Decentralized Evaluation

Thematic Evaluation – End of Term Evaluation
Renewed Efforts Against Child Hunger and undernutrition

June 2014 to August 2017

Volume I – Evaluation Summary Report

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UN Network for SUN (UNN)/REACH Secretariat

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List of Acronyms

ACF  Action contre la Faim (Action Against Hunger)
ANSP  Africa Nutrition Security Partnership
AWP  Annual Work Plan
CAN  Compendium of Actions for Nutrition
CBFN  Central Board for Food and Nutrition - Myanmar
CC  Country Committee
CCS  Country Case Study
CDES  Conseil de Développement Economique et Social – Economic and Social Development Council - Haiti
CIP  Country Implementation Plan
CLM  Cellule de Lutte contre la Malnutrition (Fight against Malnutrition Unit) - Senegal
CNA  Core Nutrition Action
CNN  Conseil National de Nutrition (National Nutrition Council) - Mali
CNSAN  Conseil National de Sécurité Alimentaire et Nutritionnelle (National Food and Nutrition Security Council) - Burkina Faso
CNCN  Conseil National de Concertation en Nutrition (National Council for Nutrition Coordination) - Burkina Faso
CNSA  Coordination Nationale de la Sécurité Alimentaire (National Coordination of Food Security) - Haiti
CNSA  Conseil National de Sécurité Alimentaire (National Food Security Council) - Burkina Faso and Senegal
CO  Country Office
CREED  Cadre Stratégique pour la Relance Economique et le Développement Durable (Strategic Framework for Economic Recovery and Sustainable Development) - Mali
CRF  Common Results Framework
CSO  Civil Society Organization
CTIN  Comité Technique Intersectoriel de Nutrition (Inter-sectoral Technical Committee for Nutrition) - Mali
CTN  Comité Technique Nutrition (Technical Nutrition Committee) - Haiti
DACU  Development Assistance Coordination Unit - Myanmar
DEQAS  Decentralized Evaluation Quality Assurance System
DFATD  Canadian Foreign Affairs, Trade and Development
DHS  Demographic and Health Survey
DN  Direction de la Nutrition (Nutrition Directorate) - Burkina Faso
EDF  European Development Fund
EMMUS  Enquête Mortalité, Morbidité et Utilisation des Services (Mortality, Morbidity and Service Utilization Survey) - Haiti
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<thead>
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<th>Abbreviation</th>
<th>Full Form</th>
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<td>ET</td>
<td>Evaluation Team</td>
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<td>EU</td>
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<td>FAO</td>
<td>Food and Agriculture Organization</td>
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<td>FNS</td>
<td>Food and Nutrition Security</td>
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<td>GAC</td>
<td>Global Affairs Canada</td>
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<td>GBV</td>
<td>Gender-Based Violence</td>
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<td>GHI</td>
<td>Global Hunger Index</td>
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<td>GII</td>
<td>Gender Inequality Index</td>
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<td>Groupe Technique Sécurité Alimentaire et Nutritionnelle (Food and Nutrition Security Technical Group) - Haiti</td>
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<td>Humanitarian Country Team</td>
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<td>HDI</td>
<td>Human Development Index</td>
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<td>IFAD</td>
<td>International Fund for Agricultural Development</td>
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<td>INSD</td>
<td>Institut National de la Statistique et de la Démographie (National Institute of Statistics and Demography) – Burkina Faso</td>
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<td>MARNDR</td>
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<td>Ministère de l’Education Nationale et de l’Alphabétisation (Ministry of Basic Education and Literacy) – Burkina Faso</td>
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<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
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<td>Ministère de la Femme, de la Famille et de l’Enfance (Ministry of Women, Family and Children) - Senegal</td>
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<td>MNAPFNS</td>
<td>Myanmar National Action Plan for Food and Nutrition Security</td>
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<td>MNO</td>
<td>Multi-sectoral Nutrition Overview</td>
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<td>MOHS</td>
<td>Ministry of Health and Sports - Myanmar</td>
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<td>MOU</td>
<td>Memorandum of Understanding</td>
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<tr>
<td>MS</td>
<td>Ministère de la Santé (Ministry of Health) – Burkina Faso</td>
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<tr>
<td>MSAS</td>
<td>Ministère de la Santé et de l’Action Sociale (Ministry of Health and Social Action) - Senegal</td>
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<tr>
<td>MSLS</td>
<td>Monthly Subsistence Living Sum</td>
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Executive Summary

Introduction

1. **Subject of the evaluation.** Renewed Efforts Against Child Hunger and undernutrition (REACH) is providing support to nutrition governance in five Scaling up Nutrition (SUN) countries: Mali (since 2012), Burkina Faso, Senegal (December and October 2014), Haiti and Myanmar (January and August 2015). The assumptions of REACH revised Theory of Change (TOC) are that by achieving its four outcomes - increased awareness and consensus; strengthened national policies and programmes; increased human and institutional capacity; and increased effectiveness and accountability - REACH can contribute to the attainment of SUN Strategic Objectives and ultimately to nutrition-related Sustainable Development Goals and World Health Assembly nutrition targets. Funding is provided by Global Affairs Canada (GAC): Burkina Faso (USD 845,833), Haiti (USD 764,500), Mali (USD 1,783,699 for 2012-2017), Myanmar (USD 760,000) and Senegal (USD 925,833). Reallocation of unused funds allowed a one-year extension until the end of December 2017. The budget for each country covers the delivery of outputs; facilitators’ costs; UNN/REACH Secretariat support; and WFP administrative costs.

2. **Reasons, objectives and scope.** The Secretariat of the United Nations Network (UNN)/REACH commissioned this evaluation as per its agreement with GAC. The evaluation, which covers the period June 2014-August 2017, serves the dual purpose of accountability - assess the performance and results of REACH; and learning - determine the reasons why certain results occurred or not, draw lessons and derive good practices in and across the five countries.

3. **Stakeholders and main users.** Internal stakeholders include UNN/REACH Steering Committee (SC) and Secretariat, GAC, REACH facilitators, REACH Country Committees (CC) and UN agencies Nutrition Focal Points (NFPs). External stakeholders include the SUN Movement Secretariat, SUN Government Focal Point (SUN-FP), ministries implementing nutrition interventions, SUN Networks and other donors. The UNN/REACH SC and Secretariat will use findings to improve REACH engagements in the future.

4. **Methodology and limitations.** The evaluation was designed to assess REACH against the following criteria: effectiveness, efficiency, and sustainability. The main questions are: 1) What are REACH results in each country; 2) What are the explanatory/contributing factors explaining results; and 3) To what extent are the results achieved and the REACH operational models sustainable? The evaluation team (ET) carried out document and secondary data reviews and 142 key informant interviews with stakeholders. Difficulties were encountered in information gathering from stakeholders (high staff turnover particularly in Haiti and Myanmar); and with REACH Monitoring and Evaluation (M&E) indicators, which are not always directly linked to REACH in-country support (attribution issues). As a mitigation measure, the ET analysed REACH in-country processes and triangulated M&E data with information obtained from other sources.

Key Findings

5. A Country Case Study (CCS) report was produced for each country. The CCS findings, which are structured around the main evaluation questions and sub-questions and contain detailed information and discussion of achievements and
processes that led to them, form the basis for the preparation of the present synthesis evaluation report.

**Evaluation question 1: What are REACH results?**

6. **Effectiveness.** REACH accomplished variable levels of achievements in terms of outputs and in its progress towards its intended outcomes. There is very good progress on increased awareness and consensus (outcome 1), good progress in strengthened national policies and strategies (outcome 2), with the exception of Myanmar due to the long political transition period and change in Government (outcome 2), mixed results in increased institutional and human capacity on nutrition (outcome 3) and no progress on accountability through the establishment of mechanisms to track implementation and funding and to analyse the impact on food and nutrition security (outcome 4).

7. **Equity/gender** was addressed at design stage however the generic gender-related commitments in the Country Implementation Plans (CIPs) were not reflected in annual work plans (AWPs). REACH guidance and tools do not sufficiently tackle equity/gender, which have been variably addressed in the stocktaking activities.

8. **Efficiency.** The highest rate of budgetary execution was observed for outcome 1 in all countries. Overall under-spending was consequent to factors inherent to the sequential nature of REACH outcomes and positive factors such as cost sharing.

**Evaluation question 2: What are explanatory/contributing factors?**

9. Political instability caused stalling of work on nutrition governance during long transition periods in Haiti and Myanmar. Turnover among ministers and directors and in sector NFPs has impeded steadiness of dialogue. Recurrent natural disasters (Haiti, Myanmar) and security problems (Mali) diverted attention of Governments and partners on emergency response. Government commitment to multi-sectoral approaches was varied across countries: long-standing multi-sectoral coordination with high level anchorage and dynamic dialogue on multi-sectoral approaches already existing before REACH (Burkina Faso and Senegal) contrasting with the absence of a multi-stakeholder platform and significant difference of views on the anchorage and leadership of nutrition governance processes (Haiti). Sector ministries commitment was also mixed: whilst NFPs had been nominated by most concerned ministries in all countries prior to REACH engagement, high turnover, lack of guidance in their designation, their weak capacity and limited decision-making power have been major constraints on effective multi-sectoral collaboration.

10. As regards REACH governance, enabling factors included the quality and timeliness of UNN/REACH Secretariat support and facilitators’ networking, communication and mentoring capabilities and the quality of their contributions. Facilitators’ poor inter-personal skills were a hindrance in two countries. Although CIPs state that REACH support was based on consensual requests of REACH partner agencies, their continued support was uneven resulting partly from high staff turnover of CC members and NFPs.

**Evaluation question 3: to what extent are the results achieved and the REACH operational model sustainable?**

11. Overall outputs in CIPs have been responsive to nationally recognized gaps. Adaptation of initially planned outputs and activities to the evolving context through AWPs was essential for better alignment with national agendas and for fostering Government ownership. There is not enough hindsight to make a definitive
assessment of sustainability of REACH outputs and deliverables as many have only been recently completed or their validation is still in progress. However there are already tangible examples of uptake of REACH tools. As regards the sustainability of REACH operating model a transition plan was elaborated in the five countries by the REACH facilitators, however none proposed concrete actions for phasing-over REACH functions to the UNN.

**Overall conclusions**

12. REACH facilitation and tools have contributed to keep the momentum on nutrition, focus attention on women and children and to progress in nutrition governance although at different levels depending on the situation at baseline and evolving national realities. Assessing progress on outcomes proved difficult due to the choice of indicators as well as attribution problems, which are inherent to initiatives such as REACH which involve primarily facilitation of processes engaging several actors and are dependent on a number of factors some of which are not under the control of REACH. Achieving all four outcomes in a three-year time frame was not realistic leading the ET to question the relevance of a single standard REACH engagement framework necessarily structured around four outcomes. Some outcomes were only partially achieved: countries may require on-demand support and/or benefit from learning from other countries after the end of REACH engagement. The UNN/REACH website can contribute to capitalize on experience and disseminate knowledge and enable REACH to continue its support and capacity building remotely. Whilst due attention was given to equity at design stage, REACH guidance and M&E insufficiently address equity which has been unevenly tackled in REACH deliverables calling for better guidance for facilitators in REACH manual and tools.

13. The quality of facilitators’ communication and networking skills as well as the quality of their inputs and the support provided by the UNN/REACH Secretariat and REACH guidance and tools were enabling factors. Political and security instability and natural disasters caused delays in endorsement of REACH activities and their implementation in Haiti, Mali and Myanmar. In all five countries absence of nutrition governance responsibilities in the terms of reference of UNN NFPs, the turnover among sector NFPs, the lack of guidance in their nomination, their weak capacity and limited decision-making power not only constrained progress on activities but also posed a problem in terms of sustainability.

14. REACH contributed to catalysing/maintaining Government ownership through awareness raising and consensus building activities particularly when those involved a participatory process or were adapted to countries’ specific needs. In Haiti the absence of initial consensual buy-in for REACH support by both Government and REACH partner agencies coupled with more attention to emergency response and lack of clarity as to REACH contribution under such circumstances has compromised implementation as well as sustainability of REACH results.

**Recommendations**

15. All seven recommendations are addressed to the UNN/REACH Secretariat in consultation with REACH SC as relevant. Based on indicative information provided by the UNN/REACH Secretariat regarding their strategic priority areas for 2018, recommendations relating to design and REACH operational model (R1, R2 and R3) and information sharing (R7) should be acted upon first.

**R1 – REACH initiation and design.** Adopt a more formalized and transparent design process with clearly defined criteria and steps to ensure full endorsement and
ownership of REACH engagement by UN partner agencies and national stakeholders at inception and throughout implementation, through: a) in-depth consultations within the UN system followed by consultations with the Government at the technical and higher political decision-making levels; and b) a country visit by UNN/REACH Secretariat staff to elaborate a draft proposal to be discussed and endorsed at a workshop chaired by the SUN-FP and bringing together all relevant stakeholders.

**R2 – Country-tailored REACH support.** Adopt a flexible design of REACH engagement with a reasonable range of outcomes tailored to countries’ contexts and expressed needs, taking into account the time required to carry them out. Consider a staged-approach for REACH support: an initial phase with a more realistic range of outcomes and outputs and a second “on demand” phase subject to an appraisal of results so far achieved.

**R3 – REACH role in emergency settings.** Clarify if and how REACH can contribute to supporting and strengthening nutrition governance in emergency settings building on the results of the current reflection by the SUN Movement Secretariat on bridging the development-humanitarian divide during crises in the SUN Movement countries.

**R4 – Updating REACH guidance.** Update REACH facilitators’ manual and/or specific guidance material on REACH tools based on lessons learned and good practices. Particular attention to be given to multi-sector and multi-stakeholder tools and institutional and human capacity building; clarify areas of focus and audience taking into account/leveraging on capacity building tools of REACH partner agencies.

**R5 – REACH logframe and M&E system.** Review REACH logical framework and M&E system (choice of indicators and parameters for baseline and endline assessments) in the light of the revised REACH TOC to become more performance-based allowing corrective measures as needed, and distilling lessons learned. Consideration should be given to having country-specific logical frameworks. Budget implications: recruitment of an M&E Expert

**R6 – Equity/Gender.** Strengthen and mainstream equity (including gender equity) in REACH guidance and tools (multi-sector and multi-stakeholder stocktaking), REACH outputs (multi-sectoral nutrition policies and strategies) and M&E system.

**R7 – Knowledge sharing and capitalisation.** REACH should capitalize on experience and disseminate results through its website. The UNN/REACH website can enable countries to share experiences and learn about good practices, and enable REACH to continue its support and capacity development remotely.
1. Introduction

1. Renewed Efforts Against Child Hunger and undernutrition (REACH) is an inter-agency partnership established in 2008 by the Food and Agriculture Organization (FAO), United Nations Children’s Fund (UNICEF), World Food Programme (WFP) and World Health Organization (WHO); the International Fund for Agricultural Development (IFAD) later joined as an adviser. Initiating partners signed a Memorandum of Understanding (MOU) in December 2011 and REACH was fully operational by 2012. REACH seeks to strengthen national capacity for nutrition governance in order to achieve more coordinated multi-sectoral nutrition actions. Since 2015, the REACH partnership has been strategically re-positioned and given leadership of the Secretariat of the United Nations Network (UNN) for Scaling up Nutrition (SUN), which was formally established in 2013 to help countries accelerate their efforts to improve nutrition through coordinated, harmonised and aligned actions.¹

2. Reasons for the evaluation and scope. The UNN/REACH Secretariat commissioned this end of term evaluation of REACH in Burkina Faso, Haiti, Mali, Myanmar and Senegal as per its agreement with Global Affairs Canada (GAC), the donor funding REACH in these countries until the end of 2017. It covers the period June 2014 up to August 2017.

3. Objectives. The evaluation serves the dual purpose of: 1) accountability - assess and report on the performance and results of REACH in the five countries over the period; and 2) learning - determine the reasons why certain results occurred or not, draw lessons and derive good practices in and across the five countries (Annex 1 – Terms of Reference (TOR)).

