

IMPROVING NUTRITION THROUGH ACCOUNTABILITY & DATA SYSTEMS

SMART Nutrition for Growth (N4G) Data Commitments

TOKYO
**NUTRITION
FOR GROWTH**
SUMMIT 2021
Food, Health, & Prosperity for All

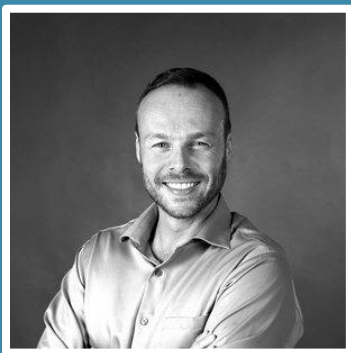
17 November 2021

8:00-9:30 AM EST | 2:00-3:30 PM WAT | 6:30-8:00 PM IST



Moderator Introduction

Today's Moderator



Sérgio Cooper Teixeira
Strategic Advisor

Nutrition International

- Today's event was organized by the Nutrition Data Partners Group

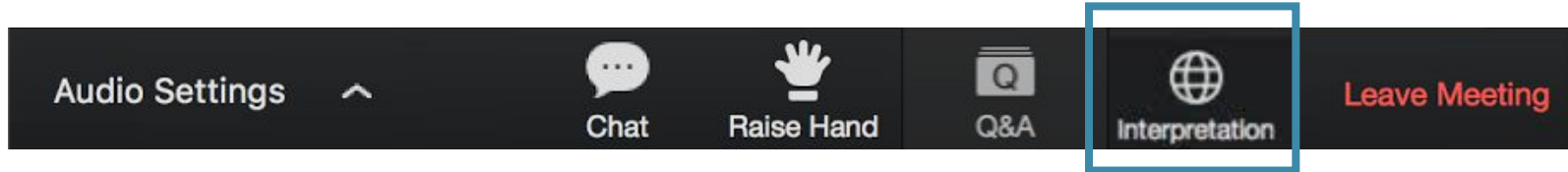


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Translation is available in English, French, and Spanish.

To enable translation:

1. Select the **interpretation** button
2. Choose your preferred language



You may want to also select “mute original audio”

Before we start

- All audience video & microphones are disabled
- Use the **Q&A button to submit your questions for the speakers & panelists**



- Use the chat to “all panelists” if you have any technical issues
- A recording will be available on the **Data for Nutrition YouTube channel** immediately after the webinar
- Presentations & discussion recap will be available in the weeks following

Speaker Introduction



Kellie Stewart

*Chief, Nutrition and Environmental Health Division,
Bureau of Global Health, USAID*

IMPROVING NUTRITION THROUGH ACCOUNTABILITY & DATA SYSTEMS

SMART Nutrition for Growth (N4G)
Data Commitments

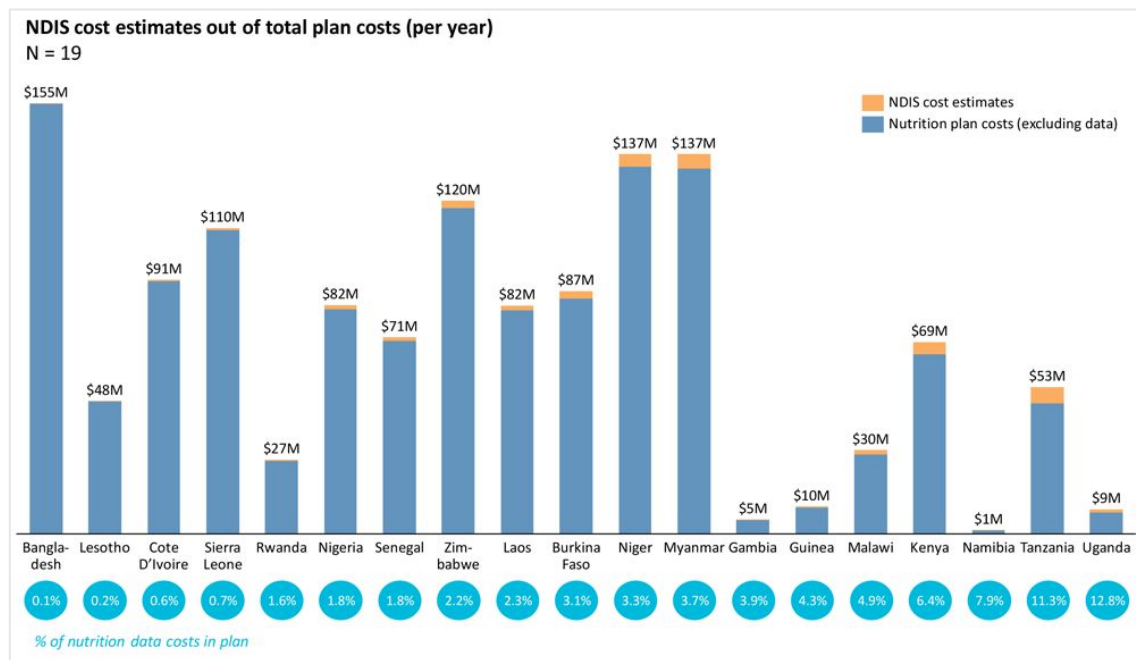
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Welcome on behalf of the Nutrition Data Partners Group



Few countries have made strategic investments in nutrition data and M&E activities

DataDENT conducted a 2019 review of Scaling Up Nutrition (SUN) national nutrition plans

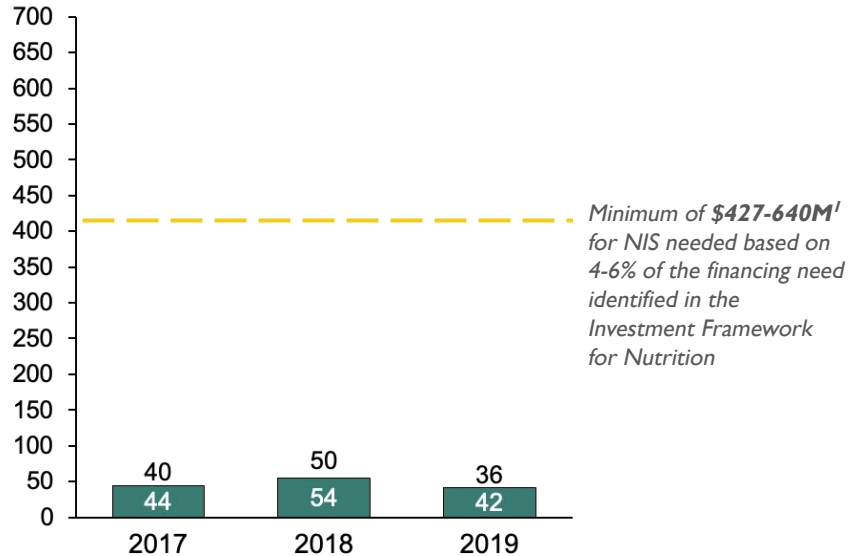


The review found:

- Only **33 of 58** countries had costed plans with sections on data, and monitoring and evaluation (M&E)
- Of these, only **0.1% to 12.8%** of the total budget was allocated for data and M&E activities

Minimal funding is allocated to nutrition data

Total spending towards nutrition information systems (NIS) in 2017-2019, millions USD

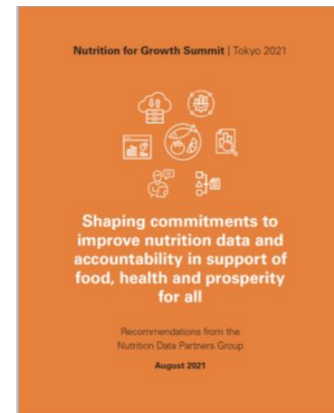


- A very small amount of funding is budgeted for nutrition data-related activities, including nutrition information systems
- Funding appears to be plateauing despite growing need
- Donor disbursements between 2017-2019 fell short of a 5% benchmark for total funding for nutrition data

1. The Global Investment Framework for Nutrition estimates that \$70b is needed from all sources over the next 10 years to reach the WHA targets for nutrition. Therefore, for one year, we assumed there is a need of \$10.4b in financing for nutrition. We then took 98% of this number to account only for direct program costs. Next, we applied the 4-6% benchmark determined by the N4G financing working group to this estimate i.e., 98% of \$10.4b which gave us the estimate of \$427m to \$640m per year needed for nutrition data related activities.

