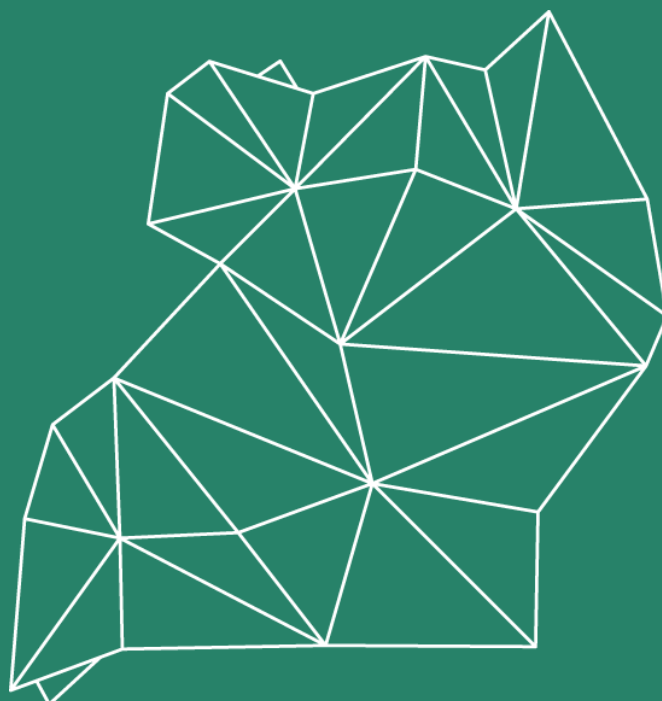




## A review of policies for improving human nutrition in Uganda and the use of evidence for making policy

Lilia Turcan and Tim Bene



## ABOUT THE NIPN INITIATIVE

*National Information Platforms for Nutrition* (NIPN) is an initiative of the European Commission supported by the United Kingdom Department for International Development and the Bill & Melinda Gates Foundation. The initiative aims to strengthen national capacity to manage and analyse information and data from all sectors which have an influence on nutrition and to disseminate and use information so as to better inform the strategic decisions countries are faced with to prevent undernutrition and its consequences. A Global Support Facility has been set up by the European Commission to coordinate the NIPN initiative, managed by the Agrinatura alliance and hosted by Agropolis International.

## DISCLAIMER

This publication has been commissioned by the Global Support Facility for the National Information Platforms for Nutrition initiative. The findings, interpretations, conclusions, advice and recommendations expressed in this work are those of the authors and do not necessarily reflect the views of the organizations that host, manage or fund the Global Support Facility.

## AUTHORS

Lilia Turcan and Tim Bene

The authors are grateful to Andrew Hall, Team Leader, NIPN Global Support Facility and David Pelletier of Cornell University, USA, a member of NIPN Expert Advisory Group, for their comments on the draft.

## COPYRIGHT STATEMENT

Copyright © 2017 by the Global Support Facility for the National Information Platforms for Nutrition initiative. Agropolis International, 1000 avenue Agropolis, 34394 Montpellier cedex 5, France.

Cover page illustration: © A\_sas/Schutterstock

This report may be freely reproduced, in whole or in part, provided the original source is properly cited and acknowledged.

## RECOMMENDED CITATION

Turcan, Lilia and Bene, Tim. A review of policies for improving human nutrition in Uganda and the use of evidence for making policy. Montpellier, France: Agropolis International, Global Support Facility for the National Information Platforms for Nutrition initiative. 2017.

## PUBLICATION DATE

December 2017

The first section of this document is a summary that can be printed separately. The full report can be downloaded here: <http://www.nipn-nutrition-platforms.org/IMG/pdf/nutrition-policy-making-uganda.pdf>

# A review of policies for improving human nutrition in Uganda and the use of evidence for making policy

---

Lilia Turcan and Tim Bene

December 2017

## Executive summary

Nutrition has benefited recently from a global surge in interest following the publication of influential papers in *The Lancet* in 2008 and 2013 and the analysis of the impact of malnutrition on economic development led by the Copenhagen Consensus. This has led to the recognition of the need for a multi-sectoral approach to preventing malnutrition centred on the development of policies to incorporate the best evidence and practices for improving human nutrition in all sectors that can influence nutrition outcomes including health, agriculture, food security, social protection, water, sanitation and education. However, the use of evidence in developing countries for policy- and decision-making for nutrition is not well understood. In order to understand and then strengthen this process, the factors that influence policy-making for nutrition and the sources and use of evidence to help formulate those policies, need to be analysed and understood. This Brief is summary of a review of policy making for nutrition in Uganda, one of several countries participating in the National Information Platforms for Nutrition (NIPN) Initiative.

### WHY USE EVIDENCE FOR POLICY-MAKING?

The multi-sectoral policies enacted by a national government are regarded as a critical to enable households to achieve nutrition security and good health, and so prevent undernutrition. In the process of multi-sectoral planning, the priority given to nutrition in policies and strategies needs to be assessed, and the alignment of each individual sector with national nutrition objectives needs to be ensured. The expectation is that the provisions of multi-sectoral policies and implementation plans will be incorporated effectively into sectoral planning and monitoring mechanisms to ensure their coordinated and synergistic implementation, and so maximise the use of resources to benefit the nutritional status of vulnerable groups. The expectation is also that evidence will be used in the nutrition policy development cycle to identify new issues to address, to set the agenda for nutrition, to inform decisions about the content of policies, and to evaluate the impact of nutrition-related policies and plans. The generation, acquisition, dissemination and application of evidence is therefore critical to evidence-based policy-making and programming.

## METHODS

We assessed the importance of nutrition in current government policies in Uganda, the type of evidence used to support those policies, and the use of evidence in the policy-making process. A mixture of structured qualitative and quantitative analysis of the national and sectoral policy documents was undertaken, with a focus on three sectors - agriculture, health and social protection - plus the second Uganda National Development Plan (NDPII). The documents were checked against criteria selected from the international literature used in similar analyses. To understand the policy making process and the use of evidence, representatives of three sectors were interviewed, all of whom were involved in developing the Uganda Nutrition Action Plan, in developing sectoral policies, or in policy implementation. In addition, interviews were held with representatives of key non-sectoral ministries: the Ministry of Finance Planning and Economic Development, the Ministry of Local Government, and the National Planning Authority. In total, thirty-three semi-structured in-depth interviews were conducted during January and February 2017 in Kampala, Uganda. The analysis focused on four domains of interest: national policy frameworks for nutrition, the use of evidence, nutrition governance, and policy implementation.

## THE FINDINGS

➔ **Placement of nutrition in the national policy framework for nutrition.** The commitment of the Government of Uganda to national and international nutrition initiatives has driven the development of nutrition policies and programmes to create a comprehensive multi-sectoral policy framework with ambitious nutrition goals which is enacted through the Uganda Nutrition Action Plan (UNAP) 2011-2016/17. The UNAP states that “successful implementation...will require...the ownership of the action plan by the key government ministries” and the expectation is that nutrition-sensitive policy actions will be integrated into future sectoral policy documents. The challenge is that nutrition is not perceived as directly contributing to the goals of each separate sector, and nutrition outcomes are not specified by each sector, so implementing the UNAP presents a difficult task.

While formulating their policies, each sector analyses their coherence, although the diagnostic methods tend to be light. Guidelines for policy formulation have been developed in Uganda but they are relatively new, with limited dissemination, and do not offer detailed guidance on the use of evidence or how to analyse policy coherence. To translate policy provisions into action, a range of national programmes are instituted through sectoral ministries. The general perception among policy-makers is that nutrition is linked to the relevant ministry programmes and sub-programmes, but the strength of the link might not be sufficiently substantial to ensure a strong influence on nutrition within each sector. An assessment of the alignment of ministerial programmes’ for nutrition could show potential areas for improvement.

The analysis of the nutrition “sensitivity” of the policies of the three main sectors and the NDPII revealed that the documents are aligned to the UNAP in some respects: nutrition is mentioned in their situation analysis sections, while nutrition-related objectives, indicators and targets are included in the health sector documents and in the recently endorsed Nutrition Integrated Early Childhood Policy and Action Plan (NIECPAP). In terms of the alignment with the interventions specified under the UNAP’s five strategic objectives, the picture varies, with a most references occurring in health documents and in the NIECPAP. These observations indicate that nutrition is not specifically given a high priority and work is needed to incorporate nutrition to a greater degree in all sectors, using existing national and international recommendations and tools.

→ **Use of evidence in policy-making.** Informants reported that evidence is important for policy formulation because it can guide the decision-making process and facilitate the mobilisation of resources. Throughout the policy development process data are used from sector-based management information systems; from the census and vital civil statistics; from budget planning, allocation and expenditure reporting systems; and from assessments and studies conducted under the guidance of the Uganda Bureau of Statistics. Some data from the Community Information System operated by the districts and the Ministry of Local Government is also utilized, but to a limited degree. A range of information products, such as regular reports and reviews by districts and sectoral ministries as part of sectoral and national planning and reporting are routinely produced, but nutrition is not well covered. To redress the situation, the Ministry of Health started in 2016 to produce periodic Nutrition Reports which include data obtained from the sector information system.

Data production however, is not linked to the decision-making process, and there are gaps between the type of information available and the information needed. The needs include more analysis of the factors contributing to poor nutrition in Uganda, data on implementing programmes at the community level, and data on each sectors' performance for nutrition. The problem is compounded by the fact that data and information are scattered in different systems and are not easily accessible, and there is no plan, guidance or tools for integrating evidence into specific stages of the policy development process, both at national and local level.

Given the situation, a comprehensive, robust means to collect existing sectoral and inter-sectoral data on nutrition for analysis could provide nutrition information to decision-makers at all levels of government for policy development and programme planning. A deeper analysis of the information needs of decision-makers would be a useful starting point. It is also worth mentioning that important opportunities for improving the use of evidence for nutrition policy-making will arise as the Government of Uganda moves towards an integrated system for sectoral programme-based budgeting and monitoring, to include the analysis of sectoral input, output and budget data. A NIPN could assist sectors in the integration of nutrition data and information into programme monitoring.

With regards to particular types of evidence, research has been a significant source of information for policy-making in Uganda. Its importance is reflected through a range of dedicated national policy instruments, such as the Uganda Health Research Policy 2012-2020, and the existence of dedicated national research organizations, such as the Uganda National Agriculture Research Organization. Nevertheless, nutrition-specific research is not specifically prioritized. Research on the determinants of persistent undernutrition in the regions with the highest prevalence, or research on the implementation of nutrition interventions in communities, would be of particular interest to policy-makers. Sectors also need support to effectively mainstream research produced by non-state agencies into their operations as well as an institutional mechanism to bring stakeholders together and coordinate the research agenda on nutrition in the country.

The use of nutrition evidence in policy documents varies, but is generally limited. While government statistics are used extensively, few documents specifically mentioned the evidence used such as systematic reviews, guidelines, policy or analytical briefs, and none of the documents mentioned evaluation in terms of analysing the effectiveness of a programme.

