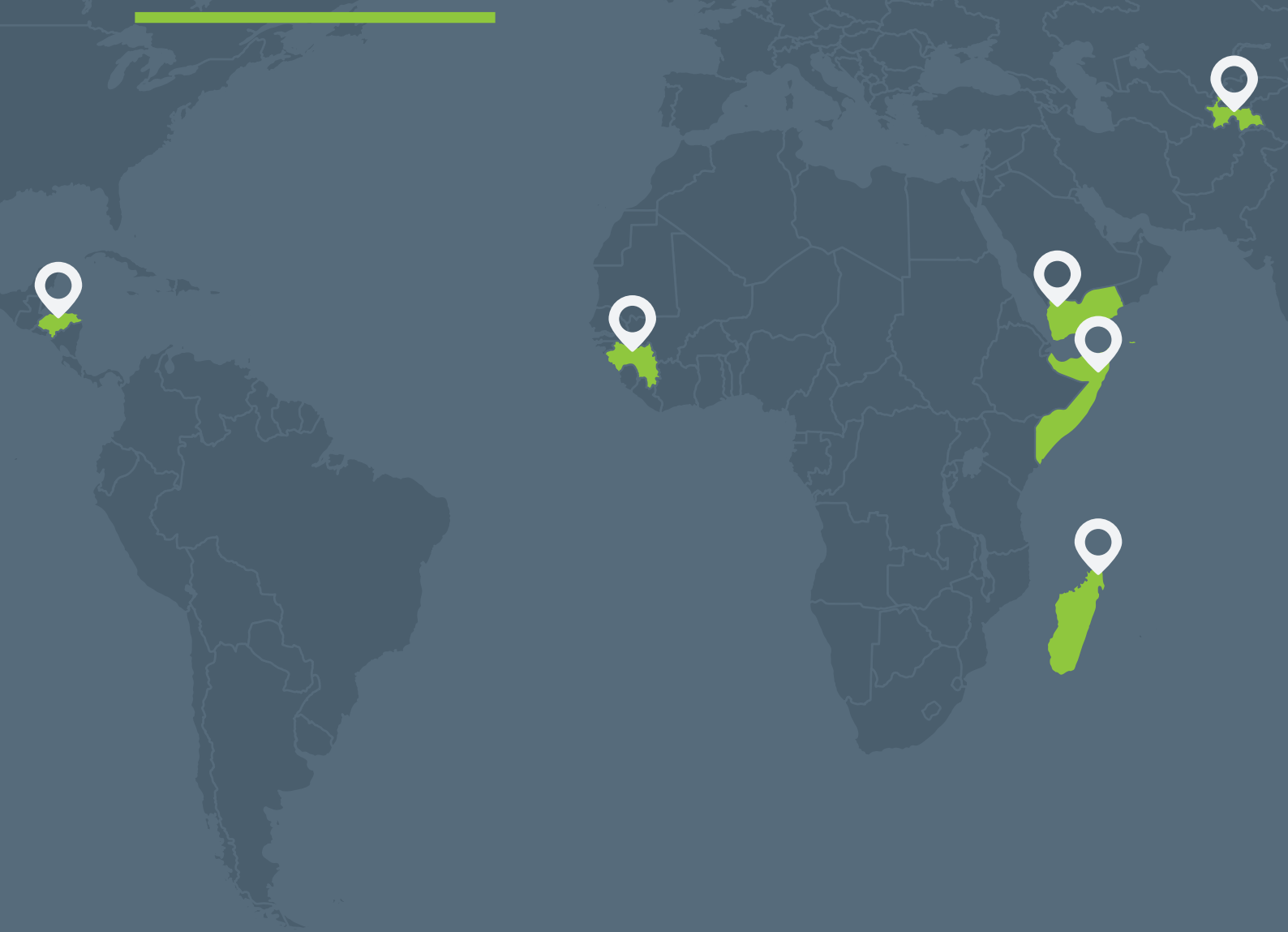# Effectiveness of Technical Assistance:

Synthesis Report on Key Findings from Six Case Studies on the Effectiveness of Technical Assistance provided by the TAN MQSUN+ facility 2017–2020

Guinea • Honduras • Madagascar • Somalia • Tajikistan • Yemen

Contents

Effectiveness of Technical Assistance:

Synthesis Report on Key Findings from Six Case Studies on the Effectiveness of Technical Assistance provided by the TAN MQSUN+ facility 2017–2020

Abbreviations

CRF	Common Results Framework
FCDO	Foreign, Commonwealth and Development Office
FNS	Food and nutrition security
GESI	Gender, equity and social inclusion
GTNA	Groupe Technique de Nutrition et Alimentation (Technical Group for Nutrition and Food) (Guinea)
JAA	Joint Annual Assessment
M&E	Monitoring and evaluation
MOH	Ministry of Health
MOHSPP	Ministry of Health and Social Protection of the Population (Tajikistan)
MOPIC	Ministry of Planning and International Cooperation (Yemen)
MOU	Memorandum of Understanding
MSNAP	Multisectoral Nutrition Action Plan
MSNP	Multisectoral Nutrition Plan
MSNS	Multisectoral Nutrition Strategy
MQSUN+	Maximising the Quality of Scaling Up Nutrition plus
NI	Nutrition International
NGO	Non-governmental organisations
ONN	Office National de Nutrition (Madagascar)
PNAN	Plan National d'Action pour la Nutrition (National Action Plan for Nutrition) (Madagascar)
SMS	SUN Movement Secretariat
SUN	Scaling Up Nutrition
TA	Technical sssistance
TAN	Technical Assistance for Nutrition programme
TASC	Technical Assistance to Strengthen Capabilities project
TOR	Terms of reference
UN	United Nations
UNICEF	United Nations Children's Fund
UTSAN	Unidad Técnica de Seguridad Alimentaria y Nutritional (Food Security and Nutrition Unit) (Honduras)
WFP	World Food Programme
WHO	World Health Organization
WRA	Women of reproductive age

1. Summary of Key Case Study Findings

Key findings from case studies in Guinea-Conakry, Honduras, Madagascar, Somalia, Tajikistan & Yemen

TA start-up & design

- **Strong leadership for nutrition at senior government level** (i.e. presidential or prime ministerial offices) is pivotal in designing, developing and implementing multisectoral nutrition policies, plans and related resources. Ensure **joint nutrition ownership by all sector ministries**, avoiding the predominance of one sector (e.g., Ministry of Health).

- **Clearly define the TA scope and respective responsibilities** of the country stakeholders and TA providers at design stage and formalise this in an agreement.

- **Include relevant sector ministries and government institutions** from the design phase of TA (not just in consultations to develop outputs), to promote a multisectoral perspective and improve ownership and uptake of TA. **A core country team** assigned to liaise with TA providers can expedite consultation and feedback processes, as well as improving the quality and relevant of programmes/actions. This team can be comprised of: the SUN Focal Point, representatives from key line ministries, SUN Networks, UN agencies and other partners, civil society and should also include women and representatives from vulnerable and marginalised groups,

- Consider the unique support needs of fragile, conflict-affected countries. For example, provision of **entirely remote assistance**, assessing **how optimal geographical coverage of outputs can be achieved regardless of political allegiances** and identifying **means to effectively engage government representatives and humanitarian actors across the humanitarian-development nexus.**

- **Remote TA** in particular requires clarity and consensus on objectives; careful joint preparation and robust design of tools for consultation and information collection.

TA provision & quality

- **Understanding of government protocols and planning processes** and cycles is helpful in informing a realistic approach, methodology, work plan. Timing of TA matters and allocating sufficient time.

- **A nutrition capacity assessment** across sectors at design stage can inform capacity-strengthening strategies of the TA itself and the definition of capacity development activities within outputs.

- **Involvement of sub-national stakeholders** in TA is essential from the outset, to ensure that their TA needs are considered and to improve their engagement in the process as well as their ownership and understanding of the TA outputs, enhancing knowledge and skills to take forward TA outputs at their respective levels of action.

- **National consultants** can leverage in-country knowledge, experience and promote sustainability; strengthening their capacity could be an explicit component of the TA.

- **Sector-specific expertise** within the team can facilitate the development of sector-specific activities with relevant ministries and enable a multisectoral approach.
- **Dedicated expertise in gender, equity and social inclusion (GESI)** as part of the TA can help to ensure the meaningful participation of women and marginalised and vulnerable groups, build local GESI expertise, and improve GESI analysis and enhance its integration within policies, plans and other outputs. More weight should be given to equity and social inclusion in TA provision.

TA utilisation & uptake

- Whilst **optimal uptake and utilisation of TA outputs** are dependent on wider country processes and systems, there are steps that can be taken throughout the TA process to maximise the chance of success. These include: ensuring TA requests are well-informed and appropriate, engaging multi-sectoral stakeholders at national and sub-national level from the conceptualisation and design stages, relevant and accessible outputs, strengthening national capacity to absorb the TA and putting in place a clear plan for launch, validation and dissemination of outputs.
- **A specific plan for validation and dissemination of TA outputs** could help to improve their uptake and onward use, particularly at subnational level. TA providers could support in its development as well as provision of tools which support onward use (e.g., hand over notes/roadmaps, abridged versions of outputs to improve accessibility, examples from other countries, example proposals).
- **Support sector ministries and government institutions** in integrating relevant component of TA outputs into sector plans and in activities at subnational level to improve ownership and uptake of TA.
- **The media** can help to raise the profile of, and engagement in, processes such as multisectoral nutrition plan development and implementation, particularly at subnational level.
- **Optimal utilisation and uptake of TA outputs** are the result of a combination of factors: well-informed and appropriate TA requests, a participatory and inclusive process where sectors are fully engaged with clearly defined roles, relevant and accessible outputs, existing national capacity to absorb the TA with a clear dissemination plan in place.

