



Nutrition Information in Afghanistan – findings and recommendations

Nutrition Action for Systemic Change (NASC)



28 May 2024



Agenda

Welcome

DAI

Opening Remarks

FCDO

Presentation: Nutrition information in Afghanistan.

Review findings & recommendations

DAI

Feedback, additional contributions, discussion

Closing remarks (Dr Tajudeen Oyewale)

UNICEF



Presentation outline

Context

Collaborative and technical approach

Findings

Recommendations

Towards implementation

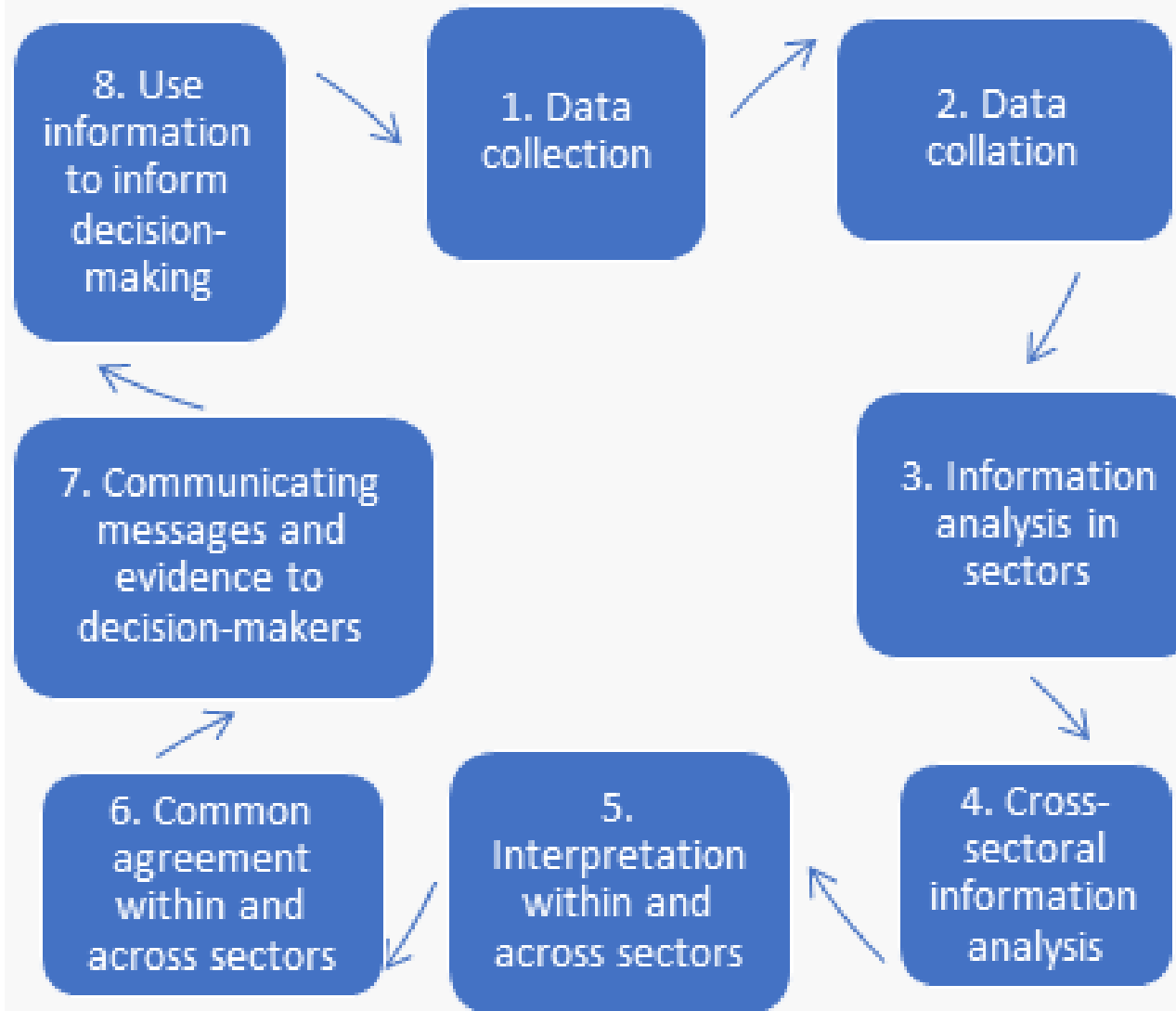
Context

- **High nutrition-related vulnerabilities persist**, driven by
 - varying levels of poverty and food insecurity
 - low access to critical social services
 - climate-induced and natural disasters.
- **Multiple sources of nutrition-relevant information** exist but challenges in interpreting and communicating overall information, multisectoral and context specific needs
- **More evidence and clarity needed** to ensure limited resources used most effectively and reach populations most in need
- Desire among development partners for **more harmonised approach and interest in addressing drivers** across sectors

