredas n=24	Totals n=71
Low awareness/misconceptions regarding good nutrition	30.4%	8.3%	25.0%	21.1%
Not feeding colostrum	30.4%	12.5%	25.0%	22.5%
Poor dietary diversity/unbalanced diet	78.3%	100%	83.3%	94.4%
Poor productivity of Crop production or Animal products	0.0%	0.0%	4.2%	1.4%
Drought/lack of rain	4.3%	0.0%	0.0%	1.4%
Lack/shortage of food	26.1%	54.2%	50.0%	43.7%
Food taboos/cultural norms	17.4%	4.2%	4.2%	8.5%
Poor access to clean water	4.3%	4.2%	4.2%	4.2%
Problems with exclusive breastfeeding	8.7%	12.5%	4.2%	8.5%
Disease outbreaks	0.0%	12.5%	0.0%	4.2%
Malnutrition 1) Stunting 2) Wasting 3) Underweight 4) Anemia	4.3%	0.0%	16.7%	7.0%
Low awareness/misconception on utilization/nutrition diversification	73.9%	29.2%	62.5%	54.9%
Poor IYCF practices	0.0%	4.2%	0.0%	1.4%
Poor production diversity	0.0%	12.5%	4.2%	5.6%



## RESPONDENT OFFICE LEVEL PARTICIPATION IN NNP – GROWTHTHROUGH NUTRITION STUDY

How is your office involved in implementation	Model Woredas	Non-Model Woredas	Non-ENGINE Woredas	Totals
of NNP?	N=23	N=24	N=24	N=71
Involved in designing nutrition/NNP plan	13.0%	20.8%	8.3%	14.1%
Involved in Implementation/Quality Control/ Evaluation of NNP plan	47.8%	29.2%	33.3%	36.6%
Implements Nutrition Specific Activities	4.3%	0.0%	12.5%	5.6%
Implements Nutrition Sensitive Ag & WASH Activities	12.5%	12.5%	4.2%	9.9%
Coordinating role	0.0%	4.2%	8.3%	4.2%
Participates in steering/coordination committee	0.0%	4.2%	12.5%	5.6%
Funding/allocating budget to sectors	4.3%	0.0%	0.0%	1.4%
Not involved/Not aware	33.3%	70.8%	62.5%	56.3%



## CHALLENGES IN NNP IMPLEMENTATION AT WOREDA LEVEL BY SAMPLE GROUP: **GROWTH THROUGH NUTRITION**

What have been the main challenges in implementing the NNP at the woreda and kebele levels?	Model Woredas N=23	Non-Model Woredas N=24	Non-ENGINE Woredas N=24	Totals N=71
Insufficient nutrition programming	4.3%	4.2%	12.5%	7.0%
Lack of budget/resources	8.7%	4.2%	0.0%	4.2%
Lack of collaboration/coordination	0.0%	4.2%	0.0%	1.4%
Lack of human resources/high turnover  Lack of rain/drought	4.3% 0.0%	0.0% 8.3%	4.2% 8.3%	2.8% 5.6%
Lack of strong leadership/political commitment/attention	4.3%	4.2%	0.0%	2.8%
Large number of committees	13.0%	0.0%	12.5%	8.5%
Limited capacity/lack of training	8.7%	4.2%	0.0%	4.2%
Low awareness of nutrition in other sectors	4.3%	0.0%	0.0%	1.4%
Low level of awareness of the community on nutrition related issues	4.3%	4.2%	12.5%	7.0%
Transportation/logistics challenges	8.7%	4.2%	0.0%	4.2%



### NUTRITION FOCAL PERSON BY SAMPLE GROUP AND SECTOR

Sectors reporting a focal person for nutrition in their office	Model Woredas n=4	Non-Model Woredas n=4	Non-ENGINE Woredas n=4	Total woredas n=12 (%)
Woreda Administrator	1	2	0	3 (25)
Woreda Health Office	4	4	4	12 (100
Woreda Water and Energy Office	3	3	3	9 (75)
Woreda Education Office	0	2	1	3 (25)
Woreda Agriculture Office	4	3	3	10 (83)
Woreda Finance Office	1	2	1	4 (33)
Total Nutrition Focal Persons	13	16	12	