→ **Nutrition governance.** Uganda benefits from a well-established institutional framework for policy coordination that engages all levels of government - parliament, central and local. The high level of political commitment to nutrition is shown by the placement of the Secretariat for the Uganda Food and Nutrition Council in the Office of the Prime Minister of Uganda, and the establishment of nutrition coordination committees at sectoral and sub-national levels, all facilitated by nutrition focal points within nutrition-related departments. The sectors, however,

are at different stages of engagement with the multi-sectoral approach to nutrition and are making progress at different rates, while nutrition coordination structures may need more effective links to the existing sectoral and local governance structures. Uganda operates a fairly robust national and sectoral mechanism for accountability for nutrition that could be effectively integrated by building on the experience of integrating the HIV/AIDS or equity and gender programmes into national accountability mechanisms.

As a new national nutrition policy is being developed to replace the first UNAP, informants indicated that the process is highly participatory yet lengthy. While the UNAP Secretariat at the OPM coordinates the process, it may not be fully equipped in the area of multi-sectoral policy formulation for nutrition, given the specialized nature of the expertise required and the small number of staff in the Secretariat. Building capacity to formulate, implement, monitor and coordinate policies, may be needed.

- **Nutrition policy implementation.** While the sectors' roles in nutrition are broadly outlined in the first UNAP document and developed further in some of the sectoral policy documents, multi-sectoral implementation on a large scale has not yet started. A lack of sectoral funding is perceived as one of the major constraints, because no national or sector programme for nutrition initiated by the UNAP has yet been supported by a budget allocated through a parliamentary vote. Furthermore, the challenge of policy implementation also relates to the sectors' existing delivery platforms as they do not always reach the community level and are not well linked to each other. To overcome this situation, two multi-sectoral nutrition-related projects have been launched and aim to strengthen the link between agriculture, nutrition, health and education, and to offer models for multi-sectoral implementation, including nutrition. As many of project-based nutrition activities, however, are not reported at a national level or captured through sectors' information systems, the multi-sectoral tracking of actions and results will be important. An information platform could assist with this process by bringing together all the data available on implementation and provide it to decision-makers.

## CONCLUSION

Ensuring that all the key actions for nutrition in Uganda can be implemented needs the effective integration of sectoral processes to achieve what is called 'policy coherence' for nutrition, so that national nutrition objectives are addressed in a coordinated and consistent manner, throughout national, sectoral and local policy-making and accountability processes. Uganda's robust administrative procedure for policy, planning, budgeting and implementation offers a tremendous asset to multi-sectoral implementation efforts, such as to improve nutrition, and nutrition is being gradually integrated into the process of national development. A thoughtful, robust information platform could provide substantial support for this process to collect and aggregate existing information and data, provide timely analysis and information to decision-makers and help identify bottlenecks in implementation to support the process of improving the nutrition of the Ugandan population.



National Information Platforms for Nutrition is an initiative of the European Commission's Directorate General for Cooperation and Development, also supported by the United Kingdom Department for International Development and the Bill & Melinda Gates Foundation.



BILL & MELINDA  
GATES foundation

[www.nipn-nutrition-platforms.org](http://www.nipn-nutrition-platforms.org)

# Contents

List of abbreviations .....	2
Introduction.....	3
Findings.....	8
<b>1. NATIONAL FRAMEWORK FOR NUTRITION.....</b>	<b>8</b>
1.1. Stakeholders’ perceptions of the priority for nutrition .....	8
1.2. Chronology of nutrition policy-making .....	8
1.3. Main objectives of the national policies .....	10
1.4. Responsibility for nutrition policy .....	10
1.5. Sectoral policies and national development plan .....	11
1.6. Sectoral policy cycles .....	12
1.7. Linkages between UNAP and sectoral programmes .....	13
1.8. Priorities in the current national nutrition action plan .....	14
1.9. Nutrition “sensitivity” of sectoral policies .....	14
1.10. Key nutritional issues of concern in national policies.....	15
<b>2. USE OF EVIDENCE FOR POLICY FORMULATION.....</b>	<b>16</b>
2.1. Decision-making and information needs .....	16
2.2. The role of research .....	18
2.3. The role of evaluations .....	20
2.4. The role of technical assistance.....	20
2.5. Other sources of information .....	20
2.6. Use of nutrition terms and evidence in policy documents .....	21
2.7. Challenges and opportunities in utilising evidence .....	21
<b>3. NUTRITION GOVERNANCE.....</b>	<b>22</b>
3.1. Coordination structure .....	22
3.2. Coordination of policy formulation process .....	24
3.3. Roles of sectors in nutrition policy coordination .....	25
3.4. Policy review process .....	26
<b>4. NUTRITION POLICY IMPLEMENTATION .....</b>	<b>27</b>
4.1. Sectors’ accountability mechanisms.....	27
4.2. Policy implementation .....	28
Discussion .....	31
References .....	35
ANNEXES.....	37

## List of abbreviations

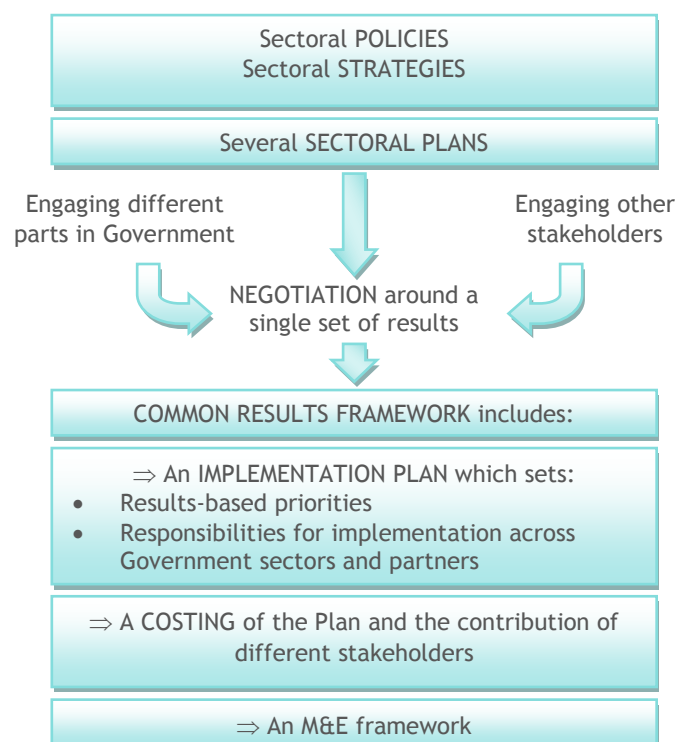
CIS	Community Information System
CSOs	Civil Society Organisations
DFID	Department for International Development of the United Kingdom
DNCC	District Nutrition Coordination Committee
IDP	International Development Partner
LG	Local Government
EU	European Union
GAFFSP	Global Agriculture and Food Security Programme
GoU	Government of Uganda
JAF	Joint Assistance Framework
MAAIF	Ministry of Agriculture, Animal Industry and Fisheries
MDAs	Ministries, Departments and Agencies
MDGs	Millennium Development Goals
MoFPED	Ministry of Finance, Planning, and Economic Development
MoGLSD	Ministry of Gender Labour and Social Development
MIS	Management information system
MoH	Ministry of Health
MLG	Ministry of Local Government
MLGSD	Ministry of Gender, Labour and Social Development
M&E	Monitoring and evaluation
NDP	National Development Plan
NIECD	National Integrated Early Childhood Development
NIPN	National Information Platform for Nutrition
NPA	National Planning Authority
OBT	Output Budget Tracking
OPM	Office of the Prime Minister
RMNCAH	Reproductive, Maternal, New-born Child and Adolescent Health
TA	Technical assistance
TWG	Technical Working Group
UBOS	Uganda Bureau of Statistics
UCSC SUN	Uganda Civil Society Coalition for Scaling up Nutrition
UDHS	Uganda Demography and Health Survey
UGAN	Uganda Action for Nutrition Society
UNAP	Uganda Nutrition Action Plan
WFP	World Food Programme



## Introduction

There has been a substantial increase globally in high-level political commitment for nutrition in the last few years (1) and many countries are now putting in place the legal, policy and financial frameworks necessary to accelerate the scale-up of high priority interventions to improve human nutrition. To do this effectively each country needs evidence of what works best in their specific context to improve human nutrition. The UNICEF (1990) conceptual framework for undernutrition captures an explicitly multi-sectoral model of the causes of malnutrition and identifies the need for actions in many sectors to address its determinants. To facilitate this process, national multi-sectoral platforms are being established to align and coordinate actions for nutrition in several sectors: health, agriculture, food security, water, sanitation, social protection, education, and industry all have a part to play. A multi-sectoral platform usually establishes a national common results framework for nutrition based on a country's existing national and sectoral policy and planning frameworks, and incorporates nutrition-centred implementation plans (Figure 1). The policies enacted by a national government are regarded as a critical component to enable households to achieve nutrition security and good health, and so prevent undernutrition (2).

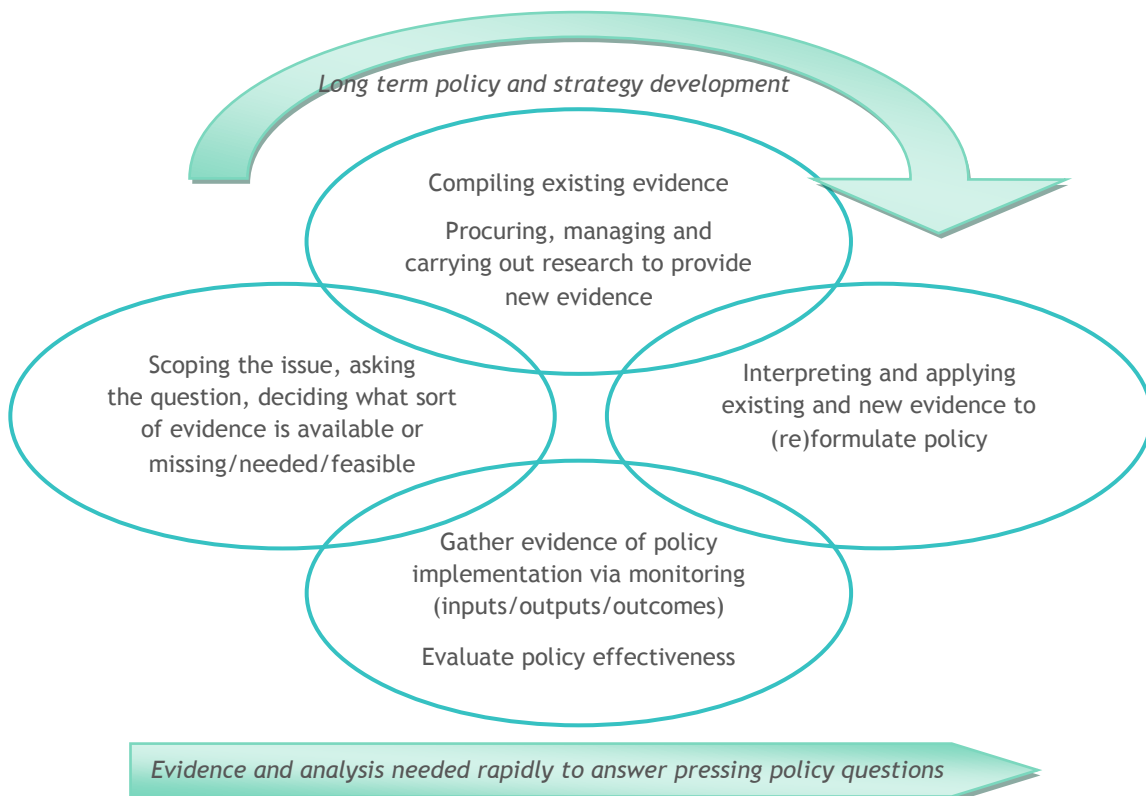
**Figure 1. SUN common results framework for nutrition (3)**



In the process of multi-sectoral planning, the adequacy of the priority given to nutrition in policies and strategies needs to be assessed, and each sectors' alignment with nutrition objectives needs to be ensured (4). The expectation is that the provisions of multi-sectoral implementation plans will be mainstreamed effectively into sectoral planning and monitoring mechanisms to ensure their coordinated and synergistic implementation, and so maximise the use of resources and the resulting benefits.