Collaborative approach

- ✓ Review of relevant documents and e-resources
- ✓ Consultations with key informants on:
 - Availability of nutrition-relevant information
 - Processes for data collection, compilation and initial analysis
 - Methods used for cross-sectoral analysis and interpretation of information
 - How recommendations are developed in relation to priority interventions.
 - Approaches, structures and instruments for sharing information with key decision-makers.
- ✓ Development of matrix mapping available nutrition-relevant information
- ✓ Endorsement of recommendations

Technical approach



Findings Component 1 & 2 Data collection & collation

Nutrition Outcomes

- Acute malnutrition data available through multiple sources including HMIS, NIS, surveillance.
- Limited data on prevalence of micronutrient deficiencies and maternal nutrition outcomes

Nutrition drivers

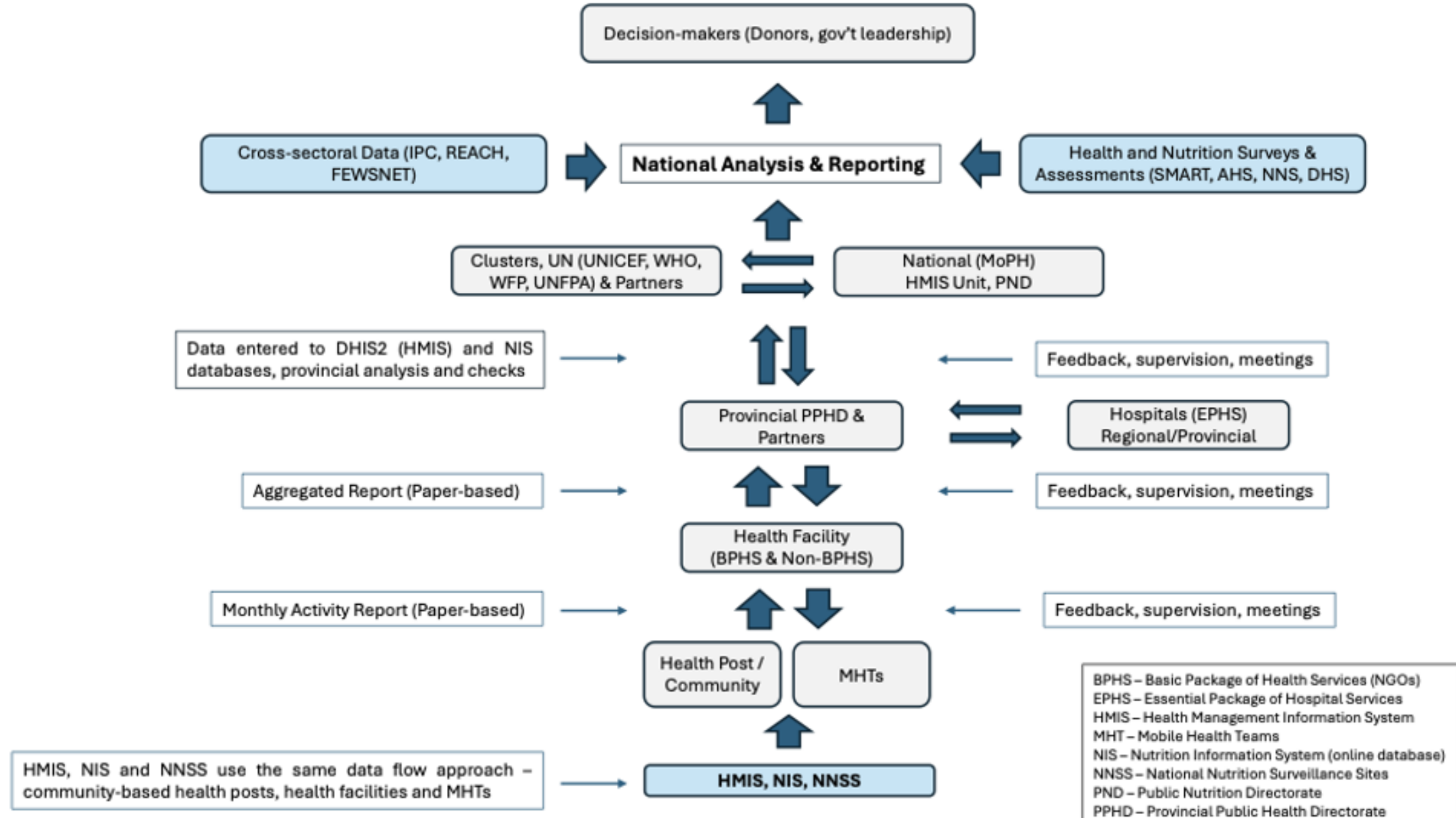
- Data available on communicable diseases (diarrhoea, acute respiratory infections) and some WASH
- Some limitations in availability/interpretation of food security / dietary diversity and WASH related data (situation, cover)
- Updated multisectoral analysis to identify context-specific drivers not available since IPC AMN 2022/23.