Call to action – increase investment in nutrition data and information systems

- Allocate at least 5% of total nutrition funding to strengthening data and information systems
- Attend to all elements of the nutrition data value chain, ranging from prioritizing what data to collect to fostering a culture of data use
- Facilitate linkages between and access to nutrition and food systems data by all actors across sectors
- Ensure a robust internal system to track N4G commitments



Commitments to strengthen nutrition data value chains

Nutrition for Growth Summit | Tokyo 2021



Shaping commitments to improve nutrition data and accountability in support of food, health and prosperity for all

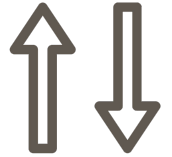
Recommendations from the Nutrition Data Partners Group

August 2021

TOKYO
**NUTRITION
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COMMITMENT TO STRENGTHENING NUTRITION DATA VALUE CHAINS

Data Prioritization & Planning

Speaker Introduction



Purnima Menon

Senior Research Fellow

International Food Policy Research Institute



Divya Nair

Director-II

ID Insight - New Delhi

Prioritizing data to track progress on nutrition and improve nutrition actions in India

Purnima Menon, IFPRI South Asia
Divya Nair, IDinsight, India

November 17, 2021



India is well-positioned to be a leading example of nutrition data use across the data value chain given the strong data focus of the National Nutrition Mission. Several uses of data were anticipated and are in place.

Tracking progress, reporting & assessing impact

- Interventions
- Immediate determinants
- Underlying determinants
- Outcomes

Using data for strategy refinement at different levels

- Intervention reach, convergence, continuity
- Immediate determinants
- Underlying determinants
- Outcomes

Using data for program refinements

- Intervention inputs (HR, supplies, etc.)
- Intervention reach, quality, continuity, uptake
- Convergence of different interventions

Review mechanisms for the National Nutrition Mission (POSHAN Abhiyaan) exist at different levels, but guidance for effective data use was limited at the time the mission launch

Outlining a nutrition indicator framework was an important early step. This was done jointly by NITI Aayog, IFPRI & IDinsight

- **Organized framework** around interventions, determinants and impacts and by intervention theory of change
- Put together a **framework of potential indicators**, based on the POSHAN Abhiyaan theory of change and existing interventions in the core national programs (ICDS and NHM)
- **Assessed data availability** across different data sources through survey and administrative data review
- **Summarized insights** into an **approach paper** on issues to consider in developing a nutrition monitoring strategy and framework for India



INTRODUCTION

India has a robust policy framework for nutrition that covers most evidence-based interventions (Vir et al. 2013), and it has in place large-scale national program platforms – the Integrated Child Development Services and the National Rural Health Mission – with the mandate to deliver diverse nutrition interventions (Avula et al. 2013). The National Nutrition Strategy (NITI Aayog 2017) and POSHAN Abhiyaan¹, India's national nutrition mission launched in early 2018, provide an updated strategic framework for action to improve nutritional outcomes for children, pregnant women, and lactating mothers. The mission-mode approach provides an impetus to strengthen not only the implementation but also the monitoring and measurement of progress. The mission explicitly notes that NITI Aayog has a mandate to lead on the monitoring and evaluation of POSHAN Abhiyaan.

This Policy Note, developed jointly with NITI Aayog and IDinsight, aims to provide guidance to national, state, and district level government officials/stakeholders on issues to consider on the use of data to track progress on nutrition interventions, immediate and underlying determinants, and outcomes. It proposes an indicator framework for POSHAN Abhiyaan and examines availability of data on these indicators across both population-based surveys and administrative data systems. Finally, it lays out issues to be considered in strengthening efforts to improve the use of data in the context of POSHAN Abhiyaan and makes key

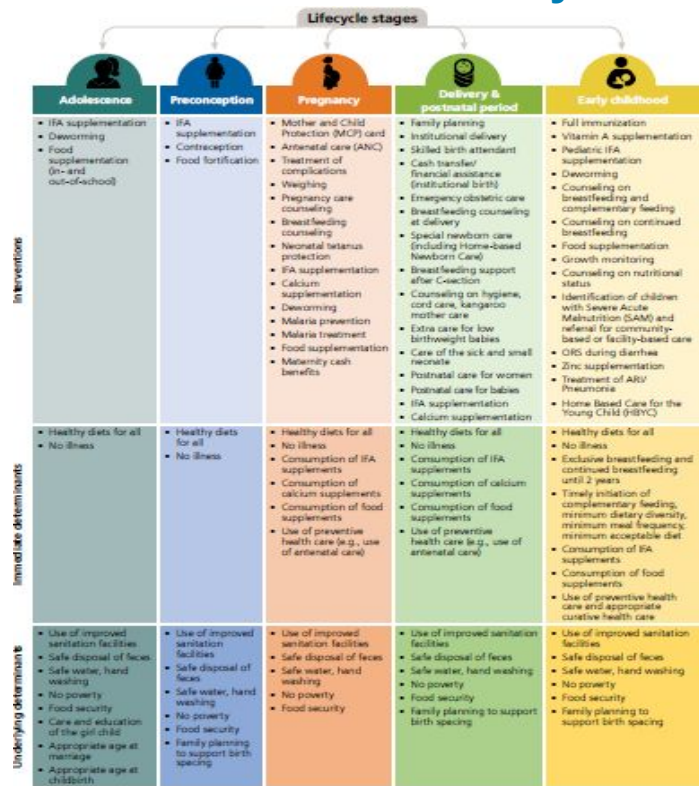
recommendations on improving data availability and improving the use of currently available data.

WHAT DID WE DO?

We first generated a comprehensive list of evidence-based interventions, determinants, and outcomes that align with POSHAN Abhiyaan's framework. We then identified potential indicators for each of these. POSHAN Abhiyaan's interventions cut across the lifecycle from adolescence, preconception, pregnancy, delivery, postnatal, newborn care, all the way through early childhood (Figure 1). For determinants, we focused both on immediate determinants, such as maternal nutrition, infant and young child feeding (IYCF) and child health, and underlying determinants, such as sanitation, early marriage and others. Finally, for outcomes, we focused on the stated target goals of POSHAN Abhiyaan as well as the nutrition-related Sustainable Development Goals (SDGs) to which India has committed.

