
Distribution: General

Date: 17 May 2017

Original: English

Agenda Item 5

WFP/EB.A/2017/5-C

Policy Issues

For consideration

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Implementation Plan of the Nutrition Policy

Draft decision*

The Board takes note of “Implementation Plan of the Nutrition Policy” (WFP/EB.A/2017/5-C).

Introduction

1. In February 2017, the Executive Board Approved the Nutrition Policy,¹ welcoming WFP's commitment to support governments' efforts to end malnutrition in all its forms, and to achieve the Sustainable Development Goals (SDGs), particularly target 2.2, by 2030.
2. The aim of the Nutrition Policy is to work with partners to ensure that healthy diets meeting nutrient needs are available, accessible and consumed. Capitalizing on WFP's deep field presence and ability to work with governments and other stakeholders, the Nutrition Policy prioritizes:
 - *Treatment of moderate acute malnutrition (MAM):* WFP will work in partnership to enhance the management of acute malnutrition.² This issue will be a major challenge in many countries during the policy timeframe, especially in the context of the “four famines” and in areas of crisis response.
 - *Stunting prevention:* WFP will work with governments and other partners to develop multi-sector approaches to tackle stunting, which continues to be prevalent in many countries.³
 - *Working with national governments:* While maintaining its expertise in emergency preparedness and response, WFP will translate its nutrition capabilities into support for national programmes and systems.

* This is a draft decision. For the final decision adopted by the Board, please refer to the Decisions and Recommendations document issued at the end of the session.

¹ WFP/EB.1/2017/4-C.

² Acute malnutrition, also known as wasting, develops as a result of rapid weight loss or a failure to gain weight. The degree of acute malnutrition in an individual is classified as either moderate or severe.

³ Stunting, also known as chronic malnutrition, develops over a long period as a result of inadequate nutrition, repeated infections or both. Unlike wasting, stunting results from a cumulative process and may not be evident for years. Chronic malnutrition usually cannot be treated, but it can be prevented.

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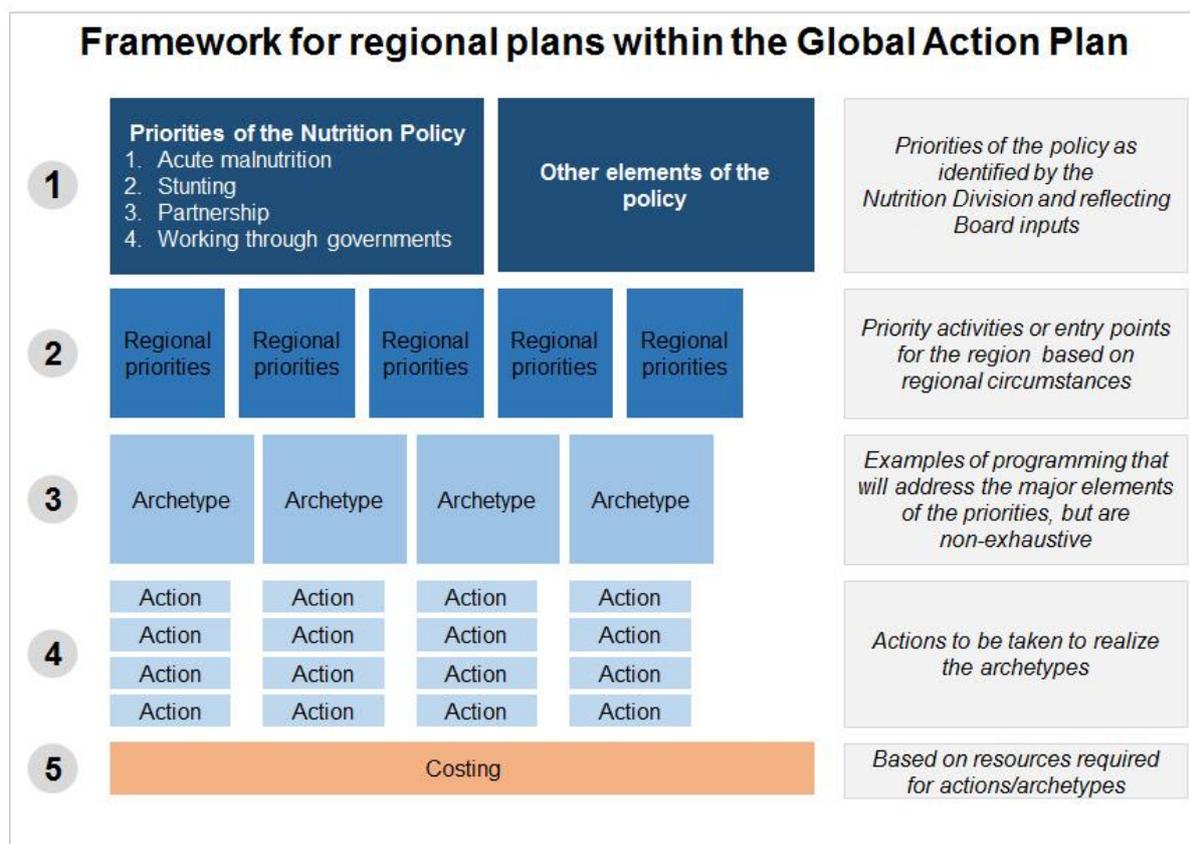
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- *Prioritize partnership:* WFP will enhance partnerships that are essential for achieving cross-sector synergies and for realizing the complex and interlinked goals related to ending all forms of malnutrition. It will especially focus on partnerships related to the management of acute malnutrition.
3. Other elements of the policy that will be emphasized in the action plan include the following:
- *Strengthen analysis:* Building on existing data, WFP will identify and fill gaps with improved data to support governments and other partners in undertaking holistic nutrition analyses.
 - *Reinforce monitoring and evaluation:* Enhancing organizational learning and accountability will inform programme refinements and enable WFP to deliver better nutrition assistance.
 - *Contribute to the evidence base:* WFP will implement an operational research strategy for nutrition grounded on its direct access to beneficiaries and including a wide range of programming modalities and technical expertise.
 - *Provide policy and programme support to national governments:* Enabling direct delivery of nutrition programmes as needed, WFP will provide technical assistance for the development of policies and programmes related to nutrition in collaboration with partners.
 - *Support national capacity development:* Building on its strengths, WFP will provide technical assistance and support South–South and triangular cooperation for the development and enhancement of national systems and capacity, linked to WFP’s comparative advantages.
 - *Advocacy:* WFP will advocate for greater international and national investments in nutrition using tools such as Cost of Hunger and the cost of malnutrition analyses.
 - *Preparing for diverse modalities and platforms:* Working with partners – especially academia – WFP will explore emerging evidence of the effectiveness of cash-based transfers and other innovative delivery modalities in nutrition programmes.
4. The Action Plan for Nutrition (APN) transforms the goals of the Nutrition Policy into concrete actions to be implemented between 2017 and 2021 in line with WFP’s Strategic Plan, which was approved by the Board in November 2016.⁴ The APN includes regional- and global-level actions to guide implementation of the Nutrition Policy. In order to ensure planning that is relevant to the various contexts in which WFP works, the APN will be operationalized at the regional level and activities will be prioritized accordingly. Within and across regions, enhancing WFP’s emergency nutrition capacity remains a core component of these action plans.
5. The Nutrition Policy will be integrated into country strategic plans and interim country strategic plans in support of national nutrition targets and emergency nutrition needs. Country offices will be supported by Headquarters and regional bureaux to achieve nutrition-related strategic outcomes that are aligned with national policies. The APN will also serve as a guide to support the country strategic planning process as WFP implements the Integrated Road Map.

Regional Action Plans

6. In order to support governments in achieving SDG 2, WFP helps to set the global agenda for food security and nutrition. The APN ensures that improving nutrition is one of the primary drivers of WFP’s contribution to SDG 2.
7. Recognizing the wide range of activities involved in implementing the Nutrition Policy, this plan will provide a prioritized extract. Detailed country nutrition outcomes will be generated through the country strategic planning process. The following structure provides an indication of priorities and how they will be addressed. Further consultation within regions will be required to confirm specific plans.

⁴ WFP/EB.2/2016/4-A/1/Rev.2*.