4. Stakeholders and users. Internal stakeholders include at global level: UNN/REACH Steering Committee (SC), which is REACH Governing Body composed of the heads of nutrition in the headquarters of REACH partner agencies guiding REACH operations at global and country level; UNN/REACH Secretariat responsible for supporting country processes, developing guidance and tools, monitoring progress in countries and knowledge sharing; and GAC as the donor. At country level, internal stakeholders comprise REACH facilitators; REACH Country Committee (CC) composed of the heads of partner agencies and of IFAD where present such as in Haiti; and UN agencies Nutrition Focal Points (NFP) who constitute the UNN technical committee. External stakeholders include: SUN Movement Secretariat which helps tracking progress and sharing experiences across SUN countries; SUN Government Focal Points who are responsible for ensuring engagement of all relevant sectors in nutrition governance; Ministries (health, agriculture, social welfare, etc. as relevant) involved in nutrition policy development and in programme implementation; SUN Networks (civil society, donors, business); and other donors which may be interested in the results because of their potential to fund an extension of REACH support or fund REACH in other countries. As REACH support is more of a normative nature and so does not engage with its ultimate but indirect beneficiaries as such, they were not included as stakeholders in this evaluation.

¹ UNN for SUN. 2015. UNN for SUN Strategy 2016-2020
5. The UNN/REACH Secretariat and its UN agency partners at global and country levels will use the evaluation findings, lessons learned and recommendations to improve current and future REACH engagements.

1.1. Overview of the Evaluation Subject

6. **Type of intervention and planned outcomes.** REACH provides tailored support to government-led nutrition governance efforts through a set of analytical tools and resource materials, the deployment of neutral facilitators (one international and/or one national staff depending on the country’s context) and catalytic funding to achieve the following four outcomes and ultimately lead to improving the nutritional status of women and children (as per REACH initial Theory of Change (TOC) presented in Annex 1 of the TOR):

1) Increased awareness and consensus of stakeholders of the nutrition situation and the best strategies and priorities for improvement;
2) Strengthened national policies and programmes that operationalize and address nutrition through a multi-sectoral approach;
3) Increased human and institutional capacity on nutrition actions at all levels; and
4) Increased effectiveness and accountability of stakeholders in implementing and supporting nutrition actions. The assumptions of REACH revised TOC are that by achieving these outcomes, REACH can contribute to the attainment of the four SUN Strategic Objectives - 1) expand and sustain an enabling political environment, 2) prioritize and institutionalize effective actions that contribute to good nutrition, 3) implement effective actions aligned with common results and 4) effectively use, and significantly increase, financial resources for nutrition - and ultimately to achieve nutrition-related Sustainable Development Goals (SDG) and World Health Assembly (WHA) nutrition targets.

7. **Geographic scope and relevant dates.** Mali is among “generation 1” countries which received funding from GAC for 2012-2014 and for which an extension until 31 December 2016 was granted. The other four “Generation 2” countries received funding from GAC for 2014-2016. In 2016 GAC approved a no cost extension until 31 December 2017. The evaluation was timed so as to allow country visits to be undertaken while REACH facilitators are still in country.

8. The operational period being evaluated differs across countries, the shortest being Myanmar. In the case of Mali the same national facilitator is in place since June 2013 and the international facilitator who left in February 2015 was replaced in March 2016. As can be seen in the table, the time lag between the exploratory

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Footnotes:
- Generation 1 countries: Bangladesh, Ghana, Mali, Mozambique, Nepal, Rwanda, Uganda and the United Republic of Tanzania.
- CIDA Grant for Inter-agency REACH Initiative – Subsidiary Arrangement No. 7056863 (signed on March 2011)
- REACH Secretariat. 2015. REACH Mali Extension/Phase 2 January 1, 2016 – December 31, 2016
- GAC/WFP. Subsidiary Arrangement No. II -612 and GAC/WFP. 2016. Amendment 1 to the Subsidiary Arrangement No. II-612
mission conducted by UNN/REACH Secretariat and appointment of the international facilitator, and the lead-time for the appointment of the national facilitator range between 2 to 6 months.

Table 1: REACH engagement in Burkina Faso, Haiti, Mali, Myanmar and Senegal

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<td>Burkina Faso</td>
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*Abbreviations: X: Exploratory mission; I: start of the international facilitator; N: start of the national facilitator; Notes: 1) in Myanmar the international facilitator resigned in mid-February 2017; in Mali the first international facilitator was in place from September 2012 to February 2015 and the second one from March 2016 to July 2017; and the national facilitator from June 2013 to August 2017.*

Source: REACH Secretariat. 2017. REACH Engagement Period

9. **Key activities.** REACH engagement in countries is guided by Country Implementation Plans (CIPs). Annual work plans (AWP), prepared by the facilitators in consultation with REACH CC and approved by the UNN/REACH Secretariat, allow adjustments in activities and/or their timing relative to countries’ evolving context. **Table 2** lists the standard planned outputs and the type of support provided by REACH: as a service provider, facilitation of country-led processes and brokering (see Annex 3 of the TOR). A description of UNN/REACH Secretariat support to countries is provided in Annex 2. Country-specific outputs and deliverables are presented in Annex 3.

Table 2: REACH planned outcomes, outputs and activity categories

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Outputs</th>
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<tr>
<td>Increased awareness and consensus of stakeholders of the nutrition situation and the best strategies and priorities for improvement</td>
<td>Multi-sectoral Nutrition Overview (MNO)</td>
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<td>Stakeholder and Nutrition Action Mapping</td>
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<td>Policy and Plan Overview (PPO)</td>
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<td>Consensus on Core Nutrition Actions (CNA)</td>
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<td>Cost-Benefit Analysis/Investment Case</td>
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<td>National advocacy and communication strategy</td>
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<td>Strengthened national policies and programmes that operationalize and address nutrition through a multi-sectoral approach</td>
<td>Incorporation of nutrition in Government and UN Strategy</td>
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<td>Update of multi-sectoral national nutrition policy/strategy/action plan</td>
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<td>Costing of action plan</td>
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<td>CNA uptake in sectoral annual work plans</td>
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<td>Sub-national CNA Uptake</td>
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<td>Increased human and institutional capacity on nutrition actions at all levels</td>
<td>Capacity gap assessment and elaboration of a capacity development plan</td>
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<td></td>
<td>Strengthening of institutional and human capacity</td>
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<td>Development of guidance material and training of national staff</td>
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<td>Establishment of knowledge sharing network</td>
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<td>Increased effectiveness and accountability of stakeholders in implementing and supporting nutrition actions</td>
<td>Implementation tracking</td>
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<td>Financial tracking</td>
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<td>Coverage dashboard</td>
</tr>
<tr>
<td></td>
<td>Joint UN effectiveness</td>
</tr>
<tr>
<td></td>
<td>• UN Nutrition Inventory</td>
</tr>
<tr>
<td></td>
<td>• UN Nutrition Strategy/Acceleration</td>
</tr>
<tr>
<td></td>
<td>• UN joint programming</td>
</tr>
<tr>
<td></td>
<td>• UN Network</td>
</tr>
<tr>
<td>REACH as service provider</td>
<td>Connecting countries with specialised service providers</td>
</tr>
<tr>
<td>REACH as facilitator of the process</td>
<td>REACH as service provider</td>
</tr>
</tbody>
</table>

REACH Evaluation Report 3 | Page
10. **Equity and gender.** The ultimate beneficiaries of REACH support to nutrition governance are women and children under five years of age. Equity and gender are more particularly addressed through outcome 1 by analysing the nutritional situation and raising awareness of national stakeholders and development partners about the magnitude and causes of the different forms of malnutrition affecting women and children and outcome 2 by supporting the development of multi-sectoral strategies to address them. In addition CIPs include gender-specific commitments.

11. **Partners.** At country level, REACH facilitators work closely with NFPs of UN agencies and sector ministries, the Government SUN Focal Point (SUN-FP), and a wide range of other stakeholders, such as civil society, donors, academia and Parliamentarians.

12. **Resources.** The budget for each country covers expenditures related to: the delivery of outputs (consultants, workshops, travel, etc.); facilitators’ costs (salary, Monthly Subsistence Living Sum (MSLS), appointment travel costs, etc.); UNN/REACH Secretariat support; and WFP administrative costs. Funding approved by GAC for 2014-2016 is shown in Table 3. In the case of Mali, the budget for 2014 is covered under the first grant. From 2012–2016, Mali received USD 1,783,699 in funding broken down as follows: a first grant of USD 1,475,000 (2012–2016), plus a reallocation of unused balances totalling USD 23,699 (2012–2016); and a second grant (used from 2016) of USD 285,000. Amounts allocated for 2017 for Burkina Faso, Haiti, Myanmar and Senegal come from the balance as of 31 December 2016 remaining from their initial respective budgets supplemented with unused GAC funds from “generation one” countries. The breakdown of planned expenditures is provided in Annex 4.

**Table 3: Planned budget**

<table>
<thead>
<tr>
<th></th>
<th>Burkina Faso</th>
<th>Haiti</th>
<th>Mali</th>
<th>Myanmar</th>
<th>Senegal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initially approved budget</td>
<td>845,833</td>
<td>764,500</td>
<td>1,783,699</td>
<td>760,000</td>
<td>925,833</td>
</tr>
<tr>
<td>Budget for one year extension</td>
<td>388,000</td>
<td>255,000</td>
<td>280,200</td>
<td>223,486</td>
<td>433,068</td>
</tr>
</tbody>
</table>

Source: Countries CIP budgets

13. **Logical framework (logframe).** The REACH logframe, which was developed in 2013, includes a scoring system for indicators based on a mix of parameters (state of completion, official endorsement, etc., as relevant). It provides a scoring system which is used in the REACH baseline (data collection planned for year 0) and endline survey (end of year 2). Whilst the baseline/endline survey formats provide a common format for assessment based as much as possible on quantifiable indicators (through the scoring system), some of the indicators, particularly at outcome level lack specificity as they were deliberately selected to monitor nutrition governance in broad terms and are not always directly linked to REACH in-country support.

14. **Previous evaluation.** A strategic evaluation of REACH covering the period 2011 to 2015, was conducted in eight “generation 1” countries (including Mali). Its main conclusions and recommendations are summarized in Annex 2 of the TOR. These recommendations did not affect the design of REACH engagement in “generation

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7 REACH. 2013. REACH Logical Framework.
2" countries as UNN/REACH Secretariat exploratory missions to these countries were conducted either before or concomitantly with the 2015 strategic evaluation.

1.2. Context

15. Table 4 provides information on population estimates, overall development, gender, literacy and food security based on the Global Hunger Index (GHI). National policies and strategies are discussed under effectiveness.

Table 4: Country background information

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Burkina Faso</th>
<th>Haiti</th>
<th>Mali</th>
<th>Myanmar</th>
<th>Senegal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic indicators</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population (million) – 2016</td>
<td>18</td>
<td>10.7</td>
<td>17.6</td>
<td>51.5</td>
<td>15.3</td>
</tr>
<tr>
<td>Poverty (%&lt;USD 2)</td>
<td>43.7 (2016)</td>
<td>24.9 (2010)</td>
<td>49.3 (2009)</td>
<td>n/a</td>
<td>38.0 (2010)</td>
</tr>
<tr>
<td>Human Development Index</td>
<td>0.402</td>
<td>0.493</td>
<td>0.442</td>
<td>0.556</td>
<td>0.494</td>
</tr>
<tr>
<td>Gender Inequality Index (GII)</td>
<td>0.615</td>
<td>0.593</td>
<td>0.689</td>
<td>0.374</td>
<td>0.521</td>
</tr>
<tr>
<td>Adult literacy Male (%)</td>
<td>43</td>
<td>64.3</td>
<td>48.2</td>
<td>95.2</td>
<td>68.5</td>
</tr>
<tr>
<td>Adult literacy female (%)</td>
<td>29.3</td>
<td>57.3</td>
<td>29.2</td>
<td>91.2</td>
<td>43.8</td>
</tr>
<tr>
<td>GHI</td>
<td>Serious</td>
<td>Alarming</td>
<td>Serious</td>
<td>Serious</td>
<td>Moderate</td>
</tr>
</tbody>
</table>


16. The GAC/REACH grant agreement stipulates that countries should be selected based on the following criteria: SUN movement country, high levels of acute and chronic undernutrition, stated commitment and readiness to develop and/or implement a national nutrition strategy and country’s request for REACH support. At the time of joining SUN, Burkina Faso, Mali and Myanmar had high levels of stunting (above 30 percent according to WHO classification) whilst Burkina Faso and Mali had serious levels of wasting (between 10-14 percent).

Table 5: Nutrition situation prior to REACH engagement

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Date</th>
<th>Burkina Faso</th>
<th>Haiti</th>
<th>Mali</th>
<th>Myanmar</th>
<th>Senegal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>16.5</td>
<td>4.1</td>
<td>16.2</td>
<td>8.7</td>
<td>6.2</td>
</tr>
<tr>
<td></td>
<td>Girls</td>
<td>14.4</td>
<td>3.1</td>
<td>14.3</td>
<td>7.1</td>
<td>5.5</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>15.4</td>
<td>5.2</td>
<td>15.3</td>
<td>7.9</td>
<td>5.9</td>
</tr>
<tr>
<td>Stunting</td>
<td>Boys</td>
<td>37.4</td>
<td>23.4</td>
<td>40.7</td>
<td>36.7</td>
<td>20.3</td>
</tr>
<tr>
<td></td>
<td>Girls</td>
<td>32.8</td>
<td>20.3</td>
<td>36.2</td>
<td>33.4</td>
<td>17.0</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>35.1</td>
<td>21.9</td>
<td>38.5</td>
<td>35.1</td>
<td>18.7</td>
</tr>
</tbody>
</table>

Source: WHO database

17. Countries are assessed as being “on course” or “off course” in their progress towards WHA stunting and wasting targets based on the rate of reduction and current prevalence. In 2015, all five countries were off course for wasting and stunting targets with “some progress” achieved in stunting reduction in Burkina Faso, Haiti, Mali and Myanmar and “no progress“ in Senegal. In terms of nutrition governance (see Table 6), Myanmar scored lowest on three of four SUN strategic objectives in 2014 and Haiti scored lowest as regards aligning actions around a Common Results Framework (CRF).

Table 6: Nutrition governance situation prior to REACH engagement

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Burkina Faso</th>
<th>Haiti</th>
<th>Mali</th>
<th>Myanmar</th>
<th>Senegal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date joined SUN</td>
<td>June 2011</td>
<td>June 2012</td>
<td>March 2011</td>
<td>April 2013</td>
<td>June 2011</td>
</tr>
<tr>
<td>Nutrition governance processes: four SUN Strategic Objectives (SO) scoring in 2014 (%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SUN SO1: Shared space for action</td>
<td>59</td>
<td>50</td>
<td>59</td>
<td>33</td>
<td>64</td>
</tr>
<tr>
<td>SUN SO2: Coherent policy</td>
<td>56</td>
<td>54</td>
<td>46</td>
<td>32</td>
<td>62</td>
</tr>
</tbody>
</table>


### 1.3. Evaluation Methodology and Limitations

18. **Evaluation questions and criteria.** The evaluation focused on the three evaluation criteria retained in the TOR: effectiveness, efficiency and sustainability (relevance was not included since the UNN/REACH Secretariat considered that it was sufficiently addressed during the 2015 evaluation). Three key questions were addressed: 1) What are REACH results in each country (effectiveness, efficiency and equity/gender mainstreaming); 2) What are the explanatory/contributing factors explaining results; and 3) To what extent are the results achieved and the REACH operational model sustainable? These questions were further elaborated with sub-questions, corresponding measures/indicators, sources of information and data collection method in an evaluation matrix (Annex 5).

19. **Data collection and analysis methods.** The principal data collection approaches included: semi-structured key informants interviews (142 interviewees in total) with internal and external stakeholders (Annex 6 - List of people interviewed) and document review (Annex 7 - Bibliography). The use of these different methods of data collection allowed the triangulation of information and opinions obtained through interviews with facts and findings retrieved from documents (for example mission reports) and REACH Monitoring and Evaluation (M&E) system (financial tracking, deliverables annual progress reports, baseline and endline data). Debriefing sessions, which were held at the end of each country visit to obtain feedback from stakeholders on preliminary findings, also provided an opportunity for triangulation of information.

20. Concerning the quality of data and information, the Evaluation Team (ET) systematically checked accuracy, consistency and validity of REACH M&E data and information; limitations/caveats in drawing conclusions using the data are briefly described in paragraph 26 and more amply discussed in the findings chapter. On the whole, no discrepancies were found between REACH M&E endline assessments and other REACH documents such as annual progress reports. Interviews with UNN/REACH Secretariat staff and in-country internal and external stakeholders helped nuance some of the endline assessments in terms of timeliness of a deliverable, its added value or quality. Not all indicators, in particular at the outcome level indicators, allow establishing a causal relationship between REACH inputs and the anticipated change.