Using a list of indicators for the interventions, determinants and outcomes articulated in the POSHAN Abhiyaan framework, we examined the availability of data on these across multiple data sources, including population-based household surveys and administrative data. We reviewed the questionnaires used in the National Family Health Survey (NFHS-4 2015-16), the Comprehensive National Nutrition Survey (CNNS 2016-18), the Aspirational Districts Programme (ADP) Survey (first and second rounds 2018-19) by IDinsight

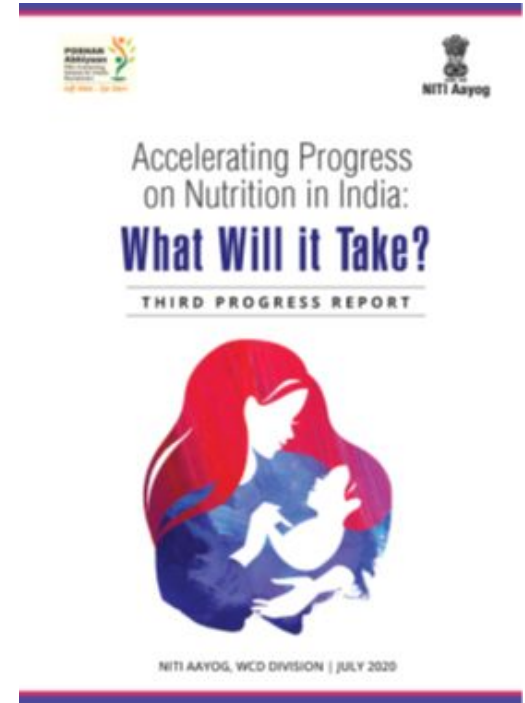
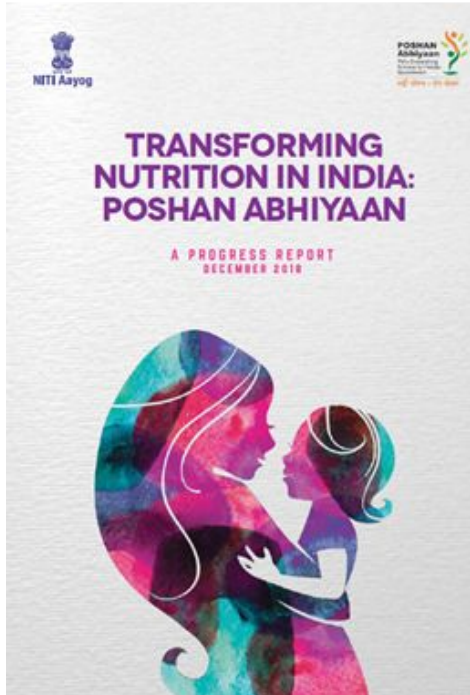
Development of the framework identified several data gaps but also provided the nutrition community an organizing rubric to work with data



- Of the **55** interventions across the first 1000 days, **six interventions** had data across all data sources.
- For **nine interventions**, no data was available from any source.
- Surveys provided data on **36** interventions and administrative systems had data on **42** interventions.
- **Data definitions and denominators vary** by source, making comparisons challenging.
- **Data frequency** also varies tremendously

Figure: Interventions, immediate and underlying determinants targeted by POSHAN Abhiyaan

POSHAN Abhiyaan Progress Reports: *Led by NITI Aayog as a monitoring entity for the National Nutrition Mission*



Some uses of data for nutrition in India since the National Nutrition Mission began in 2018



Primary surveys

- Surveys of the national behavior change campaigns, shared with national alliance of partners routinely
- Quarterly surveys and rapid feedback from poorest geographies



Administrative data

- Investments in improving administrative data quality via third party checks
- Use of administrative data to analyze impacts of COVID-19 on services



Capacity building

- Trained district administrators on nutrition, and on use of data for nutrition actions



Data use

- Analyses of existing and new survey data using the framework of indicators
- NITI Aayog POSHAN Abhiyaan monitoring reports

Reflections on improving data use

- **Ownership across levels is key:**
Data interlocutors and data engagement around prioritized indicators is essential; implementation entities have limited bandwidth
- **Flexibility helps:**
Being able to work with flawed and incomplete data is often important
- **Value of evidence/data needs to be clear:**
Continuing to work on filling data gaps is important at many levels (global, national, local).
 - Still too many interventions, actions, determinants without any data to assess progress



Nutrition for Growth Summit | Side Event on Data for Nutrition

Thank you

Phase	Indicator	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030						
Pregnancy	Any ANC visits	84.4	88.1	83.0	78.0	86.1	83.3	87.2	86.1	89.8	83.4	86.9	85.7	84.7	82.5	86.7	85.1	87.3	88.2	86.2	85.2	82.7		
	SMMC	61.3	65.0	70.0	27.2	46.6	14.4	64.7	59.1	73.5	62.8	66.0	59.0	70.5	45.4	69.3	61.1	30.2	70.3	80.1	62.1	35.9	72.1	
	Received MCP card	70.1	68.0	66.0	58.1	66.0	52.3	65.5	66.0	76.8	68.4	70.0	76.8	68.4	70.0	71.2	61.4	75.7	84.2	75.0	84.7	85.2	84.7	
	Received IFA tabloids	69.1	69.0	69.0	66.2	66.1	56.1	68.8	61.4	74.8	69.5	64.7	66.7	69.5	64.7	66.7	69.5	64.7	66.7	69.5	64.7	66.7	69.5	
	Consumed IFA 100+ days	40.2	58.8	57.6	14.0	32.7	9.9	44.7	30.1	51.3	41.3	41.3	41.3	41.3	15.4	46.5	74.8	66.4	63.9	40.8	40.8	40.8	40.8	
	Deworming	17.5	18.2	20.2	12.3	14.6	9.1	14.6	14.6	14.6	14.6	14.6	14.6	14.6	14.6	14.6	14.6	14.6	14.6	14.6	14.6	14.6	14.6	14.6
	Weighting	69.4	69.4	69.4	56.5	69.4	43.2	69.4	69.4	69.4	69.4	69.4	69.4	69.4	69.4	69.4	69.4	69.4	69.4	69.4	69.4	69.4	69.4	69.4
	Breastfeeding counselling	40.6	66.1	67.6	1.4	45.8	21.7	48.2	48.2	48.2	48.2	48.2	48.2	48.2	48.2	48.2	48.2	48.2	48.2	48.2	48.2	48.2	48.2	48.2
	Food supplementation	50.9	47.5	45.8	1.7	57.9	34.0	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1
	Health & nutrition education	35.5	36.3	36.3	3.3	34.9	18.4	33.5	33.5	33.5	33.5	33.5	33.5	33.5	33.5	33.5	33.5	33.5	33.5	33.5	33.5	33.5	33.5	33.5
	Tetanus injection	66.1	66.1	66.1	62.4	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1
	Delivery & postnatal	Institutional birth	69.1	69.1	69.1	56.5	73.2	66.5	73.2	73.2	73.2	73.2	73.2	73.2	73.2	73.2	73.2	73.2	73.2	73.2	73.2	73.2	73.2	73.2
Skilled birth attendant		66.1	66.1	66.1	57.0	66.1	72.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	
Postnatal care for mothers		66.2	66.2	66.2	29.0	53.9	42.4	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	
Postnatal care for babies		34.8	33.8	28.4	1.2	32.9	10.6	30.6	34.2	34.2	34.2	34.2	34.2	34.2	34.2	34.2	34.2	34.2	34.2	34.2	34.2	34.2	34.2	
Food supplementation		45.8	37.6	35.7	1.7	50.7	33.2	38.5	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	45.1	
Health & nutrition education		32.8	31.1	36.9	3.1	30.5	18.0	31.9	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	
Early childhood	Full immunization	66.2	73.8	65.6	39.3	47.7	62.0	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	66.2	
	Vitamin A	60.3	61.4	72.9	42.0	50.9	59.2	48.0	68.9	62.1	65.8	57.1	65.8	65.8	65.8	65.8	65.8	65.8	65.8	65.8	65.8	65.8	65.8	
	Paediatric IFA	26.4	34.8	28.3	33.9	31.0	31.7	33.9	35.5	18.8	26.6	27.9	36.4	33.3	42.6	30.4	18.8	30.6	18.8	18.8	18.8	18.8	18.8	
	Deworming	34.8	44.3	31.7	11.2	31.0	34.9	31.2	39.9	16.8	34.8	40.6	66.5	29.8	36.5	41.2	37.7	37.7	37.7	37.7	37.7	37.7	37.7	
	Care seeking for ARI	72.9	69.0	76.5	58.2	47.4	60.1	67.4	71.4	67.7	66.3	69.4	61.6	70.3	69.3	71.1	70.1	67.9	76.8	91.4	66.2	72.2	69.3	
	ORS during diarrhea	60.0	69.0	47.3	66.7	53.2	45.1	66.0	66.2	49.1	74.6	60.8	57.3	45.6	61.3	66.1	66.1	66.1	66.1	66.1	66.1	66.1	66.1	
Zinc during diarrhea	25.9	14.6	31.9	57.4	64.6	23.8	26.7	29.5	7.2	41.2	23.7	50.1	18.2	23.5	18.5	18.5	18.5	18.5	18.5	18.5	18.5	18.5		
Food supplementation	57.4	56.9	46.9	30.4	60.0	40.1	56.3	66.1	49.7	27.2	14.0	71.8	59.9	42.4	43.6	43.6	43.6	43.6	43.6	43.6	43.6	43.6		
Weighting	43.0	49.9	65.4	10.8	38.7	24.0	37.6	63.1	41.0	44.1	12.3	55.2	56.8	41.0	49.5	49.5	49.5	49.5	49.5	49.5	49.5	49.5		
Counselling on child growth	27.3	38.9	47.4	4.6	63.7	12.1	28.4	57.7	32.8	14.1	6.5	43.6	40.6	28.3	27.3	27.3	27.3	27.3	27.3	27.3	27.3	27.3		