8. Because of the variation in regional contexts, some priorities comprise problems to be addressed, such as stunting or acute malnutrition, while other priorities refer to activities such as government advocacy and building the evidence base. Each region addresses most aspects of the policy to some extent, but the archetypes and priorities below provide guidance about those of particular importance in each region.
9. All regions will be supported by Headquarters with guidance, tools, knowledge and best practices, analysis, assistance and emergency and partnership support.
10. Gender is a critical cross-cutting issue in all regions. In line with WFP's Gender Policy, gender-sensitive analysis will be mainstreamed into all programming. This includes current metrics such as women's participation, age and markers such as pregnancy among adolescent girls. Given the importance of action at national levels, the focus of understanding gender dynamics will be at the household level, and intra-household dynamics such as food distribution, knowledge transmission and care practices will inform programming to make it gender-sensitive. In addition, WFP will assess men's participation and address the needs of adolescent girls in order to break the intergenerational cycle of malnutrition.
11. Partnership is a cornerstone of almost all WFP's activities. While WFP's partnership with the United Nations Children's Fund (UNICEF) is especially crucial, other United Nations agencies such as the World Health Organization (WHO), the Food and Agriculture Organization of the United Nations (FAO) and the International Fund for Agricultural Development are also important partners, including through inter-agency and multistakeholder platforms such as the United Nations Scaling Up Nutrition (SUN) Network, the United Nations Standing Committee on Nutrition (UNSCN), national governments, non-governmental organizations (NGOs), donors, academia, the private sector and civil society. While ensuring adaptability to different contexts, the principles of good partnership involve alignment with common goals, significant commitments of time and resources, and utilizing each organization's comparative advantages, including expertise, financing, influence and other resources.

Bangkok Regional Bureau (RBB)

12. The Asia-Pacific is an economically and culturally diverse region, which has seen tremendous progress in economic growth and food security in recent decades. However, national and regional malnutrition indicators show that vulnerable groups – especially women, infants and young children, ethnic minorities and populations exposed to both natural and human-incurred disasters – still experience unacceptably high rates of undernutrition. This is particularly true in low- and middle-income countries. While Asia is home to 60 percent of the world’s stunted children and 70 percent of wasted children globally, overweight and obesity rates are increasing rapidly. A multitude of underlying factors are responsible, including social, gender and economic inequalities, rapid urbanization, climate change and other shocks. Governments are increasingly recognizing the enormous economic and human losses linked to malnutrition. As a consequence, many countries have joined the global SUN movement.
13. All countries have multi-sector nutrition strategies, policies and action plans; however, significant barriers to effective implementation remain. In this diverse region, there is a need to better define context-specific implementation modalities, building on the unique comparative advantages of stakeholders including governments, technical partners and the private sector. In addition, mechanisms for adequate and predictable national budget allocations and private-sector investments in nutrition need to be identified.
14. The APN in the Asia and Pacific region involves working across sectors to strengthen government capacity for designing and implementing nutrition-specific and nutrition-sensitive policies and programmes that support sustainable progress towards the SDGs and World Health Assembly nutrition targets. RBB will work with Headquarters to support countries, drawing on – and contributing to – guidance and best practices from other regions.
15. In order to implement the Nutrition Policy, the regional bureau has identified two major priorities that are addressed by six programming archetypes.
16. The plan focuses on two priority areas of programming:
 - *Improved models for managing acute malnutrition:* The community management of acute malnutrition (CMAM) model was established to increase opportunities for scaling up the management of acute malnutrition. Since its inception in the early 2000s, the limitations of the CMAM model have been documented, with less than 10 percent of children suffering from wasting treated. Given the high caseload in the region and the many obstacles identified, new large-scale and low-cost models for treating and preventing acute malnutrition are urgently needed. The regional bureau will support these efforts, building on – and contributing to – the work of the No Wasted Lives coalition⁵ in emergencies and increasingly in development contexts.
 - *Prevention of undernutrition:* The Asia-Pacific region faces large-scale stunting, micronutrient deficiencies and acute malnutrition. Prevention is preferable to treatment, but requires a suite of tools that are effective across the region’s diverse contexts and that respond to its many challenges.
17. The example archetypes provided below are illustrative and do not comprise a complete list of actions for the region. More detailed planning with country offices and partners will follow:
 - *Evidence-building for policy and advocacy:* To strengthen WFP’s advocacy efforts, RBB will contribute to the regional knowledge base on nutrition, working with Headquarters to contextualize the lessons learned worldwide. This will include: i) Fill the Nutrient Gap analysis; ii) continued secondary data analysis; iii) cost-benefit analysis of selected interventions; and iv) regional and country-specific analyses to define a gender-sensitive approach to enhancing nutrition outcomes. WFP will document its technical assistance and implementation support in line with national nutrition priorities through operational research, joint initiatives, reports, case studies and other publications.

⁵ The No Wasted Lives coalition is a multi-stakeholder platform dedicated to building knowledge, reducing costs and mobilizing resources for the prevention and treatment of acute malnutrition.

- *Improved engagement with SUN, including increased mobilization of SUN tools and resources:* Most countries in the Asia-Pacific region are involved in the SUN movement; however, more efforts are needed in partnership with the SUN Secretariat to make global-level technical expertise and resources available at the country level. WFP will enhance partnerships with governments and technical counterparts to access these resources in a more systematic manner.
- *Enhanced human resources capacity in RBB and country offices:* Technical expertise is needed in regional bureaux and country offices to implement the Nutrition Policy. Strong technical expertise is required to facilitate country capacity strengthening in nutrition.
- *Fortification:* In recent years, RBB has significantly increased its support to the introduction and scaling up of rice fortification in Asia. Many country offices have been involved in the creation of an enabling environment and action plans. RBB will also draw on pilot initiatives in other regions, such as for rice fortification in Mali.
- *Prevention:* RBB will develop a suite of prevention tools supported by and contributing to global guidance. This will include:
 - i) a regional social and behaviour change communication (SBCC) strategy based on ongoing activities;
 - ii) nutrition-sensitive programming, including:
 - mainstreaming nutrition in existing social safety nets in Bangladesh, Indonesia, Pakistan and the Philippines;
 - school feeding in Bhutan, Cambodia, Lao People's Democratic Republic and Nepal; and
 - asset creation, in Sri Lanka; and
 - iii) increased availability of nutritious foods via the private sector: Over the past several years, local production of specialized nutritious foods (SNFs) has been introduced across the region. WFP will collaborate with governments to support the development of sustainable domestic and regional markets for these foods, including those made to WFP's specifications and others as appropriate.

Actor	Action	Archetypes	2017	2018	2019	2020	2021
RBB/Headquarters	Fill the Nutrient Gap analysis	1	x	x			
RBB/Headquarters	Secondary data analysis	1	x	x			
RBB/Headquarters	Cost-benefit analysis	1		x	x	x	x
RBB/Headquarters	Gender analysis	1	x	x			
RBB/Headquarters	Document WFP's contribution to SDG 2	1	x	x	x	x	x
RBB/Headquarters	Operational research and dissemination, especially of new models for managing acute malnutrition	1	x	x	x	x	x
RBB/Headquarters	Regional- and national-level support to SUN	2	x	x	x	x	x
RBB	Regional SUN Centre of Excellence	2	Set up	Set up	x	x	x
RBB/Headquarters	Ensure adequate technical capacity at RBB and country offices	3	x	x	x	x	x
RBB	Evaluate and disseminate lessons learned from fortification pilots	4	x	x	x	x	x
RBB	Scale up of successful fortification models	4	x	x	x	x	x
RBB	Assess stunting-prevention efforts	5	x	x			
RBB	Develop and implement SBCC monitoring and evaluation strategy	5		x	x	x	x
RBB	Work with regional private-sector actors to increase supply of SNFs	5	x	x	x	x	x
RBB/Headquarters	Training and learning to mainstream nutrition-sensitive approaches	5	x	x	x	x	x

Cairo Regional Bureau (RBC)