## TIME SPENT IN CURRENT POSITION BY SAMPLE GROUP AND SECTOR: **GROWTH THROUGH NUTRITION**

Sectors	Average Months in Current Position					
	Model	Non-ENGINE				
Woreda Administrator	24.0	32.3	23.0			
Woreda Health Office Head	22.7	22.8	31.5			
Woreda Water and Energy Office Head	8.0	18.0	20.7			
Woreda Education Office Head	8.7	24.8	24.0			
Woreda Agriculture Office Head	20.7	31.8	15.8			
Woreda Finance Office Head	59.3	43.5	29.3			
Total	23.9	28.8	24.0			



## FACTORS FOR IMPROVED COLLABORATION: GROWTHTHROUGH NUTRITION

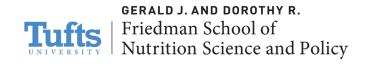
Are there any ways in which sectors could collaborate more effectively together in this woreda?	Model Woredas N=23	Non-Model Woredas N=24	Non-ENGINE Woredas N=24	<b>Totals</b> N=71
Additional budget	4.3%	4.2%	20.8%	9.9%
Capacity building	13.0%	0.0%	8.3%	7.0%
Defining roles and responsibilities of sectors	17.4%	16.7%	16.7%	16.9%
Appointing a nutrition focal person(s) to lead coordination (better leadership)	34.8%	12.5%	37.5%	28.2%
External support	0.0%	8.3%	4.2%	4.2%
Improved kebele-level coordination	8.7%	0.0%	0.0%	2.8%
Improved collaboration & shared planning	13.0%	41.7%	25.0%	26.8%
More attention/importance on nutrition	4.3%	12.5%	8.3%	8.5%
More attention/leadership from gov't	0.0%	0.0%	4.2%	1.4%



### **SUMMARY**

- GOE continues to make a commitment to nutrition NNS; NNP I and II
- Progress in implementation has been made at subnational level – but it can take time
- 3. Research can make a difference Example, oversight of coordinating body NNCB moved to office of the Prime Minister



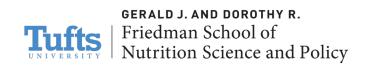




### **SUMMARY**

- Investment in capacity development can be a significant factor in multi sector implementation – Example, Model Woredas
- 5. Investing in governance is a continual process need to have strategies for rejuvenation/reinforcing mechanisms







# Effective Governance for Nutrition Programs The POSHAN Policy Process Studies

Shibani Ghosh and Grace Namirembe

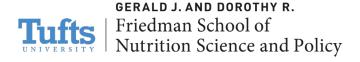
co-authors: Robin Shrestha, Dale Davis, Kedar Baral and Patrick Webb













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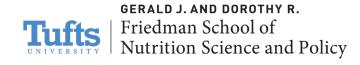
- Ministry of Health and Population, Family Welfare Division
- Nepal Health Research Council
- Tribhuvan University Institute of Medicine
- USAID/Nepal
- Participants from various line ministries (central and subnational)













### **GOVERNANCE AND NUTRITION**

- Good governance is needed to coordinate interventions, adequately invest in nutrition and set up accountability mechanisms (FAO/WHO, ICN2 2014)
- Broad agreement that successful interventions are ones that are implemented in a conducive or "enabling" policy environment (Webb et al 2016)
- A review of 75 studies on drivers of effective action by governments found that an inability to implement even well-designed policies for nutrition was often linked to "absence of institutional ownership for nutrition and institutional failure" (Baker et al 2018)
- The heterogenous nature of governments make the study of policy implementation and institutional governance difficult
- Critical challenges towards generating empirical evidence around governance for nutrition include a) determining what to precisely measure and b) where in the political and civil service arenas to measure it



### MULTI-SECTORAL INTERVENTIONS, COORDINATION AND NEPAL

- Nutrition has been the cornerstone of development in Nepal and the Nepal Nutrition Assessment and Gap Analysis (NAGA) put multi-sectoral nutrition at the policy fore front in 2009 (Pokharel et al 2009)
- The Government of Nepal in collaboration with partners has invested significant resources (human and financial) in supporting multi-sectoral policies for supporting optimal nutrition in women and children particularly those under 2 years of age
- The Nepal Multi-sectoral Nutrition Plan (MSNP) is the guiding principle for several multi-sectoral programs
  implemented by implementing partners supported by USAID, World Bank, UNICEF among others
- Since 2010, Nepal has implemented MSNP in two phases with Phase 2 going through 2024
- Within this context, the Nutrition Innovation Lab implemented the PoSHAN Policy process studies starting in 2013.