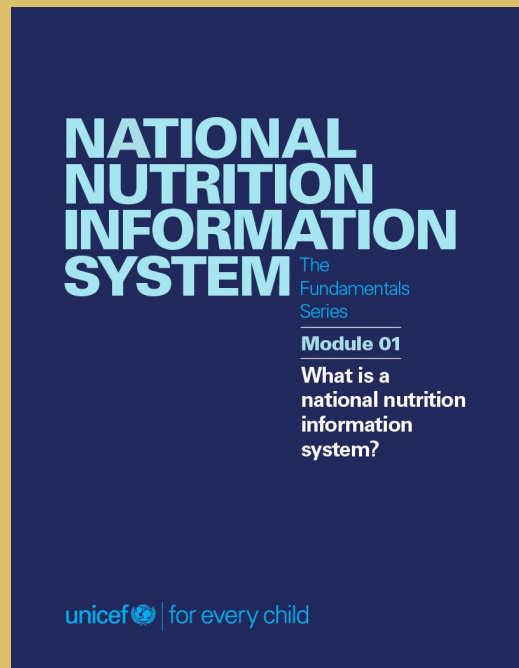
Global guidance on national nutrition information systems

UNICEF-WHO TEAM just launched:

- The Fundamental Series with 5 modules
- An e-course

to support countries in the design and implementation of **National Nutrition Information Systems**.

Learn more: <https://uni.cf/nnis-guidance>

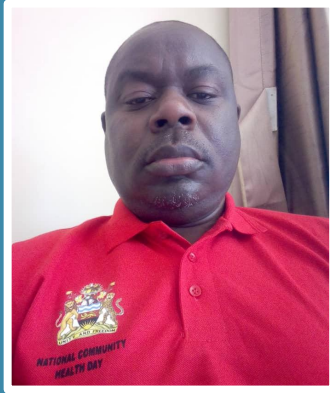




COMMITMENT TO STRENGTHENING NUTRITION DATA VALUE CHAINS

Data Creation & Collection, Curation, & Analysis

Speaker Introduction



Isaac Dambula

*Deputy Director of Planning
Ministry of Health, Malawi*



Dr. SM Mustafizur Rahman

*Director of the National Nutrition Service,
Institute of Public Health & Nutrition,
Ministry of Health & Family Welfare, Bangladesh*



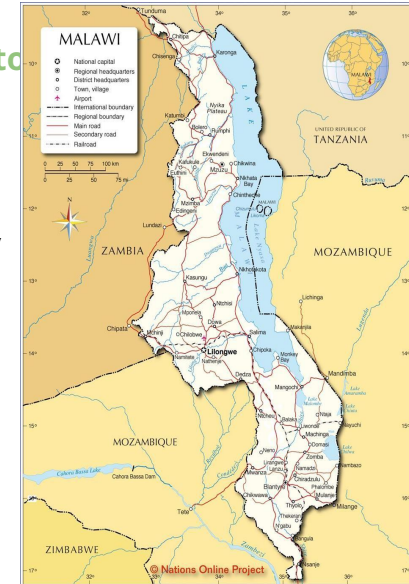
Introducing and Integrating Nutrition Data in DHIS2 for both development and emergency contexts: Malawi

Presented by
Mr. Isaac Dambula
MoH Deputy Director - DPPD

Background - Nutrition Context in Malawi



- Malawi has made progress in its efforts to reduce malnutrition:
 - Wasting has reduced: Malawi is on-track to reach the WHA goal for wasting
 - Vitamin A deficiency reduced among pre-schoolers (6–59 months) from **59.2% in 2003 to 3.6% in 2016**
 - While stunting has been reducing, still 4 in every 10 children (**37%**) are stunted: increased efforts for further reduction underway
 - At least 1 in every 10 children aged 6–23 months meet the minimum acceptable dietary standards
 - Overweight is gradually increasing, and anemia rates among children and adolescents remain high
- Malawi migrated from multiple nutrition reporting databases within health to DHIS2
- Requires technical & human capacity building for sustainability
- Nutrition program data reporting coverage in HMIS/DHIS2 is across all 29 districts
- Partners supporting nutrition program include UNICEF, WFP, USAID, GIZ, DFID, WVI and Irish Aid



Data Collection Processes and Integration



Programmes reporting include:

- CMAM Stock Sheet
- NCST
- NRU
- OTP
- SFP

Guiding policies and documents:

- National Multi-Sector Nutrition Policy & Strategy
- Nutrition Indicator Handbook
- HIS Policy
- M & E HIS Strategy
- Health Sector Strategic Plan II
- SoP on Data Collection, reporting and storage
- SoP on data quality

National Level

- Data set customization in DHIS2
- Reporting rates analysis 25th of every month

District Level

- Perform data set assignment to reporting organization units
- Create users with data entry roles
- Perform data validation for facility reports
- Data entered in DHIS2 by 15th of every month

Facility Level

- Reporting forms filled and sent to DHO 5th of every month
- Data entered in DHIS2 by 15th of every month (DHIS2 mobile sites implemented in 13 districts)

Data Flow



Data Use and Lessons Learnt



Data Use

- Data analysis through visualization tools in HMIS
- HMIS Bulletin produced by CMED covering National level program indicators
- Customization of nutrition indicators and dashboards
- Promoting use of dashboards

Lessons Learnt

- Clarity on roles and responsibilities is important
- Integrating program reporting in DHIS2 improves collaboration across all levels of the healthcare system
- Configuration of validation rules is important to limit data entry error
- Creating data demand is important – data quality improves as data is used
- Infrastructure investment is required for robust HMIS



THANK YOU!