18. The Middle East, North Africa, Eastern Europe and Central Asia region covers a wide diversity of contexts. Level 3 emergencies are ongoing in Iraq, Yemen and the Syrian Arab Republic along with Level 2 emergencies in Libya and Ukraine. Other countries in the region have more stable geopolitical contexts but precarious socio-economic situations. As a result, the region hosts large populations of food-insecure and nutritionally vulnerable refugees, internally displaced persons and returnees. Within these groups, nutritional needs vary.
19. Large numbers of internally displaced persons and refugees in urban settings and in rural areas have no livelihood opportunities. Access to food and livelihood opportunities for some populations has been severely restricted. By contrast, the region also includes several middle-income countries such as Algeria and Kyrgyzstan, where stunting prevention, micronutrient deficiencies and the rising “double burden” are the major issues. Even in these middle-income countries, however, stunting is frequently above 20 percent. The double burden is a growing concern, including among refugee populations, and requires deeper understanding.
20. WFP works extensively in the region as the primary means of relief in emergencies. In more stable areas, WFP takes a developmental approach involving capacity strengthening, advocacy, improving social safety-net programmes through school meals and fortification, cash-based transfers (CBTs) and emergency preparedness. Working with partners is critical across the humanitarian-development spectrum. While acknowledging the broad portfolio of work undertaken in the region, WFP’s priority is preventing undernutrition and micronutrient deficiencies, especially acute malnutrition in emergencies.
21. Five programming archetypes have been identified as critical in the next five years:
 - i) *Expand prevention of acute malnutrition:* The successful MAM management package developed in Sudan will be emulated in the region’s emergency contexts, especially the Syrian Arab Republic and Yemen. It is based on establishing a prevention-treatment nexus that engages different sectors impacting nutrition outcomes. This model has yielded meaningful partnerships, which have been facilitated by national and international NGOs in collaboration with United Nations clusters and government ministries in Sudan. RBC will evaluate and strive to replicate these successes, seeking to develop the approach into an integrated model of food assistance and malnutrition prevention.
 - ii) *Nutrition-sensitive programming:* In many countries across the region where stunting and overweight are high, the regional bureau will ensure that nutrition sensitivity is mainstreamed across WFP’s programming and coordinate with other United Nations agencies, such as WHO, UNICEF, the United Nations Population Fund (UNFPA) and the United Nations Relief and Works Agency for Palestine Refugees in the Near East. RBC will draw on guidance from Headquarters, adapting it to the region’s development and emergency contexts. One priority of this programming is to develop nutrition-sensitive SBCC activities to improve beneficiaries’ understanding of the importance of a nutritious diet and increase demand for nutritious locally available foods. The most successful efforts to date, in Kyrgyzstan and Palestine, will be evaluated and learned from. Nutrition-sensitive programming for refugee and conflict-affected populations is critical to prevent stunting and micronutrient deficiencies among displaced people. RBC seeks to share these experiences through workshops, seminars and operational research in other countries.

- iii) *Monitoring, evaluation and evidence-building:* Within the region, building evidence is critical to identify the root causes of MAM, stunting and overweight in order to inform both government policies and WFP programming. Building evidence for operational effectiveness is another important area. CBT pilots in the Syrian emergency response have shown promise; additional pilots and research are needed to establish an evidence base and scale up successful interventions. Using the latest technology and platforms such as mobile data collection and analytics allows for timely adjustments to improve the efficiency of WFP's nutrition programmes. RBC is keen to undertake Fill the Nutrient Gap analysis in middle-income countries to guide government nutrition policies and programmes.
- iv) *The double burden:* Overweight and obesity are increasing problems across the region, including among refugee populations and in urban areas. This is also an emerging global issue and lessons learned in RBC are important additions to the global evidence base. RBC aims to gather data on undernutrition and overweight with a view to applying the evidence in future programming. To achieve this, it will partner with WHO to monitor anthropometric measurements of school-age children. RBC will also work with UNICEF to study micronutrient deficiencies, which often occur among the same vulnerable groups. WFP will be involved in data collection and analysis, with the roles of WHO and other agencies defined at the regional level. Ensuring that WFP's programming is sensitive to the double burden also involves strengthening synergies within WFP. In Kyrgyzstan, WFP has identified schoolchildren from whom it will collect anthropometric measurements to track overweight and obesity. RBC aims to roll out similar initiatives in Egypt and Jordan.
- v) *Fortification:* In Algeria, Armenia, Egypt, Sudan and Tajikistan, RBC is working to build government capacity for fortification in order to address these countries' high rates of stunting and micronutrient deficiencies. In line with WFP's focus on supporting governments in drafting policies, regulations and setting up fortification units, WFP will provide financial support for premix, communication and marketing strategies. At the regional level and with support from the Nutrition Division (OSN) at Headquarters, RBC will work with specialized agencies like the Global Alliance for Improved Nutrition (GAIN), Nutrition International, and private partners like BASF and Royal DSM.

Actor	Action	Archetypes	2017	2018	2019	2020	2021
RBC	Prepare an overview of the nutrition portfolio based on country strategic plans, including all nutrition activities and funding requirements	1, 2, 3, 4, 5	x		x		
RBC/Headquarters	Increase malnutrition prevention activities coupled with MAM treatment	1, 2, 3	x	x	x	x	
RBC	In cooperation with other agencies, pilot different MAM treatment models in communities and health centres	1, 3	x	x	x		
RBC	Develop regional SBCC action plans for North Africa, the Middle East and the Commonwealth of Independent States	2	x	x			
RBC	Undertake SBCC workshop to train nutrition focal points in the region	2	x		x		
RBC	Ensure that SBCC design promotes gender equity to reach nutrition objectives in line with the Gender Policy	1, 2, 4, 5	x	x	x	x	
RBC	Standardize assessment and monitoring checklists for age-group breakdown and nutrition data to improve monitoring and evaluation, and build evidence	1, 3, 4	x		x		
RBC/Headquarters	Develop regional frameworks with UNICEF, WHO and UNFPA	1, 2, 3, 4, 5	x	x			
RBC/Headquarters	Conduct Fill the Nutrient Gap analysis to support government policies and WFP programmes	2, 3, 4, 5	x	x		x	
RBC	Support multi-agency initiatives like SUN and Renewed Efforts Against Child Hunger and undernutrition (REACH)	4, 5	x	x	x	x	
RBC	Train staff to integrate nutrition into all activities, including school meals, social protection and value-chain programming	2	x	x	x	x	
RBC/Headquarters	Work at the national level to support government fortification strategies and plans, drawing on global standards	5	x	x	x	x	
RBC	Support the development of national nutrition strategies, plans, guidelines and nutrition strategic reviews	4, 5	x	x	x	x	

Dakar Regional Bureau (RBD)

22. The progress made in the 19 countries comprising RBD against the 2025 World Health Assembly nutrition targets remains insufficient. West and Central Africa is the world's only region in which the number of stunted children continues to rise. Maternal and child undernutrition remains a major obstacle to development. This region can be seen in terms of three nutrition challenges, each requiring an appropriate approach.
23. First, a significant part of the region remains fragile and prone to climate and human-induced shocks, which severely impact the nutrition of vulnerable populations. The high levels of malnutrition amid the ongoing crises in the Central African Republic, Mali and around the Lake Chad Basin are jeopardizing the survival of millions of women and children, and require emergency nutrition interventions. Nutrition in emergency contexts, with a focus on the management of acute malnutrition, will remain a major priority in the coming years.
24. In the Sahel, recurrent climatic and economic shocks, rising and fluctuating food prices, and demographic pressures coupled with minimal coverage of basic social services have resulted in chronically high undernutrition among mothers and children, especially in pastoral areas and during the agricultural lean season. WFP aims to increase its focus on nutrition-sensitive programming in these contexts within the framework of resilience-building and emergency preparedness, notably by increasing the nutrition sensitivity of food assistance.
25. In coastal countries – some of which are middle-income countries – micronutrient deficiencies and stunting remain serious public health issues. WFP will renew its efforts with governments through multi-sector platforms to build national capacities for tackling the multidimensional causes of undernutrition while strengthening social protection systems.
26. While the challenges faced in RBD differ across countries, there are parallels among them and globally. RBD will utilize guidelines, standards, best practices and feedback from Headquarters, build staff capacities, and increase the number of international nutritionists on staff. In a region of 19 countries where there is often low national nutrition capacity, there are only two international nutrition positions outside the regional bureau.
27. Aligned with WFP's Nutrition Policy, five archetypes for nutrition in RBD have been identified:
 - i) *Improving the management of WFP's response to emergency nutrition crises:* Timely implementation of high-quality, evidence-based nutrition interventions at scale remains a challenge in difficult contexts. Renewed efforts are required to strengthen coordination with UNICEF in order to ensure the harmonized delivery of a holistic intervention package and the continuation of nutrition care in crises. In scaling up emergency nutrition responses, the focus will be on improving the coverage and quality of nutrition interventions. This entails capitalizing on previous investments, establishing operating standards, ensuring continued analysis, and enhancing partnership with governments and other actors.
 - ii) *Resilience-building to sustainably reduce undernutrition:* WFP's Nutrition Policy and regional and national policies offer opportunities to enhance the nutrition impacts of food-based resilience-building programmes targeting vulnerable rural communities. WFP will promote resilience and nutrition programming through a context-specific "twin track" approach. This approach combines nutrition-specific interventions that address immediate nutrition needs with nutrition-sensitive activities that address the underlying causes of vulnerability. WFP will also document lessons learned, integrate nutrition into resilience planning and food security policies, support coordination, and enhance gender sensitivity through operations-based evidence gathering and understanding intra-household dynamics.
 - iii) *Developing nutrition-sensitive social protection systems:* Social protection and nutrition are linked: both are required to build resilience and link emergency and development approaches. In West and Central Africa, there is growing interest among donors and governments in an integrated approach to social protection to tackle the multidimensional