### POSHAN POLICY PROCESS STUDY

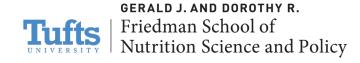
- Understand
   the process of implementation of multi-sector activities across Nepal
  - barriers/facilitators/constraints in translating policy initiatives into actions at scale
- Assess
   cross-sectoral coordination at and across different levels of governance
   vertical and horizontal coherence/coordination around nutrition
- National, sub-national district, ilaka, VDC and ward (last survey- three administrative levels- district, municipality, ward)













### **METHODS**

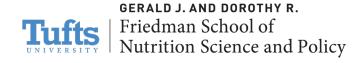
- Mixed methods study design
- Officials at national, sub-national, district and frontline workers at ilaka, VDC and ward across different line ministries and departments; purposive sampling
- Utilizing semi-structured questionnaires
- 4 rounds of data, prior to the new structure of governance in Nepal and 1 round after the new federal system (ratification of the new Constitution of Nepal in 2015)





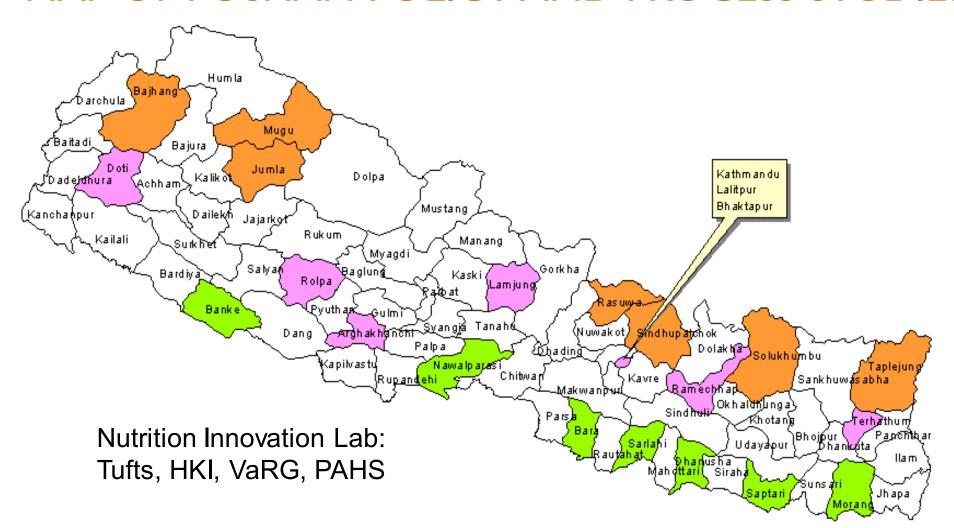




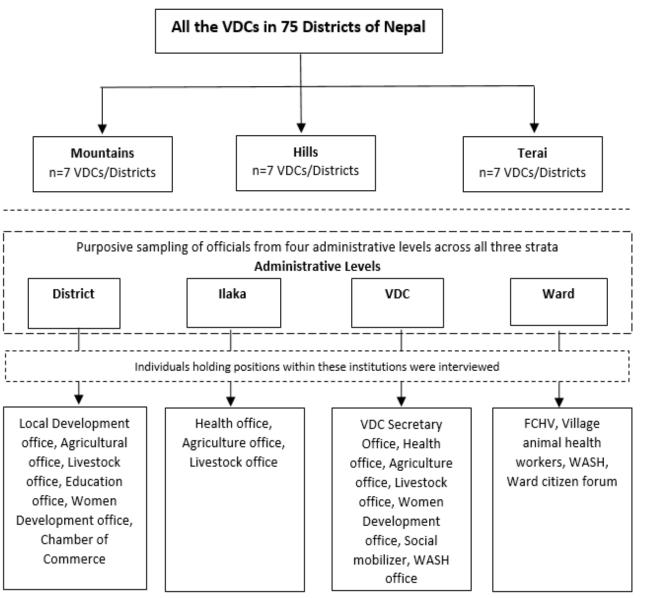




#### MAP OF POSHAN POLICY AND PROCESS STUDIES







PoSHAN Community Study

PoSHAN Policy Study



Ilaka

VDC

Ward

## LEVELS OF DATA COLLECTION AND TYPES OF OFFICIALS INTERVIEWED

2013-2016

Central

National policy makers, line ministry officials,
UN agency, bilateral agencies, INGOs

