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Annex: SPRING Pathways to Better Nutrition Budget Methods **Uganda**

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About SPRING

The Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) project is a five-year USAID-funded Cooperative Agreement to strengthen global and country efforts to scale up high-impact nutrition practices and policies and improve maternal and child nutrition outcomes. The project is managed by JSI Research & Training Institute, Inc., with partners Helen Keller International, The Manoff Group, Save the Children, and the International Food Policy Research Institute.

Disclaimer

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Note: This annex will become part of a forthcoming final report on the SPRING Pathways to Better Nutrition (PBN) Uganda Case Study, which will provide the insights, evidence, and recommendations gleaned from this two-year mixed methods study. The methods described in this annex also underpin the set of interim PBN briefs now available on our website.

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Background

The Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) project undertook an analysis of Uganda's nutrition budgets as part of its Pathways to Better Nutrition (PBN) study. The objectives of the analysis were to provide stakeholders with the following products:

- An estimate of funding budgeted for Ugandan Nutrition Action Plan (UNAP) activities in Fiscal Year (FY) 2013/2014 and FY 2014/2015. This will be useful for comparison with the estimated costs to implement the UNAP and for understanding gaps in nutrition funding. The data can also be used to plan government and donor nutrition funding and to advocate for greater and more consistent nutrition funding.
- Information about which activities are prioritized financially each year within the UNAP. This includes information on funding sources for each activity (e.g. whether funding has been shifted from other activities) and the balance of government and donor funding for the nutrition activities.
- Budgeting tools and guidance to help nutrition stakeholders in Uganda more explicitly track and advocate for nutrition funding. This can help with reporting not only within Uganda but also for groups such as the Scaling Up Nutrition (SUN) Movement, which prioritizes financial tracking in its monitoring and evaluation of countries.

Budget Analysis for the Ugandan Context

Political will for nutrition must be reflected through financial support at the national and subnational levels (USAID 2014). Several steps are involved in tracking financing support, including costing, budget analysis, expenditure analysis, and expenditure tracking. Our efforts, and this guidance document, focus on budget analysis: estimating what funding is allocated to implement the nutrition activities in the UNAP.

Budget analysis can be defined as applied analysis of government and donor budgets with the explicit intention of impacting a policy debate or furthering policy goals (The International Budget Partnership 2001). Budget analysis often also includes efforts to improve the budget literacy of policymakers, program planners, and other key stakeholders. Our budget analysis is meant to better inform the stakeholders advocating for the UNAP of their available resources. This can lead to more effective advocacy for greater nutrition funding, more transparency in how those funds will be spent, and clearer negotiation for donor funding.

Where data were available, we also conducted an **expenditure analysis** to look at what percentage of funds was spent for nutrition activities. Expenditure data were included in the analysis after budget allocations because of time and data limitations; in some cases, they were not part of budget validation interviews.

In conducting the budget analysis for nutrition in Uganda, we adhered to three key principles:

1. **Data were both taken from and defined by local documents.** The data rely on the UNAP Activity Matrix to define areas of analysis and local budget documents as primary data sources, with a preference for government documents for all data, including off-budget funding.
2. **All analysis assumptions were based on the SUN 3-Step Approach but then validated and adapted for the Ugandan context** based on feedback from nutrition stakeholders in Uganda.
3. **Data collection, validation, and analysis were broken down by UNAP objective areas** to assist the Office of the Prime Minister (OPM) and sectors to use them for future planning.

The UNAP contains an explicit implementation matrix (Annex I of the UNAP) that defines the interventions in support of the UNAP, expected outputs, the government agency responsible for leading each activity, and other participants. In addition, an approximate cost is assigned to each activity in Annex II of the UNAP, and a revised costing exercise led by the United Nations Children’s Fund (UNICEF) and the World Bank is currently under way. By using the UNAP as the basis for this methodology, activities were set for the five-year period of the UNAP, allowing SPRING to follow the same set of activities over that time. In addition, this means that estimated financial allocation and expenditures could be compared with the costed plan.

Methods

The PBN case study is a prospective mixed-methods study that includes budget analysis as an integral component. To feed further inquiry about planning for nutrition, the study compares budget analysis to qualitative data on activity prioritization. Because no standard methods exist for extracting budget data, especially for a subsector such as nutrition, we adapted guidance from the following sources to create a methodology for extracting nutrition-specific and -sensitive funding data from donor and government budget documents:

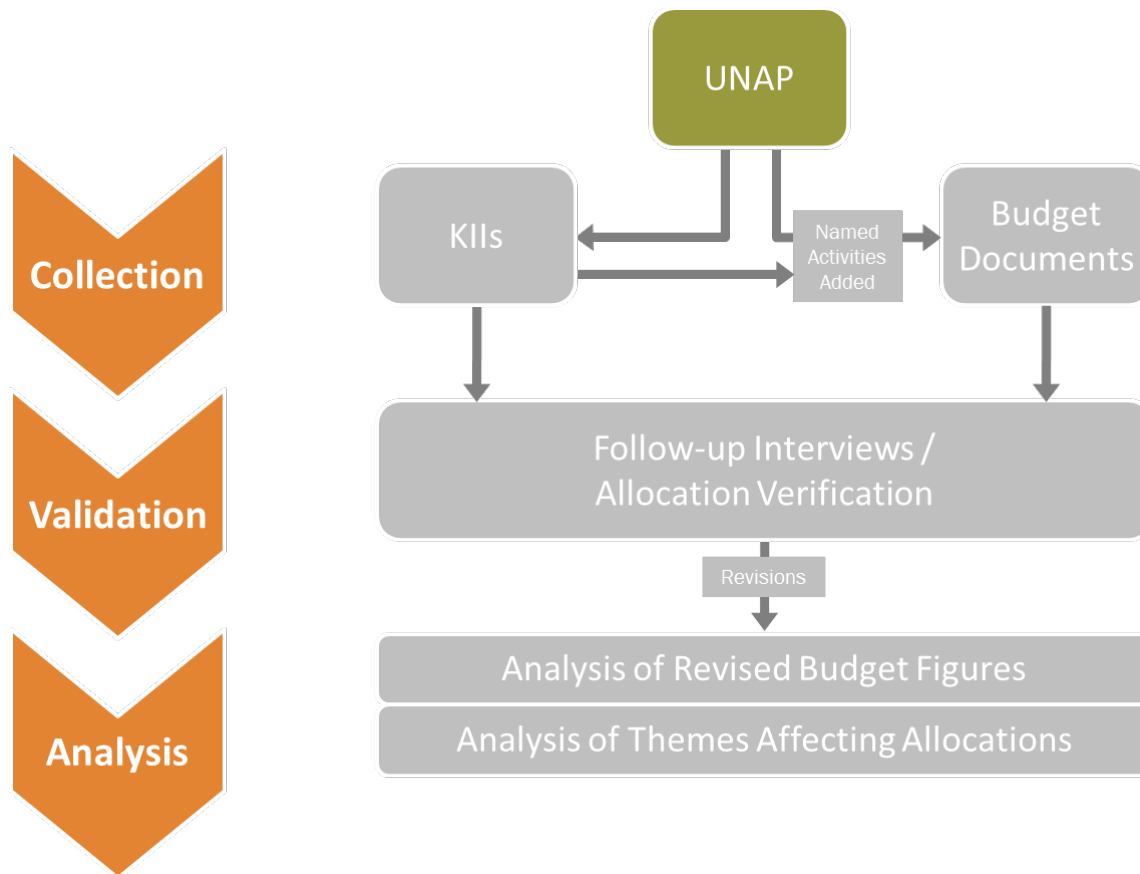
- the SUN donor network guidance for tracking global investments in the Development Assistance Committee database (DAC) (SUN Donor Network 2013)
- documentation of the SUN 3-step process (Scaling Up Nutrition, n.d.)
- examination of the UNAP Implementation Matrix (Government of Uganda 2011)
- advice on local budgeting procedures from SPRING's in-country partner Deutsche Stiftung Weltbevölkerung (DSW), which has experience conducting cross-sector budget analysis in Uganda and elsewhere in sub-Saharan Africa (Sizomu, Brucker, and Muwonge 2014)
- consultation with the Ugandan Government's ministries and key donors.

The SPRING project collected and analyzed budget data for **two budget cycles**: 2013/2014 and 2014/2015. We collected data at the national level for government, donor, and United Nations (UN) groups, and in two districts for government, donor, UN groups, and civil society organizations (CSOs).

Throughout the analysis, we used our in-country partner DSW for guidance on interpretation of budget documents and findings. The organization has decades of experience in budget analysis, both in Uganda and elsewhere, and provided us with essential insight into the local context of the budget process. In addition, DSW adapted its community-led process for district-level budget analysis to align with SPRING's national-level methodology. This resulted in comparable data in the two study districts (Lira and Kisoro).