nature of malnutrition – especially in middle-income countries. WFP is committed to engaging in this arena and several strategies have been identified. They include strengthening WFP’s engagement in the harmonization of policies; incorporating nutrition objectives and indicators into social protection systems utilizing food assistance; documenting best practices in large-scale school feeding activities; and focusing on women’s empowerment and access to social protection. Guidance from Headquarters will enhance RBD’s ability to engage in this way.

- iv) *Promoting the local production of fortified food:* Micronutrient deficiencies are prevalent throughout the region, partly because of limited production capacity for fortified foods and partly because of financial and physical barriers to accessing these nutritious foods. Increasing availability of – and access to – local micronutrient-dense foods is a priority for both donors and governments. Through a multi-year regional partnership with GAIN, WFP will continue supporting the processing and marketing of locally produced fortified foods in Burkina Faso, Mali and Senegal in partnership with the Purchase for Progress programme. These efforts will develop the capacity of smallholders and local production units to produce nutritious foods that meet quality and safety requirements. WFP will also continue piloting initiatives that link fortification of rice and other foods to social protection programmes while learning from best practices shared by other regions, such as RBP and RBB.
- v) *Improving nutrition knowledge and information management:* WFP will contribute analytics in the region to support governments and contribute to partnerships. In coordination with OSN and other Headquarters units, RBD will prioritize rolling out Fill the Nutrient Gap analysis, WFP’s SCOPE beneficiary and transfer management platform, and the Joint Approach in Nutrition and Food Security Assessment (JANFSA). Rolling out both JANFSA and Fill the Nutrient Gap analysis requires strengthening partnerships with UNICEF, FAO and governments. WFP will seek guidance from academic and research institutions to monitor the nutritional impacts of its programmes.

SCOPE is a digital monitoring system that tracks individual beneficiaries. For this reason, it has significant potential to improve nutrition-sensitive programming in the framework of social protection and is a major source of added value for WFP.

Actor	Action	Archetypes	2017	2018	2019	2020	2021
RBD/Headquarters	Engage in multi-stakeholder, multi-level, multi-sector partnerships and coordination platforms	1, 2, 3, 4, 5	x	x	x	x	x
RBD	Develop regional blueprint for standing agreement on emergencies with UNICEF	1	x	x			
RBD	Engage governments in standing agreements on emergencies	1	x	x	x	x	x
RBD/RBN/Headquarters	Build evidence of the impacts of integrating prevention and treatment	1	x	x			
RBD	Develop, evaluate and share models of prevention-treatment nexus	1		x	x	x	x
RBD/other WFP units	Establish norms and practices for adapting existing platforms to fulfil other roles	1	x	x	x		
RBD	Identify further areas of improvement and build evidence base for resilience-building	2	x	x	x		
RBD/other WFP units	Training and learning to ensure nutrition sensitivity among other WFP programmes	2		x	x	x	x
RBD/Gender Office	Conduct vulnerability analysis and mapping (VAM) on gender and market analysis	1, 2, 3		x	x	x	x
RBD	Build expertise in social protection	3	x	x	x		
RBD	Engage and influence governments to ensure that social protection programmes are nutrition and shock sensitive	3	x	x	x	x	x
RBD/Headquarters	Build and share evidence of successful social protection programmes	3	x	x	x		
RBD	Evaluate and disseminate lessons learned from fortification pilots	4	x	x	x	x	x
RBD/RBJ/Headquarters	Build evidence on increasing access to fortified and nutritious foods via rural fortification	4	x	x			
RBD	Engage with governments to scale up fortification models	4		x	x	x	x
RBD/Headquarters	Roll out Fill the Nutrient Gap analysis	5	x	x			
RBD	Identify entry points and engage <i>Cadre Harmonisé</i>	5	x	x	x	x	x
RBD	Build models for successful integration of SCOPE into programming	5	x	x			
RBD/VAM Unit	Conduct JANFSA	5		x	x	x	x

Johannesburg Regional Bureau (RBJ)

28. Southern Africa is challenged by high stunting among children, with the majority of countries' stunting rates above 30 percent and some 40 percent or higher – defined as “very high” by WHO.
29. Micronutrient deficiencies are also extremely prevalent, with surveys in many countries indicating a prevalence of anaemia among children under 5 as high as 60 percent. Acute malnutrition levels are low, with just 6 of the region's 12 countries reporting acute malnutrition rates above 5 percent. However, pockets of high acute malnutrition exist in several countries during the lean season, including Madagascar and Zimbabwe.
30. The coexistence of undernutrition, overweight and obesity is also a growing challenge in Southern Africa, with the prevalence of overweight in adults ranging from 4 percent to 20 percent. Most countries in the region have a prevalence of overweight above 5 percent. The “double burden” not only affects the same countries, but the same households and potentially even the same individuals, who can be affected by stunting in childhood and obesity in later life. Southern Africa also carries the highest burden of HIV globally and is home to one third of all people living with HIV worldwide. The HIV situation is further compounded by tuberculosis and HIV co-infections, with Lesotho, Mozambique, Namibia, South Africa and Swaziland experiencing the highest prevalence of tuberculosis in the world.
31. WFP has prioritized two methods of implementing the policy in the region:
 - Support country capacity strengthening across a range of WFP nutrition policy priorities. Aligned with regional contexts, WFP is broadening its role to include service provision as well as enabling governments. This includes enhancing capacity for preventing stunting and acute malnutrition, and treating MAM and severe acute malnutrition (SAM) among people living with HIV; fortification to prevent micronutrient deficiencies; and support to SUN networks, including the SUN Business Network and United Nations SUN Network, with assistance from Headquarters.
 - Strengthening analysis: WFP will use existing tools to support national governments in developing tailored and evidenced-based nutrition interventions and policies. The evidence generated will also inform WFP's in-country operations for the greatest impact and fill gaps in the evidence base through a consultative process with partners, which establishes longer-term working relations among partners in countries.
32. To address the nutrition needs in the region, five priority areas of programming will be rolled out:
 - i) *Programme and policy support to prevent stunting:* A multifaceted response is required to successfully address stunting. Pilots of new approaches in Madagascar and Malawi have already demonstrated positive impacts and generated extensive lessons learned for the region, which will also support the global evidence base. WFP is also focusing on the nutrition of adolescent girls in a number of countries by partnering with UNFPA in maternity waiting homes and by integrating nutrition services into reproductive and maternal health. Support to governments through the SUN networks in formulating and rolling out policies will be strengthened in line with the Nutrition Policy's focus on working through national plans. There will be a renewed focus on incorporating SBCC into programming and improving the availability of specialized nutritious foods at the local and regional levels – drawing on regional and global best practices and guidelines.
 - ii) *Strengthened analysis:* WFP will use existing tools such as the Cost of Hunger analysis and Fill the Nutrient Gap analysis to inform comprehensive national nutrition strategies. Fill the Nutrient Gap analyses have been completed in Madagascar and are ongoing or scheduled in the Democratic Republic of the Congo, Mozambique, United Republic of Tanzania and Zimbabwe.