2. Background and Introduction

2.1. Background to MQSUN+ TA and the TA Effectiveness Review

The Technical Assistance for Nutrition (TAN) programme is a 6.5-year (May 2015–November 2021), £35.8 million Foreign, Commonwealth and Development Office (FCDO)-funded initiative that provides support to the Scaling Up Nutrition (SUN) Movement and FCDO staff. The Maximising the Quality of Scaling Up Nutrition Plus (MQSUN+)[1] programme was a TA facility within the larger TAN programme which SUN countries could access from 2015 to 2020. MQSUN+ was designed as a last-resort TA provider (i.e. where no other options or capacity for meeting TA needs were available at country level), and received context-specific expertise requests from the SUN Focal Points through the SUN Movement Secretariat (SMS). This facility promoted a 'demand-driven' model, whereby technical support and expertise were available to overcome capacity gaps in the design and delivery of national multisector nutrition plans and other key elements of the government's planning and implementation cycle. Following the end of MQSUN+ in 2020, the Technical

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1   https://mqsunplus.path.org/about/

Assistance to Strengthen Capabilities (TASC) project was established as a follow-on TA facility with a similar approach, led by DAI with NutritionWorks (NW) and Development Initiatives (DI) as consortium partners.

In addition to MQSUN+, countries were able to access TA through Nutrition International's Nutrition Technical Assistance Mechanism (NTEAM) ,[2,3] under the TAN programme. Nutrition International (NI) provides longer-term in-country support, responding to direct requests from the SUN Focal Point and agreed through prioritisation exercises with members of multi-stakeholder platforms.

Figure 1: Country Requests to MQSUN+, TASC and NI
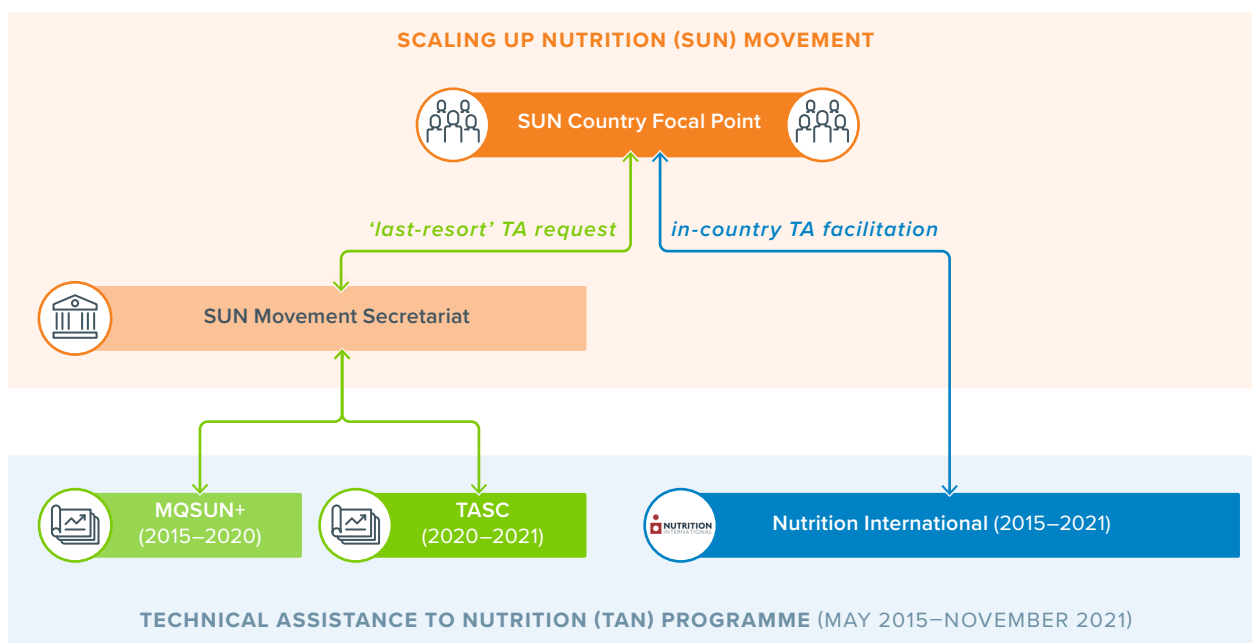
2.2. Objectives of the review

To understand the effectiveness of TA design and provision, TASC undertook a series of case studies of TA provided by MQSUN+ to a number of countries. These case studies are designed to identify best practices and lessons learned to inform the future design and provision of TA and to be used by requesting country governments and agencies involved in providing TA.

Six case study countries were selected according to the criteria listed in Box 2, from a list of 14 countries where MQSUN+ provided TA between 2017 and 2020: **Guinea, Honduras, Madagascar, Somalia, Tajikistan** and **Yemen.**

Criteria for the selection of case study countries

- Stable/fragile conflict-affected context
- Long-term/short-term TA provision
- Type of support provided (national nutrition plans/policies, advocacy/communication strategies, monitoring and evaluation (M&E) plans, costing etc.)
- 'Remote' versus in country TA provision
- Geographical location and language

2   https://www.nutritionintl.org/project/technical-assistance-for-nutrition-tan-project/
3   https://www.nutritionintl.org/learning-resource/external-progress-assessment-technical-assistance-delivered-nutrition-internationals-tan-project/

The case studies aimed to assess effectiveness across the TA process, including design, provision production of outputs, and onward uptake and utilisation. They considered the following elements:

- Relevance and responsiveness to country context, priorities and needs
- Country capacity to contribute to and absorb TA outputs
- Quality and accessibility of outputs
- Contribution of TA outputs to: scale; enhancing GESI outcomes; governance; multisectoral coordination and collaboration; enhanced quality of programmes and policies; improved monitoring of progress in nutrition; and effectiveness at leveraging resources.

Key lessons learned and recommendations from these case studies are presented in this report. These are also presented in a separate guidance note[4] for use by those requesting and those providing TA.[5]

Table 1: MQSUN+ TA provided in response to country nutrition profiles

COUNTRY	COUNTRY NUTRITION CONTEXT	MQSUN+ TA PROVIDED
Guinea	30.3% stunting & 9.2% wasting in under 5s; 50.6% anaemia in women of reproductive age (WRA); 11.5% obesity in adult women[6]	Support provided to the SUN Focal Point and Multistakeholder Platform between **May 2018 and April 2020** to develop: • Guinea Multisectoral Nutrition Policy and Budget • Costed National Multisectoral Nutrition Strategic Plan • Nutrition Stakeholder Mapping and proposals for scaling up • Communication and Advocacy Strategy and Activity Plan
Honduras	23% stunting & 29% anaemia in under 5s; 15% anaemia in WRA; 26.9% obesity in adult women[7]	Support provided to UTSAN[8] from **June–September 2020** to develop: • A revised legal framework for the official COVID-19 response • A compilation of guidelines for the subsequent development of an 'Action and Strategic Operation Plan for Food and Nutrition Security (FNS) during Coronavirus' • An advocacy document including guidelines for the integration of FNS in the COVID-19 response • Suggestions for reorganising and updating the National Strategy for FNS and the National Nutrition Plan • Guidelines for adequate planning and management of food assistance • Summary of guidelines and tools for FNS planning at sub-national level

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4   Guidance for Assuring Quality in the Design and Implementation of TA for Nutrition
5   Including: government SUN Focal Points and other country stakeholders, SMS, UN agencies, donors, TA providers, development partners, academic institutions
6   https://globalnutritionreport.org/resources/nutrition-profiles/africa/western-africa/guinea/
7   https://globalnutritionreport.org/resources/nutrition-profiles/latin-america-and-caribbean/central-america/honduras/
8   Unidad Técnica de Seguridad Alimentaria y Nutritional (Food Security and Nutrition Unit), established in 2015 within the Ministry of Coordination, with responsibility for public policy on Food Security and Nutrition.

Madagascar	42% stunting & 6% wasting in under 5s, 37% anaemia in WRA, 7.5% obesity in adult women[9]	Support provided to the SUN Focal Point and the Office National de Nutrition (ONN) between **September 2017 and May 2018** to: • Review and update the National Nutrition Policy • Develop a M&E plan to complement the Plan National d'Action pour la Nutrition III[10] (PNAN III) • Develop the implementation plan of the PNAN III
Somalia	25.3% stunting & 14.3% wasting in under 5s, 44.4% anaemia in WRA, 12.3% obesity in adult women[11]	Support provided to the SUN Focal Point and Office of the Prime Minister (OPM) between **2017 and 2019** to: • Assist with the development of a Common Results Framework (CRF) and a Multisectoral Nutrition Strategy (MSNS)
Tajikistan	18% stunting & 6% wasting in under 5s, 30.5% anaemia in WRA, 16.7% obesity in adult women[12]	Support provided to the SUN Focal Point, SUN Technical Focal Point and the Multistakeholder Platform between **2017 and 2020** to develop a CRF and Multisectoral Nutrition Action Plan (MSNAP)
Yemen	46.4% stunting & 16.4% wasting in under 5s, 69.6% anaemia, 22% obesity in adult women[13]	Support provided to the Yemen SUN Secretariat between **2017 and 2020** to: • Update the nutrition contextual analysis to reflect the consequences of the conflict • Update a costed Common Results Framework • Develop a costed Multisectoral Nutrition Action Plan, and an Advocacy and Communication Strategy

9   https://globalnutritionreport.org/resources/nutrition-profiles/africa/eastern-africa/madagascar/
10 National Action Plan for Nutrition 2017–2021
11 https://globalnutritionreport.org/resources/nutrition-profiles/africa/eastern-africa/somalia/
12 https://globalnutritionreport.org/resources/nutrition-profiles/asia/central-asia/tajikistan/
13 Global Nutrition Report 2020 https://globalnutritionreport.org/resources/nutrition-profiles/asia/western-asia/yemen/

3. Methods and Limitations

A Steering Committee, composed of representatives from TASC, SMS, FCDO, PATH and a representative from the SUN Operationalisation (SUN Ops) Working Group, was set up at the beginning of the study to provide guidance and oversight of the assignment as well as feedback and validation of key outputs. The Steering Committee was consulted regularly (including through four meetings, email exchanges, one-to-one discussions, and sharing of draft case studies and reports) on the scope of work and methodology. It played an important role in ensuring the neutrality and objectivity of the project team, triangulation of findings and avoidance of biased feedback. Steering Committee members are listed in Annex 1.