The process for data extraction and analysis described below was used to address Objectives 1 and 2 of the budget analysis. We documented this process and developed tools to help others replicate this analysis by the end of the study to meet Objective 3. Figure 1 lays out the primary steps for the process SPRING undertook. Most efforts fall within three areas: data collection, data validation, and data analysis. Further information on each area is included below. For additional detail on how to carry out a budget analysis activity, please see SPRING's [Nutrition Budget Analysis Tool and User's Guide](#) (SPRING 2015).

Figure 1. Summary of SPRING’s Budget Methodology



Data Collection

We took the following steps to ensure that all relevant data were collected for use in the budget analysis process:

1. Regular group extraction meetings to ensure all members of the PBN team understood the budget analysis process.
2. Feedback on ambiguous terms shared with nutrition stakeholders for guidance.
3. Notation and documentation in extraction sheets.
4. Cross-referencing figures from multiple sources, where available.

At the national and district levels, SPRING worked primarily with government budget documents to ensure that data were recognizable to the stakeholders who would eventually be using the data. The SPRING project and DSW (in the districts) used available documents to compile a preliminary list of budget lines that were nutrition relevant. This information came from key informant interviews (KIIs), where nutrition focal persons often identified nutrition-relevant activities during the qualitative data collection. We shared these activities with budget analysts on the PBN team who used that information and the UNAP Activity Matrix to identify budget lines that might include nutrition-relevant funding and extract the information into an Excel file for the validation phase.

Although it can be difficult to identify nutrition-relevant funding from the budget documents alone, PBN analysts focused on any budget lines that had objectives, outputs, or other descriptions that could align with one of the

activities from the UNAP Activity Matrix. Nutrition stakeholders within the ministry validated this broad collection of budget lines in budget validation meetings; these budget lines were triangulated with the information from qualitative interviews. The process was very similar at the national and district levels, but it relied on slightly different documents and stakeholders.

National Level

National-level data were gathered during baseline data collection in November 2013 and again in July 2014. The team conducted qualitative and budget interviews with stakeholders from the six key groups that SUN named for scaling up nutrition activities:

- **government (ministries as well as the nutrition coordinating body and office of the prime minister)**
- **donor agencies**
- the CSOs (at the national level, only the organizing body for CSOs, since more in-depth interviewing of this group occurs at the district level)
- business/private sector
- **UN groups**
- academic/research institutions.

The SPRING project requested budgets, supplemental documents, work plans, and any other documents needed to identify nutrition funding for each of the groups **bolded** in the above list. For the other groups, SPRING inquired about approximate funding for their nutrition work and the source of funding but did not pursue the full budgeting exercise. For government ministries, data collection focused on budgets published in the Ministerial Policy Statements (MPS) or more detailed sector or ministry work plans, when they were available.

The MPS and work plans identified on-budget funding from government and external sources. Off-budget donor and UN activities were first identified through the Ministry of Finance's (MOF's) report on off-budget funding: "Summary of project support managed outside government systems" (MoFPED 2013). Responses from the qualitative interviews with donors and UN agencies supplemented data on external funding, both on- and off-budget. The PBN analysts used all these documents to develop a preliminary list of budget line items that were a potential match for any UNAP activities, as described in the UNAP Activity Matrix.

District Level

The project and subcontractor DSW conducted qualitative and budget interviews in April–August 2014 in the districts of Lira and Kisoro. DSW led the budget-related interviews and collected key documents, as SPRING had done at the national level.

The following groups participated in the budget interviews:

- government (national medical stores, Lira Referral hospital, and district officers of Kisoro and Lira)
- donor agencies (if local office was in place)
- CSOs (all that operate nutrition-related projects in the two districts)
- UN groups (if local office was in place)
- private sector.

The SPRING project and DSW collected and reviewed district development plans, sector work plans, budget performance reports, CSO budget reports and work plans, hospital budgets and work plans, and local government work plans from both districts (the full list of district-level documents reviewed is provided in Appendix 1). The PBN analysts relied on these documents, and on information about funding and nutrition activities collected in qualitative interviews, to develop a preliminary list of budget line items that were a potential match for any UNAP activities, as described in the UNAP Activity Matrix.

Data Collection Examples:

- a. The MPS describes a budget line as including funds for “mentoring on household food security.”
- b. A key informant mentions in the interview that her organization plans to implement a nutrition awareness day.

Both would be added to a budget extraction sheet.



Data Validation

National and District Levels

After developing a preliminary list of nutrition-relevant budget lines, we validated the extracted ministry and donor budget data through meetings with the key informants for that ministry or donor. Every effort was made to also cross-validate data with the sector focal point at MOF. This validation looked not only at whether the data were relevant to nutrition, but also at whether they were correctly categorized for data analysis (see data validation interview tool in Appendix 2). See below for more detail on data analysis classifications; however, key informants were asked to validate whether the budget line should be categorized as 1) stand-alone or integrated, 2) specific or sensitive, or 3) dominant or partial.

Any projects, programs, or activities that the country or global team (for donors), line ministry, or OPM (for government) could not validate were dropped from the analysis. Projects that key informants named were researched and included in this validation step to ensure that supplemental documentation allowed them to be correctly added to the analysis.

Data Validation Example:

- a. Nutrition and budget staff members within the ministry are asked to review the budget line that includes “mentoring on household food security.” They confirm that it is a nutrition-related activity that is **integrated, sensitive, and dominant** (based on definitions presented below). It remains in the budget extraction sheet.
- b. During a validation meeting, the donor budget officer says that the Nutrition Awareness Day was not included in the final official budget for the organization. The activity is marked as “unfunded” in the budget extraction sheet and not included in subsequent analysis.

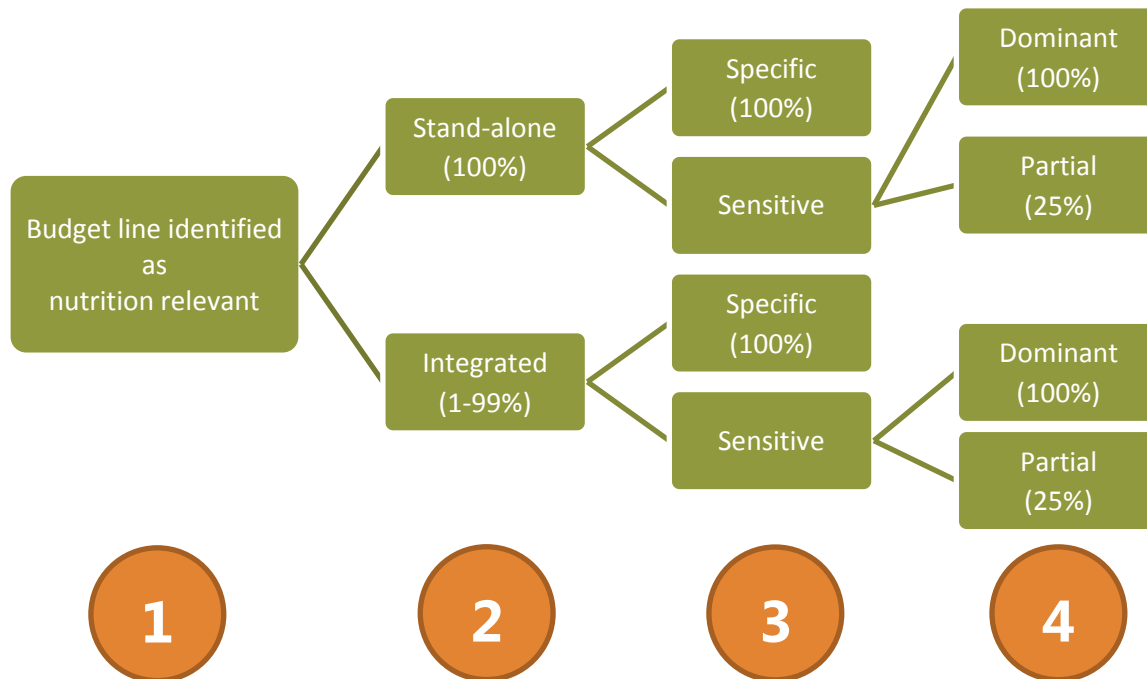


Data Processing and Analysis

National and District Levels

We built our budget analysis process on budget data **collected** from documents and KIIs and **validated** through additional meetings and emails. It relied on categorizing each budget line into a number of classifications. From this point, data were analyzed according to a simple formula. This process is outlined in Figure 2, and modifications made to this approach at the district level are presented in more detail below. Our approach was based on and informed by the SUN 3-Step Approach, but we made some modifications for the Ugandan context. Details on these modifications can be found in Appendix 3.