21. A Country Case Study (CCS) report was produced for each country using the Decentralized Evaluation Quality Assurance System (DEQAS) evaluation report template to facilitate comparison across countries in terms of implementation status of planned activities and progress made towards the four REACH outcomes. ET members revised draft CCS reports based on comments received from UNN/REACH Secretariat staff (the Evaluation Manager (EM), REACH Deputy Global Coordinator and M&E consultant) and country-level stakeholders (see paragraph 24). The CCS findings, which are structured around the main evaluation questions and sub-questions and contain detailed information and discussion of achievements and processes that led to them, form the basis for the preparation of the present synthesis evaluation report. More details on the methodology are presented in Annex 8.
22. Gender mainstreaming. The ET investigated if and how planned gender-specific activities were undertaken and if data were gender disaggregated where relevant. In addition the ET probed stakeholders’ perceptions about REACH actual/potential contribution to equity/gender needs and gaps.

23. Team composition and evaluation timeline. The ET is composed of two experts (team leader and regional consultant) with extensive professional experience in evaluation, bringing together a complementary combination of technical expertise in nutrition governance issues, good knowledge of equity/gender and familiarity with the countries being evaluated. Country visits started with Senegal (May 29-June 7) by both team members, followed by individual visits: Mali (June 12-20) and Burkina Faso (June 28-July 6) by the regional consultant; and Haiti (June 27-July 6) and Myanmar (July 24-August 3) by the team leader. In Myanmar a national consultant was recruited to assist the evaluator during the visit to Nay Pyi Taw (NPT) to interview national stakeholders.11

24. Quality assurance. The ET strictly followed DEQAS guidance (steps and reporting templates), which is based on the United Nations Evaluation Group (UNEG) norms and standards and good practice. CCS reports were to be reviewed by the EM. Though not foreseen in the TOR, REACH CC and facilitators, UN NFPs, the SUN-FP and the Canadian Embassy were given the opportunity to comment on the respective CCS reports, which were revised by the ET accordingly.

25. Ethical considerations. Before starting an interview, team members clarified their independent status with regard to UNN/REACH, that reports will respect confidentiality (no direct quotes of interviewees’ opinions), and that interview notes will be accessible only to team members.

26. Limitations. Main problems pertained to: information gathering from stakeholders; indicators of REACH M&E system (attribution issues); and comparability between countries. With regard to the first point: recently appointed Government and UN staff had limited breadth of knowledge about REACH objectives, modalities and progress in implementation; a problem encountered in all countries but more particularly in Haiti and Mali (high staff turnover among UN staff due to safety and security risks as well as among national staff due to changes in Government), and in Myanmar (mostly among national staff due to changes in Government). Skype interviews with previous UN staff were not done (with the exception of the international facilitator in Myanmar) as in the majority of cases the period of their interaction with REACH was too short. Regarding the REACH M&E system, many outcome indicators are not directly linked to REACH in-country support but have been deliberately chosen by REACH to monitor progress in nutrition governance in global terms and hence the difficulty of assessing REACH contribution. As a mitigation measure, the ET documented and analysed REACH in-country processes to achieve outcomes and systematically cross-checked REACH endline assessments with stakeholders’ views reporting divergent views if any. Comparability between countries was constrained by the different budget structure of Mali, and the large differences in the duration of REACH support in “generation 2” countries (just over 24 months in Myanmar and up to 35 months in Senegal). In terms of budgetary analysis it was difficult to draw

11 Mr Tin Aung Cho Independent consultant for moderating meetings between Government and foreign delegations
the line at May 2014 for Mali (some expenditures in the second half of the year relating to activities initiated earlier).

2. Evaluation Findings

27. The evaluation findings and the evidence to substantiate them are structured around each evaluation question in turn. More detailed findings can be found in the CCS reports, which are summarized in Annex 9.

2.1. What are REACH Results?

2.1.1 Effectiveness

28. The evaluation assessed performance against targets set in CIPs and AWPs, drawing on REACH M&E endline data and CCS findings. This section is organized along REACH four outcomes.

Outcome 1 - increased awareness of the causes of malnutrition and potential solutions.

29. The assumption behind this outcome is that more sectors and actors and stronger commitment to nutrition by national stakeholders and development partners can be achieved by increasing their awareness and understanding of: the magnitude and complexity of the causes of the different forms of malnutrition in the country; the extent to which these problems are acknowledged in existing policies; and if and where priority nutritional problems and their root causes are being addressed through operational programmes. To this end REACH developed a set of multi-sector and multi-stakeholder stocktaking tools (see description of deliverables in Annex 2) and guidance for developing a national advocacy and communication strategy to keep nutrition on the agenda of decision-makers, fuel engagement of all relevant stakeholders and mobilize resources. There was overall good progress in implementation of planned outputs.

Multi-sector and multi-stakeholder stocktaking

30. Multi-Sectoral Nutrition Overview (MNO) and Situation Analysis Dashboard were completed in the five countries. In Burkina Faso regional-level dashboards were also produced. Different elaboration processes were adopted: a first draft produced by the UNN/REACH Secretariat and then regularly updated by the facilitators in Burkina Faso; the MNO was supported by a consultant in Myanmar, an intern in Senegal; and by the international facilitator and the FAO NFP in Haiti. The UNN/REACH Secretariat provided support (comments and verification of data) throughout the process. Knowledge transfer to national staff and dissemination were highest in Burkina Faso through participatory updates of the document and its sharing during multi-stakeholders meetings and in Myanmar where the elaboration process of all the stocktaking elements was all along participatory through frequent government-led multi-stakeholder consultative and drafting meetings.

31. Consensus on Core Nutrition Actions (CNA) was achieved in four countries by bringing together stakeholders - coordination entities, sector ministries, UN agencies, donors and NGOs - to prioritize nutrition interventions drawing from the findings of the MNO and international evidence of proven nutritional impact and feasibility. The entry point for discussion on CNAs was the Scaling Up Nutrition Planning and Monitoring Tool (SUNPMT) in Burkina Faso, Mali and Senegal and
in Myanmar as part of the prioritisation of targets and indicators for the Myanmar National Action Plan for Food and Nutrition Security (MNAPFNS 2016-2025). In Burkina Faso, the SUNPMT proved useful in reducing the list of 45 high-impact interventions drawn in 2014 to 29, and in Mali from 170 interventions of the Plan d’Action Multisectoriel de Nutrition (PAMN, Multi-sectoral Nutrition Action Plan 2014-2018) to 23. Whilst REACH M&E rating for Senegal shows a satisfactory upward trend, the ET’s assessment is that REACH was only partially successful as the CNA list was not used as a basis for prioritizing interventions when elaborating the Plan Stratégique Multisectoriel de la Nutrition (PSMN, Multi-sectoral Nutrition Strategic Plan) for which the Cellule de Lutte contre la Malnutrition (CLM, Fight against Malnutrition Unit) chose to develop a manual (Référentiel Technique - Technical Reference Document) which includes a larger number of sector-based interventions. This points to the need for reaching a common understanding about the purpose/endorsement of REACH proposed activities at design stage.

Table 7: REACH endline assessment: Outcome 1 - Increased awareness of the causes of malnutrition and potential solutions

<table>
<thead>
<tr>
<th>Outputs and outcome indicators</th>
<th>Burkina Faso</th>
<th>Haiti</th>
<th>Mali</th>
<th>Myanmar</th>
<th>Senegal</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outputs</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1 Stocktaking Exercise</td>
<td>1.1a MNO</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
</tr>
<tr>
<td>completed</td>
<td>1.1b SUNPMT</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
</tr>
<tr>
<td>1.2 CNAs Consensus</td>
<td>1.2 CNAs selected</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
</tr>
<tr>
<td>1.3 Investment Case</td>
<td>1.3 Analysis done</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
</tr>
<tr>
<td>1.4 Joint Nutrition Advocacy</td>
<td>1.4a JNAS done</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
</tr>
<tr>
<td>Strategy (JNAS)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Outcome</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage of top 5 stakeholders, supporting/implementing nutrition actions</td>
<td>NGOs</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
</tr>
<tr>
<td></td>
<td>Donors</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
</tr>
<tr>
<td></td>
<td>Ministries</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
</tr>
<tr>
<td></td>
<td>UN Agencies</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
<td>🟢</td>
</tr>
<tr>
<td>Colour coding</td>
<td>Urgent problem urgent action needed</td>
<td>Requiring action</td>
<td>Satisfactory</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1a: green (Completed); yellow (On-going); red (Not done)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1b: green (Completed (&lt;12 months old) &amp; disseminated); yellow (Completed and current or &gt; 1 year old); red (Incomplete)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.2: green (yes); red (no)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.3: green (Completed &amp; Disseminated); yellow (Completed); red (Not Completed)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.4a: green (Completed &amp; adopted by Government); yellow (Completed); red (Not Completed)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outcome: green (80-100%); yellow (40-60%); red (0-20%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: REACH endline data completed between March and June 2017

32. The use of the **Policy and Plan Overview (PPO)** in Burkina Faso stands out compared to the other three countries where it was conducted as the facilitators adapted the template (more clearly defined criteria) and expanded its coverage to include analysis of local development plans. The Conseil National de Concertation en Nutrition (CNCN, National Council for Nutrition Coordination) recommended using the tool as a basis for developing municipal plans and NGO programmes. To this end, consultations are ongoing and the preparation of a guide is foreseen. In contrast, reservations were voiced in Mali regarding the usefulness of the PPO in informing future policy revisions. In Myanmar the stakeholders’ perceptions were mixed; some finding the PPO not helpful as a basis for guiding upcoming revisions of their policies, and others such as sector ministries reporting that it at least raised their awareness of the need to integrate nutrition into their policies. In Senegal, the PPO was produced as foreseen in the CIP but not submitted to CLM because its
rating system was judged to have little added value in the revision of sector policies, their updating having been already initiated based on other parameters. This exemplifies the need for REACH deliverables to be more demand-driven.

33. **Stakeholder and Nutrition Action Mapping using the SUNPMT** was completed but not yet validated in Myanmar; not finalized in Mali due to data reliability issues; validated in Senegal and Burkina Faso through a workshop and a hard copy version produced to disseminate results in Burkina Faso. In Haiti discussions are ongoing with the health and agriculture sectors to test the mapping tool. In the other four countries a four-staged process (preparatory phase, data collection, data analysis and data interpretation) extending over a 5 to 7 month period was followed with a few differences among countries. Training of participants was provided through workshops and/or individual coaching by the UNN/REACH Secretariat staff and facilitators or a consultant. Although there were difficulties in using the SUNPMT (poor quality of existing information systems; need for more quality control mechanism in data collection and interpretation), the mapping was appreciated in all four countries as it shed light on the diversity of nutrition actions and actors and on the gaps that need to be addressed; it was perceived as a decision-making tool particularly in Senegal where CLM requested REACH support for integration of the SUNPMT into an on-line platform to monitor implementation of the PSMN; REACH support for the training of trainers and collection of baseline data is included in REACH 2017 AWP. In Burkina Faso, SUNPMT results fed into the preparation of the PSMN whilst in Senegal, SUNPMT results were only partially useful for the elaboration of the PSMN because the mapping was based on a smaller number of CNAs than those of the PSMN. The sequencing and linkages between the various deliverables was most evident in Myanmar where the stocktaking deliverables were elaborated and discussed as a package and REACH plans to publish key results of all nutrition stocktaking deliverables into one booklet.

**Investment case/Cost-benefit analysis**

34. In Burkina Faso and Haiti, REACH facilitators contributed to the dissemination of Cost of Hunger studies recommendations through REACH stocktaking deliverables, meetings with parliamentarians and in advocacy documents. In Mali, REACH was a member of the technical committee and participated in the training workshop for national teams, ensuring that the multi-sectoral dimension is integrated into the study. In Senegal, REACH facilitators have been involved in the World Bank series of studies, which include an economic analysis of nutrition.

**National advocacy and communication strategy**

35. A national advocacy and communication strategy was developed and validated in Burkina Faso and Senegal under Government leadership through a consultative process that contributed to a high degree of ownership among stakeholders. In Mali, a Communication Plan linked to the *Plan d’Action Multisectoriel de Nutrition* (PAMN, Multi-sectoral Nutrition Action Plan) was produced and validated. REACH supported its dissemination through meetings with donors and parliamentarians. In Haiti and Myanmar alternative advocacy activities were undertaken. In Haiti, where a strategy had already been developed in 2014 with FANTA’s support under the Ministry of Public Health and Population leadership, REACH advocacy activities have included radio broadcasts, newspaper inserts, television broadcasts, meetings with mayors and journalists, and a booklet on the
links between nutrition and different sectors. The latter, which was developed by adapting the Compendium of Actions for Nutrition (CAN) tool to Haiti's context, has served the dual purpose of advocacy and visibility and was well appreciated by all interviewed stakeholders. In Myanmar, short and very opportune nutrition advocacy briefs were prepared to raise awareness among the transition Government and the new leadership about nutrition. In partnership with donors, REACH facilitators participated in organizing the first National Coordination Meeting on Nutrition in Myanmar chaired by the State Counsellor. Strengthening advocacy for nutrition at all levels through the development of a comprehensive advocacy strategy is amongst the priorities retained for 2017 in REACH transition plan for Myanmar.

36. **Progress made towards outcome 1** is assessed in the REACH M&E system based on changes in the numbers of stakeholders supporting or implementing nutrition, the assumption being that commitment of stakeholders to support nutrition actions is a direct result of increased awareness and consensus on nutritional problems and how to address them. Information for the outcome indicator was to be obtained from listings of stakeholders with their financial contributions and an awareness survey, which proved difficult to implement (REACH cited reasons are political sensitivities and survey fatigue). Information presented in the baseline/endline M&E forms seems to be of a less factual and more qualitative nature. Moreover the lag time between completion of the various deliverables (in particular the advocacy strategy which targets decision-makers and a wide range of stakeholders) and the endline data assessment is too short to bring about a significant change. Notwithstanding these reservations about the indicator and the difficulties in attributing changes in stakeholders’ commitment to REACH deliverables, the majority of stakeholders in the five countries noted that REACH participatory processes, in particular SUNPMT, were equally as important as the deliverables as they raised awareness about and acted as advocacy for nutrition as a multi-sectoral issue. The 2015 REACH evaluation also concluded that multi-sector and multi-stakeholder approaches have brought about increased awareness of nutrition and that REACH played a role in this, and found only limited evidence that stakeholders’ commitment was a direct result of this increased awareness of and consensus on nutrition problems.

**Outcome 2 - Strengthened national policies and programmes**

37. For this outcome the role of REACH is to shadow Government-led or UN-led policy and strategy development. Progress varied across countries, as the elaboration processes or the pace at which various documents are completed and validated are not under the control of REACH. In all countries, REACH facilitators were reactive in seizing opportunities for facilitating and contributing to the review, development or dissemination of UN and national policy and strategies. There were however limited opportunities for REACH contribution to CNA uptake in sectoral AWPs and sub-national planning.

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13 CAN includes matrices of potential multi-sectoral nutrition actions (both nutrition-specific and nutrition-sensitive actions), classified by the type of evidence available for them, as well as accompanying narratives and bibliographies.

14 REACH Myanmar. 2017. REACH MYANMAR: Transition and Sustainability Plan
Integration of nutrition in Government development strategies

38. REACH facilitators participated in the elaboration of various documents being developed by drafting proposals and carrying out lobbying activities with drafting committees. Haiti is an example of REACH contributions going beyond Government and UN development frameworks: REACH facilitators contributed to the formulation of the 11th European Development Fund (EDF) advocating for better integration of nutrition interventions within the Food and Nutrition Security (FNS) component.

Integration of nutrition in UN development strategies

39. REACH facilitators contributed to the development of new/review and extension of on-going UN development frameworks in all countries through their participation in planning/priority setting workshops and drafting sections and/or reviewing drafts being circulated for comments. Nutrition prominently features in all five documents; in the Mali UNDAF specific reference is made to the need for pursuing multi-sectoral approaches to tackle malnutrition with REACH support.