District officers (representative of departments linked to line ministries, local

NGOs

 Ilaka officers (representative of district departments at Ilaka level

VDC officers (representative of district departments at VDC level

Frontline workers: health, agriculture extension, social mobilization

Sectors included: Health, Agriculture, Livestock, Local Development, Social Mobilization





### SAMPLE SIZE BY SURVEY ROUND

Survey Rounds by Administrative Level	Sample Size	
Regional Round I (2013) only	29	
Subnational (district, Ilaka/municipality, VDC, ward)		
Round I (2013)	653	
Round 2 (2014)	523	
Round 3 (2015); 9 districts (Non-Earthquake affected districts)	136	
Round 4 (2016)	520	
Round 5 (2019); new federal structure	555	
Total Sample Size	2416	

No data collection in 2018 due to changing federal system



#### **RESULTS**

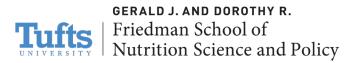
- Analysis of commitment, capability and collaboration (2013-2016 data)
- Development of a novel metric: the Nutrition Governance Index (NGI) (2014 and 2016)
- Assessing the relationship of the NGI and nutrition outcomes (2014 and 2016)













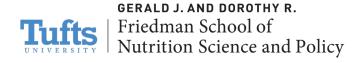
# Analysis of Commitment, Capability and Collaboration













#### COMMITMENT

- Willingness to act
- Adopting nutrition as a core professional responsibility and accepting a personal role in implementing policies and programs

#### Three elements considered:

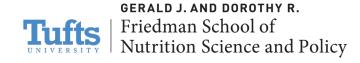
- Acknowledgement of nutrition as a priority
- Willingness to take on additional responsibilities
- Wanting to be more engaged in and consulted on nutrition policy issues













#### COMMITMENT

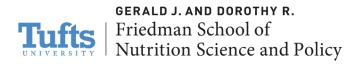
- In the 2013 survey round, over 61% asserted that nutrition should be a more important policy priority
- Nearly all (irrespective of level) wanted to be more involved in professional discussions about nutrition problems and planning appropriate solutions
- The main difference was a lower response rate in the livestock, agriculture, local development and health sectors (versus education and WASH sectors)













#### PROMOTION OF COMMITMENT

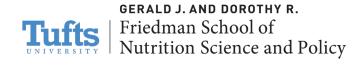
- Genuine commitment would be difficult to secure without appropriate incentives
- A mandatory mechanism would be required to ensure appropriate dedication of time and resources
- Others: financial allowances, adequate capacity building and promotion of joint responsibility for common goals
  - Up to 62% of officials at the regional level promoted monetary allowances
- Service providers at the ward level were less likely to agree with the proposition that field workers are sufficiently motivated to take on more responsibilities relating to nutrition than higher level officials.













#### CAPABILITY AND COLLABORATION

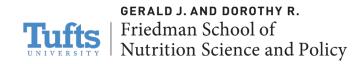
- Capability assess the capacity to deliver policy and program actions
- Inadequate capacity is often cited as a major reason for program failure (Gillespie et al 2013)
- Collaboration which is "an elusive goal as it requires articulating diverse approaches and interests across different government sectors, ministries and non-governmental actors (Mejia-Acosta et al 2012)