Introducing and Integrating Nutrition in DHIS2 for Both Developmental and Emergencies Context in Bangladesh

S M Mustafizur Rahman

Line Director, National Nutrition Services
Ministry of Health and Family Welfare, Bangladesh

POPULATION



Provided support through
District Nutrition Support Officer (DNSO) in
43 districts

Mainstreaming of National Nutrition Services(NNS)

- The Government of Bangladesh introduced National Nutrition Service (NNS) in 2011, to mainstream nutrition service delivery through the health sector.
- But, two bottlenecks identified:
 1. Inadequate management and tracking of nutrition plans at districts and sub-district levels.
 2. Limited health worker skills to deliver quality nutrition services
- No mechanism to strengthen accountability and improve quality and coverage of nutrition services

Core Nutrition Indicators

Goal: To reduce malnutrition and improve nutritional status of the peoples of Bangladesh with special emphasis to the children, adolescents, pregnant & lactating women, elderly, poor, underserved population of both rural and urban area and in emergency context

Impact

Reduction of anemia in WRAs and adolescents

Reduction in stunting

Reduction in wasting

Outcome

Increased prevalence of Exc breastfeeding

Increased minimum acceptable diet

Output

Maternal counselling

PLWs who receive IFAs

Pregnant women weighed

Child weight monitoring

IYCF counselling

SAM Management

vitamin A supplementation

Inputs

Effective nutrition Information system

CC reporting

FWC reporting

IMCI-N reporting

SAM corners reporting

Enhanced capacity of planners and service provider

% of Health workers trained on CCTN with P4P

% of workers passing the training uptake assessments

% of DNOs trained in nutrition planning and supportive supervision

Ensure responsive quality services- Quality Control & Supportive Supervision

% of facilities receiving SS&M

% of facilities providing quality IYCF/Maternal counselling

% of facilities providing quality Nut reporting

Ensure adequate nutrition supplies

IFA tablets

Counselling materials

Vitamin A Capsules

Anthropometry tools

F-75 and F-100 therapeutic feeding

Effort to Implement

1. Child Health Register-9 nutrition information

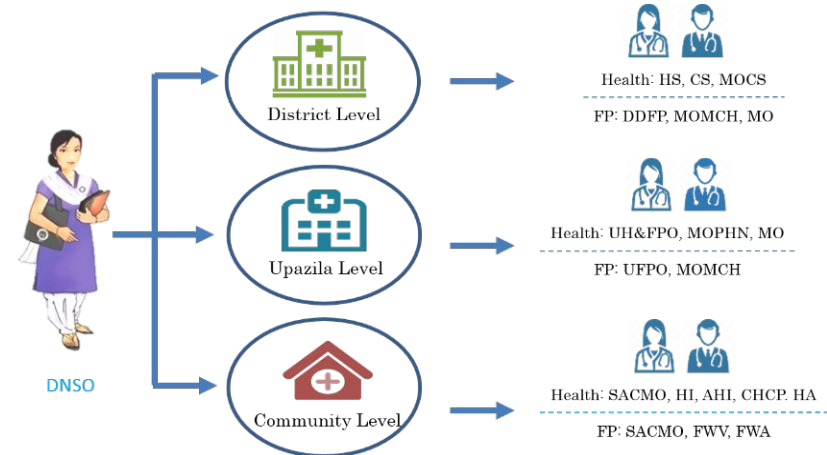


From community clinics

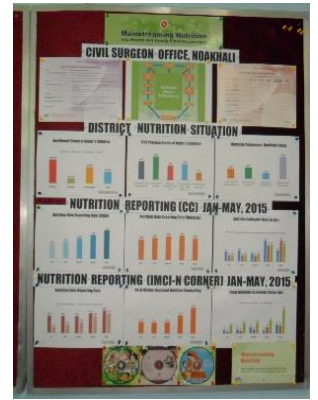
DHIS-2 monthly reporting form 7 indicators

কমিউনিটি ক্লিনিক থেকে ডিএইচইসি-২ মাসিক রিপোর্টিং ফর্ম									
ক্রমিক নং	নাম	১	২	৩	৪	৫	৬	৭	৮
১	০-৬ মাসের শিশুর সংখ্যা								
২	০-৬ মাসের শিশুর ওজন								
৩	০-৬ মাসের শিশুর উচ্চতা								
৪	০-৬ মাসের শিশুর মৃত্যু								
৫	০-৬ মাসের শিশুর মৃত্যুর কারণ								
৬	০-৬ মাসের শিশুর মৃত্যুর স্থান								
৭	০-৬ মাসের শিশুর মৃত্যুর সময়								
৮	০-৬ মাসের শিশুর মৃত্যুর কারণ								
৯	০-৬ মাসের শিশুর মৃত্যুর স্থান								
১০	০-৬ মাসের শিশুর মৃত্যুর সময়								

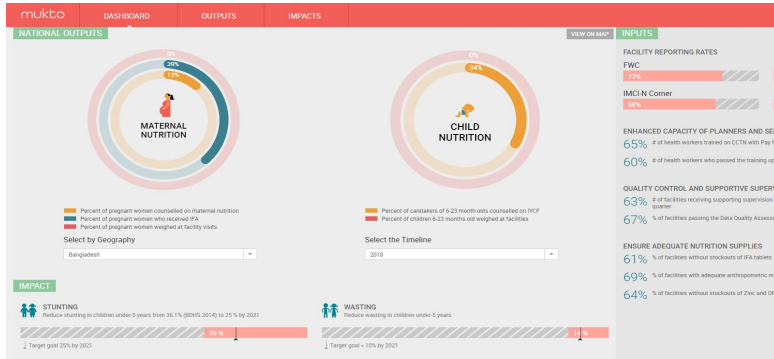
- DHIS-2 monthly reporting form
1. IFA distribution
 2. Counselling
 3. Weighing