The study team developed an outline interview framework for consultation with country stakeholders through key informant interviews (KIIs), based on the review objectives and tailored to the country context, the type of TA provided, and the stakeholders concerned. Stakeholders to be interviewed were identified for each country according to their involvement in the TA process. These included SUN Focal Points and Technical Focal Points, representatives from sectoral ministries, sub-national government, development partners (including donors and UN agencies), private sector, national and international civil society, research and academia, SUN networks, the SMS Country Liaison Team, and MQSUN+ TA staff and consultants.

SUN Focal Points in each country were contacted with information about the case studies, and requested to participate and to provide contact details of relevant stakeholders. The study team then contacted these stakeholders by email and invited them to participate in the review. Overall, 86 stakeholders were contacted and invited for interviews in the six countries, with 55 people[14] participating in KIIs, which were conducted online (due to the remote nature of this review).

In some countries, there were difficulties in eliciting a response from key stakeholders regarding participation in KIIs. Due to high national and international staff turnover in most countries, several respondents had not been involved in the TA design or process, but still provided useful insights around the uptake and utilisation of TA outputs. In some cases, several years had passed since the TA was provided (e.g. Madagascar), increasing the risk of recall bias.

Drafts of the case studies were reviewed by the Steering Committee and finalised by the study team. The main findings, key messages and lessons learned are captured in this synthesis report and also summarised in a guidance note, intended to inform future TA provision modalities and ways of working, for use by both those requesting and providing TA.

4. Findings

4.1. TA design

4.1.1. Identification of TA needs

On the whole, the case studies indicate that the demand for TA was country-led. TA needs and terms of reference (TOR) were first defined and agreed by country stakeholders, and then an expression of interest (EOI) was developed by MQSUN+, which was refined through a consultative process with SMS.

Table 2: Examples of processes for country-led TA requests

COUNTRY	PROCESSES FOR IDENTIFYING TA NEEDS
Guinea	A government-led situation analysis and discussions during the 2016 JAA were used to define TA needs.
Madagascar	TA needs were defined through an evaluation of PNAN II and during the SUN Joint Annual Assessment (JAA) process, involving a range of stakeholders at national level.

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14   Breakdown of number of stakeholders interviewed by country: Guinea – 11, Madagascar – 17, Honduras – 4, Somalia – 4, Tajikistan – 8, Yemen – 11.

COUNTRY	PROCESSES FOR IDENTIFYING TA NEEDS
Somalia	The Yemen SUN Secretariat based in the Ministry of Planning and International Cooperation (MOPIC) worked with sector ministries, United Nations Children's Fund (UNICEF) and World Health Organization (WHO) to define a TOR for support, before reaching out to SMS and MQSUN+ for support.
Yemen	The Yemen SUN Secretariat based in the Ministry of Planning and International Cooperation (MOPIC) worked with sector ministries, United Nations Children's Fund (UNICEF) and World Health Organization (WHO) to define a TOR for support, before reaching out to SMS and MQSUN+ for support.

As Table 3 shows, stakeholders in Honduras and Tajikistan suggested that the definition of TA needs had not been as participatory and government-led as in the other case study countries.

Table 3: Identification of TA needs in Honduras and Tajikistan

COUNTRY	PROCESSES FOR IDENTIFYING TA NEEDS
Honduras	UTSAN initially identified the need for support to integrate nutrition within the response to COVID-19, with some engagement with the SUN Focal Point, academia and donors. Some respondents suggested that initial discussions to define TA needs could have been more inclusive from the outset.
Tajikistan	Stakeholders in Tajikistan suggested that the demand for TA was driven more by UNICEF than by the SUN Focal Point and other government stakeholders, following a policy and programme review conducted by MQSUN in 2014.

Although MQSUN+ was intended as a 'last resort' TA provider, some case studies found that opportunities and capacity for in-country TA provision had not been sufficiently explored or the need for external TA adequately justified before reaching out to MQSUN+.[15] In Madagascar and Somalia, a set of TA priorities were defined and some allocated to country-based stakeholders (e.g. UNICEF, World Food Programme (WFP), WHO), while for others, a request was made to MQSUN+. In Honduras, UTSAN had previously benefited from TA from the EUROSAN-Occidente Project[16] to develop several outputs, and some stakeholders remarked that the possibility of further support was not sufficiently investigated at country level before contacting MQSUN+. In future TA processes, guidance could be provided for country stakeholders which outlines steps in identifying potential TA partners, ensuring that options for support from national or regional providers have been explored before reaching out to SMS.

4.1.2. Role of country stakeholders

Some case studies found that expectations and respective roles of country stakeholders and TA providers were not sufficiently discussed and agreed at design stage (e.g. organising and facilitating consultations and workshops; providing data and inputs for drafting deliverables; facilitating reviews of outputs).

In **Madagascar** and **Tajikistan**, this resulted in a lack of participation by country stakeholders in the development of outputs, with a perceived expectation that the work was the sole responsibility of the national and international TA consultants. This highlights the importance of ensuring at inception phase that the SUN Focal Point, and members of the SUN multi-stakeholder platforms and networks, are fully aware of their overall responsibility in supporting, facilitating and contributing to TA processes.

Involvement of stakeholders at sub-national level in defining TA needs and participating in the TA was found to be lacking across all case study countries. Respondents suggested that TA design and timeframes should be adjusted to allow for this in future.

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15 MQSUN was the precursor initiative to MQSUN+, implemented between 2012 and 2016
16 Inicio – EUROSAN-Occidente http://www.eurosan.hn

4.1.3. Contextual analysis

MQSUN+ routinely conducted contextual analysis through exercises such as stakeholder consultations, workshops and desk reviews. However, in complex political contexts, more detailed contextual analysis may be needed in future to inform the most appropriate and effective TA provision approaches. In informing contextual analysis, some respondents noted the importance of sourcing data from UN agencies and development partners, as well as from government sources, to fill data and information gaps.

In **Yemen**, TA outputs were developed jointly by MQSUN+ and stakeholders in Sana'a (north) only, after which their adaptation and uptake was promoted to stakeholders in Aden (south). It was suggested this approach may have affected levels of engagement from UN and other actors with the TA process and outputs, as the TA supported one part of the country only and therefore was not perceived as neutral. This approach had also resulted in security risks for the SUN Secretariat representatives from Sana'a travelling between the two parts of the country. On reflection, representatives from both the TA provider and the SUN Secretariat in Sana'a stated that a more effective and inclusive approach would engage both factions from the initial negotiation and design stages, despite the significant logistical and organisational challenges. A longer inception phase may have assisted in researching and securing such an approach.

Representatives of the TA team in **Tajikistan** highlighted that, in retrospect, an initial political economy analysis, possibly as part of an inception phase, would have been appropriate. This could have included consideration of government protocols and bureaucratic processes to better inform the team on realistic objectives, approaches, timeframes and outputs for the TA.

4.1.4. Capacity considerations

4.1.4.1. TA provider capacity

National stakeholders in the different countries found that international TA consultants generally had good knowledge and experience in developing national multisectoral nutrition common results frameworks, policies and plans. Participants also highlighted the key role of external consultants in bringing new ideas, experiences from other SUN countries and latest research evidence, whilst also providing an objective and neutral perspective, essential in dealing with stakeholders from multiple sectors with competing priorities.

The ability to work with sectors on designing or adapting interventions to improve nutrition outcomes, and knowing how to link nutrition-specific and nutrition-sensitive actions across sectors, were also flagged as important skills. However, it was felt that expertise was lacking in some specific areas such as; multisectoral monitoring and evaluation of nutrition actions/indicators; and communication and advocacy; with implications for the related content and quality of outputs.

A stakeholder in **Yemen** remarked that it should not be assumed that nutrition experts also have expertise in areas such as GESI, and that this specific expertise should be considered when assembling a TA team, to ensure these aspects are well integrated and considered in the TA outputs. Fluency in local languages was seen as an additional advantage.

Respondents in **Madagascar** highlighted that sufficient expertise to develop an M&E plan exists in-country, and this could have been drawn on instead of bringing in international consultants. Stakeholders in **Somalia** stressed the importance of functional skills of TA providers, in areas such as coordination, negotiation and training, particularly for the Team Lead role.

4.1.4.2. National consultant capacity

The recruitment and pairing of national consultants with international consultants were regarded as good practice in TA, as this helps to take local contextual issues into account throughout the process and develop capacity in-country through a 'learning by doing' approach. Although this

approach is limited to individuals, in some cases (e.g. Somalia and Tajikistan) national consultants hired by MQSUN+ then went on to use their experience and knowledge to support other processes, hired by the government and other partners.

With the exception of Yemen, capacity development of the national consultant to promote sustainability and continuity was not an explicit component or objective of TA. Some stakeholders suggested this should be included from design stage as a specific activity with a dedicated budget.

Stakeholders in **Guinea** suggested that national consultants based at regional level would have helped to bring realities of the field to the forefront, and ensure outputs included the sub-national perspective.

Representatives from several countries stated they would have liked to have had the opportunity to review international and national TA consultants' curriculum vitae (CVs) prior to their recruitment.

4.1.4.3. Capacity of national stakeholders

In some cases, an assessment of national stakeholder capacity in nutrition was conducted to inform the design of TA provision, as well as the content of eventual outputs. These were only rapidly conducted and used a very limited sample.

In **Somalia**, a very brief exercise aimed to define levels of awareness and training in nutrition, although stakeholders noted that, with more time and resources, this could have been more comprehensive and included capacity to consider and address GESI issues.

In **Yemen**, a rapid capacity assessment meeting was held with multisectoral stakeholders to define existing functional and technical capacities to support the development of the CRF and MSNAP, although it was suggested that a more formal tool to guide this process would have been helpful. In **Honduras**, an assessment of national capacity was not included, due to the short timeframe, although one respondent observed that UTSAN may have had internal capacity to develop some of the outputs that were requested of MQSUN+.