- iii) *Addressing micronutrient deficiencies:* Based on WFP's comparative advantage and strengths, entry points will include industrial fortification (piloted in Mozambique), rural fortification, which requires further operational research, and SBCC related to local fortification to address micronutrient deficiencies. Partners in the development of nutritious complementary foods include SUN stakeholders, local academia and the private sector.
- iv) *MAM treatment, especially during emergencies:* Although the prevalence of acute malnutrition is mostly low in the region, MAM rates are elevated during emergencies and the lean season. Technical assistance is required to strengthen government response capacity, particularly in Lesotho and Madagascar. This includes monitoring MAM and mapping food insecurity through health systems, health management information systems and emergency preparedness activities. WFP will continue to support the treatment of SAM and MAM among people living with HIV, considering that the greatest HIV burden is in this region.⁶
- v) *Nutrition-sensitive programming for the most vulnerable people, including people living with HIV and tuberculosis:* To ensure that its programming is sensitive to the most vulnerable people's needs, WFP needs to: i) include nutrition and HIV indicators in analysis and programming; ii) expand home-grown school feeding and fortified meals; iii) diversify food production through food assistance for assets; combine SBCC with CBTs; and iv) include nutritious foods in general food distributions. In addition to making programming more HIV-sensitive, partnerships are needed to mainstream nutrition-sensitive approaches that focus on vulnerable groups across the life cycle, and mainstream gender.

Focus on Zambia: The Mumbwa Project aims to promote complementary feeding through the use of local indigenous foods, utilizing an integrated approach that links nutrition-sensitive agriculture, complementary feeding, women's empowerment, HIV messaging, and home-grown school feeding. A documentary on the project entitled "Adolescents' Encounters in Mumbwa District" was aired by the Zambia National Broadcasting Corporation, extending its reach to viewers nationwide.

⁶ While UNICEF treats SAM in most contexts, there is a longstanding agreement that WFP will treat SAM among these groups.

Actor	Action	Archetypes	2017	2018	2019	2020	2021
RBJ	Provide technical assistance to produce specialized nutritious foods	1	Build up in Mozambique	x	x	x	x
RBJ/OSN	Provide technical guidance to the private sector for the production of complementary foods	1	Build up in Zambia	x	x	x	X
RBJ/OSN	Provide and distribute specialized nutritious foods to prevent stunting and prevent and treat MAM	1	x	x	x	x	x
RBJ	Support governments in creating, revising and implementing policies to combat stunting		x	x	x	x	x
RBJ	Roll out SUN Business Network across the region	1	x	x	x	x	x
RBJ	Roll out successful models of 1,000-day SBCC	1	X	x	x	x	x
RBJ	Partner with UNFPA to reach adolescent girls and integrate nutrition services into reproductive and maternal health activities	1	X	x	x	x	x
RBJ	Document best practices regarding the availability and production of specialized nutritious foods at the local and regional levels	1	X	x	x	x	x
RBJ/OSN	Conduct Fill the Nutrient Gap analysis	2	Democratic Republic of the Congo, Mozambique, Zimbabwe	Malawi, Swaziland, Zambia		x	
RBJ/OSN/VAM Unit	Conduct Cost of Hunger analysis	2	x	x			
RBJ	Scale up models	3			x	x	x
RBJ/RBD/OSN	Generate evidence on rural fortification	3		x	x		
RBJ	Roll out successful models of rural fortification	3			x	x	x
RBJ/OSN	Regionally adapt technical assistance package for MAM care continuity	4		x	x		

Actor	Action	Archetypes	2017	2018	2019	2020	2021
RBJ	Roll out technical assistance package to Lesotho and enhance technical assistance in Swaziland and Malawi	4			x	x	x
RBJ/VAM in the region	Work with VAM Unit to include nutrition and HIV indicators in all countries	5		x	x		
RBJ	Develop models of HIV-sensitive SBCC for CBTs	5		x			
RBJ	Biofortified foods for programmes such as school feeding and social protection	5	x	x	x	x	x
RBJ	SBCC in combination with CBT and the addition of specialized nutritious foods to general food distributions	5	x	x	x	x	x
RBJ	Diversify food production through food assistance for assets	5	x	x	x	x	x
RBJ	South–South training for country offices through the SUN Business Network	1, 3, 4	x	x			
RBJ/Headquarters	Develop and adapt successful models for fortification, SBCC and industrial fortification across the region	1, 3	x	x	x	x	

Nairobi Regional Bureau (RBN)

33. The eight countries covered by RBN reflect many diverse contexts, including disruption, transition towards recovery, structural poverty and government-led disaster prevention – with multiple contexts often seen in the same country. The region also hosts the second largest refugee caseload globally, with drought and conflict resulting in displacement and disruption of livelihoods, and often impacting access and service provision. At the same time, the region has strong government leadership and ownership of efforts towards the SDGs, many innovative approaches to development, and programmes focusing on national fortification, government-led stunting prevention and social protection to address structural poverty.
34. The nutrition situation in the region is characterized by high acute malnutrition, which exceeds the emergency threshold in large parts of countries affected by conflict or cyclic droughts. Stunting and micronutrient deficiencies are also serious issues across the region, with Burundi reaching the second highest stunting prevalence in the world and the highest in Africa.
35. In implementing the new Nutrition Policy, RBN has identified the following activities as priorities and key enablers:
 - i) *Management of MAM:* To enhance work already undertaken, WFP will strengthen alignment with national policies and plans, improve monitoring, support evidence-building, identify gender-transformative approaches, and ensure linkages to programmes for SAM treatment, prevention of acute malnutrition and safety nets.
 - ii) *Prevention of all forms of undernutrition:* WFP will work with partners through a multi-sector approach that involves engaging with government policymakers via partnership platforms and strengthening links with communities.
 - iii) *Capacity strengthening within WFP:* The new Nutrition Policy will require the creation and enhancement of capacities. This will involve forging links among country offices and sub-offices, building deep practical knowledge of WFP's programming, and promoting staff wellness to ensure performance. In order to build capacity, WFP will draw on global knowledge and best practices from other regions.
36. Four archetypes have been identified in these priority areas:
 - i) *Treatment of acute malnutrition and prevention of undernutrition (stunting and micronutrient deficiencies) in refugee settings:* Best practices have been demonstrated in Rwanda, where WFP has worked with the Office of the United Nations High Commissioner for Refugees (UNHCR) to establish a successful continuum of care between MAM and SAM, and an effective prevention-treatment nexus featuring SBCC. RBN and OSN will work together to ensure that lessons learned and proven models are shared at the global level. To meet the aims of this new policy, WFP's programming should become the norm in refugee settings across the region, linking the initial emergency phase of refugees' arrival to prevention programmes in more stable contexts. This will entail strengthened collaboration with UNHCR, enhanced SBCC, and innovations to support prevention, including gender-transformative approaches and joint work with host governments to ensure a comprehensive service package.
 - ii) *Partnership to address nutrition in emergencies:* Preventing and treating acute malnutrition in South Sudan is particularly challenging as a result of unpredictability and access challenges. WFP, UNICEF and the Nutrition Cluster have collaborated to create a rapid response mechanism. Working with local communities, WFP and its partners have been able to provide fast and effective relief, including for the prevention and treatment of acute malnutrition, to ensure a continuum of care. These joint efforts have been complemented by general food distributions and basic health services such as deworming and immunization. While this programming has already been replicated in Ethiopia and as part of the Horn of Africa drought response, RBN will continue to adjust the model in response to different contexts in the region.