Table 8: REACH endline assessment: Outcome 2 - Strengthened national policies and programmes

<table>
<thead>
<tr>
<th>Outputs and outcome indicators</th>
<th>Burkina Faso</th>
<th>Haiti</th>
<th>Mali</th>
<th>Myanmar</th>
<th>Senegal</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outputs</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.1 Nutrition in Government and UN Strategy</td>
<td>2.1a Nutrition in Government Strategy</td>
<td>↗</td>
<td>→</td>
<td>→</td>
<td>→</td>
</tr>
<tr>
<td></td>
<td>2.1b Nutrition in UNDAF</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>↗</td>
</tr>
<tr>
<td>2.2 Multi-sector National Nutrition Action Plan reviewed and updated</td>
<td>Measured under Outcome 2 Indicator 2B</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.3 CNAs included in ministries AWPs</td>
<td>2.3a Number of sectors</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.3b Percentage of CNAs</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>2.4 Integration of CNAs into relevant sub-national development plans</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Outcome</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2A State of policy (aggregate numeric score)</td>
<td>↗</td>
<td>↘</td>
<td>↗</td>
<td>→</td>
<td>↗</td>
</tr>
<tr>
<td>2B State of action plan (aggregate numeric score)</td>
<td>↗</td>
<td>→</td>
<td>↗</td>
<td>↗</td>
<td>↗</td>
</tr>
<tr>
<td>Colour coding</td>
<td>Urgent problem urgent action needed</td>
<td>Requiring action</td>
<td>Satisfactory</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.1a and 2.1b green (yes); red (no)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.3a: green (≥ 3 sectors); yellow (2 sectors); red (0 or 1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.3b: green (≥ 75%); yellow (50-74%); red (0-49%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.4: green (≥ 50%); yellow (20-49%); red (0-19%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2A: green (Policy developed, officially endorsed, updated in the last 5 years)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2B: green (Plan endorsed by government, devised/updated in the last 5 years, involves 4 or more sectors, costed, has an M&amp;E framework)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: REACH endline data completed between March and June 2017

Review/update of multi-sector national nutrition policy/strategy/action plan

40. REACH participated in the review of existing documents or the elaboration of new ones in the five countries: the policy and strategy have been validated and endorsed by Government in Mali and Senegal; technical validation was completed and official endorsement is in progress (Burkina Faso); and the drafting process has been re-launched by the respective new Governments in Haiti and Myanmar. As will be more amply discussed under evaluation question 2, several factors have affected the pace at which documents are drafted and their state of completion and
validation, particularly in Haiti and Myanmar. REACH support was multiform: participation in/facilitation of consultative and drafting working sessions; consolidation of UN comments; and substantive contributions to the documents being drafted. In Mali REACH supported the elaboration and dissemination of the documents (nutrition policy, strategy and communication plan) at the regional level by organizing a series of 2-day missions in regions. In the case of Myanmar, where the launch of the MNAPFNS initiated by FAO in response to the Zero Hunger Challenge (ZHC) caused dissensions between ministries and development partners who deplored the proliferation of governance-related efforts that UN agencies were supporting or leading, many stakeholders expressed their appreciation of REACH convening power to discuss and resolve conflicts. The quality of REACH facilitators’ contributions and their ability in mobilizing multiple sectors, easing frustrations and tensions, which are inherent to processes involving a wide range of stakeholders, was frequently praised.

CNA uptake in sectoral annual work plans

41. There were no opportunities for REACH to contribute to sectoral annual plans due to the fact that multi-sectoral nutrition plans, which should guide sectoral planning, are either not yet finalized or have been only recently validated. REACH contributed to creating the basis for future sectoral CNA uptake by raising awareness of sector NFPs. However, converting knowledge into practice will depend on the hierarchical positions/decision-making power of sectoral NFPs within their respective ministries and the extent to which the development of sectoral plans is indeed guided by multi-sectoral nutrition plans.

Sub-national CNA Uptake

42. REACH aims to support scaling up of nutrition interventions by facilitating the integration of CNAs into sub-national development plans. As mentioned under paragraph 32, in Burkina Faso the PPO was used for the analysis of municipal development plans. This is a good example of how REACH can support sub-national planning. However the role of REACH in countries such as Haiti where the development of strategies follows a "bottom-up" approach (municipal, departmental and then national level) merits reflection.

43. Progress made towards outcome 2: as shown in Table 8 outcome targets were reached in Burkina Faso, Mali and Senegal, partially reached in Haiti and not reached in Myanmar. This may however improve in the remaining period of REACH engagement in Myanmar as the new Government has requested stakeholders to review the MNAPFNS and the National Plan of Action for Food and Nutrition in order to develop and cost a new national multi-sectoral nutrition action plan and requested REACH to continue its support to this process.

Outcome 3 - Increased human and institutional capacity

44. The premise behind this outcome is that translating planning (under outcome 2) into implementation requires the consolidation/formalisation of an overall multi-sectoral consultative mechanism and of SUN Networks (with REACH as facilitator of the process) and building national capacities with regards to coordination, planning, budgeting and M&E with REACH - as a service provider – undertaking a nutrition capacity assessment and subsequently facilitating the development of
guidance material and the delivery of relevant training at national and sub-national levels. As shown in Table 9 very few outputs were achieved and hence little progress was made towards the pursued outcome.

Table 9: REACH endline assessment: Outcome 3 - Increased human and institutional capacity

<table>
<thead>
<tr>
<th>Outcome/outputs and indicators</th>
<th>Burkina Faso</th>
<th>Haiti</th>
<th>Mali</th>
<th>Myanmar</th>
<th>Senegal</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outputs</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.1 Functional and technical capacity gaps identified and plans established to address needs 3.1a: Capacity Gap Analysis</td>
<td>Functional → n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>3.1b: Roadmap/resource mobilization plan for capacity building (functional)</td>
<td>Total technical (average) →</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>3.2 Human capital allocated and institutions in place for nutrition coordination and for nutrition scale-up 3.2a: Human Capital (technical)</td>
<td>Total national (average) →</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>3.2b: Human Capital (functional)</td>
<td>National → n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>3.3 Governance, management nutrition-related training for ministries, regions and districts 3.3a: Training guidance for government staff developed and delivered</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>3.3b: Community-Based Nutrition</td>
<td>Sub-National → n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>3.3c: Nutrition M&amp;E Training</td>
<td>National → n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td><strong>Outcome</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3A Implementation of CNAs: Capacity of delivery channels to roll out nutrition actions - Coverage indicators</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>3B Capacity of high level National Coordination Mechanism to govern/manage implementation of the national nutrition plan</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>→</td>
</tr>
<tr>
<td>Colour coding</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urgent problem urgent action needed</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>→</td>
</tr>
<tr>
<td>Satisfactory</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Requirement</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Source: REACH endline data completed between March and June 2017

**Coordination mechanism: overall consultative framework**

45. The need for REACH support and the type of support provided were different across countries based on their respective situations at baseline, ranging from no support required (Senegal) up to the creation of a Coordination Cell with REACH financial support for its functioning (Mali). CCS findings indicate that REACH was able to adapt its support to very different countries’ circumstances. Even though REACH efforts did not always lead to the “creation of an overall consultative framework” as planned in the CIPs, REACH facilitators were able to contribute to improving multi-sectoral/multi-stakeholder coordination (convening and moderating meetings, preparing and sharing meetings reports) and played a role in mobilising stakeholders to participate.

46. In Myanmar REACH proposed a coordination structure based on existing mechanisms, which was in included in the draft nutrition action plan (MNAPFNS),
but not yet acted upon by the new Government. The existence of separate nutrition and food security coordination entities was a common feature in Burkina Faso, Haiti, Mali and Senegal. The establishment of an overall consultative framework was not proposed in Senegal as both entities were anchored in the Office of the Prime Minister and were operational and collaborating. In contrast, the nutrition and food security entities in Haiti were not fully operational and the majority of stakeholders felt that establishing a platform bringing them together was necessary. However various attempts made bilaterally or jointly by agencies and donors failed mainly due to the unwillingness on the part of the nutrition unit to interact and join efforts. Consequently the REACH CC decided that facilitators would provide support to both entities. In Burkina Faso REACH facilitated negotiations, consensus building and advocacy activities that ultimately led to the creation of a Food Security and Nutrition Secretariat. In Mali REACH was instrumental in setting up a Coordination Cell (approved by decree). UN agencies provided office and logistics equipment and REACH has been paying the salaries of two staff, a salary supplement to the other Cell staff and is supporting capacity building through learning by doing.

Coordination mechanism: SUN networks

47. As part of SUN processes, non-state actors such as the UN Agencies, donors, civil society organisations and businesses are encouraged to organise themselves in networks with convening and coordinating functions in order to better align their strategies, programmes and resources with the countries’ multi-sectoral nutrition plans. At baseline, some of these networks were already set up and operational such as the Civil Society Network in Burkina Faso, Mali, Myanmar and Senegal where REACH facilitators have promoted their participation in the stocktaking activities (under outcome 1) and various consultation meetings (under outcome 2). For networks not yet in place, REACH facilitators played their expected advocacy and facilitation roles through information sharing workshops (for example with academia and parliamentarians in Burkina Faso), meetings (with civil society and donors such as in Haiti) and inter-country conference calls (see paragraph 51). However their formal establishment rests on the collective will of Governments and the concerned actors. For instance, in Haiti civil society’s willingness to establish a network was not supported by the SUN FP and in Senegal, CLM chose to defer the establishment of a SUN business network. In other countries the process is ongoing (such as the donors and academic networks in Burkina Faso) and in others successfully completed (parliamentarians and business networks set up in Burkina Faso and Mali). Several stakeholders welcomed the establishment of parliamentarian networks for which REACH was instrumental through cross-country knowledge sharing and by steering a country-driven process.

Capacity gap assessment

48. This output was not retained in Haiti where the EU had recently conducted a capacity analysis, and in Myanmar where the focus of the Government and REACH was on advocacy and stocktaking. It was delayed in Burkina Faso awaiting finalisation of the PSMN (work just started in August 2017) and in Mali because of delays in setting up the Coordination Cell. In Senegal, REACH support was found to be complementary to the World Bank’s analysis of institutional performance of the nutrition sector. A technical committee (UNICEF, World Bank, REACH, CLM) was thus set up to steer the study for which a consultant was recruited. The plan, which was validated by CLM, will be integrated into the PSMN. This is a good
example of complementarity between agencies and of sustainability as it was done under national leadership and integrated into the national plan.

**Development of guidance material and training of national staff**

49. Information provided in the endline data of the five countries is not exhaustive; few examples of existing training manuals and training sessions conducted by UN agencies or other stakeholders as part of their support to a sector ministry or to a nutrition project are listed with no information on whether REACH played a role, and if so in what way. One exception is Burkina Faso where participation of sector NFPs in the REACH-facilitated CRF planning workshops is given as an example of informal training facilitated by REACH. During interviews many unprompted statements from sector NFPs imply that their participation in stocktaking activities and policy/strategy development processes contributed to knowledge transfer. The previous REACH evaluation mission had noted: “There was no clear agreement among global stakeholders regarding whether REACH should focus purely on mobilizing partners to provide technical inputs or play a direct role in addressing capacity gaps.”

17 ET discussions both at country level and with the UNN/REACH Secretariat staff corroborate this lack of clarity and hence the need for the Secretariat to critically think through the role that REACH can realistically play in addressing capacity gaps, and review its guidance and M&E indicators accordingly.

**Establishment of knowledge-sharing networks**

50. There is no indicator for this output in the REACH M&E system. Interviews and countries’ progress reports show that facilitators, with the support of the UNN/REACH Secretariat, have seized and created opportunities for exchange of experiences and best practices within and between countries. Participants in the various knowledge sharing activities found them useful and many national stakeholders expressed the need for more knowledge exchange and learning opportunities. Support was provided to Government delegations for attending regional or international events with one or both facilitators assisting them in preparing background material and presentations (for example a Burkina Faso delegation at a workshop on Public Financing for Nutrition in Nairobi; a Malian delegation at a conference on the integration of nutrition into social protection programmes in Tanzania; a Myanmar delegation at a SUN/UNICEF workshop on Public Financing for Nutrition in Bangkok). Facilitators have helped organize/participated in in-country nutrition events such as moderating panel discussions during the francophone West Africa launch of the Global Nutrition Report in Ouagadougou; and organizing together with other stakeholders national high-level events. Examples include: a National FNS Forum in Mali, the first National Coordination Meeting on Nutrition in Myanmar, and an awareness raising day *Tous Unis pour la Nutrition* (All United for Nutrition) in Senegal. In addition to the valuable knowledge exchange, these events fostered coherence among nutrition stakeholders.

51. Knowledge sharing between countries included: conference calls on various topics such as REACH tools or SUN networks (for example the REACH teams in Burkina Faso and Chad facilitated a virtual cross-country exchange between Parliamentarian Networks); and country visits (for example the Mali REACH

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17 Mokoro 2015. (page 26)
18 REACH Deliverables Progress Reports of Burkina Faso, Haiti, Mali, Myanmar and Senegal
international facilitator supporting the Burkina Faso team in organizing a UNN Strategy/Agenda development workshop). Examples of wider knowledge sharing include: an article on SUNPMT for its publication in a scientific journal in Burkina Faso and in Myanmar facilitators contributed to the design and content of the FNS page of the UN Myanmar country website.  

52. **Progress made towards outcome 3** is assessed in REACH M&E through two indicators: coverage indicators relating to 13 CNAs for which data are extracted from national surveys on the assumption that coverage indicators reflect improved implementation capacity; and the capacity of a high level national coordination mechanism (see Table 9). In Burkina Faso, comparisons could only be drawn for two indicators as for the others either no new data were available or different data sources were used. In Haiti, there was either no new data or different data sources were used (for 2 indicators). In Mali, there was no new data except for one indicator. No data available or no comparison could be made because of differences in indicators’ measurements in Myanmar, and in Senegal data were available for ten indicators. The ET notes that in addition to data availability and comparability constraints, the time lag between baseline and endline data collections is too short to observe changes in CNA coverage, let alone difficulties of attributing changes if any to REACH support.

53. As to the second outcome indicator, the situation was found to be unsatisfactory in Haiti and Myanmar and satisfactory in Burkina Faso, Mali and Senegal. However REACH assessments regarding Mali need to be nuanced: anchorage of the Coordination Cell, sustainability of its staffing and its capacity to oversee implementation of the PAMN are still problematic.

**Outcome 4 - Increased effectiveness and accountability**

54. This outcome encompasses two separate groups of activities: 1) support to “effectiveness and accountability” through the establishment or operationalization of a multi-sectoral M&E framework to track the implementation, funding and impact of the national nutrition action plan (completed under outcome 2) and/or the strengthening of surveillance systems already existing within various sectors; and 2) support to “joint UN effectiveness”, through the establishment and functioning of UNN and the development of a UN nutrition strategy/agenda to ensure harmonization of UN agencies actions and their alignment with national priorities and plans. As shown in Table 10, whilst good progress was achieved under joint UN effectiveness, much work remains to be done in terms of effectiveness and accountability.

**Implementation tracking**

55. Slow progress in outcome 2 has evidently undermined achievements for this output. It was rightly not retained in the 2017 AWPs in Haiti and Myanmar where elaboration of nutrition action plans is still in progress. In Mali REACH facilitators’ efforts to support the establishment of a national evaluation platform, were hampered by the absence of a national counterpart (the Coordination Cell had not yet been established); but REACH supported the mid-term review of the PAMN, which yielded very useful information. In Burkina Faso, discussions on the PSMN M&E system have just begun, and tangible actions are forthcoming with a recent EU proposal for the establishment of a multi-sector information platform. In

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20 http://mm.one.un.org/content/unct/myanmar/en/home/what-we-do/reach--food-and-nutrition.html
Senegal, the development of an online M&E platform, which will incorporate the SUNPMT for monitoring the coverage of interventions, is also just starting (a budget of USD 43,000 is planned for 2017 for capacity building on the use of SUNPMT).

**Accountability**

56. Coverage dashboards with indicators on nutritional impact, underlying causes and root causes were completed as part of the mapping activity.