Figure 2. SPRING's Modified Validation Approach



1. Through the data **collection** and **validation** phases, PBN analysts included nutrition-relevant budget lines in data extraction sheets. The sheets collected relevant data, including budget codes and other identifying information, budget line descriptions, allocations, expenditures (if available), references to the UNAP Activity Matrix, and other clarifying notes. If, during either the collection or validation phase, it was discovered that the activity or budget line was not actually relevant to nutrition (i.e., did not match an activity from the UNAP Activity Matrix or did not have a nutrition objective), it was not included in the analysis.
2. **Integrated** means that the budget line includes a number of activities and the nutrition-relevant activity is only a portion of the total amount reflected in the budget line. In contrast, **stand-alone** budget lines include only nutrition-relevant activities (i.e., nutrition-relevant activities make up the total amount reflected in the budget line). This classification was determined based on the available information in the budget, KIIs, and validation meetings. We tried to work with budget documents that were detailed enough to contain only stand-alone budget lines. When this was not possible, information from the budget document itself (objectives, listed activities, outputs, or inputs) was used to identify the nutrition-relevant funding. If the nutrition-relevant funding amount still could not be ascertained, integration

percentages or amounts were determined during validation interviews. The examples below illustrate some of the various ways this classification could be made:

- a. A budget line is described as a “food security and nutrition survey.” This is an example of a budget line where all the funding is relevant to nutrition because all the funding is going to support the nutrition activity. One hundred percent of the funding is used for the data analysis process.
 - b. A budget line lists a number of community-level activities unrelated to nutrition along with a nutrition sensitization event. No further information from the budget describes how much funding goes to the nutrition-relevant portion of the activity. In a validation interview, the budget officer confirms that an amount of money equal to 40 percent of the budget line is related to the nutrition sensitization event. This 40 percent is used for the data analysis process.
3. As described above, nutrition activities can be classified as **specific** or **sensitive**. This classification describes the activities’ effect on improving nutrition outcomes. The PBN analysts used the definitions below. Please see Appendix 4 for more detail on categorizing activities as nutrition-specific or nutrition-sensitive.

Nutrition-specific interventions directly address the immediate causes of malnutrition, including care, health, and feeding practices. These activities are often (but not always) addressed within the health sector.

Nutrition-sensitive interventions indirectly address the underlying and basic causes of malnutrition, which could include food security/availability, resources for feeding and caregiving, or access to health services, among others. These activities are most often addressed in non-health sectors, such as agriculture, education, gender and social development, trade and industry, water, and environment.

For this analysis, the UNAP Activity Matrix defined the scope programming that counted as nutrition relevant. Working from SUN and other global partner guidance, PBN analysts classified budget lines as nutrition-specific based on the guidance in Appendix 4. Those nutrition-relevant activities that fell within the scope of the UNAP but were not nutrition-specific were classified as nutrition-sensitive. In addition, donors were given instructions that referred to the DAC coding guidance developed by the SUN Donor Network (see Appendix 5). The examples below illustrate some of the various ways that this classification could be made.

- a. A donor has budgeted for a vitamin A supplementation activity. This is on the list of nutrition-specific activities and included under UNAP Strategy 1.1; it would therefore be classified as nutrition-specific.
 - b. A ministry budget includes a community messaging campaign to address a local food taboo that impairs the nutrition of pregnant women. This addresses UNAP Strategy 1.2, but it does not fit in the list of nutrition-specific activities, so it is categorized as nutrition-sensitive.
 - c. A CSO is implementing a plan to improve girls’ attendance at school. Some global actors consider this activity to be nutrition-sensitive, but it is not addressed in the UNAP Activity Matrix. This budget line would not be included in the final analysis.
4. In the past, the SUN Donor Network and 3-Step Approach encouraged the use of weights to adjust final estimates to account for the intensity of a budget line’s contribution to nutrition outcomes. In practice, this effort has been difficult. The SUN Donor Network admits that “although partially mitigated by a

detailed methodology with stringent criteria for inclusion, the approach is subjective” (Scaling Up Nutrition 2013).

To reduce subjectivity as much as possible, the PBN analysts used the following definitions to classify nutrition-sensitive budget lines.

Dominant nutrition budget lines: If the primary objective, results, outcomes, and indicators of the project have a direct effect on nutrition-sensitive activities, these budget lines are counted at 100 percent.

Partial nutrition budget lines: If only secondary objectives, results, outcomes, and indicators of the project have an indirect effect on nutrition-sensitive activities, these lines are counted at only 25 percent. The reason for this suggested weighting is to avoid over-counting those activities that only have a distant effect on nutrition outcomes. For example, a large-budget project like a social safety net often only has secondary nutrition-related goals. It would appear to dwarf other nutrition investments if the funds were not weighted, despite its more distant effect on nutrition.

This distinction was made during data validation interviews, with PBN analysts asking respondents whether the nutrition goals for an activity were the primary goals or only of secondary (or lower) importance. Given the subjectivity of the weights, we presented all final results unweighted, but with the option of including this weighting step. The examples below illustrate some of the various ways that this classification could be made.

- a. A community-led, value-addition activity lists improving nutrition of small-holder farmers as an explicit goal in the budget document. This budget line is classified as nutrition-sensitive **dominant** and counted at 100 percent.
- b. Funding provided to an agricultural production activity has a primary goal of increasing crop yields. Additional documentation and interviews reveal a secondary goal of improving and promoting local food processing at the household and community levels. This budget line is classified as nutrition-sensitive **partial** and counted at 25 percent.

Once the budget line was classified according to these breakdowns, a simple formula was applied to obtain analysis results.

- For **unweighted estimates**, calculate the *amount of funding relevant to nutrition*.
 - This is the full budget line for stand-alone budget lines.
 - For integrated budget lines, the nutrition-related funding amount is the “allocated budget” multiplied by the integration percentage.

Note: While unweighted results do not differentiate between nutrition-specific and -sensitive amounts, they still can be illustrative to see the results separately for each group.
- To obtain **weighted estimates**, multiply the *amount of funding relevant to nutrition* by—
 - 25 percent for budget lines classified as nutrition-sensitive partial
 - 100 percent for budget lines classified as nutrition-specific or nutrition-sensitive dominant.

District Level

District-level Considerations

At the district level, nutrition budgets are integrated into broader, layered budgets. For this and a variety of other reasons, district planners may have a more difficult time approximating percentages. Thus, a modified methodology was required to a) identify budget lines that relate to nutrition activities and b) estimate the amounts dedicated to nutrition.

For each sector, relevant budget lines were identified through KIIs, an output budgeting tool (OBT), and work plans. In the baseline round, district officials were asked to identify nutrition-relevant activities from the OBT and work plans and substantiate their activities by providing examples and relating the budget line to UNAP strategic areas. In addition, they were asked to estimate how much funding was reserved for the nutrition activity.

Whenever possible, PBN analysts relied on the expert knowledge of nutrition and budget staff in the districts to provide percentage estimates of nutrition budget lines. Unfortunately, not all key informants or data validators were able to provide a funding amount or percentage that allowed the PBN analysts to identify the amount of funding relevant to nutrition. In those cases where such data were not available, SPRING and DSW worked with district stakeholders to transfer narratives into quantitative data (see Appendix 6).

Civil Society Organization District-level Budgets

Many CSOs were reluctant to give detailed project work plans and budgets to SPRING and DSW. Therefore, a short questionnaire (see Appendix 7) was developed to provide summarized budgets and project information for a given CSO.

Additional Considerations for Data Analysis

Exchange Rates

The MOF reports off-budget donor funding in current-year USD. However, all ministry budget data are reported in current-year UGX. We reported final estimates in both USD and UGX. Interbank exchange rates from the Ugandan Central Bank were used for the conversions, averaged over the first month of the FY.

Deflation/Inflation Rates and Base Year

National-level analysis began at 2013/2014. For yearly reporting, no modifications were made to the reported figures in USD; however, for aggregated reporting of more than one year of reporting trends, we used 2013/2014 as the base year, and adjusted successive years to base-year dollars. Inflation rates were averaged over the FY using the World Bank GDP-Deflator/Ugandan Bureau of Statistics Producer Price Index.

Tracking Overlapping Donor Funds

Off-budget funders, particularly donors and UN agencies may report overlapping funding lines. Many bilateral donors provide funding to UN agencies and the Government of Uganda. When funding UN agencies, bilateral donors rarely identify the funding as nutrition, which means the UN agency decides how to allocate these funds within the larger category of giving. We chose to follow donor and UN funds at the project level rather than starting from the top, i.e., global allocation level.

