

1. **Title of project: Engaging civil society organisations in advocating and sustaining political will for government action for scaling up nutrition**
2. **Location:** Nepal
3. **Details of focal point organisation**

Name of the applicant:	Save the Children
Description	Save the Children is the world's largest non-religious, non political, independent movement for children's rights working in over 120 countries around the world. This gives us a strong and impartial voice when advocating for Children's issues. As an advocate and promoter of child rights, we act as facilitators to influence policies and practices both at the community and national level. Save the Children listens to children, involves children and acts to ensure that their views are taken into account.
Mission	We are the world's leading independent organisation for children. Our vision is a world in which every child attains the rights to survival, protection, development and participation. Our mission is to inspire breakthroughs in the way the world treats children, and to achieve immediate and lasting change in their lives.
Activities	The following are key program thematic areas which SC implements in Nepal. <b><i>Child Rights Governance, Education, Protection, Health and Nutrition Youth and Livelihood, HIV and AIDS, Emergency and Disaster Management</i></b>

#### 4. Examples of working with others, success in advocacy/campaigning

Ministry of Health and Population are involved in the process of consultation and the concept note has been already shared with them through Raj Kumar Pokharel, Nutrition Section Chief, Child Health Division<sup>1</sup>. We had also shared the concept note with the Maternal Health and Nutrition Adviser of DFID, Natasha Mesko<sup>2</sup> but did not get any assurance for local funding so far. We are in the process of entering a dialogue with the World Bank through Dr Manav Bhattarai<sup>3</sup>, Health Specialist for funding from their 1000 days campaign for this proposal as well.

The EVERYONE campaign is Save the Children's global campaign to seed up the process for countries to reaching the MDG goal 4 through popular mobilization, policy advocacy, fund raising and program delivery. The campaign has been successful in working with MoHP, UN agencies, INGO for child health strategy implementation, media and Civil Society Organizations (CSO) for popular mobilization

#### School Health & Nutrition/ Water & Sanitation Initiative in Nepal (SHN/ WATSAN)

<sup>1</sup> Raj Kumar Pokharel, Nutrition Section Chief, CHD, MoHP Nepal ( [rajkumarpokharel@gmail.com](mailto:rajkumarpokharel@gmail.com) )

<sup>2</sup> Natasha Mesko, DFID, Maternal Health and Nutrition Adviser ( [N-Mesko@dfid.gov.uk](mailto:N-Mesko@dfid.gov.uk) )

<sup>3</sup> Dr Manav Bhattarai, World Bank, Health Specialist ( [mbhattarai@worldbank.org](mailto:mbhattarai@worldbank.org) )

The project has been successful in advocating in partnership with NGOs for a national Strategy for School Health and Nutrition to Ministry of Health and Ministry of Education. Conduct popular mobilization at national and sub-national level for school health and nutrition messages.

**Project title: Saving Newborn Lives**

The project has been successful in bring awareness about newborn health and survival as a key to reach the MDGs, bring policy change for newborn health and develop programs. The project has been successful in developing alliance for newborn health among the civil society organization.

## **5. Purpose of Grant**

The framework on scaling up nutrition (SUN) has provided the road map for Multisectoral Approach in Nutrition where the civil society has been recognized as a key stakeholder responsible for advocating and sustaining the political will for government action in monitoring and accountability of both public sector and private sectors in service delivery. In this regard a consultative meeting has been conducted with a CSO representing civil society in order to identify the potential role of civil society in scaling up nutrition in future (*attached list of participants*). The meeting began by noting the clear need to scale up efforts by involving CSOs. The overall coordination of the multi-sectoral plan at the national level lies with the National Planning Commission, under the stewardship of the National Nutrition Steering Committee and National Food and Nutrition Security Steering Committee, in which bi-lateral and multi-lateral stakeholders, including DFID, the World Bank and UNICEF participate. Now it is realized that CSOs need to pro-actively work towards ensuring room for CSOs in the national multi stakeholder platforms. CSOs have a multi-faceted role within the SUN movement (implementer, watchdog, communicator, advocate, data collector among others). The meeting identified an urgent need to build a Nutrition alliance involving the government, research and academic institutions, I/NGOs, CSOs, and other stakeholders so that the Government knows who to talk to. The meeting concluded with the final remarks by Mr. Rajkumar Pokharel, Nutrition Chief, Child Health Division, and he identified the need for individual CSOs to scale up direct actions as well as lobby others to invest in scaling up nutrition. He added that institutional development is critical at every level and both in the public as well as the private sector.