Nutrition actions / interventions

- The nutrition database serves as a crucial platform for integrating nutrition-relevant data. Data on coverage of interventions such as MNP, MMS are planned for integration.
- Data on service coverage in underserved (white) areas not readily available/accessible.

Concerns on data quality and reliability of some nutrition indicators. Data quality assurance system in place but limited evidence available on its adequate functioning

Nutrition-relevant information flow:



Findings

Component 3 & 4

Analysis within & across the sectors

Humanitarian Situation Analysis

- Undertaken within the cluster system, cross-sectoral data (health, nutrition, food security, WASH) available through various sources and compiled in situation updates/reports available online.
- Assessment and Analysis Working Group (AAWG), co-led by OCHA, IOM and REACH, has been established to improve analytical capacity, undertake collective review of real-time monitoring data and improve information sharing among clusters.
- Snapshot of trends and figures available across sectors but limited explanation for changes in trends, geographical hot-spots and intersectoral impacts of risks and interventions.

Findings

Component 3 & 4

Analysis within & across the sectors

Nutrition-relevant information analysis across sectors

- Assessment Information Management Technical Working Group (AIM TWG) within nutrition cluster is at the center of nutrition-relevant information analysis.
- Last comprehensive multi-sectoral analysis of nutrition-relevant information with reference to determinants and drivers undertaken in IPC AM in January 2023.
- Available information does not meet minimum criteria for inclusion in IPC analysis.
- Nutrition status estimates (nowcasting and forecasting) reliant on *extrapolation and triangulation but*, the specific analytical process, apparently very robust, is not documented.
- Data on key nutrition indicators not currently included in REACH RTMF
- It is likely that the existing information is being under-utilised.

Findings

Component 5 & 6

Interpretation and reaching common agreement

Within and across sectors

Nutrition and Cross-Sectoral Coordination and Analysis Groups include;

- Humanitarian coordination team (HCT) – Intercluster
- AAWG – OCHA, IOM, REACH
- AIM TWG – Nutrition Cluster

Challenging for organisations to reach common agreements and to develop clear and evidence-based messages to decision-makers due to:

- Varying interpretations / biases
- Perception of uncertainty related to information derived through extrapolation

Multiple and inconsistent messages reach decision-makers, resulting in delays in decisions related to financing and implementation of critical interventions.

Findings

Component 7

Communication of information for decision-making

Communication of messages and information to decision-makers

- Cluster websites, Nutrition Sentinel Sites Bulletins, humanitarian situation reports available and can be accessed online or through cluster.
- Nutrition Cluster not currently issuing regular narrative analytical reports/bulletins.
- Limited coherence in communicating overall purpose and information sharing to inform various decision-makers at different levels. It is likely that senior and non-technical decision-makers are not receiving consistent and evidence-based communications on evolving situations, recommendations and targeting.

Findings

Component 8

Use of information for decision-making

Use of nutrition-relevant information to inform decision-making

- Confidence in data quality and reliability varies significantly among information users and decision-makers.
- Valuable data not used to inform decision-making, not contextualised / analysed.
- In the absence of clear and consistent messages, decision-makers likely to undertake own analysis and develop individual conclusions and recommendations.