Several respondents underlined the importance of an initial phase of awareness raising and capacity strengthening on multisectoral nutrition action for different sector stakeholders in the design of TA, particularly where sector ministries are used to working in a 'siloed' manner and do not recognise their role in responding to the problem of malnutrition. It was also proposed that TA design should include support to sector ministries on how to integrate relevant components of multisectoral policies and plans into sector documents. Longer-term TA to countries, as modelled by the NI TAN approach, can be an effective way to support the operationalisation of multisectoral plans, by accompanying country stakeholders through the steps required for implementation.

4.1.5. Gender, equity and social inclusion

GESI considerations were included to differing degrees in the design of the TA assignments, largely dependent on the capacity of the TA provider and intention to include GESI in the TA design. The FCDO reportedly assisted in pushing the GESI agenda forwards through MQSUN+ TA, and a PATH representative also stressed the key role that TA can play in "elevating the conversation around gender". However, the case studies show there is considerable room for improvement in this respect. Lessons learned from the TA provision indicate the need to provide specific expertise and build local capacity on GESI; ensure meaningful participation of women, and vulnerable and marginalised groups in TA processes; and apply a GESI analysis to inform priorities for action.

Gender and equity-related information from past situational analyses informed how GESI considerations would be 'framed' within the CRF and MSNS in **Somalia**. The strong existing expertise of nutrition experts in Somalia, particularly amongst those working in the UN, was regarded as instrumental in the inclusion of a dedicated strategic objective on GESI in the strategy.

Government stakeholders in Yemen stressed that gender had been considered since the country signed up to the SUN movement, and that women had participated in the TA design and process and were an intended target of TA outputs. However, they agreed that more expertise and orientation on GESI, that drew on experiences and examples from other countries, was needed at the design stage. This would have improved the content of outputs in terms of highlighting the importance of targeting women and adolescent girls with nutrition, addressing GESI issues and responding to specific needs to improve nutrition outcomes. Stakeholders suggested that the use of a framework would have helped to improve the incorporation of GESI in TA outputs, although this was not available at the time of the TA. The Gender Transformative Framework for Nutrition[17] has since become available and tools are being developed to support its application.

GESI was not explicitly included in the identification of TA needs or design in Madagascar. The disaggregation by sex was regarded as the primary means for GESI integration into the M&E plan. One respondent highlighted a lack of capacity in the country regarding GESI. GESI-related tools, guidelines and checklists would have been helpful for mainstreaming GESI in the TA.

In Honduras, respondents noted that GESI was not well incorporated in the TA objectives, or scope of work and tasks. Neither did the TA design factor in the involvement and contribution of women and girls, and other marginalised or disadvantaged groups, such as indigenous groups who bear a heavier burden of malnutrition in this context.

Stakeholders in Guinea noted that GESI aspects were included at design stage in the TOR, although in practice their inclusion appears to be quite minimal in the final TA outputs.

4.2. TA provision

4.2.1. Timing

Participants in all countries found the TA provision to be timely, but some setbacks were experienced in producing outputs, as a result of delays on the part of both MQSUN+ and country stakeholders. Although flexibility throughout the process is a prerequisite to this type of TA, there are certain measures that can be negotiated in the design and planning stage to minimise delays and ensure sufficient time is allocated. A number of participants raised the importance of ensuring awareness of and coherence with country planning and budgeting processes and timeframes when designing and implementing TA.

Although the Madagascar PNAN III was finalised in 2017, its accompanying updated policy, M&E and implementation plans were not finalised until 2018, one year after its launch and five months into its implementation. Respondents attributed this to TA provider availability, insufficient consultant days and issues with cost-sharing for stakeholder workshops.[18] In both Madagascar and Guinea, international consultant visits to the country were considered too short and infrequent, and remote support was regarded as less effective in mobilising and engaging stakeholders.

TA in Somalia required extension due to delays in obtaining background documentation and agreeing on cost share arrangements. In Tajikistan, the development of the CRF and Multisectoral Nutrition Plan (MSNP) took considerably longer than anticipated, mainly due to slow and bureaucratic government processes involved in consulting ministry stakeholders and reviews of drafts. Similarly, in Guinea, the requirement for all communications and decision making to go via the SUN Technical Focal Point was reported to have caused delays. Turnover of international consultants also contributed to delays. The close involvement of MQSUN+ Project Management staff in country TA provision was considered essential in ensuring continuity.

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17   https://www.gendernutritionframework.org/
18   A requirement of MQSUN+ was that country stakeholders identified funding for workshops, meetings and other events, as part of a cost-sharing agreement.

4.2.2. Stakeholder participation

Case studies found that in most cases, there was good participation from country stakeholders at national level in TA activities. However, more could have been done to promote participation from as wide a stakeholder group as possible, including sub-national stakeholders, women, girls and marginalised groups, at an earlier stage in the process.

TA providers highlighted a lack of visibility on how stakeholders were selected or invited to participate, and suggested that a mapping exercise and/or a checklist would have been useful in supporting this process. Some key stakeholders were apparently absent during the development of outputs in a number of countries.

For example, the private sector, international non-governmental organisations (NGOs), Chamber of Commerce and the Nutrition Cluster in Yemen; nutrition-sensitive sectors in Somalia and Honduras; and senior government officials in Tajikistan

NI highlight the high need and demand for TA at sub-national level to achieve scale up of nutrition actions in their recent Global Synthesis of Key Findings from Progress Assessments.[19] All case studies in this review found the participation of sub-national stakeholders to be sub-optimal or non-existent, although efforts were made in some countries.

In Guinea, a team from the Groupe Technique de Nutrition et Alimentation (GTNA)[20] conducted regional visits to collect information, identify priorities and map nutrition-related activities; and in Somalia, state-level stakeholder workshops were conducted to gather inputs for the MSNS, and sub-national level representatives participated in national workshops and launch events. However, stakeholders in Madagascar remarked that a lack of sub-national participation had resulted in poor ownership of plans by those closest to their implementation.

Stakeholders in Guinea reported that all members of the GTNA were actively involved in the development, review and validation of the various TA products. These comprised seven government staff from nutrition-sensitive and nutrition-specific sector ministries; four members from civil society; one university representative; three UN staff; one private sector representative; and one person from the National Assembly. Interest and buy-in from these multiple sectors were attributed to an initial orientation session on the multisectoral causes of malnutrition, to make stakeholders aware of the process, understand their roles and be better able to contribute relevant inputs.

Representatives of different ministries in Yemen were reported to have contributed very positively to the process, defining sectoral actions and indicators for nutrition as well as seeking to integrate these into their own plans. Draft outputs were widely shared for review and validation, and inputs were considered to have been well integrated in final versions.

A high-level parliamentary event was held in Tajikistan to launch the MSNP development process, chaired by the SUN Focal Point and Technical Focal Point, with participation from multiple ministries (including Ministries of Agriculture, Education and Science, Industry and New Technology, Economic Development, and Trade and Finance) and international agencies including the UN, donors and NGOs. In addition to orientation on malnutrition in Tajikistan and multisectoral approaches to addressing the problem, the launch also facilitated the set-up of working groups in each of the sectors, to further raise awareness on nutrition-sensitive actions and to promote a participatory approach to developing sector strategies within the framework of the MSNP, through the contribution of sector data and reviewing draft chapters.

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19   See reference 3
20   Technical Group for Nutrition and Food

Respondents in Madagascar described the important role played by the ONN Technical Focal Point in facilitating the engagement of all relevant nutrition-specific and nutrition-sensitive stakeholders, including ministry and SUN Network focal points in meetings and workshops, to obtain inputs for the M&E plan. In Somalia, numerous consultative workshops engaged stakeholders from government, international partners and local NGOs, at both federal and state levels. In addition, the media at state level were engaged to raise awareness of the process, and working groups were set up to review chapters and versions of the strategy. However, the Ministry of Health was the predominant sector presiding over discussions at both levels, and respondents suggested that the participation of other sectors could have been more proactively sought.

In Honduras, UTSAN was unsuccessful in engaging other stakeholders in the TA process due to competing priorities within a short timeframe, although respondents acknowledged that they should not have been the only agency involved.

4.2.3. Gender, equity and social inclusion

Overall, the inclusion of GESI in TA processes was limited. Several participants remarked that a genuine commitment to GESI requires that TA providers possess GESI expertise, and that this should be explicitly included in the TA. This expertise includes the ability to conduct a GESI analysis and design sectoral activities with explicit GESI considerations.

In Honduras, existing country guidance on gender in the context of COVID-19 by the National Institute for Women supported the integration of gender equity considerations into the output relating to food and nutrition security in the COVID-19 response.

In Somalia, it was reported that women participated in the development of TA outputs (more women than men work in the country's nutrition sector), although the workshop attendance sheets suggest the participants were predominantly male. Marginalised and socially deprived groups were not well represented, and stakeholders with specific GESI experience were not included in workshops or consultations.

Respondents in Guinea noted the importance of including GESI considerations in the development of the various outputs; however, disaggregation of indicators by sex was the only example given of this. A lack of inclusion of young people in the TA process was also highlighted.

Some participants in Tajikistan regarded the 'natural' focus of both the CRF and MSNP on women and children, and the prioritisation of regions with high rates of malnutrition, as sufficient consideration of GESI issues. Others felt that GESI perspectives were not sufficiently included, particularly in the descriptions of required actions to address gender-related determinants of malnutrition. NI made a similar observation in their 2020–21 Progress Assessments,[21] where many stakeholders were unable to describe the effect of TA on gender equality outside of women-focused services or sex-disaggregated data.

Stakeholders in Somalia and Guinea noted that realities of needs at decentralised level should be reflected, and these could only be represented through a 'community-centric' approach, where needs and solutions are discussed at local level, particularly with marginalised and vulnerable groups.

4.2.4. Remote TA provision

'Remote' TA refers to cases where international TA consultants do not visit the country or work face-to-face with country stakeholders, usually for security reasons, and instead support country stakeholders and national consultants via online means including email, Skype, Zoom, etc.