**Table 10: REACH endline assessment: Outcome 4 – Increased effectiveness and accountability**

<table>
<thead>
<tr>
<th>Outcome/outputs and indicators</th>
<th>Burkina Faso</th>
<th>Haiti</th>
<th>Mali</th>
<th>Myanmar</th>
<th>Senegal</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1 Effectiveness 4.1a Coverage Dashboard</td>
<td>✅</td>
<td>✅</td>
<td>✅</td>
<td>✅</td>
<td>✅</td>
</tr>
<tr>
<td>4.1b Governance in NIS</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>→</td>
</tr>
<tr>
<td>4.1c Nutrition in NIS</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>→</td>
</tr>
<tr>
<td>4.2 Accountability 4.2 Output results regularly disseminated</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>→</td>
</tr>
<tr>
<td>4.3 Joint UN Effectiveness 4.3a Joint UN programmes</td>
<td>✅</td>
<td>✅</td>
<td>→</td>
<td>→</td>
<td>→</td>
</tr>
<tr>
<td>4.3b UN In-country Focal Points</td>
<td>✅</td>
<td>✅</td>
<td>✅</td>
<td>✅</td>
<td>✅</td>
</tr>
<tr>
<td>4.3c UN Coordination</td>
<td>✅</td>
<td>✅</td>
<td>→</td>
<td>→</td>
<td>→</td>
</tr>
<tr>
<td>4.3d UN Nutrition Strategy</td>
<td>✅</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>→</td>
</tr>
<tr>
<td>Outcome</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>→</td>
<td>→</td>
</tr>
</tbody>
</table>

**Colour coding**
- Urgent problem urgent action needed
- Requiring action
- Satisfactory

4.1a: green (<12 months old & adopted by government); yellow (completed but not adopted); red (incomplete)
4.1b, 4.1c: green (yes); red (no)
4.2: green (M&E reports available & within 12 months); yellow (available, out of date); red (not accessible or distributed)
4.3a: green (2 or more joint UN programmes developed and funded); yellow (1); red (none)
4.3b: green (all 4 REACH partner agencies have a focal point with nutrition governance responsibilities in their TOR and/or work plans); yellow (2 or 3); red (none or 1);
4.3c: green (UNN established and fully operational); yellow (created but not operational); red (not in place)
4.3d: green (yes); red (no)
4A, 4B, 4C: green (yes); red (no)

Source: REACH endline data completed between March and June 2017

**Joint UN effectiveness**

57. **UN Network for SUN.** In 2016 REACH has facilitated the establishment of UNN in Burkina Faso, Haiti, Mali and Myanmar. In Senegal, a Donors/UN System Network was already established since 2014. REACH facilitators have been providing support for its functioning (for example supporting the preparation of a joint work plan and organizing monthly meetings). In Mali, the UNN also includes UNFPA and UN Women. In Myanmar, UNN known as the UNN-NFS, which started with the four REACH partner agencies, was joined by UNFPA and United Nations Office for Project Services (UNOPS) in 2016, followed by an expansion to nine members including United Nations Development Programme (UNDP), UN Women and World Bank in 2017.

58. **UN nutrition inventory.** The inventory was undertaken in the five countries. In addition to REACH partner agencies (and IFAD in Haiti), UNFPA and UNDP contributed to the inventory in Haiti and UNFPA in Burkina Faso and Myanmar.21

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21 REACH Myanmar. 2016. Inventory of UN Nutrition Actions – a Summary of the Findings - Myanmar
In Myanmar the inventory was particularly timely, as its findings will feed into the UNDAF, which is in preparation. The inventory revealed interesting findings and made relevant tangible proposals for follow-up; for example low coverage of UN-supported interventions in some high burden geographical areas and hence the need to re-think/re-position the geographical focus; UN agencies operating in many of the same states/regions, but not necessarily in the same townships and hence the need for improving joint targeting and programming.

59. **UN nutrition strategy/agenda** seeks to identify needs that are not being addressed and/or that could be addressed more efficiently or effectively by UN agencies. Their elaboration starts with strategic workshops or retreats. These have been organized, funded and facilitated by REACH in Burkina Faso, Haiti and Myanmar. Overall, UN agencies representatives and NFPs expressed their satisfaction with the process, but had different views and interest in a UN nutrition strategy/agenda. In Burkina Faso following the retreat, a strategy was developed and validated in 2017. In Haiti, the REACH facilitators prepared a draft UN agenda for FNS 2017-2020 in July 2017. The document was finalized in August 2017 and validated. No UN nutrition strategy/agenda has been developed yet in Mali, Myanmar and Senegal. During its visit to Senegal, discussions were on going between UN agencies on whether to elaborate a UN Strategy. The ET learned that a recent agreement was reached between UN agencies to organize a retreat.

60. **Joint UN programmes.** The situation is diverse: unchanged situation in Myanmar with no joint UN programmes whilst in Burkina Faso WHO, WFP and UNICEF have an MOU in the area of FNS and a joint action plan since 2014; and in Senegal the number of joint UN programmes increased from one at baseline to three.

61. **Progress made towards outcome 4:** as shown in Table 10: there was some progress in activities under joint UN effectiveness but no implementation or funding tracking mechanisms could be established within REACH engagement period. There was no progress in the five countries, namely no mechanisms to track implementation and funding and to analyse impact on food and nutrition security.

### Box 1: Key findings and conclusions on effectiveness

#### Specific findings per outcome

**Outcome 1-Increased awareness and consensus**
- All stocktaking activities undertaken in Burkina Faso, Mali, Myanmar and Senegal and only MNO in Haiti
- Variable elaboration processes ranging from use of interns (such as MNO in Senegal) to participatory elaboration under national leadership in Myanmar.
- Quality of deliverables: PPO perceived as descriptive except in Burkina Faso (used as a planning tool); unanimous concerns on difficulties in using SUNPMT (poor quality of existing information systems; need for more quality control mechanism in data collection and interpretation) and on the need for more capacity building.
- Variable dissemination channels such as printed version of SUNPMT in Burkina Faso.
- Utilisation: SUNPMT and PPO used to inform planning processes in Burkina Faso and SUNPMT to be used for M&E of PSMN in Senegal.

**National advocacy and communication strategy:** linked to multi-sector nutrition strategy and validated in Burkina Faso and Senegal; Communication Plan in Mali; not yet done in Myanmar and Haiti where alternative advocacy deliverables were supported (radio broadcasts, inserts in newspapers, booklet etc.).

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### Box 1: Key findings and conclusions on effectiveness

#### Outcome 2-Strengthened national policies and programmes

**Incorporation of nutrition in Government and UN Strategy:** substantive contributions of REACH facilitators to UNDAF and various national development strategies.

**Review/update of multi-sector national nutrition policy/strategy/action plan:**
- Variable completion status: policy and strategy validated and endorsed by Government in Mali and Senegal; technical validation completed and official endorsement in progress (Burkina Faso); re-launching of the drafting process by new Government (Haiti and Myanmar).
- Multiform support from facilitators: participation in/facilitation of consultative and drafting working sessions; consolidation of UN comments; and substantive contributions to the documents being drafted.

**Sector and sub-national CNA uptake:** rightly not retained in Haiti and Myanmar AWP; overall limited contribution of REACH except for a workshop in Burkina Faso for sub-national CNA uptake.

#### Outcome 3-Increased human and institutional capacity

**National coordination capacity**
- Little support required (Senegal) up to setting up and functioning of a Coordination Cell in Mali.
- Key role of facilitators in negotiations between national entities for setting-up a multi-sector coordination body (Burkina Faso); regular participation and support to existing coordination group meetings (Haiti); and contributions to discussion on nutrition coordination architecture (Myanmar).

**Establishment of SUN Networks:** Facilitators very active in raising awareness for the establishment of SUN Networks not yet in place through for example one-day orientation workshops and meetings; but their formal establishment resting on the collective will of governments and the network constituents.

#### Outcome 4-Increased effectiveness and accountability

**Multi-sectoral M&E system and processes and accountability:** not retained (Haiti and Myanmar) or delayed as contingent on the elaboration/validation of a multi-sectoral strategic plan; initiated support to the integration of SUNPMT in M&E platform in Senegal; mid-term review of PAMN conducted with REACH support in Mali; coverage dashboards completed as part of SUNPMT.

**Joint UN Effectiveness**
- REACH instrumental in the establishment of UNN and in supporting its functioning: organization of regular meetings, facilitation of inventory of UN nutrition actions (completed in the five countries) and UN retreat or workshop (Burkina Faso, Haiti, and Myanmar).
- Common agenda validated in Burkina Faso and Haiti; joint work plan integrating REACH activities elaborated in Mali.

#### Overall conclusions

- Outputs: good progress in delivering outputs under outcome 1 and Joint UN effectiveness under outcome 4 and mixed progress in outputs under outcomes 2 and 3 and, with the exception of Senegal no progress for effectiveness and accountability under outcome 4.
- Outcomes: notwithstanding weak specificity of indicators to measure progress (particularly for outcomes 1 and 3) within the time frame of REACH: evidence from CCS findings coupled with information on achievements of outputs pointing to good progress towards outcome 1 and outcome 2, mixed progress on outcome 3 and no progress on outcome 4.
- REACH facilitation difficult to quantify but perceived equally as important as deliverables because of its contribution to raising awareness about and advocacy for nutrition as a multi-sector issue.
- Well-appreciated contributions of facilitators to all deliverables.
2.1.2 Equity and Gender

Gender-related commitments in the CIPs

62. CIPs include gender commitments, none of which was explicitly translated into specific activities or cross-cutting issue in the various outputs in either the CIPs, countries’ AWPs or in REACH M&E:

1) **Integration of gender equality and women’s empowerment in the different policy documents and strategies and in their M&E systems.** It was beyond the scope of this evaluation to assess the quality of policies and strategies and their M&E systems whether in terms of gender mainstreaming or other criteria. Indirect evidence was thus sought. For instance in Burkina Faso, the national communication and advocacy strategy, which was developed with REACH support, reiterates the principles of the national nutrition policy which encompass inclusiveness, gender and equity. In Myanmar, several stakeholders expressed their appreciation for REACH facilitators’ contributions to the MNAPFNS document by drafting a section on gender and social protection and to the UNDAF by participating in the Gender Equality Focus Group Situation Analysis. In Mali the mid-term review of the PAMN supported by REACH disclosed insufficient focus on women and recommended that more nutrition-sensitive interventions be supported in favour of women empowerment. Although these are just a few examples, they illustrate how REACH has and could further contribute to integration of equity and gender and on women’s empowerment in the policy documents and strategies.

2) **Strengthening the capacities of women’s organizations.** As can be seen in the preceding section on effectiveness this intended result does not fit into any of the REACH outputs and activities.

3) **Advocacy for women to be represented in the different coordination mechanisms.** Interviewees were of the opinion that members of coordination entities, namely NFPs, are/should be appointed on the basis of their professional profile and/or their functions within the agencies/ministries. Gender was not considered as an issue that should come into play in the selection of NFPs. However there was agreement on the need for ministries responsible for equity and gender (and/or a national women council or commission or equivalent) to be represented in multi-sector nutrition coordination mechanisms to ensure that women’s empowerment is addressed in policies and strategies being developed. In Myanmar, the REACH facilitator catalysed the engagement of UN Women and UNFPA in the UN Network.

4) **Messages disseminated by the different partners/channels at all levels are gender sensitive.** No example could be found on REACH playing a role in influencing/ensuring this.

5) **Breaking down indicators by sex and analysis of data with a gender perspective.** The REACH M&E system does not include equity/gender as a cross-cutting issue nor does it include gender-disaggregated data where it could/should have such as in the impact indicators (nutritional status of children) or coverage indicators for assessing progress on outcome 3. Interviewees and participants in debriefing sessions during which this issue was raised concurred that corrective measures are required.

**Identifying and addressing nutrition-related equity/gender needs and gaps**
63. To answer this question, the ET analysed REACH guidance and tools and examined REACH related deliverables through a gender lens to determine whether equity/gender-related guidance, if any, was followed. In its analysis, the ET focused on deliverables for which REACH is a service provider and hence where REACH has more leeway for tangible contributions.

64. The REACH facilitator manual does not include equity and gender as cross-cutting issues; few references to gender are made in the MNO-related guidance, calling for “gender-sensitive situation analysis dashboard” and identifying “trends over time and between genders”. Gender inequity is indeed highlighted as one of the basic causes of malnutrition in the situation analysis dashboards of Burkina Faso, Haiti and Myanmar. In total six indicators specific to women are included in the template dashboard, which was followed in these countries. In Haiti, the causal analysis of malnutrition highlights the fact that inequity and gender-based violence are amongst the key determinants of malnutrition. However the malnutrition indicators (stunting, wasting, overweight, vitamin A deficiency, iron deficiency and iodine deficiency disorders) among children are not disaggregated by sex in any of the MNOs and corresponding dashboards, whilst the data sources used such as Demographic and Health Surveys do provide gender-disaggregated data.

65. The PPO aims at identifying gaps and raising awareness about child and maternal nutrition in existing policies and strategies and both the manual and the PPO template do mention that gender-related policies should be included in the analysis. This was not systematically done; for example the Senegal PPO does not include the Stratégie Nationale pour l'Egalité et l'Equité de Genre (SNEEG, National Strategy for Equality and Gender Equity). The PPO could have been a good gateway to analyse the extent to which women's empowerment has been addressed in the various existing policies. This is a missed opportunity.

**REACH outputs and outcomes moving towards achieving intended impacts on women and children.**

66. REACH partner agencies are committed to SDG goals both individually and collectively (that is through the UNN and REACH or joint programmes). Within their respective mandates, UN agencies focus their nutrition work in terms of governance and implementation on the most vulnerable, namely women and children through a life-course and multi-sectoral approach. Whilst the duration of REACH engagement is evidently too short to have an impact on the nutritional status of women, REACH contributes to setting the basis for moving towards achieving intended impacts on women and children through particularly outcomes 1 and 2. Consensus on CNAs is a case in point. CNAs stem from the MNO and are guided by international evidence (the Lancet Series) and global targets for improving maternal, infant and young child nutrition such as WHA targets. CNAs in Myanmar are a good example whereby 9 out of 20 CNAs target or prioritize women; namely 2 out of 6 nutrition-specific CNAs and 7 out of 14 nutrition-sensitive CNAs in the areas of disease prevention and management, Water Sanitation and Hygiene (WASH), food and agriculture, and rural development (see Myanmar CNAs in Annex 2).

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23 Women ages 15-49 years old with anaemia, women 15-49 years old with problems accessing health care; females that completed at least primary school; female literacy rate; total fertility rate per woman; women ages 20-49 years old, with first birth at 15 years; and women’s intra-household decision-making power.
Box 2: Key findings and conclusions on equity/gender

Specific findings

- Generic gender-related commitments included in all CIPs but not reflected in annual work plans, REACH annual progress reports or REACH baseline and endline data.
- Some of these commitments not in the realm of REACH (for example limited scope for REACH to strengthen the capacities of women organizations or to influence the designation of members of national coordination entities or of sector NFPs).
- Equity/gender variably addressed in the multi-sector and multi-stakeholder stocktaking package of activities:
  - In MNOs women’s empowerment mentioned among basic causes of malnutrition, data provided on the nutritional status of women but malnutrition prevalence among children not gender-disaggregated; in situation analysis dashboards relevant indicators included as per REACH facilitators’ manual;
  - CNAs and in turn SUNPMT target or prioritize women as relevant to the country’s context (Myanmar a good example);
  - In PPOs gender policies not always included among the reviewed policies, and policies and plans not analysed with a gender perspective.

Overall conclusions

- Due attention to gender at design stage.
- REACH weak guidance and M&E system on equity/gender.
- Equity/gender unevenly addressed in REACH deliverables.
- Need for including guidance for facilitators on how to address equity/gender in REACH manual and tools.
- REACH engagement too short to have an impact on the nutritional status of women and children but REACH outputs (such as CNA) contributing to increased focus on women and children.

2.1.3 Efficiency

Rate of budgetary implementation

67. Figure 2\textsuperscript{24} shows expenditures over the respective implementation periods and up to 31 December 2016.

The lower than planned utilization of planned budgets is evidently related to the shorter implementation period, namely among “generation 2” countries, in Burkina Faso and Senegal activities started late in 2014 (in December and October 2014 respectively); in Haiti in January 2015 and in Myanmar in August 2015 (see Table 1). For the first half of 2017, expenditures are more on track: 35 percent in Burkina Faso where activities with high budgets are planned for the second half of the year (resource mobilization workshop, capacity gap

\textbf{Figure 2: Total expenditures versus planned}

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{graph.png}
\caption{Total expenditures versus planned}
\end{figure}

\textsuperscript{24} In the case of Mali, the planned figures were taken from the 2014-2016 AWPs as opposed to the CIP budgets as was done for the other four countries.
assessment, etc.); Haiti (42 percent), Mali (58 percent), Myanmar (53 percent) and Senegal (46 percent). As can be seen in the CCS summaries in Annex 9, expenditures on outcomes were very low in the first year in all four countries as the first few months are needed for familiarisation of the international facilitator with the country context and key stakeholders, propose revisions of the CIPs if necessary, and take necessary steps to initiate the various activities.

**Figure 3**: Percentage expenditures by outcome

![Figure 3: Percentage expenditures by outcome](image)

Source: REACH Planned budget for each country and Financial Tracking Excell Sheets for each country

68. In Haiti progress was slower than in the other countries as activities were undermined by the lack of consensus among UN agencies and between the two coordination entities (discussed in more detail under question 2).