The expectation is also that evidence will be used in the nutrition policy development cycle to identify new issues to set the agenda for nutrition, to inform decisions about the content of policies, and to evaluate the impact of nutrition-related policies and plans. The generation, dissemination and application of evidence is therefore critical to promote evidence-based policy-making and programming (5). The conceptualisation of the uptake of evidence into the policy process is illustrated in Figure 2 and shows that evidence is vital throughout the ‘policy cycle’ - from agenda setting, to policy formulation, implementation and then monitoring and evaluation. By working to align the generation of evidence and its application to policy and decision-making processes, great value could be added for nutrition which could accelerate progress towards achieving the goal of optimal nutrition of young children and families.

**Figure 2. The use of evidence in the policy development process (adapted from Shaxson, 2006) (6)**



The National Information Platforms for Nutrition (NIPN) initiative is providing support to 10 countries in the global SUN Movement to strengthen their capacity to bring together existing information and evidence on nutrition with information on factors that influence nutritional outcomes, including policies, programmes and investments. In doing so, it aims to help countries to track progress towards meeting global and national targets, to analyse data to better understand how malnutrition can be prevented, and to inform national policies and thus improve programmes and nutritional outcomes (7).

## Country context

Uganda has recorded impressive rates of poverty reduction in the last two decades. The proportion of the Ugandan population living in poverty more than halved from 1993 to 2013, while under-five mortality has dropped from 152/1000 in 2001 to 64/1000 by 2016. Nevertheless, economic growth has brought about rising social inequality and more than one-in-three Ugandans live below the international extreme poverty line of US\$1.90 a day (8).

Uganda has one of the youngest and most rapidly growing populations in the world as about half of population is younger than 15 years old and the country's annual population growth rate, currently at 3.3 percent, is above the average for Africa. About 55% of Uganda's children less than 5 years, however, are deprived of at least two out of the seven main human needs: nutrition, health, water, sanitation, shelter, education and information (9). In terms of progress in development, the final Country Report on the Millennium Development Goals (MDGs) indicated that 33 per cent of goals were met by Uganda while the targets under goal 1, to eradicate extreme poverty and hunger, and under goal 4, to reduce child mortality, were "*narrowly missed*" (10).

There has been mixed progress to date in preventing malnutrition: 29% of young children are stunted while 53% of young children and 32% of women of reproductive age are anaemic (UDHS, 2016). The immediate causes of malnutrition in children in Uganda continue to be the high burden of disease resulting from malaria, diarrhoeal diseases and acute respiratory tract infections, as well as inadequate dietary intake resulting from suboptimal infant feeding practices (11) and limited availability of food (12). In terms of governance capacity for nutrition, Uganda's commitment to nutrition is ranked globally as "*low*" (13). The Government of Uganda supports the production and use of data and statistics to facilitate evidence-based policy making, programme planning, and accountability (14).

## Aims and methods

The aim of this review was to describe and assess the status and importance of nutrition in current government policies, and examine the use of evidence to support those policies in Uganda. The review was carried out between December 2016 and March 2017.

To gauge the priority given to nutrition in Uganda, a mix of structured qualitative and quantitative analysis of national and sectoral policy documents was undertaken, supported by interviews with stakeholders involved in nutrition. The analysis included the main policy documents from three sectors, health, agriculture and social protection, and the second Uganda National Development Plan (NDP II). The documents were analysed in terms of their nutrition 'sensitivity', meaning their potential impact on human nutrition, and with reference to the strategic interventions specified in the Uganda Nutrition Action Plan (UNAP) of 2011-2016, extended to include 2017.

Table 1 shows the number of representatives of the three key ministries (agriculture, health and gender and labour) involved in developing the UNAP and/or the sectoral policy packages and policy implementation who were interviewed for the review. In addition, meetings were also held with representatives of key non-sectoral ministries as well as staff of policy research bodies and representatives of development partners. A total of 33 key interview informants, hereafter called 'informants', were contacted by telephone or email and then interviewed, face to face. When necessary, an official letter of request for an interview was sent to their respective ministry.

The main objectives of the review were to identify and describe:

- the national framework for nutrition and the links with sectoral policies;
- the types of evidence used to develop policy;
- sectoral policy development and implementation cycles.

**Table 1. Institutions and profiles of informants**

Institutions	Number of staff		Level, type and length of nutrition-related expertise
	Interviewed	Responsible for nutrition programming	
Line/ sectoral ministries			
Ministry of Health	5	5	Assistant commissioners and technicians, with >6yrs experience at UNAP of planning and monitoring at national level
Ministry of Agriculture, Animals and Fisheries	3	3	
Ministry of Gender Labour and Social Development	2	2	
Non-sectoral entities for oversight and support			
Office of the Prime Minister	2	2	Commissioners, senior or principal specialists with >6yrs experience with policy, planning and oversight for UNAP at national level
National Planning Authority	2	2	
Ministry of Local Government	2	2	
Ministry of Finance, Planning, and Economic Development	2	2	
Policy research centres and facilities	8	5	Engaged in nutrition-related research and policy development, with 5 previously working at internationally supported nutrition-related projects or programmes in Uganda
International development partner (IDP) organisations	7	7	Advisers/specialists overseeing nutrition-related projects funded by IDPs; four with >7yrs experience with programming for UNAP at national and sub-national level
TOTAL	33	30	

## Policy content analysis

The following Uganda national policies, frameworks and strategies were reviewed for their nutrition ‘sensitivity’:

1. National Development Plan II 2015/16-2019/20
2. National Agricultural Policy (2013)
3. Agriculture Sector Strategic Plan 2015/16-2019/20
4. Health Sector Strategic plan 2015/16-2019/20<sup>1</sup>
5. Reproductive Maternal New-born Child Adolescent Health Sharpened Plan (2016)
6. National Social Protection Policy (2015)
7. Programme plan of interventions for implementation of the Uganda National Social Protection Policy 2015/16 - 2019/20
8. National Integrated Early Childhood Development Policy and Action Plan (2016)

<sup>1</sup> The Uganda 2<sup>nd</sup> National Health Policy 2010-2020 was developed before the advent of the UNAP in 2011 and was not, therefore, included in the current review.

These documents were developed after the formalisation of the Uganda Nutrition Action Plan (UNAP) 2011-2016. The expectation was that the UNAP would facilitate coherence in sectoral policies for nutrition and that selected nutrition-sensitive policy actions would be included in the respective sectoral policy documents. The documents were reviewed to assess the degree of prioritisation for nutrition. Each document was checked to see if nutrition was included in the situation analysis; to see if there were objectives, goals, indicators and targets related to nutrition; and to see whether each included the strategic interventions specified in the UNAP. In a separate analysis, the policy documents were also examined to see if and how they used sources of data, research and evidence on nutrition.

The core content of the report is presented in the Findings section in which the nutrition policy framework, the use of evidence for policy making, the structure of nutrition governance, and the policy implementation cycle in Uganda are described in four sub-sections. These are followed by some concluding remarks and annexes containing supporting information.

## Findings

### 1. NATIONAL FRAMEWORK FOR NUTRITION

---

#### 1.1. Stakeholders' perceptions of the priority for nutrition

All informants recognised that undernutrition is a development problem that harmfully affects human capital formation because of ill-health, lost education, and missed economic opportunities. In the opinion of informants, the process of developing the UNAP 2011-2016 played a critical role in increasing the importance of nutrition on the national agenda; it stimulated a wide-ranging dissemination of information about the harmful effects of undernutrition on children and their mothers in Uganda; and it assisted with the process of identifying a set of multi-sectoral actions to address the problem. The informants felt that the increased pressure for results and accountability, both nationally and internationally, including the Millennium Development Goals (MDGs) and Sustainable Development Goals (SDG) initiatives and the Scaling Up Nutrition (SUN) movement, have also created high aspirations and an expectation of improved human development in general, and of better nutrition in particular. In addition, nutrition is being given increased attention by members of the Parliament of Uganda: a Parliamentary group on nutrition has been established and the 1st Nutrition Parliamentary Forum was recently held<sup>2</sup>.

The informants considered that Ugandan sectoral and national policies adequately reflect the nutrition needs of the population and the provisions of UNAP 2011-2016, and that the focus now should be on implementing and scaling-up of actions. In the opinion of informants, while nutrition in Uganda is intended to be prioritised by a number of sectors, it does not directly contribute to individual sectoral goals, and this poses a challenge to its prioritisation within each sector. As nutrition has been adequately addressed in national and many sectoral policy statements, in practice it has been a daunting challenge to follow up these statements with a convincing sectoral and multi-sectoral implementation strategy.

#### 1.2. Chronology of nutrition policy-making

Table 2 shows that Uganda has a relatively long history of policy processes for nutrition which have gradually developed to consolidate strategies towards a multi-sectoral approach. It is clear from the summaries in Table 2 that the policy framework for nutrition in Uganda is developing into a comprehensive multi-sectoral approach with ambitious nutrition goals. The foreword of the UNAP 2011-16/17 states that *“adequate nutrition is a prerequisite for human development and socioeconomic well-being”*. In pursuing this objective, the document confirms that the current level of malnutrition in Uganda is unacceptable and that *“nutrition warrants greater investment and commitment (...) [which is] a necessary prerequisite for further progress on the Millennium Development Goals and attainment of the National Development Plan (NDP I) objectives”*. The UNAP states that *“successful implementation (...) will require (...) the ownership of the action plan by the key government ministries”* (Chapter 6.4). For such ownership to occur, the provisions of the UNAP need to be captured effectively within the policy documents and mechanisms of each sector, such as sectoral policies, action plans, strategic plans and implementation platforms.

---

<sup>2</sup> The Uganda Today. Parliament Launches Forum on Nutrition. At <http://www.theugandatoday.com/health/2017/06/parliament-launches-forum-on-nutrition/>

**Table 2. A chronology of the main documents for nutrition in Uganda**

Sources: T. Benson (2) and informants' interviews

**1964.** The Uganda Food and Nutrition Council (UFNC) was established to provide oversight and to coordinate the implementation of national programmes to ensure food security and nutrition, but it functioned on an *ad hoc* basis due to the lack of a related bill to provide the legal mandate for its institutionalisation (15).