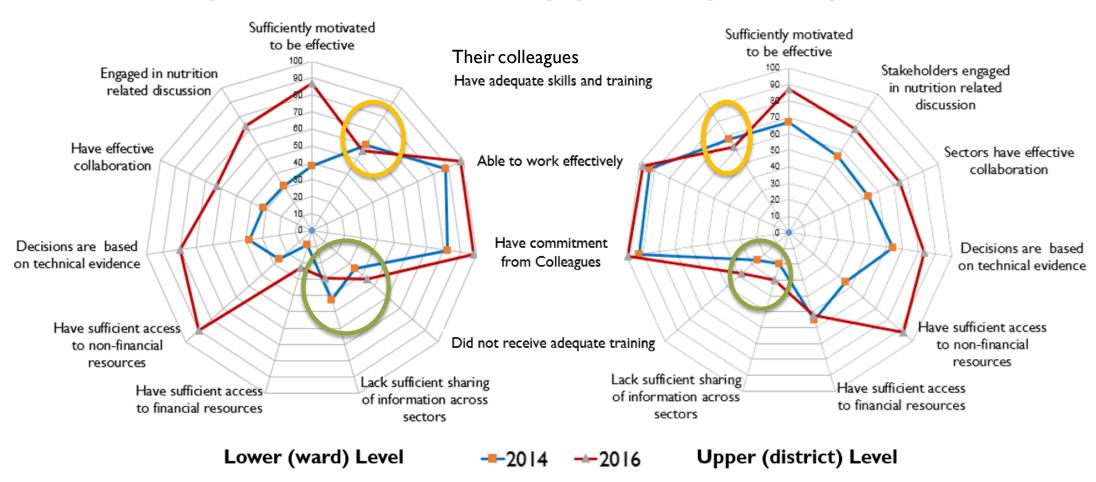








#### CAPABILITY AND COLLABORATION



Both in 2014 and in 2016, fewer respondents agreed their roles and responsibilities around nutrition were clearly defined (this was irrespective of sector and level)



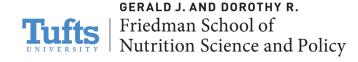
# Development of a Novel Metric: the Nutrition Governance Index (NGI)













#### RATIONALE FOR NUTRITION GOVERNANCE INDEX

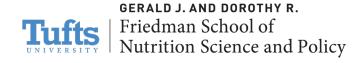
- There is a need for countries to translate policies into outcomes on the ground
- Dearth in metrics that measure governance
- Published metrics lack granularity below the national level and many are not nutrition-specific













## CONCEPTS CAPTURED IN THE QUESTIONNAIRE

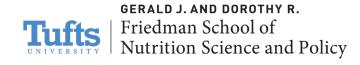
- Understanding of nutrition and related policies
- Formal consideration of nutrition when budgeting and planning
- Clear definition of nutrition-related responsibilities
- Effective collaboration across office in addressing nutrition issues
- Demand from other ministries for collaboration
- Clear leadership on nutrition issues in their sector
- Adequate on-job training
- Adequate support from supervisors
- Availability of both financial and non-financial support at the workplace













#### STATISTICAL ANALYSIS

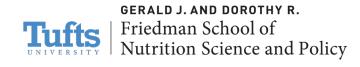
- We condensed all the responses into principal components, using a data reduction procedure called Principal Components Analysis
- Principal components capture most of the variation in the data
- The NGI is a sum of these components, weighted by the amount of variation they capture
- Statistical reliability (consistency) and Construct validity were assessed using Cronbach's alpha and Confirmatory Factor Analysis













#### **RESULTS**

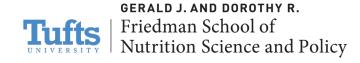
- Six domains were identified and aggregated into a single score, the NGI:
  - 1) Understanding nutrition and responsibilities
  - 2) Collaboration within and across offices
  - 3) Access to financial resources
  - 4) Nutrition leadership
  - 5) Capacity
  - 6) Coordination and support across and between sectors







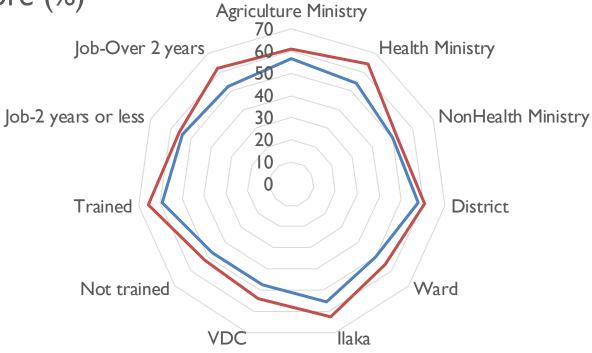






### RANKING SUB-NATIONAL GROUPS





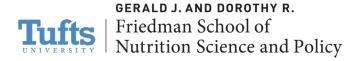














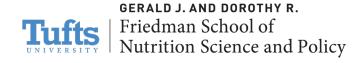
# Assessing the Relationship of the NGI and Nutrition Outcomes













#### NGI AND NUTRITION OUTCOMES IN CHILDREN

Linking the NGI to nutrition outcomes in Nepal

HAZ/WHZ ~ NGI ?