### **a. Description of malnutrition situation**

Nepal has made considerable progress in reducing child and maternal mortality. There have a significant progress on reducing micronutrient malnutrition, and Nepal is one of the very few countries in the world to be in track to meet the WFC goals.

However, the achievement in reducing general malnutrition in Nepal has remained poor. Between 2001 and 2006, stunting reduced slightly from 57% to 49%; underweight from 43% to 39%; while wasting increased from 11% to 13%. One in every four (24%) women are thin (BMI < 18.5). Growth faltering among children in Nepal occurs early in life and is common in children 0-24 months, the period of rapid growth and therefore increased nutrient requirement for children.

Given the malnutrition status of Nepal, the Ministry of Health and Population conducted a Nutritional Assessment and Gap Analysis in 2009 to identify the proximal, intermediate and distal cause of malnutrition and the causal pathway. One of the major recommendations provided by the assessment was to develop a multisectoral architect for nutrition both at national and sub-national level and implement the cost effective nutrition interventions. Following which a inter-ministerial, multi-donor committee in Nutrition was formed under the stewardship of National Planning Commission to develop the Multi Sectoral Nutrition Plans (MNSP) to improve the maternal and child under nutrition. The different ministry engaged in the development of plan are Ministry of Education, Agriculture, Physical Planning and works, Local Development and Health.

**b. Problems that project aims to address through advocacy and campaigning activities**

- Nepal has a long history of developing Multi Sectoral Nutrition Plans (MSNP) in 1998 and 2006 engaging different line ministries however, these Multi Sectoral plan has not been effectively implemented and owned by the line ministries and donor agencies. The mechanism to monitor and advocate for the implementation of multi Sectoral plan was not established.
- The stakeholders engaged in the currently drafted multi Sectoral plan development are the government and donor community with limited engagement and recognition to civil society.
- Although nutrition is identified as an area of intervention in the multi sectoral plan, there has been limited focus on implementation amongst the state authorities.
- There are many NGOs working in the field of nutrition, each with its own agenda and approach. A more coordinated effort in design, implementation, and monitoring is required to prioritize the nutrition efforts in the country
- The multi-Sectoral draft plan hugely neglects the presence the civil society ranging from the researchers, academia, media and journalist, human right advocates, private sectors, professional bodies, micro-credit cooperatives, farmers association and NGOs working in the field of nutrition. Moreover, the inadequate human and financial resources (only 1.8% of total National Health Budget allotted for National Nutrition Program under Ministry of Health and Population) and institutional capacity and expertise at all level for efficient management of nutrition program. Thus, there is a need for institutional strengthening and skilled human resources at central all levels and in NGOs sectors.
- The action will aspire to increase the civil society visibility and influence in health policy development through their capacity building in raising nutrition related issues supported by an expansion in access to information and knowledge.
- Capacity building of CSOs will promote interaction and facilitate effective linkages between the sub-national and national level state authorities

**c. Key Target group(s)/allies:**

- Government Stakeholders of Multi Sectoral Nutrition Plan: Ministry of Health and Population (MoHP), National Planning Commission, Ministry of Local Development, Ministry of Agriculture, Ministry of Education, Ministry of Physical Planning and Works
- Donor Community: World Bank, DFID, USAID, AusAid
- UN: WHO, FAO, WFP, UNICEF