**1996.** A National Food and Nutrition Policy (NFNP) and the first Ugandan National Plan of Action for Nutrition were drafted under the aegis of the National Food and Nutrition Council. The documents were developed as a follow-up to the International Conference on Nutrition in 1992 by a multi-sectoral Task Force that included representatives of the Ministries of Agriculture, Health, Finance and Education (titles shortened). The overall objective of the NFNP was to guarantee food security by increasing food production and to ensure adequate nutrition for all through a sufficient supply of food by means of adequate processing, preservation, storage, marketing, distribution and external trade, and by supplementary food aid. None of the documents were officially endorsed at the time (16).

**2003.** The 1<sup>st</sup> Uganda Food and Nutrition Policy (UFNP) was formalised based on the renewal of the 1996 Policy and Plan and provided strategic direction to undertake food and nutrition security interventions within the remits of the Ministry of Health and Ministry of Agriculture. The Policy contains 12 priority areas, seven of which are related to the food supply and the environment, but also include nutrition, health and education interventions. The impetus for the Policy was the global MDG initiative and the formalisation in 2001 of the Uganda Plan for Modernisation of Agriculture to address poverty eradication by transforming the agricultural sector.

**2005.** The National Agricultural Education Policy, Strategy and Investment Plan 2004-2015 (NAEP) was a joint initiative of the Ministries of Agriculture, Education and Gender and Labour, aimed at providing agricultural education on producing of nutritious foods through: (a) primary schools, as an important means of conveying agriculture messages and practices to pupils; and (b) functional adult literacy classes, targeting youths and adults of 15 years and above, with a focus on women and vulnerable groups.

**2005.** A Food and Nutrition Strategy was drafted by the Ministry of Agriculture and the Secretariat for the Plan for the Modernisation of Agriculture (PMA), and described strategic approaches to food and nutrition mainly focused on food security and increased food production, but also on the supply and consumption of nutritious foods. A complementary Investment Plan was formulated but neither of the documents was formally endorsed due to lack of consensus over institutional arrangements.

**2009.** A Food and Nutrition Bill was formulated but is still under review by the Cabinet. Currently, it is proposed that the Bill should be revoked for review and re-submitted to the Cabinet, although no direct provisions are made as to which institution or line ministry should lead the process. In the absence of the Bill, the executive could not be vested with a budget which would enable the Uganda Food and Nutrition Council (UFNC) to have separate and distinct budget vote to provide to line ministries and implementing institutions.

**2010.** At the launch of the SUN Roadmap and the 65<sup>th</sup> UN Assembly, the Government of Uganda committed to tackling the crisis of malnutrition. The use of PROFILES<sup>3</sup> models during this period heightened awareness of the economic costs of malnutrition and assisted the creation of a multi-partner coalition of nutrition advocates while also engaging donors and development partners.

**2011.** The Uganda Nutrition Action Plan (UNAP 2011-2016) was developed and adopted as the country's new strategic framework for addressing nutrition multi-sectorally. The Plan was co-signed by eight line-ministries (but not the Ministry of Water and Environment, which joined in 2016). It was viewed as the operationalisation of the nutrition aims of the NDP I and the Food and Nutrition Policy 2003, while responding to the call of the SUN global initiative to prioritise nutrition. The Plan provides a link between nutrition and national development and calls for the scaling-up of multi-sectoral and high impact interventions focused on the first 1,000 days of life, from conception to two years of age. The Plan has been extended to the end of 2017 to allow for the analysis of lessons learned, and to formulate its successor.

**2015.** The second Uganda National Development Plan (NDP II) proposes an end to all forms of malnutrition by 2030, including achieving by 2025 the internationally agreed targets on preventing stunting and wasting in children under five years of age, and by addressing the nutritional needs of adolescent girls, pregnant and lactating women, and older persons. The Plan's overall intent is wealth creation by infrastructure development, enhanced human capital development, and strengthened mechanisms for delivering high quality and efficient services.

**2016.** A National Nutrition Policy is being drafted as a successor to the UFNP of 2003. Its vision is for *"a well-nourished, healthy and productive Ugandan population by 2030"* with a mission to *"eliminate malnutrition through a multi-sectoral approach to food and nutrition security"*. The overarching goal of this policy is *"to build an enabling environment for(...) programmes to eliminate malnutrition in Uganda"*. A complementary Nutrition Strategy and Investment Plan is under development, as successor to UNAP 2011-2016/17 (UNAP 2).

<sup>3</sup> PROFILES modelling tool uses diverse type of data to project consequences of poor nutrition on mortality, morbidity, fertility, school performance, and labour productivity. PROFILES also estimates the benefits of nutrition programmes in a given country. For Uganda PROFILES please see <http://www.fantaproject.org/countries/uganda/nutrition-advocacy-using-profiles>



### 1.3. Main objectives of the national policies

Table 3 summarises the goals of Ugandan national development and sectoral policy documents in the three sectors: agriculture; health; and gender, labour and social development. It is evident that in Uganda a comprehensive policy and strategic planning framework has been developed and governs the activities promoted by various stakeholders. The policies' overarching goals are in line with the Uganda Vision 2040 and aim to ensure economic prosperity, income generation, access to social services and the well-being of citizens.

**Table 3. Summary of national and selected sectoral policy documents, Uganda**

Policy document and dates	Goal
Uganda Vision to 2040 (2010)	A transformed Uganda society from a peasant to a modern and prosperous country within 30 years
NDP II 2015/16-2019/20	Wealth creation through sustainable economic growth, infrastructure and human capital development
National Agriculture policy (2013)	Promote food and nutrition security and improve household incomes through sustainable agricultural productivity, employment and trade
Agriculture Sector Strategic Plan II 2015-2020	Transforming the sector from subsistence farming to commercial agriculture and create employment, increase household incomes, and ensure household food security
2 <sup>nd</sup> National Health Policy 2010-2020	To attain a good standard of health for all people in Uganda in order to promote healthy and productive lives. The focus of the Policy is health promotion, disease prevention, early diagnosis and treatment of diseases
Reproductive, maternal, new-born and child health Sharpened plan for Uganda (renewed in 2016)	To end preventable maternal, new-born, child and adolescent deaths and improve the health and quality of life of women, adolescents and children in Uganda
Health Sector Strategic Plan (HSSP) IV 2015-2020	To accelerate movement towards universal health service coverage with essential health promotion services for a healthy and productive life
Social Protection Policy (2015)	To reduce poverty and socio-economic inequalities for inclusive development by 2024
Programme Plan of Interventions for the Social Protection Strategy 2015/16-2019/20	To increase access to social protection services
National Integrated Early Childhood Development Policy and Action Plan (NIECP-AP; 2016)	All children in Uganda from conception to 8 years of age grow and develop to their full potential. Food security and nutrition is one of the three main sectoral priorities

Given the multi-factorial nature of malnutrition, the challenge for policy development is to assign nutrition-related actions to all sectors that can influence nutrition outcomes and ensure that the general policy for nutrition is coherent. Coherence is defined as the promotion of mutually reinforcing policy actions across government departments and agencies, thereby achieving the agreed objectives (see Annex 5). Achieving this requires an awareness of nutritional needs by all sectors as well as policy coordination, analytical tools and technical skills (17).

### 1.4. Responsibility for nutrition policy

As early as 2001, the Uganda Plan for Modernisation of Agriculture (PMA) based in the Ministry of Agriculture, Animal Industry and Fisheries (MAAIF) provided a planning framework for poverty, agriculture and rural development, and focused on collaboration between several ministries, development partners, the private sector and civil society. It facilitated the formulation of several policy documents including the Uganda Food and Nutrition Policy, released in 2003. Under the new



national coordination and planning arrangements introduced through the Comprehensive National Development Planning Framework in 2007 (18), the Uganda National Planning Authority took the lead in developing a range of national planning frameworks, including the UNAP, in 2011. After the endorsement of the UNAP, the responsibility for coordinating and implementing the Plan's implementation was transferred to the Office of Prime Minister (OPM) of Uganda. Currently, the OPM is also leading the formulation of the new National Nutrition Policy, Strategy and Investment Plan.

## 1.5. Sectoral policies and national development plan

In line with the provisions of the Comprehensive National Development Planning Framework of 2007, all National Development Plans should outline their overall development objectives for the short term (five years) and medium term (ten years), and set the national long- and mid-term targets through which the National Vision 2040 will be achieved. Line ministries are required to prepare all their respective sector policies and plans to be consistent with long-term national development goals and objectives. The National Planning Authority (NPA) is mandated to guide and facilitate the formulation of the NDP and to assist sectors to produce comprehensive sector plans, action plans and budgets that are aligned with the priorities for national development. The NPA also assesses the degree to which policies are aligned to the NDP II and issues a Certificate of Compliance to sectoral plans and budgets. The Certificate facilitates the process of monitoring policies and approving budgets by the Cabinet and Parliament and serves to identify gaps in the application of sectoral commitments which need to be acted upon by the sectors. It is a powerful instrument to achieve accountability, issued by the highest-level planning authority in the country, and is made public.

The NDP II Certificate of Compliance for the Annual Budget Report for 2015/16 stated that programmes for scaling-up critical nutrition outcomes achieved only 20 percent budget release (allocation) and that the allocation of resources for nutrition is a key concern for national planning. The low allocations are attributed to the low priority given to nutrition within sectors. In the case of the agriculture sector, for example, the report mentions that although there is evidence of budget allocations for food security and nutrition, they are not coordinated with the health sector (p.97). In the case of the health sector, the report indicates that no evidence of prioritisation or budget allocation is provided for nutrition activities (act. 44. Essential Nutrition Actions; act. 45. Strengthened policy, legal, institutional framework and capacity to effectively address nutrition; act. 46 Strengthen advocacy, social mobilisation, and communication for good nutrition for all (p.121)<sup>4</sup>.

Some of the non-sectoral informants indicated that a detailed nutrition certificate of compliance with plans and budgets is possibly needed to guide sector-based planning and budgeting for nutrition. By comparison, they noted that the dedicated 'Gender and Equity Certification and Compliance' framework and tools developed under The Uganda Public Finance and Management Act had established budget and planning responsiveness by all sectors to address gender and equity issues. Recently, members of the Equal Opportunities Commission presented an assessment report on the responsiveness of annual ministerial policy statements to issues of gender and equity<sup>5</sup>. In the opinion of some informants, this approach could be applied effectively to nutrition to ensure prioritisation in national and sectoral planning.

<sup>4</sup> For more details, please see Certificate of Compliance for the annual budget FY2015/16 at <http://npa.ug/wp-content/uploads/Certificate-of-Compliance-FY2015-16.pdf>

<sup>5</sup> For details, please see <http://www.eoc.go.ug/media-updates/2017/02/rt-hon-rebecca-kadaga-receives-eoc%E2%80%99s-report-findings-assessment-sector-budget>

## 1.6. Sectoral policy cycles

The sectoral policy cycles in Uganda largely follow an iterative process from policy formulation through implementation, monitoring and policy review, to policy re-formulation. Given the multi-sectoral nature of policies for development, interactions between ministries play a major role in the process.