69. It should be noted that the planned budget figures and their proportionate share out of the total planned budget (see Annex 4) is not a reflection of more focus of REACH on one or the other: for some outcomes in particular outcome 2, the main role of REACH is that of facilitation meaning the facilitators’ presence and skills (time spent in networking, coaching, etc.), whilst for outcome 3 a service provider is needed to conduct capacity gap assessment (for example up to 21% of the total CIP budget allocated for the four outcomes in Senegal). The highest rate of budgetary execution was observed for outcome 1 in all four countries; the lowest being Mali (22 percent) and highest Myanmar (69 percent). In Myanmar, NPT is the administrative capital whilst embassies and UN agencies are based in Yangon. Frequent travel of the facilitators to NPT was therefore necessary to ensure continued consultation with Government, in particular the National Nutrition Centre (NNC), and keeping them regularly informed on progress. In addition, the salary of the advocacy consultant in 2016, who became national facilitator in 2017, was covered under output 1.4 “Develop national advocacy and communications strategy”.

70. The ET compared CIP planned budget figures with annual planning figures per year and per outcome for the four “generation 2” countries. This comparison...

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25 In the case of Mali, the planned figures were taken from the 2014-2016 AWPs as opposed to the CIP budgets as was done for the other four countries.
showed that initial planning as well as yearly planning were not realistic for any of the outcomes in any of the countries. This illustrates the problems encountered by the UNN/REACH Secretariat and facilitators in planning activities and corresponding budgets due mainly to difficulties in predicting: whether the activity will be feasible at the proposed time as regards evolving context and stakeholders’ priorities; the pace at which Government and/or UN partner agencies endorse the activity and agree to its timing; and whether other stakeholders will provide financial contributions. This points to the need for REACH SC and Secretariat to reflect on and review the basis on which REACH engagement in countries should be planned and budgeted.

Compliance of expenditures with approved budget plans

71. Planned budgets are not broken down by specific type of expenditure such as consultancy, travel, etc. A detailed comparison of planned expenditures with actual disbursements is hence not possible. However the descriptions of expenditures, in the financial tracking sheets and information provided by the facilitators indicate an overall coherence of the type and magnitude of expenditures vis-à-vis accomplished deliverables and the processes leading to them.

72. Some activities for which a substantial proportion of the budget was allocated were either not accomplished or done at a lower cost for various reasons (discussed also under question 2):

a) Endorsement of activities by Governments: in the case of Haiti the main constraint was the absence of a single nutrition coordinating entity/interlocutor with authority to endorse activities such as the SUNPMT for which USD 30,000 was allocated (representing 42 percent of the budget allocated for outcome 1).

b) Sequencing of outcomes and longer the planned time to complete activities: activities not accomplished because their implementation depends on the completion of outputs under other outcomes which have not yet been finalized and/or validated, such as in Burkina Faso where the establishment of a M&E system under outcome 4 (USD 40,000 representing 67 percent of the total budget allocated for outcome 4) is awaiting validation of the PSMN which is a long process; and in Mali where the capacity gap assessment (USD 35,000 representing 34 percent of the budget allocated for outcome 3 in 2016) has been postponed due to the late establishment of the Coordination Cell.

c) Cost saving: activities accomplished at no cost such as the MNO in Senegal done by an intern and in Haiti where it was conducted by the REACH facilitator and UN NFP instead of a consultant for which USD 5,000 was planned; or done at lower cost such as the SUNPMT exercise in Burkina Faso in which the facilitators were personally involved hence reducing the cost (57 percent of planned budget spent).

d) Cost sharing: activities accomplished with financial contributions from other stakeholders such as in Burkina Faso where UNICEF provided financial support to the costing of the PSMN and a Rome-based FAO consultant provided support for the SUNPMT exercise; in Mali, the costs of the Coordination Cell were covered by different partners: the Government covering rent and transport costs; WFP, FAO, UNICEF and WHO providing office furniture and equipment; and REACH contributing to the salaries/subsidies of some of the staff for 18 months; in Myanmar where the UN agencies contributed to the national nutrition month promotion activities and a cost-sharing arrangement
between REACH and UNICEF enabled the recruitment of a consultant to support REACH stocktaking exercises; and in Senegal where the elaboration of the *Politique Nationale de Développement de la Nutrition* (PNDN, National Policy for Nutrition Development) and PSMN was funded by the Government and several other CLM partners and the capacity gap assessment was co-funded by the World Bank and UNICEF.

**Timeliness of funds requisition and release**

73. No problems were reported in any of the countries over and above usual time frames in administrative processes, which can be sometimes long (for example recruitment of national facilitator in Senegal or payment of consultants).

<table>
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<tr>
<th>Box 3: Key findings and conclusions on efficiency</th>
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<tr>
<td><strong>Specific findings</strong></td>
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<tr>
<td>– Total budgetary implementation up to 31 December 2016: Burkina Faso (65 percent), Haiti and Senegal (69 percent), Myanmar (74 percent); Mali (89, 68 and 71 percent per year between 2014 and 2016).</td>
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<tr>
<td>– Disbursements January-June 2017: Burkina Faso (35 percent), Haiti (42 percent), Mali (58 percent), Myanmar (53 percent) and Senegal (46 percent).</td>
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<td>– Highest rate of budgetary execution observed for outcome 1 in all countries.</td>
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<tr>
<td>– Reasons for under-spending:</td>
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<tr>
<td>• Endorsement of activities: not endorsed such as the SUNPMT in Haiti;</td>
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<tr>
<td>• Sequencing of outcomes: activities not accomplished because awaiting validation of other outputs such as in Burkina Faso where USD 40,000 for M&amp;E (62 percent of outcome 4 budget) is pending PSMN validation;</td>
</tr>
<tr>
<td>• Cost savings: activities accomplished at no cost such as the MNO in Senegal and Haiti; activities done at a lower cost such as SUNPMT in Burkina Faso;</td>
</tr>
<tr>
<td>• Cost sharing: activities accomplished with financial contributions from other stakeholders such as in Burkina Faso (UNICEF financial support to the costing of the PSMN and FAO consultant for SUNPMT); in Mali costs of the Coordination Cell covered by different partners; in Myanmar a cost-sharing arrangement between REACH and UNICEF for stocktaking exercises; and in Senegal capacity gap assessment co-funded by the World Bank and UNICEF.</td>
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<tr>
<td>– No delays in disbursements reported in any of the countries over and above usual time frames in administrative processes.</td>
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<th>Overall conclusions</th>
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<tr>
<td>– Overall under-spending consequent to negative factors such as insufficient initial consultation/endorsement of activities by Governments, factors inherent to the sequential nature of REACH outcomes and positive factors such as budget savings and cost sharing.</td>
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<td>– Advantages of flexibility in annual budget planning often offset by unpredictability of the pace of Governments’ endorsement processes (often very lengthy).</td>
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**2.2. What are the Explanatory/Contributing Factors for Results**

**Exogenous factors**

74. **Political situation.** Changes in Government in Burkina Faso (two Health Ministers) delayed the signature of a decree for the creation of a Technical Secretariat to oversee coordination of the PSMN. In Mali changes have taken place at different levels: Government (2014 and 2017) and members of the Technical Secretariat and sector NFPs. These changes had a negative impact on the implementation of activities, including the establishment of the Coordination Cell, and deferrals and cancellations of activities such as the capacity gap assessment. Political instability was a more prominent negative factor in Haiti and Myanmar. Haiti faced political uncertainty throughout 2015 and 2016; after multiple deferrals
of second-round elections, Haiti’s new President was sworn in on February 7, 2017. During this whole period, there were consequently several changes in ministers and key positions in sector ministries and coordination entities with which UN agencies and REACH interact. The differing priorities and knowledge of interest in nutrition governance of new appointees affected the steadiness of dialogue and limited or prevented adherence to REACH annual work plans and timely progress on deliverables. In Myanmar, following the general elections held on 8 November 2015, the new administration took power at a formal handover ceremony on 30 March 2016. During this entire “actively waiting” period (as referred to by many stakeholders), there was lack of clarity as to the official status of various development policy frameworks;26 work launched by the previous government on nutrition governance (policies, strategies and coordination mechanism) was halted and so were relevant REACH activities.

75. **Humanitarian context.** In Mali, the tense security context has led to a change in the priorities of the Government, which has reversed its decision to anchor the Coordination Cell in the office of the Prime Minister. Haiti was severely affected by drought in 2015-16 and was hit by Hurricane Matthew in October 2016, which further stalled nutrition governance processes as the country shifted again its focus to emergency response. REACH facilitators participated in the Emergency Food Security Working Group (WG) and the Emergency Nutrition WG meetings, and tried to establish links between both WGs, but their further involvement was halted due to differing views between REACH CC members on the role that REACH can play in the context of emergencies. In Myanmar resurgence of tensions/conflicts in three States and flooding have led to degradation of the humanitarian situation. In 2015 and 2016, the focus of UN agencies and other stakeholders was hence on alleviating humanitarian needs and building resilience of affected populations. Whilst recognizing the need to address governance issues, several interviewees mentioned that their focus was on peace building and supporting emergency preparedness and response.

76. **Policy environment and Government commitment to multi-sectoral approaches.** In Burkina Faso, the facilitators benefited from a favourable national context: the clear stability of the DN and the open-mindedness of its management and the commitment of sector ministries (NFPs actively participating in the work of various committees for the policy review and the elaboration of the strategic plan and communication and advocacy strategy) created a positive working environment. In addition the country has solid databases that facilitated the stocktaking exercises. In Senegal, anchoring of the CLM at the level of the Prime Minister Office reflects the Government’s commitment in favour of a multi-sectoral approach to nutrition. The scepticism at the outset of the CLM and other external stakeholders on the added value of REACH in a country where the dynamics have been in place for a long time explains in part the low involvement of the CLM in the initial stocktaking activities. However the international facilitator has been able to establish fairly rapidly a dialogue and a trusting relationship with CLM and to convey the added value of REACH at a time when CLM was reflecting on how to mobilize stakeholders for the review of the Lettre de Politique de la Nutrition (Nutrition Policy letter). The timing of REACH was ultimately opportune.

77. In Haiti, the absence of a multi-stakeholder platform bringing together the two existing coordination entities - *Unité de Coordination du Programme National*
REACH Evaluation Report

78. In Myanmar, the positioning of the SUN-FP (Director General, Department of Public Health) and the SUN Technical Focal Point (Director, NNC) in the Ministry of Health and Sports (MOHS) has led to a tendency for nutrition to be perceived as a health-led issue and negatively affected the engagement of other sectors. Although the Minister of Health sent an official letter to the other ministries requesting the nomination of dedicated NFPs for the stocktaking exercise there were frequent changes in NFPs of some sector ministries which affected the steadiness of dialogue and efficacy of meetings by delaying progress in moving the subjects under discussion forward and relevant decision-making. High-level government commitment to nutrition reaffirmed by the State Counsellor in January 2017 gave new impetus to nutrition governance-related work. More clarity on leadership on nutrition governance has also recently emerged with the establishment of ten Sector Coordination Groups (SCG) including a Nutrition SCG to be led by MOHS. The Government Development Assistance Coordination Unit (DACU) released “Guidelines for Sector Coordination Groups” on 26 July 2017. Under these circumstances, the extension of REACH support into 2018, which has been recently approved by GAC, is fully justified.

79. Engagement of sector NFPs. Sector NFPs are in place in the five countries (although as noted earlier staff turnover is a problem in some of them), but they don’t all have the necessary technical capacity or administrative position to coordinate multi-sectoral interventions within their ministries. The integration of nutrition into sector policies and plans is one thing; leading ministries to be accountable is quite another. Sector NFPs have significant responsibilities: they must advocate within their ministries to raise awareness among their colleagues; be able to interact with all services and departments involved in nutrition-sensitive interventions and ensure coordination within the ministry. They have not all been prepared for this task, which comes in addition to the responsibilities attached to their respective positions within the ministry. For example in Senegal, the capacity gap assessment analysis has shown that NFPs are not designated on the basis of TOR or a specific profile, they have varying knowledge and capacities as regards governance issues and their influencing skills are generally low. In Mali where similar observations were made, this is a crucial problem as NFPs form an integral part of the Coordination Cell. In Haiti and Myanmar, coaching and

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mentoring by REACH facilitators and UNN/REACH Secretariat staff promoted skill and knowledge transfer to sector NFPs. In the other three countries, the involvement of sector NFPs in the stocktaking activities and in the development of nutrition strategic plans, have provided an opportunity for capacity building, though the need for more capacity building was widely underlined.

**REACH governance and facilitators’ hosting arrangements**

80. **UNN/REACH Secretariat support.** There was overall appreciation of guidance material, country visits, monthly facilitators calls and other on-demand advice requested by the facilitators or by members of the CC in all five countries. In Myanmar, in the period before the international facilitator took up her functions, the UNN/REACH Secretariat provided remote support on policy, coordination and UNN including the UN nutrition inventory and an in-country intern helped with the PPO and inventory. However, different views were expressed regarding the flexibility of REACH AWP elaboration process. In Senegal, facilitators considered the AWP as insufficiently flexible and adaptable, whilst the UNN/REACH Secretariat saw it as a result of a fruitful dialogue. Although not involved in the process of developing AWPs, different internal and external stakeholders felt that more flexibility was indeed needed in the yearly programming of REACH engagement. The earlier than planned departure of the international facilitator in Myanmar posed challenges in view of the workload and deadlines of the nutrition stocktaking activities that were in progress. The choice made by the UNN/REACH Secretariat to recruit a programme assistant with a mix of administrative and technical support responsibilities, was a good solution, which should be considered in other countries as relevant.

81. **Hosting arrangements.** Different options were applied: in Burkina Faso, Mali and Myanmar both facilitators are hosted by WFP; in Haiti the CC decided for rotation of both facilitators amongst agencies (both spending two days at WFP, and the national facilitator three days at WHO whilst the international facilitator would be at UNICEF); and in Senegal, the international facilitator is hosted by WFP and the national facilitator in the CLM.

82. In Haiti, the REACH CC had initially proposed that the international facilitator be located within the Ministry of Public Health and Population in order to effectively support the government in inter-ministerial coordination. This option did not materialize and no clear-cut explanations were provided to the ET (obstacles cited: for some it was a matter of poor communication between the international facilitator and the SUN-FP; for others a logistical problem, namely the lack of adequate office space). The rotation option was mentioned as favouring closer working relationship and collaboration between the facilitators and respective NFPs, as well as more interest and commitment on the part of the hosting agency. However rotation has also posed administrative challenges in terms of office space and ease of access to the agencies’ premises. In Myanmar during the exploratory mission, the initial proposal was that the REACH facilitator team be anchored in Government in NPT and in an interim phase be hosted by one of the UN agencies. The NPT option was not retained due to logistical constraints (limited housing options) and higher cost (related mainly to transport: need for hiring or purchasing a car versus using the vehicles fleet of UN agencies in Yangon). Some external stakeholders perceived anchorage of the facilitators in WFP as a cause of confusion.

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29 CC. 2015. Letter to the Minister of Health
30 REACH Secretariat. 2015. REACH in Myanmar – Country Implementation Plan (CIP)
as to the role and focus of REACH: is REACH about facilitation within the UN system, or between the UN system and Government or within different Government sectors? There are pros and cons regarding the location of the national facilitator in a national entity as is the case in Senegal: the national facilitator having a better knowledge of local realities can play a moderator role for strengthening cohesion between sector ministries, however the pitfall of this option is the loss of opportunities for the national facilitator to build a working relationship with UN agencies.

**REACH facilitators’ skills**

83. The communication capabilities (listening, influencing, networking, etc.) of facilitators were praised in Burkina Faso, Mali, Myanmar (current national facilitator) and Senegal. In addition to their competence, national facilitators have an added value in terms of their in-depth knowledge of the countries’ context, culture and language (as in Myanmar) and their extensive connections with national stakeholders at technical and higher decision-making level. The quality of the facilitators’ contributions to various national policy and strategy documents were highly and consensually appreciated in all five countries.

84. A few problems were reported as regards either the expertise of the facilitators or their inter-personal skills. In Myanmar, the first national facilitator did not meet expectations. Another problem in Myanmar arose during the initial months of the international facilitator: collaboration between the international facilitator and a national consultant recruited by UNICEF upon the request of the SUN-FP and NNC did not go smoothly stemming mainly from personality issues, and the CC had to intervene to clarify roles and responsibilities. Similarly in Haiti, difficult relationships between the international and national facilitator and between the facilitators and some stakeholders have undermined progress by weakening partnerships. In both instances interviewed stakeholders pointed to the need for international facilitators to be flexible and adapt their expectations, communication and work style to sensitive sociocultural contexts and the need to have senior national facilitators with proven professional experience in multi-sectoral work.