**d. Key Partners**

National Level Civil Society

- Nepal Health Research Council, Nepal Public Health Foundation, Mother and Infant Research Activity (MIRA), Nepal Nutrition Intervention Project, Nepal Paediatric Society, Nepal Society of Obstetric and Gynaecology, Perinatal Society of Nepal, Trade Union, Media, Hellen Keller International, United Mission to Nepal, CCS Italy, British Nepal Medical Trust, Care Nepal, Plan Nepal, Institute of Medicine, Kist Medical College

Sub-National Level Civil Society

- Family Planning Association of Nepal, Nepal Technical Advisory Group, CWIN, media, trade Union

**e. Approach(es) to be adopted**

The CSO alliance will be mobilized to conduct the activities in the project

**6. Description of project**

Purpose, outcomes and expected results, including a log frame (Annex 1. attached)

**Purpose:**

To influence the development and implementation of an adequate and effective policy and programmatic response that will lead to improved nutrition outcomes.

<b>Problem:</b> Civil society organisations working on nutrition lack a coordinated approach without any cohesive networking, and lack coordinated design, implementation, monitoring and advocacy			
<b>Outcome 1:</b> To establish a strong, sustainable and inclusive civil society alliance on nutrition from all sectors by 2 <sup>nd</sup> quarter of the project			
Results	Target Groups	Allies	Outputs
<ul style="list-style-type: none"> <li>• Result 1.1: Civil society organizations mapped</li> <li>• Result 1.2: Detailed consultation with civil society organizations to identify their current role, understand their agenda in nutrition and potential role in the alliance</li> <li>• Result 1.3: Formation of the civil society alliance at national level with a detailed TOR and establishment of secretariat at National Planning Commission</li> </ul>	<ul style="list-style-type: none"> <li>• National civil society organisations working on nutrition issues</li> <li>• District CSOs and community based organisations</li> <li>• Networks</li> <li>• Government stakeholders of the Multi Sectoral Nutrition Plan</li> </ul>	<ul style="list-style-type: none"> <li>• Official donors (World Bank, DFID)</li> <li>• UN agencies (UNICEF, FAO, WFP)</li> <li>• Media</li> <li>• Private sector food industry</li> </ul>	<ul style="list-style-type: none"> <li>• A functional CSO alliance developed and executed at national and sub-national level by the end of 2nd quarter of first year.</li> <li>• Nutrition alliance joint recognized by CSO and Government Nutrition alliance secretariat office established</li> <li>• Strategy and plan of operation of alliance available</li> <li>• Resources allocated for the secretariat</li> <li>• At least 2 periodic meetings, 2 workshops and 1 review meeting initiated</li> </ul>
<b>Problem:</b> CSOs lack capacity in knowledge of government policy and plans, and in how to design, implement, monitor and advocate on nutrition issues, and in how to conduct budget analysis			
<b>Outcome 2:</b> Strengthen the capacity of the civil society to influence nutrition policy design, implementation and monitoring and to build relations with government and the donor community, by end of 2 <sup>nd</sup> year project			
Results	Target Groups	Allies	Outputs
<ul style="list-style-type: none"> <li>• Result 2.1: CSO alliance members capacitated on the Multisectoral nutritional plan of the government in order to assist them to advocate for its implementation developing evidence based Multi Sectoral nutrition plan,</li> <li>• Result 2.2: CSO alliance capacitated in monitoring the progress in implementation of Multi Sectoral Nutrition Plan</li> <li>• Result 2.3: CSO Alliance capacitated in</li> </ul>	<ul style="list-style-type: none"> <li>• National civil society organisations working on nutrition issues</li> <li>• District CSOs and community based organisations</li> <li>• Networks</li> <li>• Government stakeholders of the Multi Sectoral Nutrition Plan</li> </ul>	<ul style="list-style-type: none"> <li>• Official donors (World Bank, DFID)</li> <li>• UN agencies (UNICEF, FAO, WFP)</li> <li>• Media</li> </ul>	<ul style="list-style-type: none"> <li>• By the end of 2nd yr, CSO alliance members capacitated in developing evidence based Multisectoral nutrition plan and monitoring and budget analysis for scaling up nutrition at national and sub-national level</li> </ul>