### ➔ Policy formulation

At the national level, policy direction is provided by line ministries and departments. The policy formulation process is detailed and often lengthy, involving multiple consultations between sectors and with partners. Technical subject papers are sometimes produced by the Policy and Planning Units of ministries, jointly with the technical departments that initiate the policy. This process is often facilitated by consultants with expertise in the field. The situation analysis should be undertaken by a sectoral **Technical Working Group (TWG)**, although often there is only a ‘light-touch’ even though detailed guidance on analysing the problem by consultations and a stakeholders’ analysis is provided by the Cabinet in the **Guide to Regulatory Impact Assessment**<sup>6</sup>. The diagnosis should be complemented by a review of existing policies and plans in order to identify potential synergy and avoid duplication of policy actions. In the view of some informants, the review of the complementarity of policies tends to be nominal rather than substantive, which possibly explains some overlaps in policies. To avoid this and to ensure a more thorough analysis of complementarity, technicians in the ministries need detailed guidance and tools.

To engage most of the sectoral stakeholders, **Technical Steering Committees** are constituted from representatives of sectors and local government, which discuss and debate the initial content of the proposed policies. At the top levels of management and policy development, a Draft Cabinet Memorandum describing the objective of a policy is prepared and submitted for formal review to the ministries involved, ideally early in the process to provide sufficient time for consideration. This ministerial review is usually delegated to a technical unit and is documented using a detailed **checklist for evaluating policy**, which includes recommendations for improving or adjusting the policy.

Based on these various intra- and inter-sectoral reviews, the line ministry formulates a final policy document. The policy package is forwarded to the NPA and the Ministry of Finance, Planning, and Economic Development (MoFPED), to assess the degree of compliance with the existing national development and financial frameworks. Based on these assessments, the policy is submitted through the Cabinet Secretariat to the Cabinet for review. The approval of the Cabinet signifies the government’s position to be presented formally for consideration by Parliament.

The operationalisation of approved sectoral policies is conducted through the development of sectoral strategic and annual action plans and budgets and, in some cases, the design of dedicated programmes and priority projects. Informants indicated that the UNAP influenced the development of nutrition-related sectoral and multi-sectoral policy documents and they also provided some examples: the Anaemia Policy and Investment Plan (under development), the School Feeding Policy (being finalised), the Integrated Early Childhood Policy and Action Plan (2016). The informants, however, indicated that no dedicated sectoral programme for nutrition was initiated by the sectors because of UNAP, with a dedicated budget allocated by a parliamentary vote.

---

<sup>6</sup> For more details, please see: The Republic of Uganda: Evidence Based Policy Making - A Guide to Regulatory Impact Assessment. The Cabinet Secretariat Office of the President. Undated. At <http://regulatoryreform.com/wp-content/uploads/2016/09/Uganda-Guide-to-RIA-Cabinet-Office-Undated.pdf>

A set of formal documents have been developed to guide the process of sectoral policy formulation and planning and include the Guide to Policy Development and Management (2009, revised in 2013) and separate Sector and Local Development Planning Guidelines (2015 and 2014, respectively). Specific Nutrition Planning Guidelines were issued by the NPA in 2015 and provide detailed instructions on the process of sectoral, national and local government planning for nutrition. The informants noted that the guidelines are relatively new and disseminated to selected districts only, where nutrition-focused external assistance is available. In addition, the guidelines do not address policy implementation or offer guidance on tools for the use of evidence for policy analysis and multi-sectoral monitoring.

### ➔ Policy implementation

This is the remit of the districts, led by their decentralised departments and agencies under the direction of the District Chief Administrative Officer (CAO) and the District Council. Policy planning and budgeting processes have been decentralised and each district is responsible for the formulation and approval of a three-year Medium-Term Development Plan. The approved plan forms the basis for annual planning and budgeting by each district for funds allocated by the MoFPED. Line ministries are responsible for providing technical advice to local governments about the content of national policies and implementation plans, as well as jointly monitoring progress against objectives set out in sectoral and sub-national plans. However, informants indicated that the limited budget of ministries and their lack of staff precludes support for all districts, so assistance is provided based on needs, which is usually given to the worst-performing districts.

## 1.7. Linkages between UNAP and sectoral programmes

To achieve national and sectoral policy and planning goals, each sector develops sector priority programmes. In the agriculture sector, the previous Agriculture Development and Strategic Investment Plan (2010-2015) stipulated 23 multi-action programmes while the current Sector Strategic Plan refers to commodity-focused programmes. Although no nutrition-dedicated programme is in existence, nutrition is mentioned in programmes and sub-programmes on selected commodities and in the extension services and agricultural education platform, through which the production and consumption of the selected nutritious foods is intended. In the health sector, 12 priority programmes and sub-programmes are operated. Nutrition is included as a sub-programme in the Maternal and Child Health Programme under the Community Health chapter and appears under Clinical Services and national disease control programmes. In the social protection sector the flagship scheme, Social Assistance Grants for Empowerment (SAGE), is focused on social assistance interventions for the elderly. Although not directly linked to nutrition, it has been documented that most of the SAGE payments are used to buy food and pay for health services and children's schooling, so may contribute to nutrition outcomes.

These programmes could potentially be analysed for the degree of their inclusiveness of nutrition. International evidence indicates that programmes considered to be linked to nutrition are not necessarily nutrition-sensitive and work is needed to modify them (19). The UN Network for the SUN/REACH Secretariat and the United Nations partner agencies have recently launched a Compendium of Actions for Nutrition, which includes matrices of potential, tested, and recommended sectoral actions for nutrition, both nutrition-specific and nutrition-sensitive (20). The Compendium of Actions for Nutrition could be used to assess Uganda's national efforts for nutrition in terms of the breadth of actions currently implemented by sectors compared with the actions and sub-actions recommended by international evidence<sup>7</sup>.

---

<sup>7</sup> Compendium of Actions for Nutrition: Overview. At <http://www.reachpartnership.org/documents/312104/9559bb26-621b-40f8-8c62-1dae09494150>

## 1.8. Priorities in the current national nutrition action plan

The objectives of UNAP 2011-2016/(17) are:

1. Improve access to and utilisation of maternal, infant, and young child feeding services.
2. Enhance consumption of diverse diets, comprehensively address food availability, access, use and sustainability for improved nutrition.
3. Protect households from the impact of shocks and other vulnerabilities that affect their nutritional status.
4. Strengthen the policy, legal and institutional frameworks and the capacity to effectively plan, implement, monitor and evaluate nutrition programmes.
5. Create awareness of and maintain national interest in and commitment to improving and supporting nutrition programmes in the country.

The Plan elapsed at the end of 2016 but has been extended to the end of 2017 to allow for the analysis of lessons learned, and to formulate its successor. The draft successor document, a National Nutrition Strategy and Investment Plan (NNS-IP), is currently under review by a Technical Reference Group and was not available for review during the present analysis.

## 1.9. Nutrition 'sensitivity' of sectoral policies

As part of the analysis, we explored the extent to which nutrition and the provisions of UNAP have been incorporated into key policy documents developed after 2011 in three sectors: agriculture, health and social development. To do this, we assessed the key sectoral policy documents against a set of criteria adapted from a World Bank framework on the role of nutrition in Poverty Reduction Strategy Papers (21) and from the strategic objectives of UNAP 2011-2016. Information was extracted from the situation analysis section of policies; from the lists of outcomes, objectives or priority areas; and from the description of the institutional and implementation arrangements. Table 4 presents a summary of this assessment.

Taken as a whole, the sectoral policies and the NDP II are consistent with the UNAP in a proportion of the dimensions deemed critical to the prioritisation of nutrition. The review shows that nutrition is mentioned in the situation analysis sections of the sectoral and NDP II documents, while health sector documents analyse nutrition problems in a more substantial manner. Some informants mentioned that a dedicated nutrition-focused analysis is conducted when sectoral policy documents are developed, but only selected summarised paragraphs are included in the final document given the wide scope of the policy documents. Further on, health sector documents and the recent NIECP-AP include specific nutrition objectives, indicators and, in some cases, targets. A wide variation in the target populations was also noted. In terms of the alignment with the interventions specified under the UNAP's five strategic objectives, the picture varies, with a substantial number of those included in the health and the National Integrated Early Childhood Development (NIECD) policy documents.

Nutrition is mentioned as a cross-cutting issue of priority in the NDP II, among eight others listed. In an environment of finite funding and competing priorities, the need for focused attention on nutrition is essential so that the strategies and interventions described in the UNAP are carried out as proposed. The sectoral policies and development plans do not yet provide a consistent level of prioritisation for nutrition although the more recent policy documents in the health and social protection sectors, the Reproductive, Maternal, New-born Child and Adolescent Health (RMNCAH) Sharpened Plan and the NIECD action plan, prioritise nutrition to a substantially greater degree. Additionally, in the health sector, a dedicated Maternal Infant and Young Child Nutrition (MIYCN) Strategy and Guidelines were developed in 2016 and a 'road map' 2016-2020 is currently being finalised by the Division of Nutrition to guide the scale-up of high impact maternal, child and adolescent nutrition services. This initiative is viewed positively as it could provide sectoral nutrition targets and more detailed guidance on implementation.

## 1.10. Key nutritional issues of concern in national policies

It is evident from the review of national and sectoral policy documents that the concerns for nutrition relate to the persistently high prevalence of child undernutrition, vitamin deficiencies and food insecurity, all despite the good economic growth during the last decade and declining rates of poverty and mortality. Informants emphasised concern over the limited understanding of the barriers to key health, hygiene, and care, while one Informant mentioned that recent formative research indicates that caregivers are knowledgeable about feeding and care practices but have insufficient means to apply them. The paradox of chronic undernutrition in the ‘breadbasket’ of the Southwest Region of Uganda remains poorly understood. As it may be related to the rapid commercialisation of agriculture leading to mono-culture production and increased food insecurity, it requires deeper investigation.