85. Another type of problem that was reported only in Haiti was the lack of clarity on lines of communications between the facilitators and different partners (within REACH CC as well as with Government counterparts and other stakeholders) and delays in their formal introduction to key stakeholders, which contributed to misconceptions about REACH and false expectations, all the more so since the CIP and AWPs were not shared with Government counterparts.

**REACH partners’ commitment**

86. As mentioned under paragraph 16, a country’s request for REACH support is one of the selection criteria for GAC support. The CIPs of Burkina Faso, Myanmar and Senegal state that the REACH exploratory missions were conducted “at the invitation of the Representatives of the four signatory agencies of the REACH initiative (FAO, UNICEF, WFP, WHO) expressing their commitment to request the government to join REACH.” There is no clear indication in the CIPs of Haiti and Mali about the initiators of the request; in both cases, the Representatives of the four agencies (and IFAD in Haiti) endorsed the CIP with some conditions which were reflected in the respective documents: in Haiti emphasis on flexibility in AWPs in the face of the political situation, and in Mali on the need for REACH
alignment and complementarity with existing technical assistance programmes and with the work plans of national entities and of UN agencies. In Haiti interviews and monthly facilitators’ reports point to recurrent debates on REACH AWPs with for example some agencies opposing the involvement of facilitators in emergency-related activities (see paragraph 75). Initial endorsement of REACH has been affected by the Heads of Agencies own understandings and perspectives about REACH, and hence the need for more formal and clear communications from the REACH SC members to their country representatives and possibly at country level a more formal documented endorsement process (such as a note for the record).

87. During the period of REACH engagement up till present, the buy-in and support provided by REACH partner agencies was variable in the five countries. Cost-sharing of consultants and workshops costs, advice of the UNICEF Communications team on the graphics of the advocacy booklet in Haiti and other examples given in the preceding sections bear witness to the agencies’ support to REACH. On the other hand, the ET noted during its interviews that in some countries Heads of Agencies and NFPs had varying degrees of acquaintance with REACH mandate, facilitators’ role, AWPs and deliverables. This is partially attributable to a high turnover amongst REACH CC and NFPs. In Senegal, at the time of the country visit there were no NFPs in WFP and UNICEF (replacements of NFPs who left or changed positions within the organization had not yet been designated) and the WHO NFP had only recently been appointed. The situation was particularly crucial in Haiti where between 2015 and June 2017, the following changes took place among CC members: FAO (2), WFP (5), WHO (2) and IFAD (2) and among NFPs: FAO (3), UNICEF (2), WFP (3), WHO (2) and IFAD (2). In addition, participation of NFPs in UNN technical committee meetings has been uneven, the reason given is that they have a high workload and their priorities are guided by the project or thematic area (which has not always been nutrition or food security) to which they are assigned and for which they have been recruited within their agencies. Turnover and irregular participation require time to brief and mobilise newcomers and reduces the quality of discussions. The UNN/REACH website, which is under reconstruction, would be helpful in this respect: keeping all stakeholders informed about REACH in general and about developments and lessons learned from various countries.

88. In Myanmar, the international facilitator fostered UN agencies buy-in through a participatory review of the CIP focusing on its adaptation to the context and on its alignment with the mandates/priorities of UN agencies and sector ministries (respective columns added in yearly work plans). This was well perceived by UN agencies: participants in a UNN meeting in October 2015 agreed that the “REACH CIP could be considered as the embryonic UN Nutrition Network Work Plan”. Unfortunately the launching of one-on-one governance-related support (such as the ZHC supported by FAO) adversely affected external stakeholders’ perceptions about REACH as a cohesive UN partnership.

31 REACH Myanmar. 2015. UN Nutrition Network/UN REACH Myanmar – Technical Leads Monthly Meeting Notes
Specific findings

1) Negative factors

Exogenous factors

- Political instability: stalling of work on nutrition governance during long transition period (Haiti, Myanmar); much time spent by facilitators for continual briefing and mobilisation due to frequent changes in key government positions (ministers and directors in Haiti and Myanmar) and in sector NFPs (Haiti, Mali, Myanmar and Senegal) with differing priorities and knowledge of/interest in nutrition governance of new appointees.
- Recurrent natural disasters and focus of Government and partners on emergency response, with less attention on the emergency-development nexus and governance-related issues (Haiti, Myanmar).
- Policy environment and Government commitment to multi-sectoral approaches: absence of a multi-stakeholder platform bringing together two existing coordination entities and significant difference of views on the anchorage and leadership of nutrition governance processes among different sector ministries (Haiti); positioning of the SUN-FP in health ministry leading to nutrition being perceived as a health-led issue affecting the extent and regularity of engagement of other sectors (Burkina Faso, Haiti, Mali and Myanmar).
- Engagement of sector NFPs: high turnover, lack of guidance on their designation, weak capacity and limited decision-making power.

REACH governance and facilitators' hosting arrangements and partners' commitment

- Different hosting arrangements depending on the countries' contexts each with its advantages and challenges, such as rotation among UN agencies meant to foster their engagement but posing logistical difficulties (Haiti).
- Facilitators' poor inter-personal skills a hindrance (Haiti and Myanmar).
- Uneven REACH partners' engagement and support resulting partly from high staff turnover of CC members and NFPs (Haiti, Mali, Senegal).
- Parallel poorly coordinated one-on-one support to nutrition governance (Myanmar).

2) Enabling factors

Exogenous factors

- High level of Government commitment to nutrition (Burkina Faso, Myanmar, Senegal).
- Existence of a long-standing dynamic nutrition coordination entity (Senegal).
- Existence of consultations frameworks of technical and financial partners (Burkina Faso).

REACH governance and facilitators' hosting arrangements and partners' commitment

- Quality and timeliness of UNN/REACH Secretariat support.
- Adaptation of support to countries' contexts.
- Facilitators' skills: networking and communication capabilities of facilitators (Burkina Faso, Mali, Myanmar and Senegal); competence and quality of contributions (all countries).
- Various financial and technical contributions from UN agencies.

Overall conclusions

- A combination of factors impacting negatively progress to varying degrees; cumulative exogenous and REACH governance-related factors in Haiti.
- A common constraint to all countries: weak capacity and decision-making of sector NFPs deserving more capacity building support from REACH.
- Improvements needed in UN agencies buy-in and support.

2.3. To What Extent are Results Achieved and REACH Operational Model Sustainable?

Increased national ownership/Sustainability of REACH results

89. In the TORs and evaluation matrix national ownership and sustainability of REACH results were two separate sub-questions. The ET found it more meaningful
to discuss them together as national ownership is both a prerequisite for sustainability of REACH deliverables, outputs and outcomes and the ultimate result of REACH support.

90. There is not enough hindsight to make a definitive assessment of sustainability of REACH outputs and deliverables as some have been only recently completed and the validation process is in progress; for example the stocktaking package in Myanmar (finalized early 2017) or the Plan National de Nutrition (PNN, National Nutrition Policy) validated technically in 2016 and the PSMN endorsed in 2017. Another point to bear in mind is that the starting situation was different in the five countries: participatory multi-sectoral consultations already existing (Burkina Faso, Senegal); well-established coordination entity (Senegal), multiplicity and weakness of existing entities (Mali), weak entity in terms of human resources and of its positioning in the health sector (Myanmar), and parallel nutrition and food security coordination mechanisms (Haiti); as well as various stages of initiation of nutrition policy and strategy review or elaboration processes.

91. Adequacy of planned outputs vis-à-vis national priorities and identified gaps. All UNN/REACH Secretariat exploratory missions included consultations with various national entities through bilateral meetings, focus group discussions or working groups involving a Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis (such as in Burkina Faso and Haiti). Debriefings were held with Heads of UN agencies in Burkina Faso, Haiti and Myanmar; and in Senegal at a meeting chaired by the SUN-FP and bringing together ministries, representatives of UN agencies and members of donor and civil society networks during which the CIP was endorsed. In Haiti the political and policy contexts – namely the existence of separate nutrition and food security coordination mechanisms - have not been conducive to consensual Government buy-in of REACH outputs and deliverables. No clear line of communication and consultation/decision-making processes could be established with Government counterparts regarding REACH activities.

92. Overall outputs proposed in the CIPs did respond to nationally recognized priorities and gaps and refinements were made through AWPs, which are meant to adjust CIPs to evolving context. There were a few instances where an activity was carried out though not considered a priority for the entity in charge of nutrition or the latter had chosen another option. For instance, in Senegal CLM chose to develop a Référentiel Technique (Technical Reference Framework) as a basis for elaborating the PSMN which did not build on CNAs though a list of 25 CNAs had been agreed upon during a workshop organized by REACH bringing together CLM and sector NFPs. As shown in Annex 3, some activities were reformulated and prioritized in line with national governance priorities. Such revisions are indeed necessary for the following reasons: 1) it is difficult to fully capture the nutrition governance situation (government priorities as well as current and planned one-on-one support provided by partner agencies) in the short duration of an exploratory mission; and 2) the situation can evolve during the time lag between the CIP finalization and the start of REACH engagement in the country (for example new Government may have different priorities; new one-on-one governance initiatives supported by different agencies and donors may have been launched). The main challenge in this endeavour is to comply with the initial CIP in view of accountability to the donor (the initial CIP being the officially approved document) while adapting it to the country’s evolving context. While this flexibility is evidently needed, major shifts away from initial plans (such as in Haiti and
Myanmar) denote the need for more in-depth context analyses, for REACH not to be constrained by a unique and standard model of engagement and for donors to be more flexible.

93. **Sustainability of REACH results.** This needs to be addressed from different angles for different outputs. For activities in which the role of REACH is primarily to shadow Government-led processes, such as for the revision of an existing policy or strategy or elaboration of a new one, completion and validation of the documents and whether they will be funded and translated into actions are not under the control of REACH. The question is whether the processes, namely the participatory, multi-stakeholder and multi-sectoral consultations, which were promoted and facilitated by REACH, will be sustained. Regarding outputs for which REACH has introduced new tools which led to the production of various documents, the issues to be examined with respect to sustainability include: knowledge transfer during their elaboration and hence enhanced capabilities of coordination entities and sector ministries in carrying them out (for example update of the MNO or mapping) post-REACH; their validation and dissemination; and depending on the timing of their completion, evidence of (or expressed desire for) their uptake into national governance processes.

94. As regards outputs facilitated by REACH, facilitators have promoted more regular and active participation of sectors that were previously less engaged in nutrition (sectors such as social protection, rural development, WASH, etc. which are involved in nutrition-sensitive interventions) by meeting with NFPs individually and supporting their participation in meetings and workshops. There was overall consensus that REACH has contributed to greater awareness about nutrition governance and more particularly of its multi-dimensional nature among sector NFPs and this is promising in terms of sustainability. However, the turnover among sector NFPs observed so far and their generally low influencing skills (paragraph 79) that they themselves acknowledged raises some doubts as to whether this momentum will be maintained. There is a need for consolidating these emerging improvements, as also pointed out in the REACH evaluation of 2015.

95. Regarding activities for which REACH is a service provider such as the stocktaking deliverables, the MNO and PPO have been carried out by REACH (facilitators, interns, consultants) and there is overall little evidence of knowledge transfer with the exception of Burkina Faso where the facilitators involved CNCN which made recommendations for the PPO tool to be used for the development of municipal plans and NGO programmes (paragraph 32). In contrast more knowledge transfer was achieved through the SUNPMT, which by its very nature involves the participation of a wide range of stakeholders in data collection, though the need for more capacity building was voiced in all countries. In terms of dissemination and uptake of tools: the SUNPMT has been validated and disseminated as hard copy in Burkina Faso; in Mali, the national malaria programme would like to use the mapping tool to provide insight into the many stakeholders involved in this field and other actors would like to have a simplified mapping tool to be used at the operational level to inform planning of interventions and REACH partner agencies have included the updating of the MNO and SUNPMT in their joint work plan; and
in Senegal, CLM requested REACH support for integration of the SUNPMT into an on-line platform to monitor implementation of the PSMN (paragraph 33).^{32}

**Sustainability of REACH operational model**

96. The facilitators in the five countries elaborated transition plans, which summarize achievements to date and make proposals for areas of focus in relation to nutrition governance, which should receive attention by Government and UN agencies post-REACH.

97. Regarding proposals for continuation of REACH facilitation functions, their uptake by REACH partner agencies was proposed in Haiti. A few interviewees thought that, streamlining facilitators’ UN coordination-related functions into NFPS’ TOR and having them assume this function on an alternating basis is a feasible option. Others felt that a full-time facilitator position was necessary as in most cases NFPS are recruited on a project fund, which limits the time they can allow for other non-project-related activities.

98. In Burkina Faso, continuation of the national facilitator position is proposed but no budget was identified. Three options for the positioning of the national facilitator were discussed internally within the UN: 1) in the Ministry of Health - insufficiently unifying to some; 2) at the Primary Minister level - a good strategic position but no technical counterpart; and 3) in the Conseil National de Sécurité Alimentaire (CNSA, National Food Security Council) which would become the Conseil National de Sécurité Alimentaire et Nutritionnelle (National Food and Nutrition Security Council) - some agencies would not relate to this structure. Due to a lack of agreement among agencies, this issue was not raised with the Government. In Senegal, consultations were held in 2016 between GAC, REACH, Nutrition International (NI) and CLM for NI to assume the funding of the national facilitator's position post-REACH. NI agreed to fund the post for 2018 to ensure continued support to CLM’s coordination of stakeholders at both national and sub-regional levels. In Myanmar WFP is seeking funding for a one-year extension of the national facilitator. In parallel, the extension of REACH engagement with GAC funding into 2018 (information shared with stakeholders during the debriefing session) met with a positive response from stakeholders.

99. During the extension phase of REACH engagement in Mali (2015-2017), REACH invested heavily in the establishment of the Coordination Cell and its operationalization. Proposals were made in the REACH transition plan for agencies to continue supporting the Cell. During interviews Heads of Agencies, pointed out that the functioning of the Cell should be under Government’s responsibility and that their contributions will depend on their financial resources. The likelihood of maintaining the functions of the national facilitator are low, and interviews did not reveal any concrete proposals either from the Government or the Agencies.

**Box 5: Key findings and conclusions on sustainability**

**Specific findings**
- Not enough hindsight to make a definitive assessment of sustainability of REACH outputs and deliverables (some deliverables only recently completed or validation still in progress).

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- Review of CIPs by facilitators and AWP in consultation with national stakeholders and UN agencies: essential for better alignment with national priorities and ownership by Government and UN agencies.
- Overall outputs in CIPs responsive to nationally recognized priorities and gaps; some instances of maintaining deliverables for which no manifested interest by the Government.
- Knowledge transfer key to sustainability.
- Sustainability of REACH tools: in Burkina Faso PPO used for municipal/regional planning; in Mali interest of sectors other than nutrition such as malaria programme in using SUNPMT.
- Sustainability of REACH operating model: in Senegal national facilitator to continue in 2018 with NI funds; in Myanmar WFP mobilizing funds to maintain national facilitator post-REACH; uptake of REACH facilitators’ function into agencies NFPs’ TOR proposed but not found to be feasible in view of their workloads.
- REACH transition plan elaborated in the five countries: no clarity yet for phasing-over REACH facilitation functions to the UNN.

**Overall conclusions**
- Government ownership both a prerequisite of sustainability and a result of REACH support.
- REACH flexibility to adapt to a changing national agenda and/or to political and humanitarian events a key enabling factor.
- Capacity building of sector NFPs needed to ensure sustainability of multi-sector consultative processes and REACH tools.

### 3. Conclusions and Recommendations

100. Based on the findings presented in the previous section, an overall assessment that responds to the evaluation questions is provided below. This is followed by seven recommendations of how the UNN/REACH Secretariat can take action to build on the lessons learned.