LIMITATIONS

Missing Data and Non-Response

The MOF document detailing off-budget support is released up to two FYs late, so donor sources have to validate all these data. Given the large number of donors with at least one project, however, only the most active were contacted for in-person, in-depth data validation, while the others were contacted via email. For those projects not included on the MOF list, some respondents were not able to break down overall project budgets to yearly ones. When respondents could not provide this data during interviews, we imputed the missing data from the total project commitment figure divided by the number of project years. This applied primarily to off-budget donor figures.

Data Quality

Most respondents to our requests for information were unaware of the budget analysis methodology in the first round of data collection, which complicated efforts to appropriately identify and categorize relevant funds. Where possible, this challenge was overcome by capacity development of these respondents, who were better able to answer requests during the second round of data collection. This limitation was overcome with continued capacity development but did not preclude the dissemination of final results that included confidence intervals, when necessary.

Changes over Time

The project compared data over several budget cycles, so it was important to use the same standards during each round for comparability. However, as ministries became more aware of nutrition and “nutrition-sensitive” activities via the rollout of the UNAP, their accounting for activities sometimes changed; a greater number of activities were identified as nutrition-sensitive, even if they existed in previous budgets. We made every effort to return to previous years’ data after each new round to check that “new” activities were indeed new and not just re-categorized.

Subjectivity of “Sensitive”

Defining “nutrition-sensitive” can be complicated. Within the data analysis team, SPRING ensured inter-rater reliability through regular group extraction meetings to discuss ambiguous activities listed in UNAP and cross-verified final lists with the source ministry, local governments, or donor organization.

Evolution of Nutrition Designation

Changes in the designation of nutrition-sensitive categories at the global and national levels are likely. The UNAP is not expected to change until 2017, but modifications—particularly related to water and sanitation (the Ministry of Water and Environment [MWE] was excluded from the original plan)—could be made. In response to a request from the OPM, SPRING included the MWE in data collection efforts. While not a signatory ministry, the MWE’s role in the UNAP rollout has been growing, and national stakeholders felt that not including these figures would not accurately reflect the level of investment in nutrition.

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Appendix 1. District-Level Documents Reviewed

District Development Plan FY 2010/11 – 2014/15	Detailed sector work plan Health FY 2011/12
District Development Plan FY 2011/12 – 2015/16	Detailed sector work plan Health FY 2012/13
District Development Plan FY 2012/13 – 2016/17	Detailed sector work plan Health FY 2013/14
District Development Plan FY 2013/14 – 2017/18	Detailed sector work plan Education FY 2011/12
Approved budget estimates for revenues and expenditures (central government vote) FY 2011/12	Detailed sector work plan Education FY 2012/13
Approved budget estimates for revenues and expenditures (central government vote) FY 2012/13	Detailed sector work plan Education FY 2013/14
Approved budget estimates for revenues and expenditures (central government vote) FY 2013/14	Detailed sector work plan Water FY 2011/12
Annual local government work plan FY 2011/12	Detailed sector work plan Water FY 2012/13
Annual local government work plan FY 2012/13	Detailed sector work plan Water FY 2013/14
Annual local government work plan FY 2013/14	Detailed sector work plan CBS FY 2011/12
Summary sector work plan P&M FY 2011/12	Detailed sector work plan CBSFY 2012/13
Summary sector work plan P&M FY 2012/13	Detailed sector work plan CBS FY 2013/14
Summary sector work plan P&M FY 2013/14	Approved budget performance report FY 2011/12
Summary sector work plan Health FY 2011/12	Approved budget performance report FY 2012/13
Summary sector work plan Health FY 2012/13	Approved central government transfers
Summary sector work plan Health FY 2013/14	Lira Referral Hospital work plans and budget
Summary sector work plan Education FY 2011/12	CSO reports, work plans, and budgets
Summary sector work plan Education FY 2012/13	
Summary sector work plan Education FY 2013/14	
Summary sector work plan Water FY 2011/12	
Summary sector work plan Water FY 2012/13	
Summary sector work plan Water FY 2013/14	
Summary sector work plan CBS FY 2011/12	
Summary sector work plan CBS FY 2012/13	
Summary sector work plan CBS FY 2013/14	
Detailed sector work plan P&M FY 2011/12	
Detailed sector work plan P&M FY 2012/13	
Detailed sector work plan P&M FY 2013/14	

Appendix 2. Sample Data Validation Tool

This sample data validation tool includes some of the questions that were asked in data validation meetings, depending on previous rounds of data collection and validation.

INTERVIEWER STEP 1: CIRCLE THE LINE ITEM YOU ARE GOING TO DISCUSS BELOW. Only fill in answers for that ONE line item on this sheet. Please print enough questionnaires for each line item in this list.

Vote XX, VF XX, Programme XX		XXX, Output XX: [Description]
[additional budget lines as necessary]		
Q#	Question (INTERVIEWER: FILL OUT IN ENTRY FORM ONLY FOR CIRCLED LINE ITEM)	Answer
1	In the FY 13/14, did the budget line item listed have any component related to nutrition? What about FY 14/15? (If no, show UNAP activity list. If still no, move to next budget line.)	13/14: YES or NO 14/15: YES or NO
2	We would like to estimate what part of this budget line item is related to nutrition (what percentage, 1-100) for each year. Can you share with us a work plan or breakdown of this line item to identify this percentage? (If no, ask them to estimate percentage.)	13/14: YES or NO Document: _____ Or estimated %: _____% 14/15: YES or NO Document: _____ Or estimated %: _____%
3	(If no work plan or confusion) As compared with the UNAP Annex (at end of this file) , can you describe for us what within this line item is related to these UNAP activities and approximately what the budget was for? _____	Estimated Amount: _____UGX (13/14 or 14/15) _____UGX (13/14 or 14/15) _____UGX (13/14 or 14/15)
4	Among the activities in this project, were any "nutrition specific" (see list at back, Annex 1)? If yes, which ones (specify year)? _____	13/14: YES or NO 14/15: YES or NO
5	For nutrition-sensitive activities, does this nutrition activity have a primary (is the main objective of this work to improve nutrition) or a secondary outcome of improving nutrition?	13/14: PRIMARY or SECONDARY 14/15: PRIMARY or SECONDARY
6	Will you continue the nutrition activities in this line item for next year (2015/16)?	15/16: YES or NO

Appendix 3. SPRING Modifications to the SUN 3-Step Process

Some activities that the Scaling Up Nutrition (SUN) Movement includes on its “nutrition-sensitive” list for the Development Assistance Committee (DAC) guidance were not counted in our analysis. Each country has latitude to include or exclude any of these activities, and in the Ugandan Nutrition Action Plan (UNAP), certain sectors received less emphasis. Qualitative inquiry can probe the reasons for the differences between the SUN definition and what appears as sensitive in the UNAP (see Appendix 4 for the SUN list), but for the budget analysis, excluded activities did not count toward the total estimated nutrition allocation or expenditure. The ambiguity of the UNAP list is a drawback, since it allows subjective interpretation.

We compiled a list of ambiguous terms and activities and asked for clarification from various nutrition stakeholders in Uganda, including the Office of the Prime Minister (OPM), the UNAP Coordination Secretariat, and signatory ministries. However, in some cases, there was still room for interpretation. When this occurred, we allowed the inclusion of any budget items related to that activity that still fell within the SUN definitions of nutrition-sensitive. The ministry or donor responsible validated all final budget lists as a last check on the validity of the budget analysis.

Nutrition-Specific Activities

Within the sources above and the activities in the UNAP Activity Matrix, SPRING largely followed the USAID Nutrition Strategy definition of nutrition-specific activities.

- Management of severe acute malnutrition
- Preventive zinc supplementation
- Promotion of breastfeeding
- Appropriate complementary feeding
- Management of moderate acute malnutrition
- Periconceptual folic acid supplementation or fortification
- Maternal balanced energy protein supplementation
- Maternal multiple micronutrient supplementation
- Vitamin A supplementation
- Maternal calcium supplementation

This list matches the one provided in the executive summary of the 2013 *Lancet Series* (*The Lancet* 2013). The SUN guidance for the identification of nutrition-specific activities was also based on *The Lancet Series*’ (2008 and 2013) set of interventions.

The SUN guidance for tracking global investment in nutrition (Mucha 2012; SUN Donor Network 2013) does not provide a definition of nutrition-specific activities beyond recommending use of the “basic nutrition” DAC purpose code. In the DAC, the definition of this code is—

“direct feeding programs (maternal feeding, breastfeeding and weaning foods, child feeding, school feeding); determination of micro-nutrient deficiencies; provision of vitamin A, iodine, iron, etc.;

monitoring of nutritional status; nutrition and food hygiene education; household food security”
(OECD website, “Purpose Codes: sector classification” and “2012 CRS purpose codes_excel EN”)

According to SUN guidance, **100 percent of the funds** assigned to a “nutrition-specific” activity will be counted toward the total (no weighting applied).