**Table 4. Nutrition included in key policy documents in Uganda**

Indicator	National Development Plan II 2015/16-2019/2020	Agriculture Policy and Sector Strategic Plan 2015-2020 (draft)	Health Sector Development Plan 2015-2020 and RMNCAH Sharpened Plan (2016)	Social Protection Pol. & Programme plan 2015/16-19/20 and National Integrated Early Childhood Policy and Action Plan
Nutrition in situation analysis section	Yes, but not substantive	Yes, but not substantive/ mainly related to food security	Yes, substantive (loss to human capital; cause of mortality/disability, determinants)	Missing in Policy and Plan documents; mentioned in NIECP-AP
Nutrition objectives	Reduction of stunting; adoption of nutrition practices	Indirect (food security and diversified food production)	Reduce mortality and morbidity by addressing determinants (nutrition and care practices, prevention of diseases)	NIECP-AP: support nutritious food production, care practice and community mobilisation to promote nutrition behaviours
Nutrition-related indicators, targets	Stunting in children reduced to 25% by 2019/20 (37% in 2010)	% children ‘undernourished’; No targets on specific nutritious foods or diversified diets	Stunting, under-weight; prevention of communicable and vaccine preventable diseases; latrine coverage; No nutrition-specific indicators/targets	NIECP-AP: 16 indicators: outcome (stunting, underweight, anaemia) and output (feeding practices, access to extension services); No targets
Targeting of vulnerable groups	Young children, adolescents, women, vulnerable groups, refugees	Households headed by women and children, poor, people with disabilities	Geographic focus, underserved groups, young children, mothers, adolescent girls, people affected by diseases	Children from conception to 8yrs, caretakers; orphans, disaster-affected communities
<b><i>Nutrition focused strategies/interventions in line with UNAP</i></b>				
Maternal and child nutrition services, including sanitation (Obj. 1)	Delivery through health sector, community-led total sanitation approach, hygiene in humanitarian setting mentioned	No / no linkages	Yes (majority of UNAP maternal and child interventions mentioned including latrines and handwashing coverage)	NIECP-AP: Access to supplementation, diverse foods, feeding and antenatal and health practise
Production, consumption of diversified foods (diet) (Obj. 2)	Partially - only consumption of diversified diets mentioned	Promotion and consumption of diverse diets; incl. technologies (bio-fortified crops, household food processing)	Promotion of nutritious foods for children and women	NIECP-AP: access to, consumption of diversified and nutritious foods for infants and children
Social /community protection interventions (Obj. 3) (cash transfers, school feeding, etc.)	School feeding, early childhood development services, cash transfers enlisted	School-based education for nutrition and food security enlisted	No	Not in NIECP-AP but in Policy/Plan: ECD centres, cash transfers, school feeding, etc
Commitment to nutrition (Obj. 4) (budget, HR, institutional arrangements)	Capacity-building for implementation of UNAP mentioned	Budget under Consumption& Production strategy	Budget for nutrition services, by year	NIECP-AP: detailed budgets, by strategic area and intervention, by year
Multi-sectoral collaboration for nutrition (Obj. 5)	Cross-sectoral priority for all sectors (among 8 other priorities)	Cross-sectoral priority	Not explicit	NIECP-AP: Food security and nutrition is priority policy action

## 2. USE OF EVIDENCE FOR POLICY FORMULATION

All informants noted that evidence is important for formulating policies because it can guide the decision-making process and influence the mobilisation of resources. The majority of respondents also indicated that a good deal of information of many types exists, but there is no well-designed plan, guidance and tools for using the evidence during the stages of the policy development process, both at local and national levels, and for monitoring multi-sectoral efforts for nutrition. Additionally, some users noted the increasing demand for locally-focused analysis to improve targeting of interventions and monitor the convergence of sectoral programs, projects and actions for nutrition at a community level in terms of the geographical distribution of nutrition-focused services, the allocation of resource and coverage of services.

### 2.1. Decision-making and information needs

We looked at the roles and responsibilities of policy and decision makers in Uganda and what types of evidence for nutrition they have used or need. The results are presented in Table 5. An assessment of the needs for information by decision-makers to establish who the data users are, what data they require, under what form they require the data, and what they use data for, are not routinely conducted in countries such as Uganda (22, 23). Where a data needs assessment has been done, as, for example, in Indonesia, Ethiopia and Bangladesh, it has served the purpose of starting a useful dialogue between data users and producers (24).

**Table 5. Decision-making roles and information needs of nutrition policy makers in Uganda**

Source: extracted from National Nutrition Planning Guidelines for Uganda (NPA, 2015) and informants interviews

Structure / Institution	Decision-making roles and responsibilities	Information currently available and issues	Information possibly required and issues
<b>Community and District level</b>			
Civil society organisations (CSOs) and general public/citizens	Contribute to local development planning, implementation (community mobilisation to increase demand for and uptake of services, including nutrition) and oversight	Data on access to services collected by various agents (Village Health Teams, farmers and women' groups, water users' committees, etc.), including, in real time (SMS/mobile phone-based) but not consistent or well-coordinated	Data on spread of malnutrition and practices at community/district level Stories, experiences and exchange addressing existing sub-optimal practices (ex. food taboos) Limited literacy and various dialects may constrain use of data and require creative presentation
District sectoral departments (health, agriculture, community development, etc.) in coordination with sub-district authorities (level L1 and L3)	Initiate three-year and annual local development plans (baseline, targets, objectives) and budgets Ensure implementation, financing and monitoring of local plans Collect and compile data, provide periodic reporting on status of implementation to higher level government and feedback to communities	Data from sector-based information systems (health, education) Community Information System (CIS) operated by districts, MLG and UBOS Census, civil and vital statistics (variable) Budget planning, allocation and expenditure data (OBT tracking) Various assessments, mappings, studies (by external partners) but not clearly integrated into local planning Data dis-joined/scattered in different systems, not easily accessible/searchable, in various formats	Community/household vulnerability profiles for better targeting Off-budget data on funding and implementation from CSOs Joined-up analysis - budgets, populations and results (coverage with services, adoption of adequate care practices, etc.) - to enable meaningful, evidence-based narrative at district level
District Councils (level L5) aided by Technical Planning Committee (inclusive of District Nutrition Coordination Committees)	Approval and monitoring of district-based policies and development plans, including, cross-sectoral (nutrition)	District Situation Analyses as part of districts' plan development Mid/end-year district performance reports (to OPM) Finance reports (using OBT; to MoFPED) LG performance reports (to MLGSD) District nutrition plans and reports (where available)	Platform (database) to access main indicators of district development Feedback on progress of district' nutrition indicators and implementation; comparison to other districts



<i>National level: sectoral</i>			
Sectoral Working Groups, Departments of Policy and Planning, technical departments, resource centres, national research organisations	National policy initiation, formulation & approval, monitoring and reporting on nutrition-related programmes and budgets and evaluation	<p>Statistics coming from sectoral information systems, compiled into annual sector's performance report (9-11 core indicators)</p> <p>Annual ministerial Policy Statements and Budget reports to Parliament</p> <p>Sectors' Joint Review Assessments and reports</p> <p>Surveys, studies, service assessments</p> <p>SMS/phone-based tracking of supplies (mTrac) and citizen feedback</p> <p>Evidence synthesised in guidelines</p> <p>Project/programmes evaluations (mainly funded by IDPs)</p> <p>League Table (MoH; 11 indicators including vitamin A)</p> <p>International evidence (global monitoring platforms), evidence synthesis (Lancet series)</p>	<p>Sectoral joined-up analysis (and mechanism for analysis) on nutritional status, budgets and programme/project results information</p> <p>Sectoral mapping of capacities, funding, evidence, research, programmes/projects</p> <p>Operational research</p> <p>Assessment of sectoral policy coherence of nutrition-related policy documents/frames</p> <p>Policy briefs based on synthesis of evidence and modelling of scenarios/options</p> <p>Sectoral budget/finance tracking for nutrition, by priority programmes/projects, including off-budget</p>
Ministry of Local Government	Monitoring local governments (LG) performance (ability to develop plans, manage finances, collect revenue, build capacity, mobilise communities)	<p>Annual Assessment of LG Performance</p> <p>Annual National Assessment Report for all Local Governments (to OPM and NPA)</p>	<p>Nutrition indicators/issues integrated in LG performance assessments, checklists, audits, and reports as part of routine inspections and support supervision of LGs</p> <p>Gaps and needs for nutritionist posts at LG level</p>
<i>National level: inter-sectoral (cross-sectoral)</i>			
Office of Prime Minister/National Multi-sectoral Nutrition Technical Committee/UNAP Secretariat	Coordination of development, implementation and monitoring of policies and plans, including nutrition (UNAP, nutrition policy) at national level	<p>National, Sectors, Districts, core projects performance reports (general, as per GoU requirements);</p> <p>UBOS sectoral and demographic statistics</p> <p>Ad-hoc nutrition implementation reports</p> <p>Mapping of nutrition resources (2014)</p> <p>Costing of UNAP (2013)</p>	<p>Nutrition Policy/UNAP implementation progress on annual basis (joined-up data - budgets, populations and results - to enable meaningful, evidence-based nutrition narrative at national level)</p> <p>Mid-term and end-of term impact evaluations (nutrition policy, UNAP)</p> <p>Coordinated national nutrition research agenda/plan; mapping of existing nutrition information available</p>
NPA	<p>Coordinate and harmonise national development planning</p> <p>Monitor and evaluate projects/programmes</p> <p>Advise Cabinet on national policies/strategies</p>	<p>National sector and multi-sector outcome data as sectoral results matrices, ministerial policy statements, Certificate of compliance reports</p> <p>Annual national development reports (although no assessment against targets)</p>	<p>National, sectoral, district dashboard</p> <p>Tools and analysis on policies alignment to nutrition objectives (tools to assess compliance of development plans for nutrition)</p>
UBOS	Coordinating, monitoring and supervising the National Statistics System	<p>District profiles and statistical abstracts</p> <p>CIS database</p> <p>Population data (births and deaths)</p> <p>Sector statistics data (MIS)</p> <p>National surveys (demographic and health) sentinel site surveys, etc.</p>	<p>Joined analysis of population, nutrition and service coverage</p> <p>Analysis of nutrition data gaps</p>
Members of Cabinet and Parliamentary sub-committees	Policy approval, oversight and modification	<p>Sectors annual policy statements</p> <p>OPM Annual Government Performance Report</p>	Nutrition Policy/UNAP implementation progress on annual basis, presented by OPM/UNAP Secretariat

It is evident from Table 5 that data are needed for the analysis of factors contributing to poor nutrition, community outreach of services, and sectors' performance for nutrition. The majority of informants indicated that although some data and information exist, they are scattered between programmes and are not collected together, integrated or analysed. A range of information products, such as periodic reports and reviews by districts and sectoral ministries, are routinely produced, but nutrition is not well covered. To address the issue, a nutrition monitoring report was started in late 2016 by the Ministry of Health and the experience could be shared with other sectors.

Given the situation, a thoughtful, robust information platform aimed at providing an integrated sectoral and inter-sectoral analysis of the nutrition situation, to include the population status, the implementation of activities and nutrition results, could provide significant benefits and link this information to decision-makers and structures at various levels of government.

It is notable that a range of various **management information systems (MIS)** exists in Uganda. They include an MIS in health and education and a **Community Information System (CIS)** maintained by the districts and the Uganda Bureau of Statistics (UBOS)<sup>8</sup>. Informants noted that the CIS and sectoral MIS are not linked however, and informants do not frequently access such systems cross-sectorally. Informants mentioned challenges for such an information system, including *“too much data collection and reports writing”* which overburden district departments, plus the lack of feedback and variable data quality. While some data entry is automated and electronic reports are submitted by the district health MIS, the agriculture and social development sectors rely on paper-based reports, which is prone to delays as reports are delivered to the offices of line ministries in Kampala or Entebbe by hand. The MAAIF recently received a boost for their Data Centre, which recruited 18 statisticians to facilitate data collection, analysis and dissemination. The social sector intends to develop an integrated MIS and currently maintains an MIS for programmes focused on orphans and other vulnerable children (OVC-MIS) (25). It aims to provide joined-up information on needs, supplies and utilisation of services and includes a dashboard of 40 indicators, including food and nutrition services. By 2016, all 116 districts had complied with system's reporting requirements<sup>9</sup>.