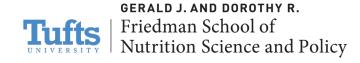
 Two statistical approaches were used to explore this relationship Generalized Estimating Equation modeling Multilevel modeling approach













### **RESULTS**

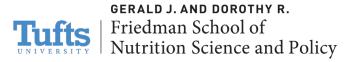
		HAZ	WHZ		
	Multi-level model				
NGI & child's age	2				
	NGI & >24months	0.12***	0.04*	Nutrition-sensitive VS nutrition-specific	
	<b>NGI &amp;</b> ≤ 24months	Ref	Ref	programs	
ICC		0.07	0.17	Lagged effects of	
N		11910	10148	rolled-out policies	
		GEE n	nodel		
NGI & child's age					
	NGI & >24months	0.02(0.01)***	0.01(0.01)		
	<b>NGI &amp;</b> ≤ 24months	Ref	Ref		
N		6094	5127		













#### POINTS TO CONSIDER WHEN USING THE NGI

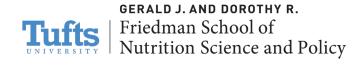
- Domain analysis is required to achieve a comprehensive understanding of nutrition governance
- Sample selection based on positions held as opposed to individual officials
- Purposive sampling of participants within VDCs may limit generalizability













#### RELEVANCE OF THE NGI

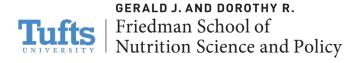
- Measuring the effectiveness of policy implementation, at the sub-national level, is feasible using a simple and intuitive tool like NGI.
- The Nutrition Governance Index can be linked to child nutrition outcomes
- This tool can be contextualized for use in other countries













#### CONCLUSION

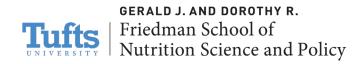
- Inherent complexity- main challenge for implementing multi-sector policies
- A high level of quality and performance, coordination and convergence is needed (WHO 2013)
- This is in face of varying and limited management, technical capacity and poor governance environments (WHO 2013)













#### CONCLUSION

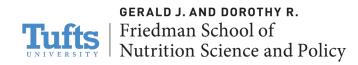
- Implementation of MSNP policy (across programs and districts) clearly is moving Nepal in the forward direction
- In Nepal, we found strong commitment and a positive shift in capability and collaboration particularly lower levels of governance across all sectors
- Committed financial resources for nutrition, training, information sharing and clarity over the division of labor, roles and responsibilities within multi-sector plans are needed
- NGI: Novel approach to measure quality of policy implementation, constraints, opportunities at the sub-national level; understand readiness of various sectors at the sub-national level to implement nutrition policies, and quantify achievements and inadequacies in nutrition service delivery













#### NUTRITION INNNOVATION LAB PUBLICATIONS

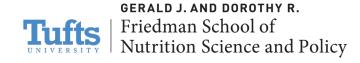
- Webb P, Ghosh S, Shrestha R, et al. Measuring nutrition governance: an analysis of commitment, capability, and collaboration in Nepal. *Food Nutr Bull*. 2016;37(4 Suppl):S170-S182. doi:10.1177/0379572116674856
- Namirembe Grace, Robin Shrestha, Patrick Webb, Robert Houser, Dale Davis, Kedar Baral, Julieta Mezzano, and Shibani Ghosh. "Measuring Governance: Developing a Novel Metric for Assessing Whether Policy Environments are Conducive for the Development and Implementation of Nutrition Interventions in Nepal." *International Journal of Health Policy and Management* (2020).
- Namirembe Grace, Robin Shrestha, Julieta Mezzano, Lynne Ausman, Dale Davis, Kedar Baral, Shibani Ghosh, Gerald Shively, Patrick Webb. "Effective Nutrition Governance is Correlated with Better Nutrition Outcomes in Nepal." Manuscript submitted for peer review to BMC Pediatrics (2021).













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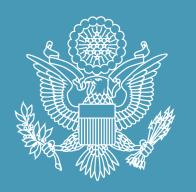


Q&A



#### **THANK YOU**

- To register for upcoming webinars, you can visit **NutritionInnovationLab.org** or **AdvancingNutrition.org**. More details coming soon!
- Recordings and slides for each webinar will also be posted on our websites.



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