#### 3.1. Overall Assessment/Conclusions

101. **Effectiveness.** REACH accomplished variable levels of achievements in terms of outputs and in its progress towards its intended outcomes. Findings from the country visits and REACH M&E show very good progress on increased awareness and consensus (outcome 1), good progress in strengthened national policies and strategies (outcome 2) with the exception of Myanmar due to the long political transition period and change in Government (outcome 2), mixed results in increased institutional and human capacity on nutrition (outcome 3) and no progress on accountability through the establishment of mechanisms to track implementation and funding of the multi-sectoral action plans and to analyse the impact on food and nutrition security (outcome 4). Progress on the establishment of such mechanisms was evidently not possible within a three-year timeframe as the multi-sectoral plans are either still being developed (Haiti and Myanmar) or have been just completed and technically validated in Burkina Faso (May 2017) and endorsed in Senegal (June 2017). In Mali, where the PAMN was approved in 2014 (period not covered under this evaluation), there is still no M&E system. Although the situation in Mali (instability and security issues) cannot be taken as representing a typical situation, it nevertheless shows that achieving all four outcomes, which involves a sequential process, requires a longer timeframe even in countries where the development of a multi-sectoral nutrition plan was initiated early on within REACH engagement period (such as in Burkina Faso, Haiti, Myanmar and Senegal). This leads to questioning the relevance of a single standard REACH engagement framework. A large number of stakeholders in the five
countries pointed to the need for prioritisation of REACH support and for fine-tuning the sequencing of outputs vis-à-vis the context. Alternatives to be considered include: a longer timeframe such as five years as recommended in the 2015 REACH evaluation (recommendation 2 – Annex 2 of the TOR) or a reduction in the number of outcomes. With respect to the latter, the decision as to which outcomes will be retained would be decided on the basis of the starting situation in each country and Governments’ priorities. Whatever alternative is chosen, there is a need for REACH and its donors to invest more time at the design stage in order to have a proposal for REACH support that is better tailored to countries’ specific governance situation and priorities. Haiti and Myanmar CIPs were particularly ambitious striving at too far-reaching outcomes given the political, policy and humanitarian context that was prevailing at the time of the exploratory missions. Despite a prioritisation of outputs and the more realistic planning of outputs and deliverables through a revision of the CIP by the international facilitator in consultation with CCs through annual work plans, progress was slow and remained below set targets.

102. Regarding the quality of REACH tools and deliverables, several interviewees noted that REACH processes were equally as important as the end result as they acted as advocacy for nutrition as a multi-sectoral issue. Notwithstanding difficult environments such as in Haiti, Mali and Myanmar, REACH has been successful in promoting/facilitating a new approach to governance of a multi-stakeholder issue. There was overall agreement in the four countries where the stakeholder and nutrition action mapping was undertaken, that data collection consolidation and interpretation posed the greatest challenge. Most frequently mentioned concerns requiring more attention by the UNN/REACH Secretariat in the future include: more tailored guidance on the tool at central and decentralized levels; closer supervision of data collection; improved quality control mechanism; and more knowledge transfer through greater responsibility given to/ participation of national stakeholders in data analysis and interpretation.

103. Equity/gender. CIPs include four broad gender-related commitments but these were not explicitly reflected in REACH AWPs. REACH facilitators’ manual does not include guidance on how to address them except in relation to the MNO: “gender-sensitive situation analysis dashboard” and identifying “trends over time and between genders”. The REACH M&E system includes the nutritional status of women among nutritional impact indicators but does not require gender-disaggregated data as regards the nutritional status of children (impact indicator) and coverage of CNA interventions (outcome 3 indicators). In addition to being non-country-specific some of these commitments are not in the realm of REACH: there is limited scope for REACH to strengthen the capacities of women organizations or to influence the designation of members of national coordination entities or of sector NFPs. Equity and gender were best addressed through the consensus of CNAs; with Myanmar being a good example thanks to the special attention given by the facilitators to equity/gender issues which they added as a reporting item to the REACH monthly facilitators’ reporting template. Interviewees had diverse levels of interest in equity and gender issues, but there was overall agreement that equity and gender cannot be stressed enough and that REACH, as any other inter-agency nutrition partnership, should promote and advance equity/gender, a core principle already embedded in UN agencies’ global policies and streamlined into their support to national policies, processes and programmes.
104. **Efficiency.** Lower than planned expenditures were observed for all outcomes, in particular the first year in all four countries as time is needed for familiarisation of the international facilitator with the country context and key stakeholders, propose revisions of the CIPs if necessary, and take necessary steps to initiate the various activities. A comparison of CIP planned budget figures with annual planning figures per year and per outcome for the four “generation 2” countries showed that initial planning as well as yearly planning were not realistic for any of the outcomes in any of the countries. This illustrates the problems encountered by the UNN/REACH Secretariat and facilitators in planning activities and corresponding budgets due mainly to difficulties in predicting: whether the activity will be feasible at the proposed time as regards evolving context and stakeholders’ priorities; the pace at which Government and/or UN partner agencies will agree to its timing. The highest rate of budgetary execution was observed for the stocktaking and advocacy outputs under outcome 1 in all countries. Under-spending was mainly due to activities not being undertaken, as they were dependent on the completion of outputs under other outcomes. Some savings in the budget were made: activities accomplished at no cost or accomplished with financial contributions from other stakeholders. No delays in disbursements were reported in any of the countries over and above usual time frames in administrative processes.

105. **Contributing factors.** Political instability has resulted in stalling of work on nutrition governance during long transition periods in Haiti and Myanmar. There were frequent changes in key government positions (ministers and directors in Haiti and Myanmar) and in sector NFPs (Haiti, Mali, Myanmar and Senegal) and among Heads of Agencies and NFPs most prominently in Haiti. The differing priorities and knowledge about nutrition governance and the role of REACH of new appointees affected the steadiness of dialogue and slowed the pace of activities. Recurrent natural disasters, security problems and focus of Government and partners on emergency response, with less attention on the emergency-development nexus and governance-related issues had a negative impact on REACH activities in Haiti, Myanmar and Mali. As regards the policy environment and Government commitment to multi-sectoral approaches, constraints were observed: initial reservation about REACH added value on the part of the nutrition coordination entity (Senegal); delays in setting up a technical coordination entity (Mali, Burkina Faso); absence of a multi-stakeholder platform bringing the two existing coordination entities and significant difference of views on the anchorage and leadership of nutrition governance processes among different sectoral ministries (Haiti); positioning of the SUN-FP in health ministry leading to nutrition being perceived as a health-led issue affecting the extent and regularity of engagement of other sectors (Burkina Faso, Haiti, Mali and Myanmar). Engagement of sector NFPs: high turnover, lack of guidance in their designation, weak capacity and limited decision-making power.

106. **Enabling factors.** Include: quality of facilitators’ communication and networking skills (building relationships with a wide range of government sectors and bringing them together) as well as the quality of their inputs into various documents; support from the UNN/REACH Secretariat both remotely and through country visits, and REACH guidance and tools. Regarding the latter, many stakeholders in the five countries expressed their satisfaction with the participatory processes involved and the products they yielded.
107. **Sustainability.** There is not enough hindsight to make a definitive assessment of sustainability of REACH outputs and deliverables as some have been only recently completed and the validation process is in progress. Nevertheless the ET examined the potential for sustainability on the basis of various parameters: alignment of REACH outputs relative to national priorities; and degree of knowledge transfer to enable national counterparts to update awareness raising deliverables when needed or maintain regular inter-sectoral consultation meetings post-REACH. The ET concluded that REACH contributed to catalysing Government ownership (such as in Myanmar) or maintaining it where it already existed (Burkina Faso and Senegal) through awareness raising and consensus building activities (outcome 1), particularly when those involved a participatory process such as SUNPMT or were adapted to countries’ specific needs (such as the PPO used for sub-national planning in Burkina Faso). However the absence of initial consensual buy-in for REACH support by both Government and REACH partner agencies coupled with recurrent disasters (less attention to long-term development and governance issues and lack of clarity as to REACH contribution under such circumstances) has compromised implementation as well as sustainability of REACH results such as in Haiti.

3.2. **Lessons Learned and Good Practices**

108. **Lessons learned.** Government ownership is both a prerequisite of sustainability of REACH results and a consequence of REACH support. Accomplishing planned outputs and progressing towards intended outcomes in a sustainable manner require the strong and consensual will of national stakeholders to: 1) improve dialogue through existing nutrition consultation and coordination mechanisms or by agreeing to establish a new one (if required); 2) work together under the aegis of a consensually developed and adopted multi-sectoral nutrition (or food and nutrition security) plan; and 3) the political willingness at the highest level to take actions accordingly. The lack of these essential prerequisites coupled with lack or insufficient consensual buy-in for REACH support among REACH partner agencies at country level, such was the case in Haiti, can clearly undermine progress.

109. **Good practices.** The use of the PPO in Burkina Faso for the analysis of sub-national plans is a good example of the adaptation of REACH tools to countries’ needs and of how REACH can support scaling up nutrition programmes by helping local actors to better identify opportunities to integrate nutrition. Burkina Faso’s experience with the PPO is worth sharing with other countries. The UNN/REACH Secretariat should consider revising its guidance for this tool encouraging facilitators to adapt it to country needs and share Burkina Faso’s PPO through its website. Capacity gap assessment in Senegal is a good example of how REACH complements support provided by other stakeholders of cost sharing by development partners. Cost sharing opportunities should be sought at the design stage when sharing REACH draft proposal with stakeholders (see Recommendation 1) and throughout implementation. The addition of gender as a reporting item in the facilitators’ monthly reports as done in Myanmar is a good example of gender mainstreaming into REACH country level support and should be included in future reporting formats.
3.3. Recommendations

110. Based on the findings and conclusions of this evaluation, the recommendations of the evaluation team are outlined below. Country-specific recommendations are presented in Annex 9 at the end of each CCS summary. The following 7 recommendations pertain to future REACH engagement in other countries. Each recommendation is preceded by a brief recall of its justification. All recommendations are addressed by the UNN/REACH Secretariat in consultation with REACH SC as and when required. No specific timeline can be proposed at this stage, as the UNN/REACH Secretariat has not yet developed its work plan for 2018. The ET was informed that the following priorities/strategies are currently under discussion within the UNN/REACH Secretariat and with REACH SC: a) review of REACH design and operational model taking stock of the on-going REACH Irish Aid model whose main features include yearly funding, prioritisation of outcomes/outputs, senior national facilitator hosted by government with one regional facilitator covering four countries; b) a UNN business case exploring where the UN can collectively make a difference (areas under consideration include the humanitarian-development nexus); and c) launch of a new UNN/REACH website. Based on this information, the ET proposes the following prioritisation: R1, R2 and R3, which relate to REACH design and operational model and R7, which relates to knowledge sharing/UNN/REACH website, should be acted upon immediately after approval of the evaluation report.

111. **Recommendation 1 – REACH initiation and design.** The degree of national stakeholders’ endorsement of REACH planned outputs at design stage, was uneven and is amongst the reasons for delays in launching an activity and/or in its validation. REACH exploratory missions were too short to fully capture the intricacies of nutrition governance although they have always included consultations with UN agencies, national and external stakeholders. The seemingly consensual request by REACH partner agencies for REACH support did not always translate into their continued commitment during REACH engagement period.

**R1:** Adopt a more formalized and transparent design process with clearly defined criteria and steps to ensure full endorsement and ownership of REACH engagement by REACH partner agencies and national stakeholders at inception and throughout implementation. The following could be considered as relevant and feasible:

- a) A request outlining areas for which REACH support is required should be developed based on in-depth consultations within the UN system (a retreat or workshop along similar objectives to those organized by REACH for the development of a joint UN Agenda) followed by consultations with the Government at the technical and higher political decision-making levels for their inputs and agreement in principle;

- b) A country visit by UNN/REACH Secretariat staff to elaborate a draft proposal to be discussed and endorsed at a workshop chaired by the SUN-FP (or co-chaired by existing coordination entities) and bringing together all relevant stakeholders (UN agencies, ministries, donors and SUN Networks).

112. **Recommendation 2 – Country-tailored REACH support.** There was limited or no progress on some outputs in view of the sequential nature of REACH outcomes within a three-year time frame. Having a standard implementation plan
articulated around the four REACH outcomes was not realistic and did not prove feasible. Moreover some deliverables did indeed fill an information gap but were not acted upon by national stakeholders, as they did not respond to their expressed needs.

**R2: Adopt a flexible design of REACH engagement with a reasonable range of outcomes tailored to countries’ contexts and expressed needs, taking into account the time required to carry them out.** In order to achieve better results, consider a staged-approach for REACH support: an initial phase with a more realistic range of outcomes and outputs and a second “on demand” phase subject to an appraisal of results so far achieved.

**113. Recommendation 3 – REACH role in emergency settings.** In countries faced with humanitarian challenges, the focus on emergency response has diverted attention away from longer-term governance-related issues, although there is wide consensus among all stakeholders on the need to strengthen the humanitarian-development nexus.

**R3: Clarify if and how REACH can contribute to supporting and strengthening nutrition governance in emergency settings building on the results of the current reflection by the SUN Movement Secretariat on bridging the development-humanitarian divide during crises in the SUN Movement countries.**

**114. Recommendation 4 – Updating REACH guidance.** Difficulties were encountered in using the SUNPMT throughout the process of data collection, compilation, analysis and interpretation and concerns about its sustainability, as national capacity remains weak. There is lack of clarity as to the role and scope of REACH support in the development of guidance material and in conducting training (output under outcome 3). The PPO as it stands was generally perceived as too descriptive except in Burkina Faso where it was adapted as an analytic and planning tool at sub-national level.

**R4: Update REACH facilitators’ manual and/or specific guidance material on REACH tools based on lessons learned with particular attention to knowledge transfer and capacity building.** The following require particular attention:

a) PPO: adapting it as a tool for assessing programming at sub-national level.

b) SUNPMT: a more rigorous data collection supervision system; clarifying responsibilities throughout the process; enhancing participation of national stakeholders in data analysis and interpretation; elaborating a simplified version for its use as a planning tool at the operational level as it can provide information on the complementarity of actors and interventions and can generate opportunities for synergies.

c) Institutional and human capacity building: clarify areas of focus and audience taking into account/leveraging on capacity building tools of REACH partner agencies.

**115. Recommendation 5 – REACH logframe and M&E system.** REACH logframe, which dates back to 2013, is the basis on which REACH M&E system was developed. Baseline and endline data collections form a fairly satisfactory basis for comparing countries’ progress towards the end of REACH engagement but do not provide performance data to guide programmatic decisions.
R5: Review REACH logical framework and M&E system in the light of the revised REACH TOC and lessons learned from the implementation of REACH M&E to become more performance-oriented, allowing corrective measures as needed, and distilling lessons learned. This should involve the recruitment of an M&E expert to review and update REACH logical framework and M&E system, namely the choice of indicators and parameters for baseline and endline assessments. Consideration should be given to having country-specific logical frameworks and adapting the format of the annual country progress reports accordingly.

➢ Budget implications: recruitment of a M&E Expert

116. **Recommendation 6 – Equity/Gender.** Gender received attention at REACH design stage but commitments included in the CIPs are not tailored to countries’ contexts and some of them are not realistic. Equity/gender issues are not sufficiently included in REACH guidance and tools. Even though the core principles of equity and gender are already embedded in REACH partner agencies’ global policies and in their respective assistance programmes in countries, REACH can play an important role in further streamlining and promoting gender and equity issues into nutrition governance processes.

R6: Strengthen and mainstream equity/gender in REACH guidance and tools, REACH outcomes and M&E system. This will involve streamlining equity/gender in REACH manual and tools in order to guide facilitators in: incorporating a gender analysis as part of the multi-sector and multi-stakeholder stocktaking (for example in MNO: analysing needs, priorities and roles of men and women); promoting the incorporation of equity/gender-specific and sensitive elements in multi-sectoral nutrition policies and strategies; advocating for representation of line ministries responsible for equity and gender (and/or a national women council or commission or equivalent) in multi-sector nutrition coordination mechanisms.

117. **Recommendation 7 – Knowledge sharing and capitalisation.** REACH supports countries in laying the groundwork for nutrition governance. Sustaining nutrition governance requires countries to regularly update the stocktaking deliverables in order to maintain stakeholder awareness of nutrition and provide up-to-date information for decision-making; and have effective monitoring and accountability mechanisms to document implementation of their multi-sectoral nutrition plans.

R7: REACH should capitalize on experience and disseminate results through its website. The UNN/REACH website can enable countries to acquire knowledge and skills, networking, sharing experiences and learning about good practices, and enable REACH to continue its support and capacity building remotely.
Annexes

Annex 1: Terms of reference
Annex 2: UNN/REACH Secretariat support
Annex 3: Country-specific planned outputs and deliverables
Annex 4: Breakdown of planned budget by country per respective CIP
Annex 5: Evaluation Matrix
Annex 6: List of people interviewed
Annex 7: Bibliography
Annex 8: Additional information on the evaluation methodology
Annex 9: Summaries of country case study reports
Renewed Efforts Against Child Hunger and undernutrition

https://www.unnetworkforsun.org/reach