Source: DNSO, Satkhira

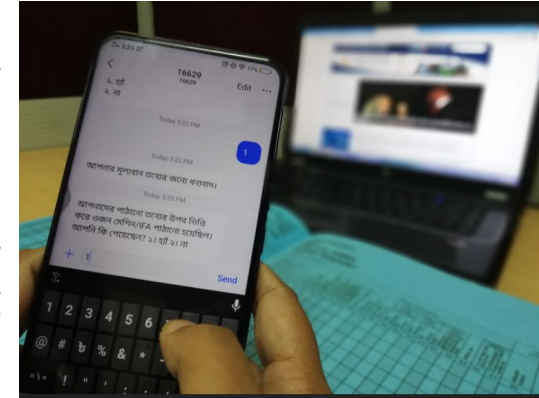


Multi Function Data Visualization Platform MUKTO pull data from DHIS2

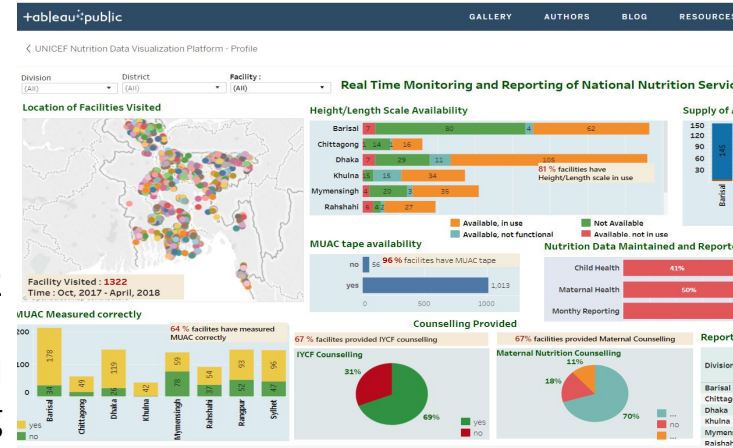
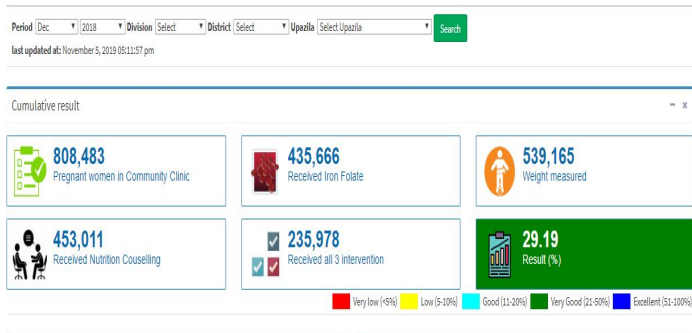


Innovations

Linking of DHIS-2 individual tracker system with SMS technology (Rapid Pro) and connecting with health workers for problem solving



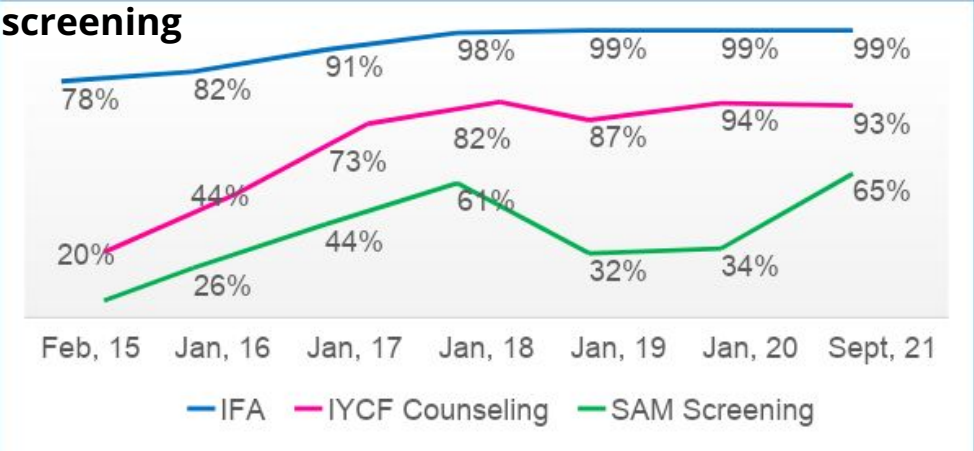
Use of DHIS2 individual tracker for nutrition results in Sector's Pay for Performance initiative



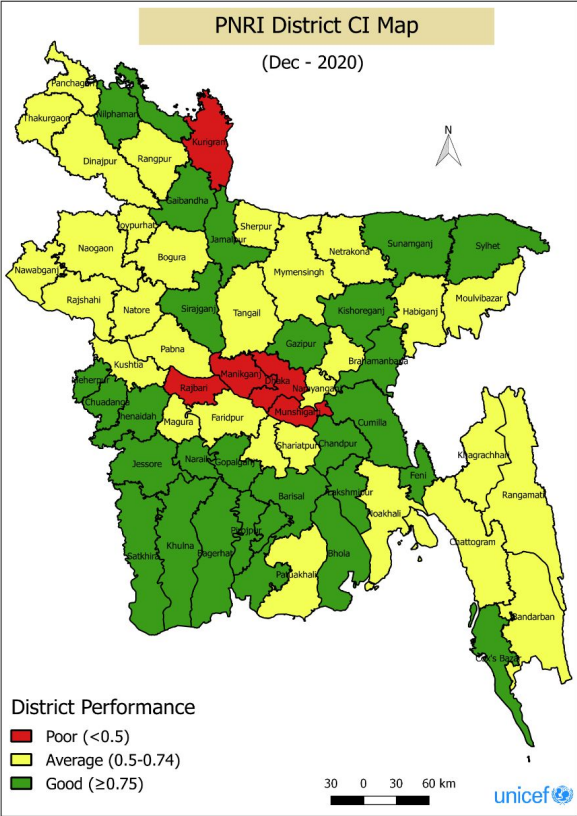
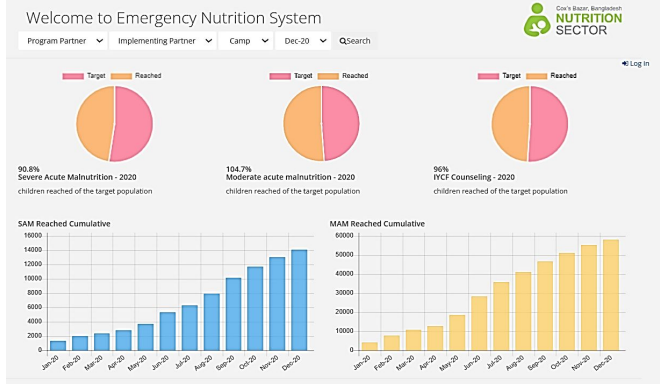
DHIS2 Guided External Monitoring And Mentoring

Transformation

Facilities providing IFA, IYCF and SAM screening



Sector partners report and track minimum emergency nutrition interventions in CXB by using Realtime data entry system in 27 camps



Important Links:

<https://nnsop.org/>

www.dghs.gov.bd

<https://mukto.nnsop.org/dashboard>

<https://emergencynutrition.org/>

Innovation in data collection

In Peru local youth were engaged to monitor budget allocation and public investment for nutrition using simple open-access tools

Learn more: https://bit.ly/N4G_data_Peru



ADN Juvenil Madre de Dios
 4 d · 🌐

@ADN Juvenil Madre de Dios comunica a la región la ejecución presupuestal al I Trimestre 2021, somos sociedad civil organizada d... Ver más

CONSULTA DE EJECUCIÓN DE GASTO

Gobierno Regional de *Madre de Dios*

CATEGORÍA PRESUPUESTAL	AVANCE %
0001: PROGRAMA ARTICULADO NUTRICIONAL	23.8

UNIDAD EJECUTORA	AVANCE %
402-1708: COMPLEJO OPTO. MADRE DE DIOS-FICHA SALUD PERSONAL	99.9
400-0705: REGION MADRE DE DIOS-SALUD	11.0
401-1003: REG. MADRE DE DIOS-HOSP. STA. ROSA DE PTO. MALDONADO	12.9
001-0175: TRICEN. MADRE DE DIOS-MER. CONTAN.	10.6