Informants mentioned using information from the **Integrated Financial MIS and Output Budget Tracking (OBT)**, which provide data on sectoral budgeting. Informants from the MoFPED and NPA suggested that for nutrition to be effectively prioritised in national planning frameworks, nutrition-related allocations should be captured in the budget tracking system, in the same ways as they are for gender and equity. Furthermore, the transition to a programme-based budgeting and monitoring is starting throughout government and will enable links to be made between programs' inputs, outputs and outcomes. The identification of a set of concise sectoral and multi-sectoral nutrition-related input and output indicators, in line with the existing governmental requirements, could be a good entry point for prioritisation of nutrition in the new programming and budgeting system.

## 2.2. The role of research

In the opinion of informants, research has been a significant source of information for policy making, and its importance is reflected through a range of policy instruments such as the National Agricultural Research Organisation Strategic plan 2008/09 - 2016/17 and the Health Research Policy 2012-2020. Of particular interest to informants is research exploring the determinants of persistent undernutrition in the regions with the highest prevalence, as well as research on the implementation of nutrition interventions in communities. It is worth noting that an earlier review

<sup>8</sup> For details, please see <http://www.ubos.org/statistical-activities/community-systems/district-profiling/community-statistics/>

<sup>9</sup> For details, please see

[http://ovcmis.mglsd.go.ug/view\\_programme.php?linkvar=National%20OVC%20Indicators&&action=OVC%20Indicators](http://ovcmis.mglsd.go.ug/view_programme.php?linkvar=National%20OVC%20Indicators&&action=OVC%20Indicators)



of research priorities in Sub-Saharan countries noted a “*striking (...) dearth*” of national research priorities in child health and child nutrition (26). Our examination of the two national research policy documents mentioned above revealed no specific prioritisation of nutrition-related research, such as on determinants of malnutrition, diets, or food consumption patterns. Advocacy to prioritise nutrition-related research is needed to assist the setting of the national and sectoral nutrition-related research agenda.

Nevertheless, research related to nutrition is being carried out. An example was given of the Community Connector/FHI360 Project, which focused on links between agriculture and nutrition and was specifically designed to support the implementation of the UNAP in communities. The project carried out a baseline survey and process assessments in six pilot districts and reported the findings to the UNAP Multi-Sectoral Nutrition Technical Committee. It was also mentioned that research findings are frequently discussed at ministerial and district technical working groups, yet the findings are not consistently captured or interpreted by the ministries’ policy units. Explaining the situation, one Informant said: “*The ministry is not bound to utilise research produced by NGOs because it is not done by ministry’s staff nor coordinated by ministry’s research agencies*”. In the words of another Informant, referring to the costing conducted for the UNAP: “*That type of costing does not take into consideration available governmental funds and cannot be applied at budgeting process. Researchers should consult Ministry of Finance on existing budget calculations and how costing for nutrition could be implemented*”.

Informants from the research sector questioned the over-emphasis on quantitative data. One reported: “*Quantitative statistics say very little because quantitative instruments cannot tell about the depth of people’s situation (...) and are prone to calculation errors*”. Yet: “*qualitative data are not taken seriously*”. At the same time, informants expressed caution toward the over-utilisation of evidence concerning knowledge and behaviour change: “*it is not about behaviour change but about the context people live in, what means they have at their disposal, and how the constraints to certain behaviours could be removed*”. To avoid these pitfalls, informants recommended triangulating various types of information, including statistics, formative research, and focus group discussions.

Informants noted that the non-governmental sector provides a significant share of all research in Uganda. They feel that sectors need support to effectively mainstream external research into the operations of the government. In their opinion, for research to make its way into policy, the findings need to be brought to the attention of top sectoral and national managers, possibly through agencies mandated to produce research such as Uganda National Health Research Organisation (UNHRO) and National Agricultural Research Organisation (NARO). Additionally, an institutional mechanism is needed to bring stakeholders together and coordinate and prioritise research on nutrition.

It is worth mentioning that the texts of the reviewed sectoral policy packages refer to ‘studies’ and ‘research’ but do so sparsely and cite them inconsistently. Only two documents mention evidence in the sense of synthesis, such as systematic reviews, guidelines, policy or evidence briefs. In this respect, the Uganda Policy Development and Management Guide (2009) states: “*Policy analysis can be qualitative or quantitative, this may include using case studies, survey research, statistical analysis, and model building among others.*” (p.4). Furthermore, the Guide includes a statement on the “*importance of using evidence from the ‘front line’ of service delivery (staff actually delivering a service like the medical/health workers, teachers, clerks, policemen, etc.) and potential customers*” (p.7). No instruction is available in the Guide, though, on the criteria for using research during the policy formulation or review process.

Various Ugandan academic sources provide recommendations about how to cite scientific papers (27, 28) but existing policy and planning guidelines do not provide citation rules for policy writers.

## 2.3. The role of evaluations

While recognising the value of evaluations, informants mentioned that they are not routinely done. Informants commented that evaluations are particularly challenging endeavours as they “*are expensive*” and sectoral budgets cannot provide for their implementation. Evaluations are also perceived as “*lengthy*” and, given the long policy formulation process and limited human technical resources in ministries, evaluations are challenging to manage. In Uganda it takes, on average, between one and two years from policy initiation to formal endorsement, while evaluations are not necessarily planned in synchrony with the policy process but are carried out when external funding becomes available. Additionally, one Informant noted that for a programme evaluation to be informative it needs to be based on a pre-defined M&E framework, which may not be in place. For example, while the UNAP was endorsed in 2011, the M&E framework has not yet been finalised and the M&E Plan has not been initiated.

Policy and Planning Departments of line ministries are responsible for coordinating monitoring activities, including evaluations. Informants hinted that the institutional capacity and authority of these departments is limited and while ministries recently underwent a restructuring process resulting in an increased number of departments, the staffing of the Policy and Planning Departments remained largely unchanged. They employ one or two policy analysts at most, who find it difficult to engage with multiple policy and planning processes at once, and are usually called in at the final stages of the policy formulation process.

None of the sectoral documents that were reviewed mentioned evaluations in the sense of analysing the effectiveness of a programme.

## 2.4. The role of technical assistance

Technical assistance (TA) in the form of short- or medium-term advisory support to ministries and departments is viewed positively as it helps to cover critical gaps, such as in monitoring and evaluation, strategic communications, and planning. The need for TA is identified as part of projects or sector reviews and planning processes, and is usually funded by international partners. In the case of the UNAP Secretariat, TA was recently made available through the recruitment of three TA consultants, financed by UNICEF and the EU to assist the Secretariat’s two staff. Informants mentioned that, in accordance with UNAP Strategic Objective 4, plans for capacity needs and capacity-building are to be formulated at all levels, including TA provision. Stakeholder and Capacity Assessments (29, 30) were conducted sometime early in the UNAP implementation cycle and Capacity Development Action Plans for improving nutrition were recommended for districts (31, 32), but were not followed-up.

## 2.5. Other sources of information

It is worthy of note that some informants mentioned utilising information from international and regional peer reviewed scientific papers and reports. They pointed out that international evidence is a valuable source of information, offering insight into various programme operational modalities, and providing research tools. They also mentioned regional reports providing comparative assessments of progress toward regionally and globally agreed targets, for example, the 2016 Annual Trends and Outlook Report on Nutrition<sup>10</sup> coordinated by the Regional platform of the Comprehensive Africa Agriculture Development Programme (CAADP). These are accessed through online platforms, although the quality of the internet connection at government institutions varies greatly.

---

<sup>10</sup> For details, please see <https://conference.resakss.org/2017/07/27/resakss-annual-trends-and-outlook-reports-atoms-2/>

## 2.6. Use of nutrition terms and evidence in policy documents

We explored the use of nutrition-related terms and the citation of documents in the government policy documents under review, to provide a baseline assessment of the potential increase in the prominence or importance of nutrition in future government policy documents. All documents were available as electronic and searchable files, and the in-built search functions of the respective file types (.doc, .pdf) were used.

A table of **nutrition-related terms** is presented in Annex 4. All documents, apart from those in the health sector, reveal various but, generally, limited use of nutrition-related terms. A prospective monitoring of the terms' usage will provide valuable insight into the evolution of prioritisation for nutrition within sectoral and national development documents.

For the analysis of the **usage patterns of research-related words** we looked into data used throughout the documents and the references cited in the text to support facts or statements such as: scientific paper or review published in a journal; book chapter; scientific monograph; government report or document; report or data from UN agency; report or data from non-government agency; and other. The text that focused on the problem definition (such as a situation analysis) and policy prioritisation were of primary interest.

The analysis revealed that documents extensively use government data, such as on crop production, the utilisation of services, the prevalence of undernutrition in various population groups and various indicators of vulnerability. In some instances, surveys or the abbreviations of sources are indicated in the text but are not cited in the document's references, which makes it difficult to identify the actual source. In fact, a list of references is provided only in health sector documents. So, it is difficult, at this stage, to adequately categorise the sources or type of information used to support policy making. It appears that the final printed versions of the respective documents include a fuller package of supplementary information related to the respective documents, including a reference list, but these were not available at the time of this review. A more detailed review of the documents may be conducted as part of support from the NIPN initiative to the UNAP Secretariat.

## 2.7. Challenges and opportunities in utilising evidence

As a whole, informants felt that although there are data and information to document the nutritional status of the population in Uganda, it does not necessarily explain 'why' malnutrition occurs. They also felt there is a substantial amount of information on various nutrition interventions but it is fragmented, not mapped and not easily accessible through databases or information platforms. It is also evident that data production is not necessarily linked to the decision-making process, as there are gaps between the type of information available and the information needed (Table 5). To address this problem, 'strategic analysis mechanisms' are being introduced. In the agriculture sector, a unit has been established called the Strategic Analysis and Knowledge Support System for Uganda (USAKSS-Uganda) to support the dissemination of knowledge, promote policy dialogue and build capacity for strategic analysis. The Unit has recently been integrated into the structure of the MAAIF.

Informants felt that current nutrition-related data and research do not necessarily provide responses to policy and planning questions that sectors must answer, such as what capacity and tools are needed at a community level to operationalise the UNAP. To answer these questions the informants proposed the creation of a working group to scrutinise the information available and advise line ministries on what data are saying and what are the gaps in data. The group could also assist in prioritising sectoral research for nutrition and integrating it into sectoral policy and programming processes. The need for 'knowledge managers' was also mentioned, to improve the presentation of evidence in forms tailored to policy-makers' needs.

The OPM/EU/DFID initiative for a National Information Platform for Nutrition in Uganda intends to support the establishment of a multi-sectoral policy advisory group to guide the analysis of nutrition information, facilitated by staff recruited by the OPM and with support for analysis from the Uganda Bureau of Statistics. A landscape analysis of data for nutrition will be undertaken to identify the official data available within the UBOS and the owners of other relevant data produced within Uganda. The initiative is viewed as most timely and encouraging, and all informants expressed the hope that it will be inclusive, that it will improve access to nutrition information, and will support the establishment of a ‘forum for debate’ on nutrition evidence.