Nutrition-Sensitive Activities

The SUN financial tracking guidance outlines its approach for identifying and weighting nutrition-sensitive activities from the DAC. We modified this guidance to align with the UNAP and to be relevant for both government and donor funding. These modifications added one additional step. The overall approach and SPRING’s modifications can be summarized by Figure 2.

Broken out, this can be explained as follows:

1. **Identify the pool of potentially nutrition-sensitive projects and budget line items:** SUN suggests using a combination of DAC codes and a key word search on the CRS database for donor activities. The lists of DAC codes and key words are presented in Appendix 5. **SPRING MODIFICATION:** SPRING’s roster of potentially nutrition-sensitive activities was derived from the defined activities in the UNAP Implementation Matrix. While many areas overlapped with the DAC descriptions, some divergence existed, and the level of detail was greater in the UNAP than in the DAC.
2. **Integrated or Stand-Alone Activity:** Very often in government budgets (and sometimes in donor activities) nutrition-relevant activities are “integrated” into larger non-relevant activities. Therefore, we had to undertake this additional step to allow for counting of partial components of the larger line item. In validation interviews or via reading of project documents, we tried to find out what percentage of a line item is nutrition relevant.
3. **Nutrition-Sensitive vs. Specific:** SUN suggests reviewing the projects selected in Step 1 by assessing each project document individually. The objectives, expected results, and indicators are examined to determine whether the project is nutrition-sensitive. SUN requires the activity to pass three criteria: 1) Project must intend to improve nutrition for women, adolescent girls, or children; 2) Project has a significant nutrition objective OR nutrition indicator(s); and 3) Project must contribute to explicit nutrition-sensitive outcomes (through activities, indicators, and results; see Appendix 1). **SPRING MODIFICATION:** The project modified the list of nutrition-sensitive outcomes to match the UNAP activity outputs. If an activity in SUN’s list was not in the UNAP, that activity was not counted in SPRING’s budgeting, unless it was given as a nutrition activity in our interviews.¹ For instance, on SUN’s list, improving access to education/school for adolescent girls is not a UNAP activity, so a project with that as its only nutrition-sensitive outcome would not be counted in SPRING’s budgeting. A school feeding program would be counted, however, since that is a UNAP activity.
4. **For Nutrition-Sensitive, is it “Dominant” or “Partial”:** Through the same review of project documents, classify the “intensity” of nutrition sensitivity into two subcategories: nutrition-sensitive dominant or

¹ Government considerations: In government work plans and budgets, activities are usually not explicitly defined, and few will have explicitly named results or indicators. This makes following the DAC guidance more difficult. We tried to apply the same standards to both donor and government funding but had to relax the set of three to become a set of the first and third criteria, with the second as an optional criterion, if information became available. We discussed the extracted activities with each ministry to ensure the project was appropriately defined as a nutrition-sensitive activity.

nutrition-sensitive partial. **SPRING MODIFICATION:** When no other information for a project was available, SPRING used SUN's weighting scheme (100 percent of funding is counted if a project's main objective, results, outcomes, and indicators are nutrition- sensitive; 25 percent if secondary objective, results, outcomes, and indicators are nutrition- sensitive). However, SPRING had access to work plans or donor budgets; when information was insufficient in these documents to determine the approximate percentage, SPRING asked stakeholders to define the breakdown for accounting. When SPRING still could not define the percentage after these consultations, the SUN weighting scheme was applied. We documented our decisions for each activity.

Appendix 4. Guidance for Determining Nutrition Specificity or Sensitivity

Nutrition-Specific Activities

The project defines the following activities as nutrition-specific:

- Management of severe acute malnutrition
- Preventive zinc supplementation
- Promotion of breastfeeding
- Appropriate complementary feeding
- Management of moderate acute malnutrition
- Periconceptual folic acid supplementation or fortification
- Maternal balanced energy protein supplementation
- Maternal multiple micronutrient supplementation
- Vitamin A supplementation
- Maternal calcium supplementation

This list matches the one provided in the executive summary of the 2013 *Lancet Series (The Lancet 2013)*. The one additional criterion we consider for donor funding is whether or not the government has explicitly named the funding as nutrition funding. If an activity is listed as “Nutrition” in the “Report on Loans and Grants & Guarantees for Financial Year 2011/2012,” we would need an explicit reason not to include it as nutrition-specific (for example, if it is not part of the groupings above).

Nutrition-Sensitive Activities

SOURCE: SUN Donor Network 2013

These outcomes below, used to gauge the degree of nutrition sensitivity, are drawn from the nutrition conceptual framework (UNICEF 1990), the reference document “Addressing Undernutrition in External Assistance” (EC 2011), and the SUN Movement Strategy 2012–2015.

A. Individual level (children or adolescent girls or women):

- Increase purchasing power of women (e.g., safety nets and cash transfers).
- Improve access to nutritious food for women, adolescent girls, or children (e.g., agriculture/livestock diversification, biofortification, food safety, and increased access to markets).
- Improve the diet in quality or quantity for women, adolescent girls, or children (e.g., promotion of quality/diversity, nutritious diets, quantity/energy intake in food-insecure households, stability, micronutrient intake, vouchers, and access to markets).

- Improve access of women, adolescent girls, or children to primary health care (e.g., maternal health care, child health care, reproductive health care, supplementation, therapeutic feeding, and breastfeeding support).
- Improve access to child care (i.e., child care not supplied through the health services).
- Improve women's, adolescent girls', or children's access to water, sanitation, and hygiene (e.g., access to latrines, access to safe water, and improvement of hygiene).
- Improve access to education/school for adolescent girls.
- Improve knowledge/awareness on nutrition for relevant audiences (e.g., inclusion of nutritional education in the curriculum for primary and secondary education, TV and radio spots addressing vulnerable households and decisionmakers, and nutrition awareness campaigns).
- Improve empowerment of women (e.g., access to credit, women-based smallholder agriculture, and support to women's groups).

B. National level:

- Improve governance of nutrition (e.g., increased coordination of actors and policies for nutrition, establishment of budgets specifically contributing to nutrition, improvement of institutional arrangements for nutrition, improved nutrition information systems, and integration of nutrition in policies and systems).
- Increase nutrition-sensitive legislation (e.g., food fortification legislation, right to food, legislation for the implementation of the Code of Marketing of Breast-Milk Substitutes, and food safety).

C. Research

- Increase research with nutrition objectives.

Additional Nutrition-Sensitive Guidance for Donors

Note: This is the additional guidance provided to donors/external funders familiar with DAC categorizations. Government contacts received a printout of the UNAP Activity Matrix to use for identifying nutrition-sensitive activities.

The project modified SUN financial tracking guidance to align with the UNAP and to be relevant for both government and donor funding. Generally, nutrition-sensitive activities are projects categorized with a nutrition-sensitive DAC code or that address one of the UNAP activities listed in the UNAP Intervention Matrix but are not included as nutrition-sensitive.

Appendix 5. List of OECD-DAC Purpose Codes

SOURCE: SUN Donor Network 2013

Food Security and Agriculture:

Availability

- 31110 agricultural policy and administrative management
- 31120 agricultural development
- 31140 agriculture water resources
- 31150 agricultural inputs
- 31161 food crop production
- 31163 livestock
- 31166 agricultural extension
- 31181 agricultural education/training
- 31182 agricultural research
- 31191 agricultural services
- 31193 agricultural financial services
- 31194 agricultural co-operatives
- 31310 fishing policy and administrative management
- 31320 fishery development
- 31381 fishery education and training
- 43040 rural development

Accessibility

- 16010 social welfare services
- 16011 social protection
- 52010 food aid/food security programs
- 72010 material relief assistance and services
- 72040 humanitarian/emergency relief
- 72050 relief coordination, protection, and support services
- 73010 reconstruction, relief, and rehabilitation

Public Health and Water and Sanitation

Public Health (including reproductive health)

- 12110 health policy and administrative management
- 12220 basic health care
- 12250 infectious disease control
- 12261 health education
- 12281 health personnel development
- 13020 reproductive health care
- 13022 maternal health, including neonatal health

Sanitation

- 14030 basic drinking water supply and sanitation
- 14032 basic sanitation

Drinking Water

- 14031 basic drinking water supply

Care Environment

Gender Empowerment

- 15170 women's equality organizations and institutions

Other

- 51010 general budget support

Appendix 6. District-Level Nutrition Share Estimations

When a key informant at the district level was unable to provide the quantitative data, they were asked to describe the amount of funding that was related to nutrition. Using the classifications developed in collaboration with district stakeholders, the answer was then “translated” to a quantitative range. Based on this grassroots methodology, estimation of nutrition shares of district budget lines were as follows:

- NO activity= 0%
- Little activity=10%
- Moderate= 50%
- Many activities=70%
- Most of the activities=80%
- All activities=100%

Note: As sensitization regarding nutrition and the UNAP progresses, it is likely that this scale will no longer be necessary.