This mode of support was employed in Yemen and was considered to have worked well, without compromising the quality or effectiveness of the TA provision. As country stakeholders had to initiate and implement many tasks themselves (whereas in other

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21   See reference 3

settings, TA consultants would often be leading these), this facilitated better government ownership and leadership of the process. For example, the Yemen SUN Secretariat team and sector colleagues were responsible for preparing and facilitating workshops and consultations, developing tools and resources, setting objectives, defining outcomes and writing up workshops. SUN Secretariat representatives highlighted the importance of clarity and shared consensus on objectives, joint preparation, and robust design of tools to facilitate consultations and collect information. On the other hand, another stakeholder suggested that working remotely constrained consultants' ability to gain insights on the dynamics of field implementation and outreach work, limiting possibilities to propose realistic and scalable solutions. This was addressed by using available evidence and experiences from other countries to propose solutions and cross-check, adapt and validate these with country stakeholders. National consultants can also support these processes where international staff cannot travel to the country.

In cases where international consultants were able to travel, stakeholders noted they would have preferred more frequent and extended visits, as face-to-face meetings (versus online, remote consultation) were considered the easiest way to motivate and convene people, and to gather necessary information.

4.2.5. Empowering country-led action

The extent to which TA processes were perceived to be country-led differed across the case studies.

In **Madagascar**, for example, the ONN Technical Focal Points described how they had decided on the design and content of the M&E plan, identified participating stakeholders and chaired workshops, with support from TA consultants in facilitation. Similarly, in **Guinea**, it was reported that the SUN Focal Point had led the process of developing the different outputs, and facilitated workshops with the support of the TA providers in providing suggestions and comments and preparing presentations, as well as providing an 'external' perspective.

Strong leadership and investment in the TA processes of the SUN Focal Points in both **Somalia** and **Yemen** were seen as contributing to the successful completion of nutrition plans and other outputs, which were considerable achievements under very challenging circumstances.

In **Tajikistan** and **Honduras**, however, the development of outputs was mainly conducted independently by the TA consultants, although country stakeholders provided feedback on these in both cases, with implications for the degree of follow-up actions taken by country stakeholders.

4.2.6. Capacity

Capacity development was an integral component in most of the MQSUN+ TA provided to the case study countries. 'Hands on' capacity strengthening approaches were used in several cases, promoting learning through doing. The NI Progress Assessment reports[22] also highlighted the valuable learning that occurred when TA providers used such approaches that fully engaged local stakeholders in the process.

Good use was made of existing country capacity in **Somalia**, where workshops and discussions were facilitated by nutrition coordinators, sub-cluster coordinators, ministry representatives and academics, at both federal and state level. Multi-stakeholder workshops focused predominantly on strategy development, but participants also gained awareness during these meetings on pathways to malnutrition, the role that different sectors can play in addressing these, and the definition of targets and specific sectoral activities to achieve these. For many, this was their first experience of participating in strategy development, particularly one which engaged multiple sectors. Newly-qualified nutritionists gained experience applicable to a range of strategic processes, even

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22 See reference 3

where the technical content is different. The acts of collecting and analysing data and incorporating this in the strategy also strengthened capacity.

In Guinea, MQSUN+ training on communications, advocacy and budgeting was highly appreciated, and several respondents stated that as a result of these, they were better able to contribute in workshops to elaborate the content of the various documents.

Capacity strengthening took a 'hands on' approach in Madagascar, where TA consultants supported country stakeholders to develop the M&E and implementation plans, and provided helpful guidance documents, research evidence and examples of good practice from other countries. However, some stakeholders believed that formal training would have been useful in helping stakeholders to understand the importance of multisectoral action and the roles and responsibilities of the respective sectors.

Stakeholders in Yemen described following a steep learning curve during the TA process, particularly as TA was provided remotely, fostering in-country leadership, ownership and learning by doing through facilitating workshops and stakeholder consultations; collecting and collating multisectoral data and costing information; and coordinating the review and validation of outputs by country stakeholders. The introduction to multisectoral planning processes was greatly appreciated, although an initial phase focused on awareness raising and capacity strengthening of the different stakeholders would have been hugely beneficial, as well as advance sharing of the various tools and guidance materials to be used, given the very limited existing knowledge and capacity in nutrition in Yemen.

In Tajikistan, the World Bank Landscape Analysis Country Assessment (LACA)[23] tool was adapted for a small multisectoral capacity assessment, considering understanding of the various forms and causes of malnutrition, the country nutrition context, priorities, policies, and ongoing activities relating to nutrition. This was used to inform capacity-strengthening strategies for different sectors in the resulting plan, though it lacked consideration of GESI-related issues in the context of nutrition.

The MQSUN+ team in Tajikistan facilitated a sensitisation process for sector stakeholders on nutrition, to promote buy-in to the MSNP development process through training sessions on nutrition-specific and nutrition-sensitive actions. However, bureaucratic procedures in Tajikistan limited the level and frequency of participation of sector ministry participants.

Due to the short timeframe and remote TA provision to Honduras, it was not possible to foster the 'hands on' approach taken in other countries, although respondents highlighted existing in-country capacity to develop some of the outputs.

4.3. Quality of TA outputs

In all countries profiled, country stakeholders considered the TA outputs to be of good quality. However, the lack of a GESI focus and absence of GESI expertise in TA teams meant that GESI considerations were generally inadequately integrated within TA outputs.

Respondents in Honduras remarked on the good quality of the various outputs produced through the MQSUN+ TA, which have empowered national stakeholders to have a vision and take action to integrate nutrition considerations in the COVID-19 context. TA outputs also documented achievements in the country, creating a sense of positive reinforcement.

In Guinea, stakeholders stated that all the outputs produced were of good quality and helped to foster political commitment, demonstrated by the establishment of a multisectoral working group at Prime Ministerial level to oversee their implementation.

The M&E plan for Madagascar was generally regarded to be of good quality and relevant

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23 https://apps.who.int/nutrition/landscape_analysis/country_assessments/en/index1.html

to the context, although some stakeholders remarked that they would have liked to have seen examples from other countries against which they could compare this. However, some stakeholders noted that the document was cumbersome, with too many indicators which did not reflect the reality of the field and would be difficult to collect at the frequency proposed.

In Yemen, the MSNAP was considered to be of good quality and realistic, with accurate and sensitive reference to the political situation in the country, given that the documents were to be shared with governments in both Sana'a and Aden.

Stakeholders in Somalia, Yemen and Tajikistan found the plans produced through the TA from MQSUN+ to be of good quality, and it was suggested that mid-term reviews would give a better idea of how these were being translated into action. Participants in Somalia remarked that the achievement of the MSNS was something to be proud of, particularly in such a context, although some considered that more could have been included on prevention and resilience-building. Similarly, in Honduras, participants expressed that the outputs provided a sense of positive reinforcement, demonstrating how TA can play a role in affirming country efforts, highlighting what is going well or being achieved in the midst of challenges. Stakeholders in both Somalia and Yemen noted the absence of detailed cost calculations in the outputs, which can raise questions among supporting donors and UN agencies around methods, and affect the credibility of the costing exercise.

Respondents in Yemen also proposed the development of more digestible tools and resources, such as abridged versions of the plans, which would be more accessible and digestible than the original, rather complex documents. It was suggested this would promote uptake and implementation, particularly at lower levels of government and for other partners at sub-national level.

4.4. Uptake and utilisation of TA outputs

In most cases, TA outputs have been validated at senior political level and launched at national level, though predominantly online due to COVID-19. These were then disseminated to varying degrees, in many cases at national level only and as electronic rather than hard copies. Several country stakeholders suggested that more accessible and digestible resources should complement the main outputs (e.g. leaflets, audio-visual resources) to increase their uptake and onward utilisation, particularly at sub-national level. A clearly defined and agreed dissemination plan at the conclusion of the TA process may have been helpful to country stakeholders in increasing awareness and uptake of the outputs.

Case studies identified a range of examples of onward use of the TA outputs in the different countries, including: the establishment of dedicated councils, platforms, units and working groups to oversee the implementation of outputs; adaptation of academic courses; development of guidance, training and capacity in sector ministries; adaptations to existing guidance, legislation and policy; and improvements to Nutrition Information Systems, agricultural extension services and health services.

An observation across the case studies was that many key actors (including in the UN, sector ministries, and at sub-national level) were still not aware of or using the outputs, or perceived these as government-owned or external documents. Ownership, uptake and use of outputs by country stakeholders in different sectors was found to be dependent on a sense of ownership and involvement from the start, in the design and process of TA. The identification and engagement of key stakeholders at national and sub-national level at these stages of TA is therefore essential in ensuring optimal ownership and uptake of outputs.

Engagement of sub-national actors from the outset of the TA process is particularly crucial given their pivotal role in subsequent implementation of TA outputs. This can be achieved, for example, through stakeholder mapping exercises; extending awareness and training sessions, workshops and consultations to regional and district levels; and encouraging facilitation and ownership by sub-national actors across sectors, an approach taken during the MQSUN+ TA to Somalia in a number of states. Where travel to sub-national level is not possible, a more inclusive approach can be taken to

the organisation of workshops and consultations at national level, where a range of representatives from regions/districts are invited to participate in national workshops (as done in Yemen, for example), or otherwise remote discussions can be organised. The employment of sub-national TA consultants is also a potential solution to ensuring greater engagement at decentralised level.

Stakeholders from all countries engaged in the review noted how TA providers could do more to support uptake, utilisation and implementation of outputs, ensuring that they do not remain 'in a drawer', as one stakeholder put it. Whilst this is dependent on wider country processes and systems, there are steps that can be taken throughout the TA process to maximise the chance of success. These include: ensuring TA requests are well informed and appropriate; engaging multisectoral stakeholders at national and sub-national levels from the conceptualisation and design stages; producing relevant and accessible outputs; strengthening national capacity to absorb the TA; and putting in place a clear plan for launch, validation and dissemination of outputs. In addition, resources such as roadmaps, handover notes, example proposals and sector activities to improve nutrition outcomes from other SUN countries are also useful.