- iii) *Multi-sector programming to reduce undernutrition:* As well as acute malnutrition, stunting and micronutrient deficiencies are also a widespread problem in the region. In Burundi and Rwanda, a successful partnership among NGOs, governments and four United Nations agencies has created a strong working model involving complementary interventions, joint monitoring, planning, decision-making and supervision to address undernutrition. WFP, FAO, UNICEF and WHO each lead a component; in addition to complementary feeding, WFP co-leads the monitoring and evaluation component with UNICEF. Multi-year funding has been obtained, allowing for efficiency gains and long-term planning. RBN will continue to explore partnerships in order to expand WFP's multi-sector stunting prevention activities across the region, including investments in SUN coordination and strengthening the capacity of government counterparts. As with other types of programming, RBN will learn from – and contribute to – global best practices.
- iv) *Government capacity strengthening:* Governments are crucial partners across the region and the Nutrition Policy marks WFP's commitment to align with national plans. In Kenya, technical capacities have been strengthened in nutrition-related data management, assessments and policy development, aided by South–South cooperation through a high-level visit to the Centre of Excellence against Hunger. WFP has enhanced its role and built solid relationships by working with governments on the development of national nutrition plans, guidance on fortification, nutrition in school meals, and integrating HIV into the management of acute malnutrition. Fill the Nutrient Gap has contributed to WFP's relations and ability to be an effective partner. Using this platform, WFP has been able to focus on prevention, managing acute malnutrition and integrating nutrition-sensitive programming. Fill the Nutrient Gap analyses also enhance country capacity to address malnutrition. RBN aims to allocate resources, staff capacity and time to such strengthening in Burundi, Djibouti, Ethiopia, Rwanda, Somalia, South Sudan and Uganda.

Centre of Excellence: RBP works with OSN to support the Centre of Excellence against Hunger located in Brazil, which already supports governments worldwide in linking school meals to local agriculture.

Actor	Action	Archetypes	2017	2018	2019	2020	2021	
RBN/RBD/Headquarters	Build evidence on prevention-treatment nexus	1, 2, 3	x	x				
RBN	Develop enhanced models for working with communities	1	Burundi, Kenya and Rwanda	Roll out	Evaluate models			
RBN	Develop a regional SBCC strategy	1	x	Roll out workshop				
RBN	Improve monitoring through checklists and data feedback loops	1	x	x	x	x	x	
RBN/Headquarters	Develop refugee nutrition training for staff	1	x					
RBN	Enhance gender activities to encourage men's participation in infant and young-child feeding	1, 2, 3, 4	Rwanda and Djibouti					
RBN	Technical support, deployments and coordination in South Sudan							
RBN	Partnerships with UNICEF (steering committee) and Global Nutrition Cluster to draft joint framework and guidance for South Sudan							
RBN/Headquarters	Participate in UNICEF steering committee and development of framework	2	Framework	Roll out and country office-level adaptation	Updates			
RBN	Develop minimum package of services for joint emergency nutrition response	2	Ethiopia, Kenya, Somalia and South Sudan					
RBN	Co-lead Nutrition Cluster through coordination and secondment of staff	2	x	x	x			
RBN/Headquarters	Conduct Fill the Nutrient Gap analysis	3	Djibouti, Rwanda and Uganda	Ethiopia and Kenya	x	x	x	
RBN	Invest time and staff in SUN, and encourage co-leadership	3	Priority plus 7	x	x			
RBN	Train government counterparts in prevention and service complementarity	3	x	x	x	x	x	

Actor	Action	Archetypes	2017	2018	2019	2020	2021
RBN	Integrate nutrition sensitivity into school meals, social protection and value chain sectors	3	x	x	x	x	x
RBN/Headquarters	Improve demand for healthy diets through communication and fortification	3	Rwanda	x	Ethiopia	x	
RBN	Develop capacity-strengthening plan for decentralized government counterparts	4	x	x	x	x	x
RBN	Devote staff time to supporting national nutrition plans, guidance and nutrition strategic review	4	All 8	x	x	x	x
RBN/Centre of Excellence	Encourage South–South cooperation and visits to the Centre of Excellence against Hunger	4	Djibouti, Uganda and South Sudan		x		

Panama Regional Bureau (RBP)

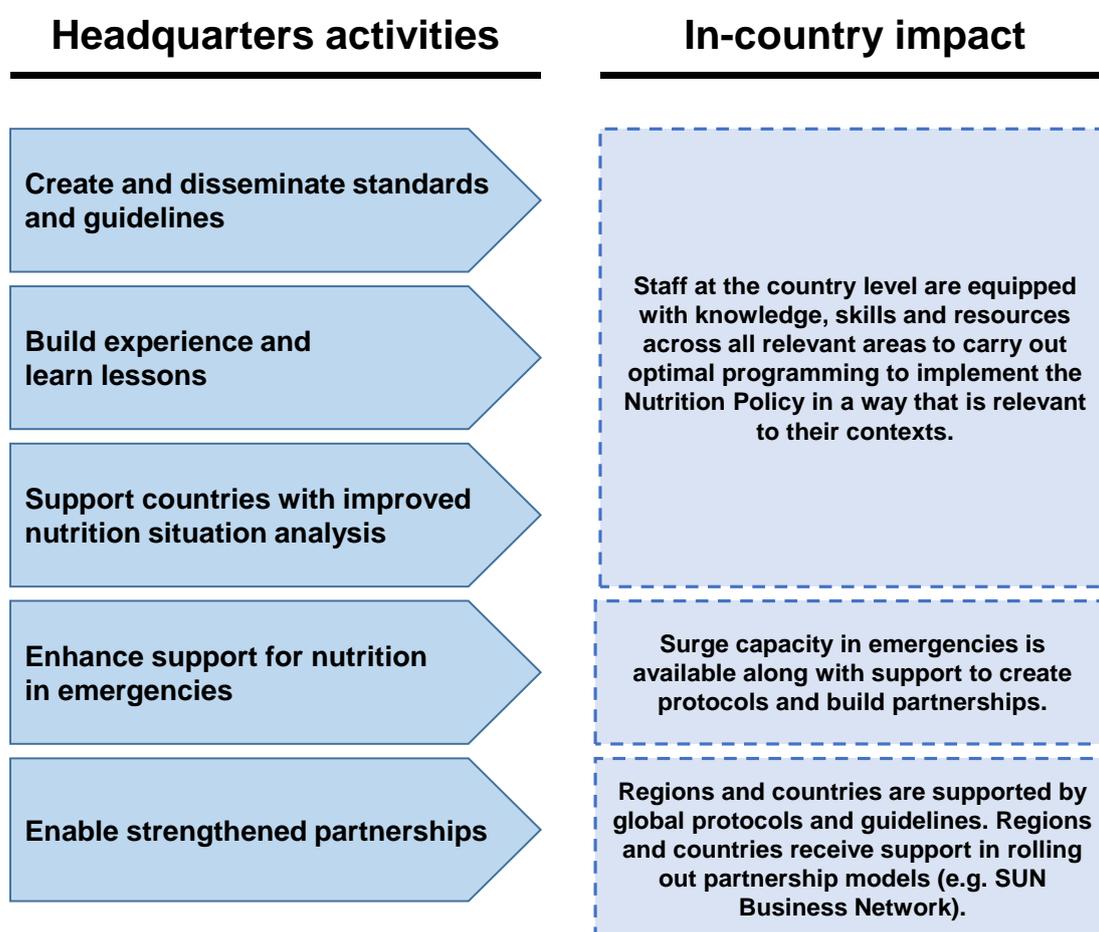
37. The Latin America and the Caribbean region is the only region to have met the Millennium Development Goal target of halving the proportion of individuals suffering from hunger between 1990 and 2015. During the same period, the proportion of stunted children was also halved from 24.5 percent to 11.5 percent. This can be attributed to massive increases in public investments in poverty reduction and health, supported by robust economic growth. However, significant differences persist between and within countries, and stunting remains a priority for several countries, particularly in Central America. Guatemala has the fourth highest prevalence of stunting in the world. Inequalities – particularly with regard to indigenous communities and women – are extremely prominent. Addressing gender inequality is a priority since the school retention rate for girls is low and 12 percent of adolescent girls experience early pregnancies, which are often linked to violence and sexual exploitation.
38. These challenges, along with economic migration and a lack of access to safe, adequate and nutritious foods, are major risk factors for food insecurity and malnutrition. Although there are refugees in Colombia and Ecuador, conflicts in the region are receding. However, the region is extremely prone to natural disasters and climate-related events, which can cause spikes in acute malnutrition, affecting the most vulnerable communities and hampering progress towards the eradication of malnutrition.
39. All countries except Haiti are classified as middle-income countries, and the region has the highest rate of urbanization among all those where WFP works. As a result of rapidly changing lifestyles, populations are experiencing a nutrition transition in which poor and marginalized communities and individuals are affected by the double burden. Obesity prevention is a rising concern for many governments, with unique challenges for policies and programmes.
40. WFP's role in RBP has evolved from direct support to technical expertise and strengthening the capacities of governments and marginalized communities. This region serves as a testing ground for innovative approaches to WFP's engagement in middle-income countries, which will be highly relevant to its work in the future.
41. The following are priorities of the regional nutrition action plan:
 - i) Governments' social protection systems and safety nets increasingly address malnutrition in all its forms with a gender lens.
 - ii) Nutrition is integrated into national emergency preparedness plans across the region.
 - iii) Innovative studies, approaches and tools are developed, tested, evaluated and documented in order to improve government systems and programmes, particularly for tackling the double burden.
42. In order to achieve these outcomes, RBP will work in four priority areas:
 - i) *Building effective partnerships and alliances:* The nature of WFP's work and the relative size of country offices make it difficult to permanently retain the array of competencies necessary to strengthen the capacities of governments and other stakeholders, and develop new approaches. Effective partnerships are crucial to augment WFP's expertise within coordinated comprehensive approaches, and to ensure that WFP's partnerships make the best use of resources. The following are examples of WFP's many partnerships in the region:
 - *South–South cooperation:* RBP has established agreements with the Governments of Argentina, Chile and Mexico to provide technical support and strengthen governments' capacity for reducing food insecurity and malnutrition. WFP also supports South–South cooperation through the Centre of Excellence against Hunger in Brazil. In addition, WFP calls upon governments with specific expertise to transfer their experience, such as the Government of Costa Rica on rice fortification.