Appendix 7. District-Level Civil Society Organization Questionnaire

The Pathways to Better Nutrition case study explores how the Ugandan Government prioritizes nutrition interventions and supports the implementation of its national nutrition plan to reach its chosen goals of reducing undernutrition. It analyses whether the Government of Uganda and its development partners make the necessary investments to enable the rollout of UNAP activities.

The SPRING project is interested in conducting a budget analysis to explore factors affecting funding allocations and actual expenditures in government and donor funding. This budget review will provide a picture of financial trends over the study period. The financial information we collect in these interviews will be complemented by qualitative data collected on the process of implementing and monitoring nutrition programming, as well as some limited quantitative data analysis conducted on contributing factors to nutrition.

I would like to ask you to participate in a one-on-one interview on issues concerning nutrition projects. The discussion will take about 20 minutes. You will not be judged on your responses; you may refuse to answer any question, and you may choose to stop the discussion at any time.

No direct benefit, money, or compensation will be given to you for participating in this study, and your participation is voluntary. However, we hope that if this study is done well, your community will benefit. Your organization will participate in the validation of case study results and will appear in the final document of the case study. The publication will be disseminated.

1. General Information

NGO	Project title	Project description	Project duration	Overall project budget	Project by Financial Year					
					2011/12	% of output for nutrition	2012/13	% of output for nutrition	2013/14	% of output for nutrition

2. UNAP Strategy Area

Strategy Area	Tick
Strategy 1.1: Promote access to and utilization of nutrition and health services to all women of reproductive age, infants, and young children.	
Strategy 1.2: Address gender and socio-cultural issues that affect maternal, infant, and young child nutrition.	
Strategy 2.1: Increase access to and use of diverse nutritious foods and use at the household level.	
Strategy 2.2: Enhance post-harvest handling, storage, and utilization of nutritious foods at the household and farm levels.	
Strategy 2.3: Promote the consumption of nutrient-enhanced foods.	
Strategy 3.1: Develop preparedness plans for shocks.	
Strategy 3.2: Promote social protection interventions for improved nutrition.	
Strategy 4.1: Strengthen the policy and legal frameworks for coordinating, planning, and monitoring nutrition activities.	
Strategy 4.2: Strengthen and harmonize the institutional framework for nutrition from the local to the central government level.	
Strategy 4.3: Strengthen human resource capacity to plan, implement, monitor, and evaluate food and nutrition programs in the country.	
Strategy 4.4: Monitor and evaluate the food and nutrition situation to inform policy and programming.	
Strategy 4.5: Enhance operational research for nutrition.	
Strategy 5.1: Increase awareness of and commitment to addressing nutrition issues in the country.	
Strategy 5.2: Advocate for increased commitment to improving nutrition outcomes.	

3. Choose activities that fall under the organization program area.

Objective 1: Improve access to and utilization of services related to maternal, infant, and young child nutrition.	Tick
<p>Strategy 1.1: Promote access to and utilization of nutrition and health services to all women of reproductive age, infants, and young children.</p> <ul style="list-style-type: none"> Promote and support health and nutrition education to increase the level of awareness of good nutrition. Promote integration of nutrition services in all routine and outreach health services and programs targeting children and mothers. Manage nutrition for sick children, pregnant women, lactating mothers, and other women of reproductive age. Integrate management of severe and moderate acute malnutrition into routine health services. Promote utilization of antenatal and post-natal care services among all pregnant women and lactating mothers. Promote and support breastfeeding policies, programs, and initiatives. Promote exclusive breastfeeding. Promote and support appropriate complementary feeding practices. Support and scale up community-based nutrition programs. Promote proper food handling, hygiene and sanitation through increased knowledge, use of safe water, and hand washing practices at the household level. 	

<p>Strategy 1.2: Address gender and socio-cultural issues that affect maternal, infant, and young child nutrition.</p> <ul style="list-style-type: none"> • Promote male involvement in family health services and in food security and nutrition programs. • Advocate and seek solutions for reducing workload for all women, especially pregnant women and lactating mothers. • Address detrimental food taboos and norms that impair the nutrition of women, infants, and young children. 	
<p>Objective 2: Enhance consumption of diverse diets.</p>	<p>Tick</p>
<p>Strategy 2.1: Increase access to and use of diverse nutritious foods and use at the household level.</p> <ul style="list-style-type: none"> • Promote production and consumption of diversified nutritious foods at the household and community levels. • Advocate for and support integration of nutrition services in agricultural programs the national and local government levels. • Increase consumption of both raw and processed nutritious foods. • Promote and support local food processing and value addition at the household and community levels. • Promote and support the utilization of safe labor-saving technologies at the household and community levels. • Support on-farm enterprise mix to promote stable diversified food production. • Promote production and consumption of indigenous foods to enhance dietary diversification. 	
<p>Strategy 2.2: Enhance post-harvest handling, storage, and utilization of nutritious foods at the household and farm levels.</p> <ul style="list-style-type: none"> • Promote and support adoption of post-harvest handling and storage technologies at the household and community levels. • Provide an enabling environment to the private sector to manufacture, market, and distribute appropriate post-harvest handling and storage technologies. 	
<p>Strategy 2.3: Promote the consumption of nutrient-enhanced foods.</p> <ul style="list-style-type: none"> • Promote production of fortified common staples by local manufacturers. • Promote production of bio-fortified varieties. • Promote consumption of nutrient-enhanced foods through increased awareness of their benefits. • Support local production of ready-to-use therapeutic and complementary foods. 	
<p>Objective 3: Protect households from the impact of shocks and other vulnerabilities that affect their nutritional status.</p>	<p>Tick</p>
<p>Strategy 3.1: Develop preparedness plans for shocks.</p> <ul style="list-style-type: none"> • Strengthen and scale up early warning systems on food and nutrition information from the community to the national level. • Support and promote urban farming to save the most vulnerable households in urban areas. • Develop, promote, and implement in a timely fashion a comprehensive package of nutrition services and food items to provide during emergencies and recovery periods. • Make integration of nutrition in disaster management program mandatory. • Promote and support diversified production of drought-resistant crops, including vegetables, and raising of animals tolerant of heat stress the household and community levels. • Carry out sensitization programs for communities to raise their awareness of prevention, mitigation, and response to risks of malnutrition during shocks. 	
<p>Strategy 3.2: Promote social protection interventions for improved nutrition.</p> <ul style="list-style-type: none"> • Provide social transfers to and support livelihoods for the most vulnerable households and 	

<p>communities.</p> <ul style="list-style-type: none"> • Develop and implement programs for special social assistance and for livelihood promotion and protection in areas with high levels of malnutrition. • Advocate for and promote school feeding programs. • Manage cases of severe acute malnutrition by integrating care into routine health services and providing follow-up support and monitoring at the household and community levels. • Promote social protection interventions for improved nutrition. 	
<p>Objective 4: Strengthen the policy, legal, and institutional frameworks and the capacity to effectively plan, implement, monitor, and evaluate nutrition programs.</p>	<p>Tick</p>
<p>Strategy 4.1: Strengthen the policy and legal frameworks for coordinating, planning, and monitoring nutrition activities.</p> <ul style="list-style-type: none"> • Fast-track enactment of the Food and Nutrition Bill, which will provide the statutory mechanism for establishing the FNC and its secretariat. • Revitalize and legalize the functionality of the FNC and establish its secretariat/coordinating unit. • Review the Food and Nutrition Policy to integrate emerging issues. Revise the draft Uganda Food and Nutrition Strategy to align it with the prevailing national, regional, and global nutrition agenda and disseminate the strategy widely. • Advocate for enactment of bylaws and ordinances that promote nutrition and food security at the district and subcounty levels. • Integrate nutrition issues into plans and budgets at all levels of government by mainstreaming nutrition and creating vote functions for nutrition. • Support the development of nutrition curricula for all levels of education and training. • Advocate for establishment of lower- and middle-cadre nutrition courses in the education structure. • Review and integrate nutrition issues in the existing curricula of formal and non-formal education and pre- and in-service training. 	
<p>Strategy 4.2: Strengthen and harmonize institutional framework for nutrition from the local to the central government level.</p> <ul style="list-style-type: none"> • Review the country's current institutional framework for nutrition and implement a suitable one. • Establish an interim multisectoral coordination mechanism for nutrition programming and M&E. • Strengthen institutional capacity for nutrition programming at all levels in all sectors. 	
<p>Strategy 4.3: Strengthen human resource capacity to plan, implement, monitor, and evaluate food and nutrition programs.</p> <ul style="list-style-type: none"> • Design and implement a capacity-strengthening plan for nutrition programming at the national, local government, and community levels. • Nutrition human resource capacity strengthening project. 	
<p>Strategy 4.4: Monitor and evaluate the food and nutrition situation to inform policy and programming.</p> <ul style="list-style-type: none"> • Establish a food and nutrition M&E system for tracking performance of nutrition indicators and for timely decision making. • Conduct a national food and nutrition survey to establish up-to-date nutrition baseline monitoring indicators. • Conduct periodic district-level food and nutrition surveys in vulnerable areas and among vulnerable populations. • Undertake mid-term and end-of-term impact evaluation of the UNAP. • Strengthen district-level food and nutrition surveillance systems. 	
<p>Strategy 4.5: Enhance operational research for nutrition.</p> <ul style="list-style-type: none"> • Conduct formative research on best practices for nutrition. 	