Stakeholders across the case studies noted that it was too early to talk about the TA's contribution to scaling up nutrition-related action and improving nutrition outcomes, and highlighted the need for more political and financial commitment to enable implementation. In countries profiled, funds were lacking for the onward implementation of outputs, underlining the importance of costing exercises and financial gap analyses to facilitate prioritisation and allocation of resources.

Findings of the individual country case studies with regards to the uptake and utilisation of outputs developed with the support of MQSUN+ TA are presented below.

Uptake and Utilisation

Guinea

The Multisectoral National Nutrition Policy and the National Multisectoral Nutrition Plan were launched and disseminated at a high-level meeting on nutrition hosted by the First Lady of Guinea in 2018. The costing of the plan and the communication and advocacy documents were not finalised until 2020, and planned roundtable discussions with donors have been postponed due to COVID-19, as well as a coup d'état in September 2021.

These meetings are now planned for October 2021, followed by dissemination meetings in all regions. A formal multisectoral strategic coordination platform was set up in 2021 by the Prime Minister, and a Focal Point was nominated in the Prime Minister's Office to guide implementation of the plan. Outputs are not currently available online, although the SUN Focal Point reportedly plans to make these available through the West African Health Organisation (WAHO) website and the government website. This will hopefully improve awareness, uptake and utilisation of the products, which are only reported to be currently used by a small number of stakeholders at the national level.

Hondurus

Stakeholders in Honduras cited a number of examples of use of TA outputs, including:
- Re-design of the new Food Security Policy
- Adaptation of the legal framework on Food Security to include nutrition (other TA processes have also contributed to this)
- Supporting the revised design of the Diploma course on Food Security and Nutrition at a university (Escuela Agricola Panamericana Zamorano)
- Commissioning of support from EUROSAN[24] to work with local authorities to understand changes made as a result of guidelines produced by MQSUN+. This includes the recruitment of additional nutrition staff to support sub-national implementation and strengthen integration of nutrition within Mancomunidades (groups of municipalities).

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24 https://ec.europa.eu/international-partnerships/projects/eurosan-food-security-nutrition-and-resilience-honduran-dry-corridor_en

- UTSAN has also used TA outputs to lobby the Ministry of Health to prioritise and allocate financial resources for nutrition-specific and nutrition-sensitive interventions.

Although TA outputs were presented at a validation workshop and their recommendations were promoted at sub-national level via a series of workshops, they have not been widely shared with sector representatives at senior government level, a key intended target group. The key objective of the TA was to integrate nutrition within the COVID-19 response, although so far UTSAN has been unable to influence sector ministries in this regard. This was attributed in part to the lack of participation or consultation in the design and development of outputs by these sector ministries, due to competing priorities.

The Ministry of Health has tentatively planned to create a nutrition-specific unit, although more support and action is required at ministerial leadership level. Respondents also stressed the need for stronger advocacy to all ministries to increase budgetary allocation for nutrition.

Madagascar

The M&E and implementation plans for the National Action Plan for Nutrition (PNAN III) were only finalised in 2018, one year after its launch, and neither were officially validated. Although the implementation plan was finalised, the M&E plan remains in draft form, and neither have been launched or disseminated. This was attributed to the absence of the international consultants at the latter stages of validating the outputs (and a consequent loss of momentum and interest); frequent turnover of the coordinator role in the ONN; and insufficient fund allocation for sub-national dissemination of outputs. As a result, many country stakeholders were unaware of these tools, which could only be obtained via informal channels and were not available online. The SUN Civil Society Network had recognised this gap and conducted a workshop to raise awareness about the tools, but review participants suggested that a clear government plan for dissemination of outputs would have been instrumental in increasing uptake and utilisation.

The case study also observed a lack of ownership of the outputs by important stakeholders at national and sub-national levels, which were widely regarded as government documents and not as tools for implementation of the PNAN III. Although regional M&E groups were established to monitor implementation of the PNAN III, the national M&E plan is not being used and instead each region has developed its own M&E plan, This is attributed to lack of awareness and/or ownership of the national M&E plan.

Somalia

The Multisectoral Nutrition Strategy was launched online in Somalia at the end of 2020, in addition to wide distribution at state level of printed and electronic copies of the strategy. To boost dissemination and awareness of the strategy and to promote uptake, a shorter leaflet was also produced, summarising the strategy and profiling some of the sector-specific interventions proposed.

The TA was considered to have played an important role in empowering country-led action by providing a structure and process through which multisectoral outputs could be developed. However, stakeholders considered that limited progress had been made in scaling up nutrition actions due to recent reductions in funding. Although a work plan for the implementation of the strategy had been developed by the SUN Focal Point, effective multisectoral platforms for nutrition still need to be set up at national level and in the majority of states to facilitate this.

There is also limited evidence that the strategy has translated into ministry, state or district policies, although the Ministry of Health is working with state health and nutrition authorities to ensure the relevant elements are reflected in state programmes, and staffing levels for nutrition have increased significantly in some states. WFP and UNICEF are also providing increased support to staffing structures within Ministry of Health (MOH) to facilitate better alignment with the MSNS, for example through the attachment of infant and young child feeding (IYCF) specialists to each state MOH.

UN agencies reported using the strategy to guide the allocation of existing resources, although commitments of government sector ministries are not so clear.

Stakeholders in Somalia noted that TA providers could support implementation of outputs in several ways including developing roadmaps with proposed next steps; supporting the development of monitoring, communication and advocacy tools; and sharing examples from other countries.

Tajikistan

The Multisectoral Nutrition Plan was validated by the President of Tajikistan in early 2021, and has since been disseminated at national level to senior government officials, sector ministry representatives, UN agencies, development partners and donors. Various launch activities included a parliamentary roundtable event, the issuing of an official decree for implementation of the MSNP by sector ministries, and SUN coordination meetings hosted by the SUN Focal Point. Although the MSNP is not yet available online, the Ministry of Health and Social Protection of the Population (MOHSPP) are currently developing a website dedicated to nutrition, where the plan should be hosted. It is also proposed to produce a regular newsletter for nutrition stakeholders to report on progress in implementing the plan.

Since the launch of the plan, sector ministries have been tasked with setting up working groups to develop sectoral implementation plans reflecting the objectives and activities in the MSNP, and are expected to report on progress to the SUN Coordination Council. However, high staff turnover in sector ministries was considered a constraint, affecting continuity and institutional memory within these working groups.

MOHSPP is planning a number of capacity development activities at national and regional levels, and is working on setting up regional working groups tasked with developing regional implementation plans. UNICEF is also supporting the Ministry of Trade and Economy to integrate relevant aspects of the MSNP into District Development Plans, through consultants working in six districts.

Yemen

Following an online launch of the Multisectoral Nutrition Action Plan in Yemen (due to COVID-19), it was disseminated widely at national level in the north (Sana'a) and also with MOPIC and other stakeholders in Aden, with the resulting establishment of a SUN Secretariat for the south. Some stakeholders mentioned that a series of face-to-face meetings and launch workshops would have been preferable for promoting uptake and utilisation. The TA to Yemen has apparently contributed significantly to the nutrition knowledge and skill base amongst stakeholders in multiple sectors in Yemen, and in particular, helped to consolidate a multisectoral platform with a shared vision, enhancing capacity to contribute as a group. Further capacity strengthening in several areas was considered necessary to support implementation of the plan. The potential to work with national academic institutions was highlighted as a means to build nutrition knowledge and capacity more sustainably.

Since its launch in 2020, there are a number of examples of how the MSNAP has been used to support different processes, including:

- Improvement of the national Nutrition Information System
- Integration of nutrition within agricultural extension services
- Development of new industrial standards relating to nutrition
- Integration of MSNAP indicators into public and private sector plans
- Drafting of a private sector plan for nutrition in Yemen (by the SUN Business Network)
- Establishment of a Civil Society Network for nutrition
- The EU also launched a call for proposals in 2021 for the implementation of nutrition-sensitive interventions in alignment with the MSNAP.

The lack of support and engagement from the international community (including UN and donors) for the financing and implementation of the MSNAP was highlighted as a major constraint. Despite initial support to its development, their current focus is understandably on the humanitarian response, with a major emphasis on the implementation of the Global Action Plan on wasting and addressing other emergency needs. Although emergency components are included in the MSNAP, these do not appear to have been integrated within the humanitarian action plan. Despite this, country stakeholders believe they now have in the MSNAP a strong advocacy tool for nutrition, which can facilitate focused discussions around funding and potential partnerships across sectors, at a time where nutrition is still not prioritised at senior government level nor included in the Government of Sana'a's 8-year strategy plan.

5. Key Messages and Recommendations

This section presents the key messages and recommendations from the six case studies relating to the design, process, quality and uptake/utilisation of technical assistance. These are also summarised in a separate, stand-alone guidance note,[25] for use by those requesting and those providing TA.

5.1. TA design

5.1.1. Setting TA priorities

- Ensure there is high-level political commitment and interest in tackling nutrition challenges. This is critical in demonstrating buy-in and guaranteeing participation and action led by country stakeholders. Examples include engaging senior representatives from presidential or prime ministerial offices from the prioritisation and design stages of TA; conducting high-level parliamentary/ministerial awareness-raising events; encouraging the participation of senior politicians in events such as the SUN Global Gathering and related regional events; and organising visits for politicians to observe achievements of other SUN countries.

- Ensure the definition of TA priorities is country-led and jointly agreed with the TA provider through a process of rationalisation, considering which priorities can be met with existing in-country capacity.

- Encourage multi-stakeholder platforms to use the SUN JAA process to identify and prioritise TA priorities. Having this jointly developed can enhance the coordination and support provided by national, regional and global TA providers.

5.1.2. Understanding national capacity with relation to TA priorities and needs

- Where feasible, TA providers can conduct a capacity assessment[26] of existing in-country skills and knowledge across sectors (both technical and functional) to support both the development and implementation of the TA outputs.