budget analysis for scaling up nutrition at national and sub-national level			
<b>Problem:</b> The multi-Sectoral draft plan hugely neglects the presence the civil society ranging from the researchers, academia, media and journalist, human right advocates, private sectors, professional bodies, micro-credit cooperatives, farmers association and NGOs working in the field of nutrition.			
<b>Outcome 3:</b> To mobilize CSOs to advocate for and report on the response to malnutrition in Nepal, including develop proposals and recommendations to improve the response by engaging in the SUN multi-stakeholder dialogue and promoting the implementation of the existing multi-sectoral plan on nutrition			
<ul style="list-style-type: none"> <li>• Result 3.1. Engage CSOs on advocacy through evidence based research, and run media campaigns based on evidence</li> <li>• Result 3.2 Appoint a focal person to track and monitor the progress in implementation of nutrition plans including budgetary issues</li> <li>• Result 3.3 Appoint an ombudsperson to monitor donor and government commitment and accountability for nutrition is established</li> <li>• Result 3.4: Demonstrate a model of establishing the ombudsperson at Sub-district level</li> </ul>	<ul style="list-style-type: none"> <li>• National civil society organisations working on nutrition issues</li> <li>• District CSOs and community based organisations</li> <li>• Networks</li> <li>• Government stakeholders of the Multi Sectoral Nutrition Plan</li> </ul>	<ul style="list-style-type: none"> <li>• Official donors (World Bank, DFID)</li> <li>• UN agencies (UNICEF, FAO, WFP)</li> <li>• Media</li> <li>• Private sector food industry</li> </ul>	<ul style="list-style-type: none"> <li>• By the end of the project (periodically), 4 nutrition policy briefs are produced at national level incorporating the findings at the sub-national level which are reflected in policy and plans</li> <li>• At least 2 media campaigns organized by the Alliance at national and districts</li> <li>• At least 8 public hearing organized by the Alliance at national and districts</li> <li>• At least 4 monitoring and evaluation of nutrition program organized by the Alliance at national level</li> <li>• A Ombudsperson model tested at sub-district level by the end of 2nd quarter of third year</li> </ul>

## Monitoring and Evaluation plan

Detailed budget in local currency and pounds sterling Systematic monitoring and evaluation practices are built into the project at all levels of implementation to ensure that updated data is available, for example, for situation analyses and measurement of change and result indicators. An effective result-based monitoring and evaluation system will be established and implemented on a quarterly basis for monitoring of the activities, outputs and outcomes of the project. The monitoring and evaluation system will help to ensure that a) the annual work plans are being implemented according to the schedule and within the planned budget, b) the expected results of the project as specified by the indicators and targets are being achieved, c) shortcomings and challenges are identified on a timely manner to allow for immediate measures to rectify them, and d) documentation of lessons learned will be available for use in reporting. Complementary to these activities will be the review and planning meetings that will be organized at the national and district level with partners and stakeholders, and regular assessment of the initial risks and assumptions made.

Save the Children will conduct regular monitoring. Regular day-to-day monitoring work will be done by the project staff whereas periodic monitoring and follow up will be carried out by the decentralized regional offices and Sectoral technical experts from Kathmandu and SC UK. The project stakeholders including the target groups will be involved as far as possible in the monitoring and review processes. Project team will report to Save the Children on a quarterly basis, and an annual progress report will be prepared by Save the Children to the Save the Children UK as per project agreement.

In addition to the regular monitoring, an internal mid-term evaluation will be held during month 15. This would consist of on-site visits and reporting by SC internal team ending with an evaluation lessons learnt workshop feeding into the Year 2 work plan. Data collection will be done by mixed teams, including government officials and CSO members. It will increase ownership and institutionalize the approach. The lessons learned and recommendations made will be followed up through action plans and reviews, and used for creating innovation. The final external evaluation study will be conducted by external consultant.

The evaluation will take place in month 29 so project staff and stakeholders can be involved and the results and lessons learned can be disseminated in month 30 to staff, stakeholders and other interested parties for replication and future programming.