PROYECTOS	AVANCE %
MANEJO PUBLICO DE INFORMACIÓN DE LA SALUD INFANTIL Y PÁR. SUAS MUJERES PARA LA PREVENCIÓN DE RIESGO Y DESNUTRICIÓN OCASIA INFANTIL	25.1
ADOPCIÓN, NÚCLEO Y NIVEL DE ASESORÍA DE LA ALIENIA POR DEFICIENCIA DE HIERRO	0.0

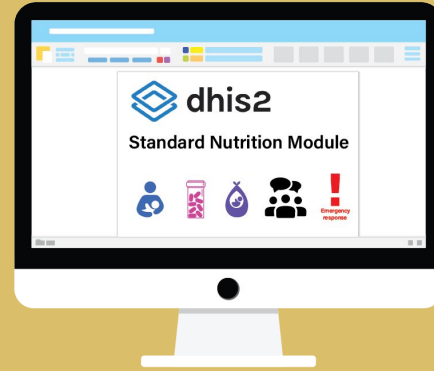
Fuente: MEF - CONSULTA PRESUPUESTAL I Trim 2021

First Global DHIS-2 Nutrition Module

UNICEF and partners will soon launch the **DHIS2 Standard Nutrition Module** and an **Administrative Data Guide** with **recommended indicators** in key nutrition areas to support countries in the design and implementation of routine administrative reporting systems for nutrition.

Learn more: <https://uni.cf/nnis>

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COMMITMENT TO STRENGTHENING NUTRITION DATA VALUE CHAINS

Data Translation & Dissemination for use in Decision Making

Speaker Introduction



Dr. Denisa-Elena Ionete
*Ambassador of the European Union,
Niger*



Mr. Saâdou Bakoye
*Secretary General,
Ministry of Planning, Niger*



Denisa-Elena Ionete, MD, PhD
*Ambassador of the European Union,
Niger*



NiPN

National Information
Platforms for Nutrition

Plateforme Nationale
d'Information sur la Nutrition :
*un outil d'aide à la décision au
Niger*

SAADOU BAKOYE
Secrétaire Général - Ministère du Plan
Président du Comité de Pilotage NIPN Niger



Depuis une dizaine d'année, forte volonté politique et engagement dans la lutte contre la malnutrition au Niger

- Un droit dans la Constitution (article 12),
- Engagement sur le plan international : adhésion SUN/REACH
- 1^{er} cadres politiques : Politique Nationale de Sécurité Nutritionnelle (PNSN) et Plan d'Action

MAIS

Manque d'informations importants en information multisectorielle

Des enquêtes nationales sont régulièrement menées (nutrition, vulnérabilité, démographie, santé et récemment consommation alimentaire : **elles restent insuffisantes pour orienter & prioriser les actions et décisions**)



En 2018: Plateforme Nationale d'Information pour la Nutrition (PNIN)



Mise en place un système d'information centralisé et d'analyse multisectorielle (PNIN) (1^{er} Prérequis)

- Outil de stockage et de diffusion des micro données
- Outil de suivi des indicateurs multisectoriels sur la nutrition
→ 340 indicateurs provenant des Ministères contributifs
- Développement de méthodologies adaptées au contexte national
- Mise en place d'un système centralisé en lien avec le Plan d'Action Multisectoriel



1^{er} résultat : Mise à disposition de l'information

- Assurant les critères de qualité
- Et aligné avec les politiques publiques

Répondre à la demande : identifier les besoins en information stratégique et leurs objectifs

- **Élaboration de Plans Cadre d'Analyses biannuels avec les décideurs**
- **Renforcement des capacités:**
 - Incluant les utilisateurs et décideurs
 - La nutrition dans la « Stratégie Nationale de Développement de la Statistique »
- **Appuie aux instances de coordination des interventions nutrition**
- **Validation des analyses par le Comité Technique en charge du Plan d'Action**
Ex: ateliers d'interprétations avec les secteurs contributifs
- **Traduction des résultats** (policy briefs, synopsis, présentations)
- **Valorisation et dissémination auprès des décideurs:**
Ex: honorables de l'Assemblée Nationale du Réseau Nutrition;
Ex: journées de plaidoyer « nutrition » auprès des médias, universitaires, acteurs nutrition



2^{ème} résultat : les décideurs sont impliqués dans le long de la chaîne de valeur des données

Traduire et utiliser les résultats: Appui aux processus de planification stratégique et décisions

28 Second séminaire parlementaire sur le plaidoyer pour plus d'action et d'investissements publics pour renverser les tendances alarmantes de la malnutrition au Niger (28 septembre 2021)

Deux ans après le premier séminaire parlementaire organisé en 2019, le second séminaire parlementaire porte sur l'importance des investissements publics pour renverser les tendances alarmantes de la malnutrition au Niger. Ce séminaire a été organisé par le Réseau Nutrition et Sécurité Alimentaire (RNSA) de l'Assemblée Nationale, le Fleuc/Commissariat à l'Initiative 3H4 et les Nigériens Nourissant les...



Live la suite



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Processus d'élaboration des engagements Nutrition du Niger pour le sommet sur la Nutrition pour la croissance / Tokyo 2021 (Niamey, Octobre 2021)
Les acteurs de la nutrition au Niger, sous le leadership du Ministère de la Santé, de la Population et des Affaires Sociales, à travers sa Direction de la Nutrition et le Fleuc/Commissariat à l'Initiative 3H4...

- Organisation de sessions parlementaires (x2)
- Présentation des résultats sur les investissements lors d'une session budgétaire au Parlement
- Élaboration d'une feuille de route du Ministère de la Santé Publique:
 - Création d'une ligne budgétaire pour la malnutrition aigüe
- Orientation du 2nd Plan Multisectoriel de Nutrition 2020-2022:
 - Rééquilibrage actions de prise en charge et de prévention
 - Renforcement des synergies entre actions spécifiques et sensibles
- Définition des engagements nationaux pour le Sommet sur les Systèmes Alimentaires



3ieme résultat: les espaces existants sont utilisés et les processus accompagnés dans un échange basé sur les données probantes



La PNIN a montré ses résultats en tant que « preuve de concept » au Niger et élément contribuant à un environnement favorable à la prise de décisions basés sur les données probantes

Il faut poursuivre les efforts pour continuer à renforcer les capacités le long de la chaîne des valeurs des données.