- TA providers should identify gaps and include an initial phase of orientation and capacity strengthening, including sector-specific activities, and activities relating to GESI and nutrition. This is an important step in raising awareness and engaging a range of sector stakeholders on nutrition.

- Map the range of TA provision options, including in-country and regional sources, available to respond to the needs identified. Ensure those requesting TA are aware of these.

- Ensure sufficient funding is available for logistical costs of the TA process (e.g. for workshops, launch events, communications, training, printing, transport), where possible locally. Cost-sharing can help to secure country ownership and stakeholder participation and accountability, and arrangements should be agreed and formalised with relevant stakeholders, e.g. with a Memorandum of Understanding (MOU).

5.1.3. Assembling the TA team

- Involve the SUN Focal Point and colleagues in the TA consultant recruitment process, defining profiles required, sharing CVs and selecting the best fit for the work.

- Include national consultants to build capacity and promote sustainability.[27]

- Consider bringing in specific expertise in areas including GESI, monitoring and evaluation, and advocacy/communications.

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25 Guidance for Assuring Quality in the Design and Implementation of Technical Assistance for Nutrition.
26 Examples of tools include the MQSUN+ Toolkit https://mqsunplus.path.org/multisectoral-nutrition-planning-toolkit/
     and the UNN Guidance Note for Nutrition Capacity Assessments. https://www.unnetworkforsun.org/sites/default/files/2018-11/CA%20Guidance%20
     Package%20-%20Guidance%20Note-EN.pdf
27 As also recommended in Results for Development (R4D) webinar 'Reimagining Technical Assistance': "explore new approaches to providing support to in-country change agents that prioritise the agency, direction and work of country and regional experts."

- Ensure the team has the required skills relating to multisectoral nutrition implementation (in sectors including agriculture, social protection, education, health, and water, sanitation and hygiene), including points of convergence between sectors, GESI and nutrition.

5.1.4. Involvement of national and sub-national stakeholders

- TA providers can develop a checklist to guide the set of stakeholders to be engaged in developing TA outputs (both at national and sub-national levels), e.g. through a context-specific mapping exercise. This will help ensure greater involvement of different sectors from the outset, and inclusion of GESI considerations.

- To engage sectoral ministries (particularly those who do not see nutrition as central to their remit), TA providers can include a clear description of nutrition-related roles and responsibilities of country stakeholders in the checklist, and highlight the importance of their inputs, feedback and follow-up action at an early stage.

- Ensure a thorough understanding of relevant coordination mechanisms (e.g. SUN Multi-Stakeholder Platform, National Nutrition Cluster, Food Security Cluster, high-level councils, development partner fora). This is crucial to understanding dynamics and relationships between government and non-government actors.

- Consult sub-national stakeholders on the TA design and process, and involve them in the TA process or consultations where appropriate, to ensure their unique interests are also represented, improve their ownership, and increase the relevance and uptake of TA.

- Encourage the participation of donors and development partners in the TA design and process, to support awareness of objectives and actions included, and promote alignment of donor/partner priorities and strategies with these.

- Consider the need for bilingual consultants in countries with limited working English knowledge.

5.1.5. Contextual considerations

- In contexts of state fragmentation, aim where feasible for TA to engage all parties from the outset, to promote inclusion and neutrality as well as ownership.

- Agree on a realistic timeline based on an understanding of country planning and budget processes, as well as other commitments such as elections, and ensure flexibility in the TA design to allow for delays.

- Research the political context and government protocol (e.g. official procedures, permissions required), to inform realistic timeframes and expectations for the TA.

- Stakeholders requesting TA should aim to provide requested documents and facilitate contacts as early as possible to avoid delays.

5.1.6. Gender, equity and social inclusion

- Include a GESI analysis to inform the design and operationalisation of all TA, and allocate sufficient time and resources for this. If it is not feasible to conduct a full GESI analysis, it will still be important to assess how the status of women, and vulnerable and/or marginalised groups relate to the underlying issue the TA aims to address. For example, it may be important to identify specific social/cultural beliefs and existing patterns of power and decision-making that drive unequal access to or control over assets, resources, opportunities and services, and agree on what can be built into the TA design to address these.

5.2. TA provision

5.2.1. Consensus on TA methods

Develop a reference framework outlining a choice of tools, resources and guidance available to support different sectors and processes, to promote consensus of in-country stakeholders on methods and ensure high-quality outputs.

5.2.2. Capacity development

- Build capacity in nutrition as much as possible within the framework of a TA assignment, across sectors and stakeholders with relation to their specific roles, prior to and during their engagement in the development of outputs (e.g. through capacity assessments and tailored training sessions, as well as promoting 'hands on' approaches). Setting up sectoral working groups on nutrition can help to define/adapt specific sectoral actions to improve nutrition. Further TA could be provided in defining how relevant elements can be integrated into sector policies and plans.

- Promote a proactive and participatory approach to the TA process, adopting a 'learning by doing' approach. For example, by promoting the facilitation of workshops, stakeholder consultations and other processes by country stakeholders.

- Include specific expertise and training sessions on aspects relating to GESI and nutrition, looking at practical ways to integrate nutrition, gender and equity into strategic documents, as well as relevant indicators to track progress. Ensure that both TA clients and TA providers are aware of and utilise existing resources to support integration of GESI with nutrition TA (e.g. Gender-Transformative Framework for Nutrition,[28] Sex- and Gender-Based Analysis (SGBA): A Toolkit for Nutrition Programs[29]).

- Use capacity assessments to inform the inclusion of capacity development activities within TA outputs, e.g. development of guidelines, awareness raising and training sessions on nutrition for relevant sector staff.

- Maximise mutual learning and capacity strengthening of international and national consultants, including coaching/mentoring of TA providers by technical experts (e.g. those with gender expertise).

5.2.3. Involvement of national and sub-national stakeholders

- To promote better multisectoral buy-in, ownership and implementation of outputs, encourage joint leadership of the development of outputs by all sector ministries implicated, avoiding the predominance of one lead sector.

- Continuously review the inclusion and participation of an appropriate mix of stakeholders throughout TA provision, including stakeholders with expertise relating to gender, and vulnerable and marginalised groups, as well as representatives of these groups.

- Sub-national stakeholders can be engaged through decentralised workshops and consultations, hiring consultants to work at sub-national level, or inviting a range of stakeholders from regions and districts to participate in national-level events.

Consider involving local media, as this can help raise the profile of multisectoral consultation processes and promote more stakeholder engagement, particularly at sub-national level.

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28 https://www.gendernutritionframework.org/
29 https://www.nutritionintl.org/wp-content/uploads/2021/07/SGBA-Toolkit_Nutrition-International.pdf

5.2.4. Contextual considerations

- Take into account the current political economy for nutrition, and proactively discuss with and support country stakeholders to consider how best TA outputs can reflect and respond to the current context.

Use TA processes to strengthen linkages between stakeholder coordination groups (e.g. MSP and National Nutrition Cluster, SUN Networks).

5.2.5. Gender, equity and social inclusion

- Examine ways in which the TA process can elevate GESI considerations, both with relation to nutrition and more generally. Ensure the inclusion of gender expertise in TA provision and the strengthening of local gender expertise, meaningful participation of women, and use of gender analysis to accurately identify priorities for action.

- Ensure sufficient weight is also given to equity and social inclusion in TA processes. Where possible, include the participation of representatives from vulnerable and marginalised population groups in the development of TA outputs, particularly at decentralised level.

5.3. Quality of TA outputs

- TA providers must be familiar with other policies and strategies to ensure the overall coherence of TA outputs with overarching and sectoral documents.

- Ensure time is taken to understand country-specific requirements and expectations, including aspects such as format, content and level of detail, prior to drafting outputs.

- Where data gaps exist, TA should draw on development partners to enhance the quality of contextual analysis in relevant outputs.

- Include dedicated sections in outputs which explicitly describe the integration of GESI considerations.

5.4. Utilisation of TA outputs

5.4.1. Validation, launch and dissemination

- Discuss and agree with country stakeholders plans for validation, launch and dissemination of outputs from the design phase of TA, where feasible securing commitment for this; for example, through a MOU and/or a dedicated stakeholder committee.

- Support country stakeholders to plan for the launch and dissemination of TA outputs, e.g. identifying funds to support the process; developing resources (roadmaps/handover notes, presentations, policy briefs); and identifying key audiences, platforms, opportunities and resources to facilitate promotion and dissemination such as media events; existing government and development partner fora; conferences; webinars; and printing of paper copies, particularly for sub-national level).

Propose means by which outputs can be shared online (e.g. country platforms, SUN website, TA provider websites).

5.4.2. Capacity development

- Work with SUN Focal Points, the multi-stakeholder platform (including SUN networks), national TA providers and academic institutions to identify priorities and opportunities for onward capacity development to support plan implementation. Conducting capacity development and awareness raising activities on a regular basis (e.g. through pre-service, in-service and refresher training) can help ensure continued levels of knowledge and skills in the face of inevitable staff turnover.

Consider opportunities for continued TA (including in-country possibilities) to support the effective use of outputs, e.g. advocacy/communication; setting up budget tracking and nutrition information systems; support to roll-out at sub-national level.

5.4.3. Tools to support utilisation

- Promote the development of additional, abridged outputs (including videos or podcasts as well as documents) which complement key deliverables, to promote access and utilisation, particularly by sub-national stakeholders.

- Signpost resources which promote onward utilisation of TA outputs, such as proposal outlines, practical examples of activities by sector, guidance on linking sector activities with nutrition, and development of sector-specific implementation plans, in annex or as a separate toolkit. Various online resources are available, including the MQSUN+ toolkit.[30]

- Support the next phase of implementation of outputs at sub-national level, for example through the provision of tools (e.g. roadmaps, presentations and briefs), and foster a multisectoral approach at this level (e.g. through the set-up of multi-stakeholder platforms).

Support the development of a M&E framework for multisectoral plans, including development of tools to be used for tracking and reporting progress against nutrition objectives.