Summary Findings

Nutrition Information System in Afghanistan

- Multiple important components of a nutrition-relevant information system exist and function within the health system
- Data are being collected, but there are some gaps:
 - Geographical and population coverage deficits
 - Specific outcome and action data deficits
 - Confidence in data quality and reliability varies significantly among information users and decision-makers.
- Existing information under-utilised
- SMART surveys in high-risk areas last done in 2021
- Multi-sectoral analysis of nutrition not frequent or recent
- Conflicting messages reaching decision-makers
- Inadequate evidence to support recommendations

Recommendation 1

Optimise potential of health-system based nutrition information

Undertake collaborative assessment of

- the intended purpose, functions and accountabilities within the existing system
- collection, collation, sharing, flow, analysis, consensus, communication and use of information for decision-making at the various levels within the health system.

Develop road-map to address deficits and gaps, including human resource capacity issues. Include definition of data use for decision-making at all levels.

Recommendation 2

Build confidence in data quality

- **Review efficiency and effectiveness** of existing data verification and quality assurance functions.
- **Identify capacity gaps** and means to address.
- **Explore use of technologies** for data entry and transmission

Recommendation 3

Address challenges with data gaps and data relevance

Strengthen evidence base for interventions by:

- continuing advocacy for SMART surveys (justified by very specific concerns and where programmatic decisions are constrained by inadequate evidence)
- exploring options for improving routine sentinel surveillance for ‘white areas’, displaced, returnees and urban populations
- strengthen information on maternal nutrition, acute malnutrition in infants and other particularly vulnerable groups.
- support to implementation of National Nutrition Survey, to establish baseline and strengthen evidence for interventions.

Recommendation 4

Twice-yearly multi-sectoral nutrition situation analysis

Build credibility and confidence in the analysis and strengthen the evidence base of recommendations through:

- Support and facilitation of periodic multi-sectoral analysis of nutrition to (i) inform situation analysis and needs assessment, and (ii) understand criticality of specific drivers, to inform evidence-based rationale for context specific response interventions.
- Formalisation and documentation of the methods used currently for extrapolation and triangulation
- Intensification of existing engagement with IPC and REACH for multisectoral analysis and monitoring.

Recommendation 5

Reaching agreement on interpretation and recommendations to strengthen communications

Ensure coherence and credibility of analysis and recommendations by:

- facilitating a process of consensus building on key messages
- ensuring coherent and context-specific recommendations on critical drivers of malnutrition.

Recommendation 6

Leadership

Overall leadership needed to:

- develop and maintain momentum and support for moving forward with recommendations.
- ensure that the necessary technical and financial resources are available
- negotiate and support technical leadership roles among existing structures
- guide the establishment of additional oversight functions as indicated
- mobilise relevant partners to strengthen multi-sectoral analytical processes
- facilitate consensus building and more harmonised evidence-based interventions.

Towards implementation of recommendations

- Build on this review & recommendations to prompt commitment to more robust multi-sectoral analysis of nutrition.
- Draft implementation plan and identify existing and additional resource requirements
- Confirm technical leads for various components e.g. Nutrition Cluster supported by AIM TWG leading sectoral analysis, AAWG guiding multisectoral analysis.
- Humanitarian information requirements and interventions to be embedded in routine programme for sustainability and early response capacity.
- Agreement on and support to overall leadership.
- Commitment to operational and financial support from donors

**Feedback, additional
contributions, discussion.**



Contact

DAI Global UK Ltd | Registered in England and Wales No. 01858644

Address: 3rd Floor Block C Westside, London Road, Apsley, HP3 9TD, UK

DAI Global Health Ltd | Registered in England and Wales No. 03054929

Address: 3rd Floor 63 Gee Street, London, United Kingdom, EC1V 3RS, UK

DAI Global Belgium SRL | Registered in Belgium No. 0659684132

Address: Avenue de l'Yser 4, 1040 Brussels, Belgium

Facility Director: Paula Quigley, Paula_Quigley@dai.com

Nutrition Action for Systemic Change (NASC) is contracted through the Expert Advisory Call Down Service 2 (EACDS2) Lot 4: Climate, Nature and Global Health funded by UKaid. EACDS technical advisory services provide rapid, quality-assured, short-term technical expertise to support the development of U.K. aid programs.



This presentation was produced by DAI's NASC Technical Assistance Facility through support provided by UK aid and the UK Government; however, the views expressed do not necessarily reflect the UK Government's official policies.