- *Civil society*: A partnership with the Latin American Society for Nutrition will be established to enhance country office capacities while leveraging WFP's contribution to the development of young talent in the field of nutrition. At the local level, increased engagement with farmers' associations – especially women-led associations – will be pivotal for: i) enhancing the nutrition sensitivity of food systems; ii) fostering shared responsibility for raising awareness of nutrition within communities and households; and iii) linking local production of nutritious foods to social protection systems and safety nets, with a gender-transformative approach in line with the Gender Policy (2015–2020).
 - *Academia*: In line with its operations research strategy, WFP will work with research institutions such as Mexico's Institute of Public Health and the private sector to build on successful models in the region.
- ii) *Advocacy*: National plans, policies and strategies are the primary entry points for WFP's work. WFP will advocate for including nutrition outcomes and in development plans and for nutrition to be considered a cross-cutting issue in poverty reduction, health, agriculture and disaster management strategies. WFP will also advocate for resources to support these priorities from national budgets. Leveraging its partnerships, WFP will facilitate multi-sector coordination and accountability, including by: i) promoting the SUN vision and action plan; ii) promoting integration of overweight and obesity prevention into national plans, strategies and programmes; and iii) utilizing new evidence-based approaches in the fields of fortification and nutrition-sensitive, gender-transformative social protection.
- iii) *Capacity strengthening and technical assistance*: RBP aims to respond to government requests for technical assistance and capacity-building as governments pursue their national plans. Given the size of country offices and the range of expertise required, RBP will strengthen its internal capacity in SBCC and food fortification, and will facilitate the exchange of other expertise through partnerships with the Latin American Nutrition Society, Mexico's National Institute of Public Health, the global science-based company Royal DSM, the Institute of Nutrition of Central America and Panama, and via OSN's global knowledge base.
- Another focus will be on integrating nutrition into social protection programmes, for example, via school feeding. Finally, WFP will support resilience and emergency preparedness using nutrition-sensitive training in community-based participatory planning as part of the three-pronged approach.
- iv) *Innovating and generating evidence*: RBP is demonstrating how WFP can engage in middle-income countries where policies and programmes are led and resourced nationally. The models developed in this region can be replicated in other regions in the coming years. In many ways, RBP is an incubator for high-quality nutrition programming in other regions.
43. Modeled on the success of the Cost of Hunger methodology, which has been applied in more than 20 countries in the Americas and Africa, RBP plans to address existing evidence gaps related to the development of tools for measuring and understanding malnutrition in urban contexts, impacts of the double burden of malnutrition and models for prevention, and the effectiveness of interventions for vulnerable groups. Along with urban communities and adolescent girls, elderly populations are of interest, given their important role as caregivers.

Actor	Action	Archetypes	2017	2018	2019	2020	2021
RBP	Identify WFP needs and resources (e.g. funds, secondments, expertise)	1	x				
RBP	Seek out new partners in academia, civil society and the private sector, and identify opportunities to engage	1		x			
RBP	Use alliances to further regional priorities and build capacity within WFP	1			x	x	x
RBP	Identify government nutrition priorities and jointly identify WFP's means of support	2	x	x			
RBP	Collaborate on the creation of nutrition policies	2			x	x	x
RBP/Headquarters	Contribute to well-functioning SUN networks, drawing on global experience	2	x	x			
RBP/Headquarters	Evaluate and spread lessons learned from successful SUN collaboration	2			x	x	x
RBP/Headquarters/VAM Unit/Gender Office	Adapt global guidelines in important areas for the region, such as preparedness, fortification and school feeding	3		x			
RBP	Build and evaluate successful capacity-strengthening models	3		x	x		
RBP	Roll out successful models across the region	3				x	x
RBP/VAM Unit	Establish funding and administrative mechanism for selecting and running innovation pilots	4		x			
RBP/Headquarters	Evaluate and spread lessons learned from pilots	4			x		
RBP	Where appropriate, facilitate scale up	4	x				
RBP	Identify and co-commission evidence-gathering activities	4	x	x			
RBP	Evaluate and disseminate knowledge and evidence	4		x	x	x	

OSN Global Plan for Nutrition

44. To create the enabling environment for regional bureaux to support country offices, OSN will work with other WFP units and global partners to ensure that the needed materials, capacity and support are available.
45. Planning at the regional level will continue to facilitate the effective use of resources in regions and the essential contextualization of guidance. While the nutrition issues, environmental constraints and capacity challenges vary, there are opportunities to build upon economies of scale by prioritizing global issues. In this way, OSN can enhance the ability of regional bureaux to work with national governments and other stakeholders to improve nutrition.
46. Responding to the priorities and needs outlined in the regional action plans, OSN will design and execute cohesive global strategies that support regional bureaux in working with country offices to implement the Nutrition Policy. This includes: i) an emphasis on gender-transformative nutrition programming; ii) an enhanced nutrition focus in emergency response and preparedness; iii) programming to address acute malnutrition, including approaches for managing acute malnutrition; iv) support for scaling up nutrition-sensitive approaches; v) improving nutrition context analysis; vi) building a culture of learning and knowledge management; and vii) strengthening partnerships to support national governments in their efforts to achieve SDG 2.
47. All of OSN's work aims to enable regions and countries to implement the Nutrition Policy. OSN will play enabling roles in the design of operational research, dissemination of findings and best practices, and fostering of global partnerships and protocols to support country-level work. Other OSN priorities include building the emergency roster for nutrition and enhancing Fill the Nutrient Gap analysis to serve specific country office needs as requested. Five principle means have been identified by which OSN will support regional bureaux and country offices, as detailed below.