Des actions sont déjà en place mais doivent être soutenues et appuyées:

- Phase II du financement NIPN (EU/2022-24)
- Processus d'institutionnalisation
 - 1^{ère} étape: étude de pérennité
- Une décentralisation des processus
 - 1^{ère} étape: ateliers régionaux



Wa fonda goy aran kam ka ga aï hangane

Na gode da kou ka bani hankalin kou

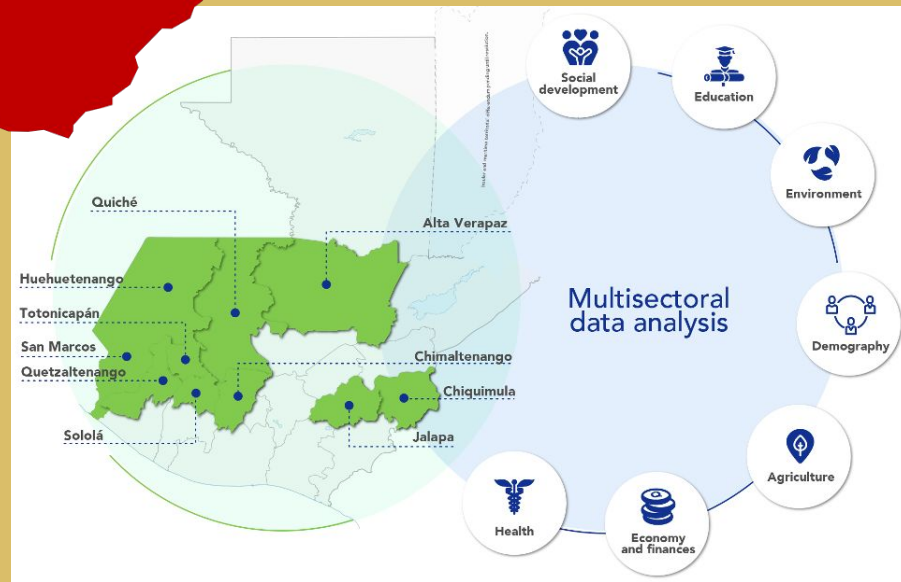
Merci de votre attention

Thank you for your attention

Developing subnational information systems



NIPN partners in **Guatemala** are replicating **multi-sector information platforms at territorial level** in order to support local decision makers



Learn more:

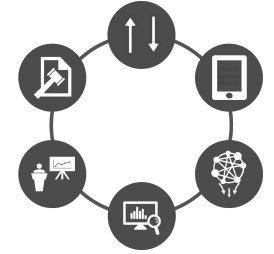
https://bit.ly/N4G_data_Guatemala

Ensuring data are publicly available

Indonesia has developed a **public open-access platform** for monitoring multi-sector actions and outcomes of the national Acceleration of Stunting Reduction programme



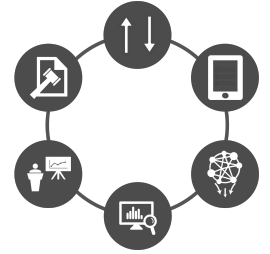
Learn more: https://bit.ly/N4G_data_Indonesia



Question & Answer

use the **Q&A** button to submit questions





PANEL

Making commitments to strengthen Nutrition Data Value Chains

Panelist Introduction



Samalie Namukose

*Assistant Commissioner - Head
of Nutrition Division*

Ministry of Health, Uganda



Paul Mbaka

*Assistant Commissioner - Head
of Health Information*

Ministry of Health, Uganda



Erin Milner

*Senior Nutrition Monitoring,
Evaluation, and Learning Advisor*

USAID, Washington DC

Karima Ahmed Al-Hada'a

*Ministry of Planning and International
Cooperation, Yemen*

*Planning and Liaison Specialist, SUN
Secretariat*

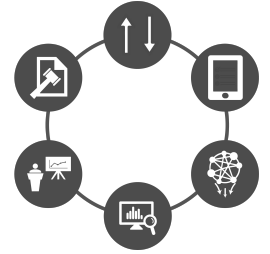
Improving data use for accountability

The **Nigeria Governors Forum Nutrition Scorecard**, launched in 2020, holds Nigeria's 36 Governors accountable to four commitments to improve the enabling environment for nutrition at state level.

Learn more: https://bit.ly/N4G_data_Nigeria



Data Source	Data Provided by State Committees on Food and Nutrition (SCFN)						Routine/Administrative Data
Indicator	SCFN quarterly meeting chaired by SCFN Chair (Apr-Jun 2021)	75% of quarterly funding for SCFN workplan released (Apr-Jun 2021)	MSPAN Approved	State list of prioritized programs shared	Six months maternity leave with full pay for civil servants	Functional government owned/run creche(s)	US SAM Coverage (DHIS-2 Apr-Jun 2021 Average) Target: 75%
Abia ²	● ↑	● ↓	● ↓	● ↓	● ↓	● ↓	0% ▲
Adamawa	● ↑	● ↓	● ↓	● ↓	● ↓	● ↓	5% ●
Akwa Ibom	● ↑	● ↓	● ↓	● ↓	● ↓	● ↑	0% ●



CLOSING

**Call to action: Commitments to
strengthen Nutrition Data Value
Chains**

Speaker Introduction



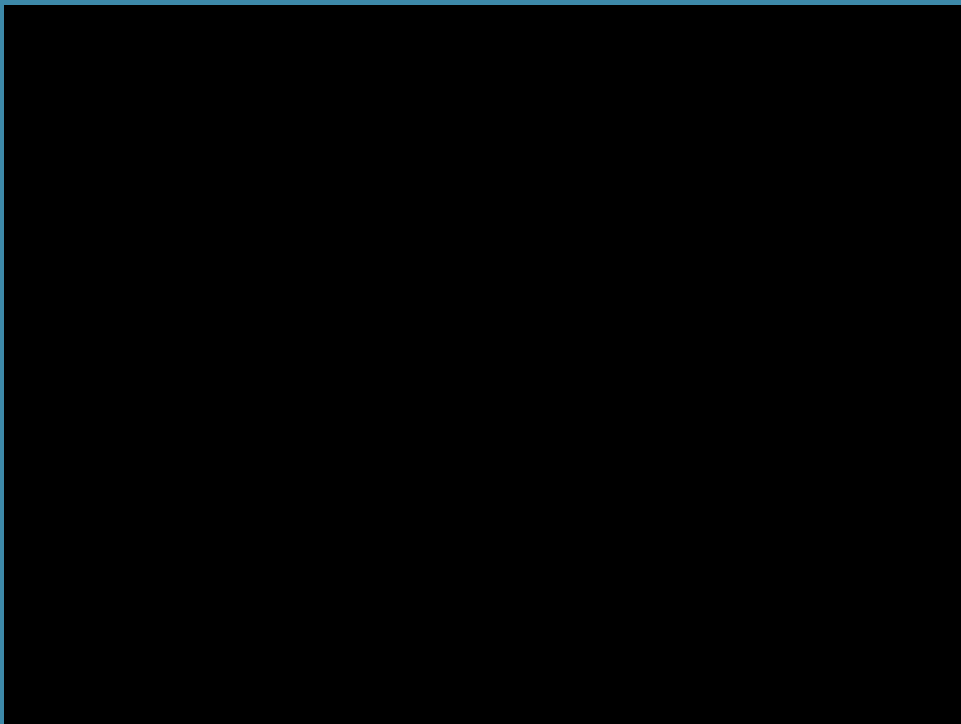
Patricia N'goran Theckly

Conseiller à la Présidence de la République de Côte d'Ivoire, Point Focal SUN, Conseiller du Gouvernement auprès du CERFAM



Satoshi Ezo

Director, Global Health Policy Division, International Cooperation Bureau, Ministry of Foreign Affairs of Japan



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Thank you for
participating

A special thank you to our speakers, panelists,
translators & the organizers from the NDPG



Co-funded by
the European Union



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**Thank you for
participating**



YouTube

A recording of the webinar is available now at the *Data for Nutrition YouTube Channel*.

Copies of language translations, presentations and summary of the Q&A will be shared via the CoP in the coming weeks. Visit www.datafornutrition.org for more information.