<ul style="list-style-type: none"> • Research, document, and disseminate findings on positive indigenous dietary practices. • Compile food composition data for all foods consumed in Uganda. • Identify and conduct research relevant to scaling up food and nutrition interventions. • Collate and share research findings and best practices for scaling up food and nutrition interventions in Uganda. 	
Objective 5: Create awareness of and maintain national interest in and commitment to improve and support nutrition programs in the country.	Tick
<p>Strategy 5.1: Increase awareness of and commitment to addressing nutrition issues in the country.</p> <ul style="list-style-type: none"> • Develop and implement a nutrition communication strategy. • Produce annual policy statements and periodic policy briefs on the national food security and nutrition situation. • Commemorate nutrition-related events and take advantage of other advocacy events. <p>Strategy 5.2: Advocate for increased commitment to improving nutrition outcomes.</p> <ul style="list-style-type: none"> • Develop and implement a nutrition communication strategy. • Develop and implement a comprehensive and sustainable nutrition advocacy plan. • Produce and publish an annual report on the state of the food security and nutrition situation in the country. 	

4. Have you given any in-kind contribution to the district (financial or physical)?

Thank you for your time.

Appendix 8. Table of UNAP Objectives, Strategies, Interventions, and Outputs

	Interventions	Lead Agency	Outputs
Objective 1: Improve access to and utilisation of services related to maternal, infant, and young child nutrition.			
Strategy 1.1: Promote access to and utilisation of nutrition and health services to all women of reproductive age, infants, and young children.			
1	Promote and support health and nutrition education to increase the level of awareness of good nutrition.	MOH	Increased level of awareness of good nutrition Increased access to and utilisation of information, education, and communication materials and messages to target beneficiaries
2	Promote integration of nutrition services in all routine and outreach health services and programmes targeting children and mothers.	MOH	Growth monitoring and promotion and other nutrition services integrated in all routine and outreach health services Increased access to and utilisation of nutrition services
3	Manage nutrition for sick children, pregnant women, lactating mothers, and other women of reproductive age.	MOH	Increased access to and intake of nutritious foods by sick children, pregnant women, lactating mothers, and other women of reproductive age
4	Integrate management of severe and moderate acute malnutrition into routine health services.	MOH	Capacity for management of severe and moderate acute malnutrition enhanced Centres for management of severe and moderate acute malnutrition increased within existing health facilities nationwide Cases of severe and moderate acute malnutrition monitored and followed up on
5	Promote utilisation of antenatal and post-natal care services among all pregnant women and lactating mothers.	MOH	Increased number of mothers attending antenatal and post-natal care services
6	Promote and support breastfeeding policies, programmes, and initiatives.	MOH	Increased number of exclusively breastfed babies Increased number of 'baby-friendly' workplaces, communities, and health facilities, both public and private Increased number of employers and institutions/agencies implementing the maternity and paternity law
7	Promote and support appropriate complementary feeding practices.	MOH	Increased use of diversified local foods for complementary feeding Increased frequency of complementary meals at household level Increased knowledge among mothers of appropriate complementary feeding practices Increase in number of appropriate complementary feeding practices/initiatives supported

	Interventions	Lead Agency	Outputs
8	Support and scale up community-based nutrition initiatives.	MOH/MGLSD/MAAIF/MOES	Increase in number of community-based nutrition initiatives supported Increased coverage of community-based nutrition initiatives Increased level of community participation and involvement in community-based nutrition programmes
9	Promote proper food handling hygiene, and sanitation through increased knowledge, use of safe water, and hand-washing practices at the household level.	MOH	Increased knowledge of proper food handling hygiene and sanitation Increase household use of safe water Increase in hand washing practices by households
Strategy 1.2: Address gender and socio-cultural issues that affect maternal, infant, and young child nutrition.			
1	Promote male involvement in family health services and in food security and nutrition programmes.	MGLSD/MOH/MAAIF	Increased knowledge among men of family health and nutrition issues Increased male involvement in family health, food security, and nutrition services and programmes
2	Advocate and seek solutions for reducing workload for all women, especially pregnant women and lactating mothers.	MGLSD/MAAIF	Increased awareness among husbands and other family members of benefits of reducing women's workloads Increase in sharing of farm and household work among household members Increased use of labour-saving technologies at the farm and household levels
3	Address detrimental food taboos and norms that impair the nutrition of women, infants, and young children.	MAAIF/MGLSD	Increased knowledge on the impact of detrimental food taboos and norms that impair nutrition Change in negative attitudes, beliefs, and practices related to nutrition Increased intake of culturally prohibited foods
Objective 2: Enhance consumption of diverse diets.			
Strategy 2.1: Increase access to and use of diverse nutritious foods and use at the household level.			
1	Promote production and consumption of diversified nutritious foods at the household and community levels.	MAAIF	Increased production of diversified nutritious foods Increased consumption of diversified nutritious foods Increased provision of appropriate agricultural inputs and services at the household and community levels
2	Advocate for and support integration of nutrition in agricultural programmes at the national and local government levels	MAAIF/NPA	Increased integration of nutrition issues in agricultural programs
3	Increase consumption of both raw and processed nutritious foods	MAAIF/MOH	Increased consumption of raw vegetables and fruits

	Interventions	Lead Agency	Outputs
			Increased consumption of enriched processed foods Increased consumption of fortified foods
4	Promote and support local food processing and value addition at the household and community levels	MAAIF/MTC	Increased processing of nutritious foods at the household and community levels Diversified processed food products at the household and community levels
5	Promote and support the utilisation of safe labour-saving technologies at the household and community levels	MAAIF/MTC	Increased types of labour-saving technologies at the household and community levels Increased utilization of labour-saving technologies at the household and community levels
6	Support on-farm enterprise mix to promote stable diversified food production.	MAAIF	Increased number of households and communities with stable diversified food supplies and incomes
7	Promote production and consumption of local indigenous foods to enhance dietary diversification.	MAAIF	Increased production and consumption of indigenous foods Increased awareness of the nutrition value of indigenous foods Increased exploitation and utilisation of foods from non-conventional sources
8	Promote positive indigenous dietary practices.	MAAIF	Dietary practices related to indigenous foods emphasised in the school curricula and national examination Increased application of dietary practices related to indigenous foods at the household and community levels
Strategy 2.2: Increase post-harvest handling, storage, and utilisation of nutritious food at the household and farm levels			
1	Promote and support adoption of post-harvest handling and storage technologies at the household and community levels.	MAAIF/MOES	Increased awareness and adoption of appropriate post-harvest handling and storage technologies
2	Provide an enabling environment to the private sector to manufacture, market, and distribute appropriate post-harvest handling and storage technologies.	MTC	Clear policy developed to guide and provide incentives to small- and medium-scale private sector players Private players supported to acquire equipment, financial support, and infrastructure Increase in public-private partnerships for food processing and storage Affirmative action provided for geographically marginalised areas
Strategy 2.3: Promote the consumption of nutrient-enhanced foods.			
1	Promote production of fortified common staples by local	MOH/MTC	A policy promoting fortification in place