48. *Create and disseminate standards and guidelines:* WFP's ability to quickly adjust its operations to meet the greatest needs is an organization hallmark. This ability to implement high-quality nutrition programmes and provide targeted technical assistance must be adapted to each context while meeting global standards. OSN will update global protocols and build regional capacity to meet these standards in order to serve both WFP and its partners.
- Responding to global and regional demands presented in the APN, OSN will develop enhanced guidance and provide technical support to improve the design and articulation of nutrition-sensitive strategies in country strategic plans and interim country strategic plans. This includes working with RBC and RBB to evaluate and document the integration of SBCC into other programmes. OSN will also document the successful nutrition-sensitive efforts of RBP and RBD in order to support governments in the design of nutrition-sensitive social protection programmes. It will also coordinate efforts within the nutrition-sensitive working group at Headquarters to apply a nutrition lens in WFP programming. Additional guidance is on nutrition in emergencies, particularly on ensuring timely nutrition support in the responses to the four famines. Guidance will also be developed on integrating gender with nutrition interventions, including in the Protection Policy, to enable programmes to link good nutrition to gender transformation.
49. *Share experiences and lessons learned:* Building on the work already undertaken to strengthen nutrition programming and document impact, OSN will continue to gather, process, store and disseminate knowledge on successful approaches and enabling factors for improving nutrition in different contexts and in different cross-cutting areas such as gender and partnership. At the global level, Headquarters will increase awareness, facilitate knowledge exchange, improve communication and enhance the sharing of experiences. This will include work with: i) RBP to disseminate lessons learned from private-sector partnerships for increasing the availability of specialized foods combined with CBTs; ii) RBJ on stunting prevention based on best practices; iii) RBB and RBN on improved models for managing acute malnutrition; and iv) all regions on emergency nutrition and preparedness standards in different contexts.
50. OSN will contribute to the global evidence base on the design of nutrition-specific and nutrition-sensitive interventions by supporting regional pilots and commissioning operational research. The division will also pursue long-term relationships with academic institutions and the private sector to identify and prioritize needed research in line with the operations research strategy.
51. *Support countries with improved nutrition analysis:* OSN will promote the use of the Fill the Nutrient Gap and other analytical tools to support national governments and stakeholders in designing multi-sector strategies and policies to reduce the nutrient gap among vulnerable groups. The division aims to continue Fill the Nutrient Gap analysis during policy implementation to support its use throughout WFP and among partners. OSN will build on its strong partnerships with SUN, the United Nations Network for SUN, and REACH to increase demand and support for this assessment.
52. At the same time, OSN will develop regional capacity for Fill the Nutrient Gap analysis in collaboration with local research institutions to allow for a greater transfer of skills, further analysis, and ongoing technical support to countries. OSN is developing indicators for nutrition-sensitive programmes linked to the Corporate Results Framework, and working with the VAM Unit to collect dietary diversity data via mobile applications. Both activities will enable regional bureaux and country offices to provide the best tools possible for situation analysis and evaluation.
53. *Enhance support for nutrition in emergencies:* Ensuring that nutrient needs are met in emergencies remains a major priority for OSN at the global level. The division will adopt a model that acknowledges the need for core staff in a small rapid response unit, with complementary efforts to strengthen the emergency nutrition roster. Actions will include evidence generation based on lessons learned in different emergency contexts in coordination with regional bureaux. For example, by documenting slow-onset emergencies with RBJ, OSN can inform global preparedness strategies. Partnerships are critical and OSN will engage with the Global Nutrition Cluster and other platforms to provide guidance to governments and inter-agency partners.

54. *Enable strengthened partnership:* Partnerships are central to WFP's engagement in nutrition. At the global level, OSN works through several multi-stakeholder platforms and will continue to deepen these relationships. As an active contributor, it will leverage WFP's experience and comparative advantages to support the Decade of Action on Nutrition and SDG 2. Responding to the priorities outlined in each region, OSN will continue its involvement with the WFP-hosted United Nations Network for SUN, and work with GAIN as co-chair of the SUN Business Network. Through these partnerships, OSN will support countries' engagement with the private sector to tackle malnutrition, with a special focus on fortification, preventing overweight and obesity, and creating visibility around successful examples. In addition to the partnership review detailed in the Nutrition Policy, OSN will continue to work directly with UNICEF at the global level to improve joint responses. OSN will also work with the other Rome-based agencies and global partners as an active member of UNSCN and the Committee on World Food Security (CFS) as interest in nutrition-sensitive approaches grows.

Actor	Actions	2017	2018	2019	2020	2021
Create and disseminate standards and guidelines to support field						
OSN/Gender Office/VAM Unit	Establish approaches and participatory tools for gender analysis and monitoring	X	X			
OSN	Disseminate updated guidance and tool kits on nutrition in emergencies	X	X	X	X	X
OSN/Policy and Programme Division	Develop additional guidance and provide technical support to enhance the design and presentation of nutrition-sensitive strategies	X	X			
OSN	Update nutrition specific guidance for regions in preparation for the “four famines”	X				
OSN	Develop and disseminate nutrition- and gender-sensitive SBCC approaches	X	X	X	X	X
Share experiences and document lessons learned						
Actors	Actions	2017	2018	2019	2020	2021
OSN/academic partners/regional bureaux	Develop research strategy, prioritizing needs	X	X			
OSN/academic partners/regional bureaux	Establish strategic relationships for research by finding complementarities between WFP and partners’ priorities	X				
OSN/academic partners	Establish standing agreements with academic institutions to formalize interaction		X			
OSN/partners/regional bureaux	Collaborate to develop, implement, evaluate and learn from pilots	X	X	X	X	X
OSN	Launch Nutrition Learning Academy and Nutrition Channel	X	X			
OSN	Mainstream gender learning within OSN	X	X	X	X	X
Support countries with improved nutrition analysis						
OSN	Continue to refine methodology for Fill the Nutrient Gap analysis	X	X			
OSN	Strengthen partnerships with UNICEF, Save the Children, the International Food Policy Research Institute and others		X	X		

Actor	Actions	2017	2018	2019	2020	2021
OSN	Evaluate impact of Fill the Nutrient Gap analysis (i.e. how are results utilized?)		X	X		
OSN	Decide on a model for scaling up		X			
OSN/ regional bureaux	Build regional bureau capacity in analysis		X	X		
OSN/Gender Office	Enhance the gender sensitivity of analysis	X	X	X	X	X
Enhance nutrition in emergencies						
Actors	Actions	2017	2018	2019	2020	2021
OSN	Ensure a full emergency rapid response team	X	X	X	X	X
OSN	Identify and maintain an emergency roster	X	X	X	X	X
OSN/regional bureaux	Partner with regional bureaux to document lessons learned	X	X	X	X	X
OSN	Work at the global level to influence nutrition-in-emergency protocols via global platforms	X	X	X	X	X
Enable strengthened partnerships						
OSN/partners	Decade of Action on Nutrition	X	X	X	X	X
OSN/partners	Contribute technical advice and collaborate on multi-stakeholder platforms, such as UNSCN, CFS and the Joint United Nations Programme on HIV/AIDS	X	X	X	X	X
OSN/regional bureaux/UNICEF	UNICEF partnership review and strengthening	X	X			
OSN/GAIN	Co-chair SUN Business Network	X	X	X	X	X

Costing

55. Provided that Member States are in agreement with the direction of the APN, the Secretariat will refine and provide costing for implementation. This costing will reflect the additional costs of building capacities, guidance and pilots needs for implementing the APN, rather than the operational costs currently reflected in implementing WFP's global nutrition programming. This detailed costing, disaggregated by region, will be presented at a future Executive Board session for approval.

Acronyms Used in the Document

APN	Action Plan for Nutrition
CBT	cash-based transfer
CFS	Committee on World Food Security
CMAM	community management of acute malnutrition
FAO	Food and Agriculture Organization of the United Nations
GAIN	Global Alliance for Improved Nutrition
JANFSA	Joint Approach in Nutrition and Food Security Assessment
MAM	moderate acute malnutrition
MCHN	mother-and-child health and nutrition
NGO	non-governmental organization
OSN	Nutrition Division
RBB	Bangkok Regional Bureau
RBC	Cairo Regional Bureau
RBD	Dakar Regional Bureau
RBJ	Johannesburg Regional Bureau
RBN	Nairobi Regional Bureau
RBP	Panama Regional Bureau
SAM	severe acute malnutrition
SBCC	social and behaviour change communication
SDG	Sustainable Development Goal
SNF	specialized nutritious foods
SUN	Scaling Up Nutrition
UNFPA	United Nations Population Fund
UNHCR	Office of the United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNSCN	United Nations System Standing Committee on Nutrition
VAM	vulnerability analysis and mapping
WHO	World Health Organization