5.4.4. Resource mobilisation

- Support country stakeholders to advocate to international partners to reference and align their funding, plans and actions with government plans.

- Support country stakeholders to conduct a financial gap analysis for nutrition, and to identify opportunities to support plan implementation by leveraging existing sector budgets and plans, and UN, donor and development partner portfolios.

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30 https://mqsunplus.path.org/multisectoral-nutrition-planning-toolkit/

Annex 1: Steering Committee members

NAME	ORGANISATION
Paula Quigley	DAI/TASC
Annemarie Hoogendoorn	DAI/TASC
Jane Keylock	NW/TASC
Charlotte Martineau	DI/TASC
Peter Forsey	FCDO
Debora Di Dio	SMS
Kendra Siekmans	SMS (consultant)
Mathews Mhuru	Sun Operationalisation Group
Monica Kothari	Former MQSUN+ /PATH
Carrie Hemminger	MQSUN+/PATH

Annex 2: Stakeholder consultation framework

Stakeholder consultation framework – TA Effectiveness Study, TASC

Country:

Name:

Role / Organisation:

Date of interview:

Introduction:

The TAN programme (May 2015 – November 2021) is a FCDO-funded facility which provides Technical Assistance (TA) to SUN movement countries in response to requests for context-specific expertise and support to their efforts in reducing all forms of malnutrition. The facility promotes a 'demand-driven' model whereby technical support and expertise are available to countries in a timely, context-specific manner, to support national SUN Focal Points and other country stakeholders to overcome capacity gaps in the design and delivery of national multi-sector nutrition plans.

Under the TAN programme MQSUN+ (now TASC) provided to support to …… (country) to develop …. (output), between …. and … (dates).

This assignment aims to assess the relevance, effectiveness, efficiency and sustainability of the TA design and provision under MQSUN+ and to further understand its uptake, onward use and added value in terms of improving nutrition and contributing more broadly to development outcomes. It will be used to identify best practices and lessons learned in order to inform the future design and provision of TA.

We would like to hear your opinions on TA provided and we will be asking questions around the design, TA provision process, quality and use of outputs. We will treat the information you provide confidentially, and your responses will be reported anonymously. However, if we would like to use a particular quote, we will contact you to request your permission.

KEY QUESTIONS	
Informant involved in: TA design / TA process / Utilisation of outputs (delete as appropriate & skip relevant sections)	
DESIGN	
IDENTIFICATION OF TA NEEDS How do country stakeholders collectively agree on priority TA needs and how do they identify capacity and funds in country, before reaching out to TASC/ MQSUN+ via SMS?	Please describe how the need for Technical Assistance was identified:
	• When?
	• By whom (which stakeholders were involved)?
	• What was the TA about? (NNP/costing/ M&E plan/advocacy and communication strategy/ other)
	• Do you think the right stakeholders were involved and if not, who else should have been involved in the discussion and why?
	• How were needs for TA discussed, defined and prioritised and how was agreement reached (please describe the process)

	• In your opinion was the selected TA priority the right one? Were other needs unmet? What has been / should be done to address these? • Once the TA needs were defined, what steps were taken? • (unpack the steps) – was in-country capacity and finance considered / identified, which TA providers were approached, what process was followed to contact SMS, how were country stakeholders made aware of this facility)
	• How would you do things differently next time around in the design phase (and why?)?
	• If you are not aware of the process followed in identifying TA needs and priorities, in your opinion how should this be managed and who should be involved?
GESI	• How did the TA design incorporate considerations of equity in the objectives, scope of work and tasks? • Was an equity analysis conducted and or incorporated in the design phase? If so, what made this possible and how did it influence the implementation of the TA? If not, what measures would be required to support a GESI analysis in the TA design phase?
RELEVANCE OF TA To what extent are TA objectives and design responsive / sensitive to country context and needs?	• How was the TA approach designed – what process was followed: who participated in this (both the process and validation of the proposed approach) • Was the chosen TA approach relevant for those who will be using the outputs? Please describe who these are.
PEA	• Do you think the TA design was relevant to the country's political and economic context and in line with nutrition priorities, policies? • How did the TA design assess implications of / engage with political processes, regulations, etc.? • Did the TA explore opportunities for driving the nutrition agenda forwards in the country? (e.g. through workshops with sector stakeholders, high level advocacy meetings, involvement of nutrition 'champions')

	• What information / data relating to the country context was used to inform the design of TA?
	Probe on types of information (malnutrition types, trends, rates, drivers from surveys and studies, existing nutrition-related interventions across multiple sectors, political, financial, socioeconomic, geographical, gender / equity-related
	  • What methods were used to access/collect information?
	  • What other information should have been included?
	  • If relevant, what are/were the barriers to accessing information on country context to facilitate appropriate TA design?

	• How were the overall objectives of the TA defined? Who was involved?
CAPACITY	• How did the TA design consider the capacity / skills in-country to participate in/contribute to the TA process (e.g. through an initial capacity assessment/ skills review) – give examples
	• How were roles and responsibilities in TA provision agreed between the TA provider and country stakeholders (e.g. with the SUN Focal Point, MSP) and what was agreed, inclusion of sector staff in facilitation, partnership with local TA providers /academic institutions/ development partners) • If this was not done, which country stakeholders should contribute/participate in the TA design and how?

	• What existing country skills might have been overlooked/better harnessed?
	• How could consideration of country capacity be better incorporated in future TA design?

TA PROVISION PROCESS

RELEVANCE OF TA To what extent are TA objectives and design responsive / sensitive to country context and needs?	• How were country stakeholders involved at different stages of the TA? (e.g. active facilitation/leadership of processes, through consultations, FGDs, workshops led by consultants, document review)
	• Was the TA timeframe appropriate to the country context (e.g. in line with other processes, deadlines agreed and respected) – how was the timeframe and any changes to it agreed?
	• Were the experts provided appropriate for the TA required, did they bring the right type and level of expertise?
	• What aspects should the timing of TA take into account?
	• In the case of remote TA provision, what mechanisms / approaches were taken to ensure this was effective and what lessons were learned?
	• Is the TA still relevant/effective based on the restrictions caused by COVID-19? How can it be adapted to suit current situation?
PEA	• During the TA process, were sensitivities to the context and/or political environment required and did these guide the approach?
GESI	• How did the process include the voices of women, poor and marginalized groups?
	• How did the TA process ensure that the constraints experienced by women, the poor and people from different excluded and vulnerable groups explicitly recognised and responded to? For example, did the TA identify whether existing policies and programmes are addressing the barriers of women, the poor, the vulnerable and the excluded; if yes, to what extent and what were the results of these findings?
	• What could be done in future TA assignments to ensure that existing institutional structures and systems support the implementation of GESI in policies and programmes?
	• How could the process of GESI integration in policies and programmes be improved?

CAPACITY
 	
What capacity / conditions need to exist at country level to be able to 'absorb' these outputs (e.g. level of commitment, ownership and resources required for onward implementation)?
	• What measures were taken at different stages in the TA provision process (initiation, implementation, finalisation) to support the capacity for uptake and onward use of the TA outputs e.g. through
	  • validation meeting,
	  • launch event,
	  • advocacy/comm strategy,
	  • handover notes with recommendations for next steps,
	  • toolkit for onward implementation)

	• How did the provision of the TA develop capacity
	  • human (technical AND functional/soft skills)
	  • government and partners,
	  • Cross-cutting capacities – GESI, functional/soft skills

	• How should future TA provision processes seek to strengthen capacity (e.g. accompanying decentralised mechanisms, links to national/regional academic institutions or training organsations, at sub-national levels?)

Empowering / promoting country-led action	• Did the TA play a role in empowering (-or disempowering) capacity and decision-making within government? Give examples. • How did the government (include high-level government and relevant government ministries) respond to / 'buy in' to the TA provided?

QUALITY OF TA OUTPUTS

RELEVANCE OF TA To what extent are TA objectives and design responsive / sensitive to country context and needs?	• Were the TA products of good quality and meeting expectations? • Who assessed/validated outputs and was feedback provided to MQSUN+? • Please list – strengths and weaknesses of the products delivered
GESI	• How did the TA outputs incorporate GESI considerations and how could this be improved? Were they formulated in a manner that recognises the differentiated issues of women, the poor, the vulnerable and excluded?

UTILISATION OF TA OUTPUTS

Utilisation of TA outputs beyond the assignment	• What is the status of the TA output? Has it been validated / launched?
	• Have outputs been widely disseminated? If yes, how and to what level?
	• How has(ve) the TA output(s) been utilised? Give examples
	• Have there been issues / constraints relating to the use of the outputs and implementing the recommendations – please describe.
	• What has happened since the TA assignment and how did the TA contribute to that.
	• How have the outputs contributed to:
	  • scale (e.g. increased number of ministries involved in nutrition; increased coverage of nutrition-related interventions, use of products for advocacy)
	  • gender – how enhanced/influenced country processes (e.g. design of policy, training, standards, legislation)
	  • inclusion – how enhanced inclusion – of multi-sectoral/subnational actors, disadvantaged, marginalised and vulnerable populations
	  • capability for steering, managing, tracking scale-up of multi-sectoral nutrition programming enhanced? How has the multi-sectoral nature of the output been sustained from its development into implementation – what capacity across sectors needs to be put in place to ensure this?
	  • improved multi-sectoral coordination and collaboration?
	  • improved quality of programmes and policies
	  • better monitoring of progress in nutrition
	  • increased effectiveness with regards to leveraging resources for scaling up nutrition
	  • improved budgeting, investment, sustainable funding for country implementation of plans?
	• How can long-term uptake of the outputs be promoted/ensured in future TA?
	• What tools or resources/other support are needed to facilitate and accompany the roll-out, onward implementation of TA outputs

Empowering / promoting country-led action	• What have been the benefits of the output in terms of galvanising country action – across sectors and from national to subnational level? E.g.
	  • Have sectoral policies and plans / National Development Plan been adjusted
	  • Has the costing attracted more money for nutrition
	  • How has the work aligned stakeholders?
	• How have the outputs translated into subnational implementation?