	Interventions	Lead Agency	Outputs
	manufacturers.		Food fortification public-private partnerships increased and strengthened Increased variety of fortified foods Industries that fortify foods scaled up nationwide
2	Promote production of bio-fortified varieties.	MAAIF/MTC	Policy promoting bio-fortification in place Increased variety of bio-fortified foods Bio-fortification of foods scaled up nationwide Food bio-fortification public-private partnerships increased and strengthened
3	Promote consumption of nutrient-enhanced foods through increased awareness of their benefits.	MAAIF/MOH/ MTC	Increased awareness of the benefits of nutrient-enhanced foods Increased consumption of fortified foods Increased adoption and consumption of bio-fortified foods
4	Support local production of ready-to-use therapeutic and complementary foods.	MOH/MTC	Policy promoting therapeutic and complementary foods in place Therapeutic foods included on the essential drugs list Local industries producing therapeutic and complementary foods scaled up nationwide Public-private partnerships for therapeutic and complementary foods strengthened
Objective 3: Protect households from the impact of shocks and other vulnerabilities that affect their nutritional status.			
Strategy 3.1: Develop preparedness plans for shocks.			
1	Strengthen and scale up early warning systems on food and nutrition information from the community to the national level.	MOH/MAAIF/ FNC	Early warning system in MAAIF strengthened (capacity and equipment) Nutrition information system in MOH strengthened National nutrition surveillance system established
2	Support and promote urban farming to serve the most vulnerable households in urban areas.	MAAIF/MTC	Urban farming policy developed and operationalised Supermarket-linked value chains developed for high-value enterprise in urban and peri-urban areas
3	Develop, promote, and implement in a timely fashion a comprehensive package of nutrition services and food items to provide during emergencies and recovery periods.	MOH/OPM	Comprehensive package of nutrition services and requirements for emergencies developed Timely implementation of comprehensive nutrition services in emergencies
4	Make integration of nutrition in disaster management programmes mandatory.	MOH/OPM/ MAAIF/MOLG	Capacity of local governments to provide nutrition services in emergencies strengthened Nutrition package integrated in all disaster management programmes

	Interventions	Lead Agency	Outputs
5	Promote and support diversified production of drought-resistant crops, including vegetables, and raising of animals tolerant of heat stress at the household and community levels.	MAAIF	Increased production of drought-resistant crops, including vegetables, and raising of animals tolerant of heat stress
6	Carry out sensitisation programmes for communities to raise their awareness of prevention, mitigation, and response to risks of malnutrition during shocks.	OPM/MOH/ MAAIF	Increased awareness of proper nutrition during shocks
Strategy 3.2: Promote social protection interventions for improved nutrition			
1	Provide social transfers to and support livelihoods for the most vulnerable households and communities.	MGLSD/MAAIF/OPM	Increase in vulnerable households receiving social transfers (cash, food, agricultural inputs)
2	Develop and implement programmes for special social assistance and for livelihood promotion and protection in areas with high levels of malnutrition.	MGLSD/MAAIF	Special food-based programmes for vulnerable groups in areas with high malnutrition levels designed and implemented Increased coverage of livelihood programmes
3	Advocate for and promote school feeding programmes.	MOES/MAAIF/MGLSD	Increased awareness of the benefits of nutritious school meals on learning outcomes 'Homegrown' school meals provided Schools supported to provide school meals
4	Manage cases of severe acute malnutrition by integrating care into routine health services and providing follow-up support and monitoring at the household and community levels.	MOH	Increased number of health facilities with supplies to manage SAM cases Increased number of children screened for SAM in the communities and referred Increased number of communities mobilized and sensitized on SAM management
5	Promote social protection interventions for improved nutrition.	MGLSD	Increased social protection interventions for improved nutrition
Objective 4: Strengthen the policy, legal, and institutional frameworks and the capacity to effectively plan, implement, monitor, and evaluate nutrition programmes.			
Strategy 4.1: Strengthen the policy and legal frameworks for co-ordinating, planning, and monitoring nutrition activities.			
1	Fast-track enactment of the Food and Nutrition Bill, which will provide the statutory mechanism for establishing the FNC and its secretariat.	NPA/MAAIF	Food and Nutrition Bill enacted
2	Revitalise and legalise the functionality of the FNC and establish its secretariat/co-ordinating unit.	OPM/MOH/ MAAIF	FNC functional FNC secretariat established
3	Review the UFNP to integrate emerging issues.	FNC	Food and Nutrition Policy revised

	Interventions	Lead Agency	Outputs
4	Revise the draft Uganda Food and Nutrition Strategy to align it with the prevailing national, regional, and global nutrition agenda and disseminate the strategy widely.	FNC Secretariat	Food and Nutrition Strategy revised Food and Nutrition Strategy disseminated widely
5	Advocate for the enactment of by-laws and ordinances that promote nutrition and food security at the district and sub-county levels.	FNC/MOLG	By-laws and ordinances that promote nutrition and food security developed and enacted
6	Integrate nutrition issues into plans and budgets at all levels of government by mainstreaming nutrition and creating vote functions for nutrition.	NPA/MFPED	Vote functions for nutrition established Nutrition mainstreamed into sectors and district development plans
7	Support the development of nutrition curricula for all levels of education and training.	MOES	Nutrition curricula in place at all levels of education
8	Advocate for establishment of lower- and middle-cadre nutrition courses in the education structure.	MOES	Lower- and middle-cadre nutrition courses established
9	Review and integrate nutrition issues in the existing curricula of formal and non-formal education and in pre- and in-service training.	MOES	Nutrition issues integrated in curricula
Strategy 4.2: Strengthen and harmonise the institutional framework for nutrition from the local to the central government level.			
1	Review the country's current institutional framework for nutrition and implement a suitable one.	NPA/OPM	Current institutional framework reviewed Key recommendations from the review implemented
2	Establish an interim multi -sectoral co-ordination mechanism for nutrition programming and M&E.	NPA	Multi -sectoral co-ordination mechanism in place
3	Strengthen institutional capacity for nutrition programming at all levels in all sectors.	FNC Secretariat/ OPM	Nutrition focal persons appointed or assigned in key ministries, departments, and agencies and local governments Nutrition co-ordination structures and committees at the national and local government levels established
Strategy 4.3: Strengthen human resource capacity to plan, implement, monitor, and evaluate food and nutrition programmes in the country.			
1	Design and implement a capacity-strengthening plan for nutrition programming at the national, local governments, and community levels.	FNC Secretariat	Nutrition capacity strengthening plan developed Capacity in nutrition policy analysis, planning, implementation, surveillance, and M&E strengthened Nutrition capacity of community-based resource persons strengthened
2	Establish a food and nutrition M&E system for tracking performance of nutrition indicators and for timely decision making.	FNC Secretariat	National food and nutrition information system established Integrated nutrition M&E system established Progress of implementation and performance of UNAP periodically reported on

	Interventions	Lead Agency	Outputs
3	Conduct a national food and nutrition survey to establish up-to-date nutrition baseline monitoring indicators.	FNC Secretariat	Baseline food and nutrition survey conducted
4	Conduct periodic district-level food and nutrition surveys in vulnerable areas and among vulnerable populations.	FNC Secretariat/ local govt.	District specific surveys conducted
5	Undertake mid-term and end-of-term impact evaluations of the UNAP	FNC Secretariat	UNAP impact evaluations conducted
6	Strengthen district-level food and nutrition surveillance systems.	FNC Secretariat/ MOH/MAAIF	District food and nutrition surveillance systems established and capacity strengthened
Strategy 4.4: Enhance operational research for nutrition			
1	Conduct formative research studies on best practices for nutrition.	MAAIF/MOH	Formative research studies on best practices for nutrition conducted
2	Research, document, and disseminate findings on positive indigenous dietary practices.	MAAIF	Positive indigenous dietary practices researched, documented, and disseminated
3	Compile food composition data for all foods consumed in Uganda.	MAAIF	Food consumption database developed
4	Identify and conduct research relevant to scaling up food and nutrition interventions.	MOH/MAAIF	Research on scaling up food and nutrition interventions conducted Academia supported to conduct applied food and nutrition research
5	Collate and share research findings and best practices for scaling up food and nutrition interventions in Uganda.	NPA	Best practices documented, disseminated, and scaled up
Objective 5: Create awareness of and maintain national interest in and commitment to improving and supporting nutrition programmes in the country.			
Strategy 5.1: Increase awareness of and commitment to addressing nutrition issues in the country.			
1	Develop and implement a nutrition communication strategy.	Development partners	Nutrition communication strategy developed
2	Produce annual policy statements and periodic policy briefs on the national food security and nutrition situation.	MAAIF/MOH	Annual policy statements produced Quarterly policy briefs produced
3	Commemorate nutrition-related events and take advantage of other opportunities to raise the profile of nutrition.	MOH/MAAIF	National, regional, and international food and nutrition events commemorated
Strategy 5.2: Advocate for increased commitment to improving nutrition outcomes.			
1	Develop and implement a nutrition communication strategy.	FNC Secretariat	Printed and disseminated strategy
2	Develop and implement a comprehensive and sustainable nutrition	FNC	Comprehensive nutrition advocacy plan developed and

	Interventions	Lead Agency	Outputs
	advocacy plan.		implemented
3	Produce and publish an annual report on the state of Uganda's food security and nutrition situation.	NPA	Annual report on the state of food security and nutrition produced