The Monitoring and Evaluation unit of Save the Children will work closely with the programme department teams to ensure that follow up is thorough and learning is disseminated throughout the organization to enhance the quality of programming. Standard guidelines and M&E plan will be developed to ensure that monitoring systems are consistent, clear and practiced by all staff and partners.

## **Management arrangements**

Management's arrangements refer to the operation of mainly the subcommittee of the Alliance. The subcommittee would have a coordinator who will be responsible for coordination of the Alliance activities. TORs for the committee and the coordinator would need to be developed. A criterion for the Membership of the Alliance also needs to be developed in consultation with some of the CSO at the beginning. Chairmanship of the alliance would be on a rotational basis and the committee will have a representation such as the nutritional focal point from the DoHS. The Committee will meet every month. Save the Children will provide support to fund the coordinator and also provide funds for office support and meeting expenses.

While it will be the CSO alliance that will take the lead on all activities of the project, SC will provide technical backstopping. Save the Children will help Create and support platforms for CSO/NSA alliance to raise nutrition issues and voices to influence policies and support effective implementation. Support will also be provided to devise and conduct effective media advocacy campaigns to disseminate policy-related HRH information with an aim to effect change and promote interaction and facilitate effective linkages between the sub-national and national level state authorities. SC will facilitate meaningful participation of CSO/NSA alliance in public health sector review and planning process at both national as well as sub-national levels.

The action will be built within the Health and Nutrition programme unit in the organizational structure of Save the Children. The management of the project will do through three distinctive categories of individuals/ teams involved in the overall execution.

1. Project Team
2. Project Advisory Team
3. Individuals/ Teams for Technical Assistance (Internal and External)

### **1. Core Project Team**

Outline of the different position and key functions for this action are as follows:

The Senior Project Coordinator will lead the project and supervise the technical personnel within the team while ensuring coordination between them. The Senior Project Coordinator will maintain linkage with the project advisory team, the technical assistance team, and the management structure of Save the Children. The personnel will be engaged in monitoring and evaluation and process documentation and internal learning of the project. Project Coordinator will coordinate and facilitate the formation of alliance, capacity building of the alliance, including dissemination and sharing of results. The Coordinator will be based in the Ministry of Health and Population and will coordinate the project activities (research, advocacy, awareness rising, and management support) at the respective districts. The Program Officer will facilitate the mobilization of national and Sub-National level CSO alliance in policy advocacy, information exchange/flow, maintaining coordination and communication, preparing and conducting advocacy campaigns and events.

## **2. Project Advisory Team**

A project advisory team will be formed for the project duration with an objective to provide oversight and steer the project. Apart from the applicant and the local partner, this will include representation from public sector authorities as well as CSO representatives. This will provide opportunity for regular dialogue and generate larger ownership of the project and its results. The team will be constituted as per the following:

1. Save the Children – Programme Implementation Director
3. CSO alliance – Representative
4. Public Sector Authorities (3) – Joint Secretary from three ministries (MoHP, MoLD, MoGA)
5. Nepal Health Research Council (NHRC) – Member Secretary
6. Save the Children – Health and Nutrition Program Manager (Coordinator of the Advisory Team)

## **3. Individuals/ Teams for Technical Assistance**

Internal teams/ individuals from Save the Children will partly be involved in managing the action. In line with the organizational structure of Save the Children, Program Director (20%) and thematic Program Manager (Health and Nutrition – 20%) will supervise the project, provide necessary backstopping support and be the link to Save the Children UK for all project matters. Reporting and donor compliance support will be from Grant Management system Senior Manager (15%) and M&E by M&E unit. Regular staff from Finance and Operations Department (Finance Coordinator – 20%) as well as Field Offices will contribute part of their time to support the project. Save the Children will also bring in global experts from its regional and home offices as necessary for technical assistance.

For the expertise not available within Save the Children, or if it is not sufficient due to time constraints, additional experts both national and international will be brought in as short term experts to provide specific technical assistance.