## 3. NUTRITION GOVERNANCE

---

### 3.1. Coordination structure

The UNAP 2011-2016/17 places great emphasis on political commitment to nutrition, which is identified as a main structural determinant to the improvement of the nutritional status of Ugandan children and women. To be effective, this commitment needs to be translated into policies and funding, facilitated by multi-sectoral and intra-sectoral coordination mechanisms. The institutional framework for policy coordination is established at a central level in Uganda and engages with all levels of central government and the Ugandan parliament (see Figure 4).

For the purposes of the UNAP, the establishment of a dedicated **UNAP Secretariat** for the **Uganda Food and Nutrition Council** in the Office of the Prime Minister of Uganda signifies the highest level of political commitment on the part of the Government of Uganda (see UNAP coordination chart, annex 1). The Secretariat is housed within the Delivery Unit in the Office of the Prime Minister, which is charged with fast-tracking the implementation of core national projects, presidential initiatives and key sector results. The role of the UNAP Secretariat is to coordinate and promote horizontal (cross-sectoral) and vertical (intra-sectoral) linkages and communication; to support multi-sectoral planning and review processes; and to contribute to coordinated and coherent policies to enhance the implementation of the UNAP 2011-2016/17. It is led by the Secretariat Coordinator, who is also the Country Focal Point for the Scaling Up Nutrition movement. The Coordinator has significant other operational responsibilities in the Office of the Prime Minister, including those relating to the coordination of the national Family Planning Programme, the Presidential Business Roundtable Initiative and disaster preparedness. This is a heavy workload.

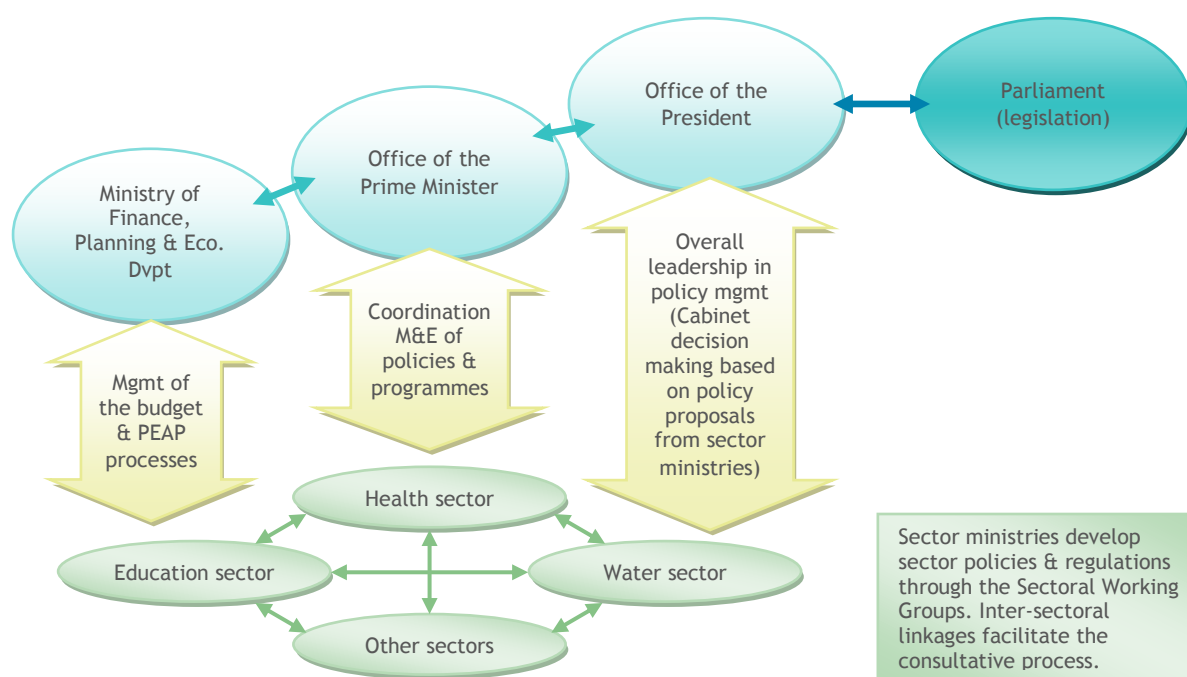
To ensure technical coordination at different levels, a **Multi-sectoral Nutrition Technical Committee** was established and consists of technical experts from the government, development partners, the private sector, academia, and civil society. A **Development Partners Group** is also formed and active, mandated to provide policy guidance to align the UNAP with international commitments and to help with the mobilisation of external resources. The Group is supported by the SUN Nutrition Donor Coordination Group, currently chaired by USAID, and by the United Nations Technical Working Group on Nutrition.

At a sectoral level, the **Sectoral Nutrition Coordination Committees** and **Sectoral Nutrition Focal Points** were established and are charged with the responsibility to mainstream the provisions of UNAP into sectoral planning and policy-making, as well as to support the process of implementing and monitoring sector-based nutrition interventions. In two ministries - health and agriculture - the structure is supported by dedicated nutrition divisions, both led by Assistant Commissioners. Both divisions are staffed by senior specialists, four in agriculture and four in health. In the Ministry of Local Government and Development, the Department for Community Development is the focal unit for nutrition and its Principal Officer has been assigned the role of Nutrition Focal Point. The Department is charged with the welfare and development of vulnerable groups and has established

technical collaboration with the nutrition departments in the Ministry of Health (MoH) and the MAAIF. The opinions of informants were that the ministries' nutrition units had insufficient staff and that the assignment of responsibilities should be adjusted to focus on strategic functions such as M&E, capacity-building and knowledge management.

**Figure 4. A model of the institutional framework for policy coordination**

Source: A Guide to Policy Development and Management. 2013. OPM Uganda



Informants indicated that to improve coordination, sectoral developments are shared through periodic meetings and reports. Ministries and their focal departments within them are at different stages of engagement with the multi-sectoral approach, and are making progress at different rates. On a related note, some informants noted that nutrition sectoral coordination structures need to be more effectively linked with the sectors' existing governance structures, such as ministries' Technical Working Groups and Top Management Committees (an example of a sector governance structure is shown in Annex 2).

The national coordination structure is replicated at the sub-national level, with **District Nutrition Coordination Committees (DNCC)** established in 66 districts, assisted by the district Nutrition Focal Points and the non-governmental implementation partners. In some districts, this committee structure is also replicated in the sub-district administration, although to a varying degree and subject to the availability of external funding. In the view of informants, the DNCCs remain challenged on how and what to coordinate across sectors, as district authorities continue to function largely on a sectoral basis. Similarly, the informants hinted that the links between the DNCC and the existing district governance structures, including the district Technical Planning Committees, are not yet well established. However, some positive experience and evidence has been accumulated in the districts that have piloted a multi-sectoral approach to nutrition<sup>11</sup>.

<sup>11</sup> For experience from Uganda, please see the project Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) website at <https://www.spring-nutrition.org/countries/uganda>

In addition, the national accountability framework was created during a Nutrition Forum in 2013. The participation of **civil society**, the private sector and academia in the national coordination mechanism for nutrition was ensured, with the Uganda Civil Society Coalition for Scaling up Nutrition (UCSC SUN) and Uganda Action for Nutrition Society (UGAN) now actively engaged. The coordination provided by the UNAP Secretariat has also improved interaction with **development partners**, although some informants felt that donors' efforts are somehow dispersed given their individual relationships with ministries and their different levels of negotiating power and influence on ministries' internal decision-making processes. Improved coordination of development partners for nutrition will need to focus on a more effective engagement with sectoral and district nutrition coordination committees.

## 3.2. Coordination of policy formulation process

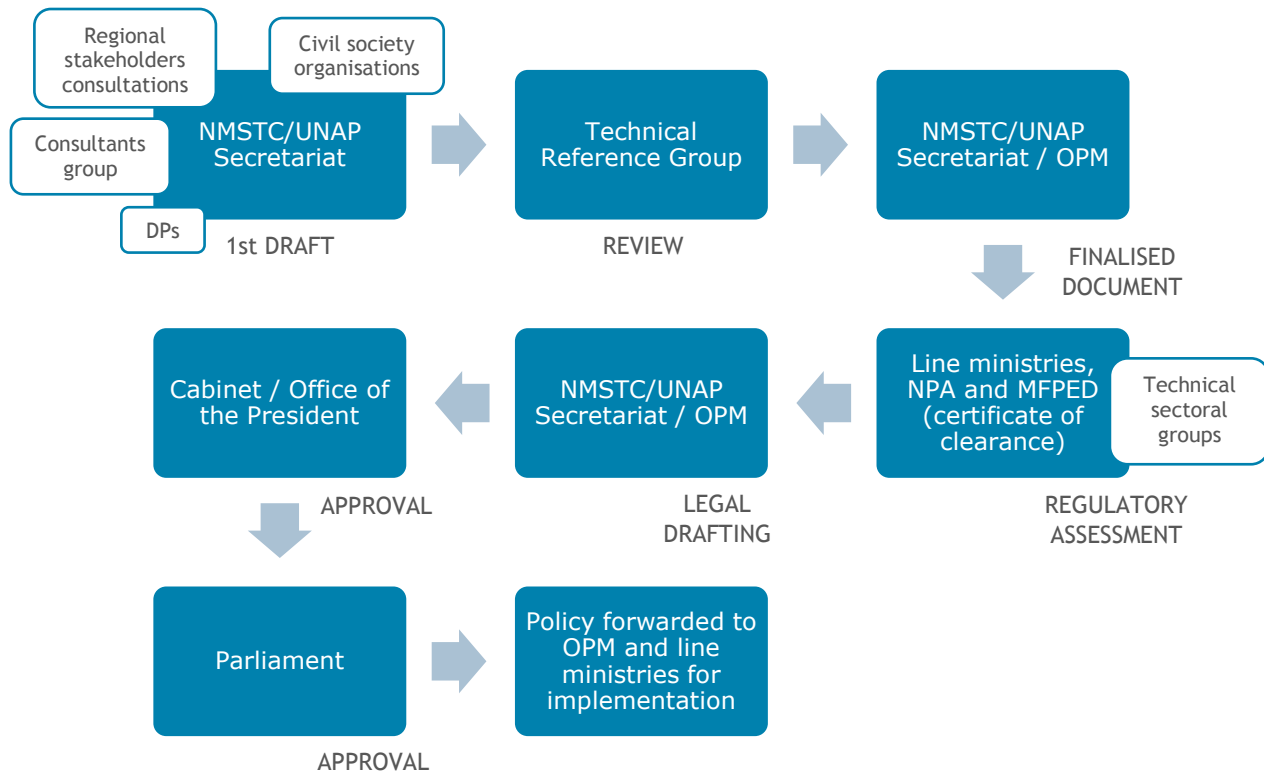
In the case of the recently drafted National Nutrition Policy, Strategy and Investment Plan, the UNAP Secretariat initiated the process as early as May 2015 and played a key role in mobilising sectors. To facilitate the process, a group of public sector experts was recruited through a private firm contracted through UNICEF and the office of WFP/REACH, with the intention to deliver a final draft package of documents by the end of 2015. A multi-sectoral participatory approach was applied, involving national and regional consultations with key stakeholders. The process was initiated through a situation analysis carried out in consultation with national sectoral focal points and technicians who were implementing nutrition-related interventions. Discussions at a national level were conducted under six specific themes including nutrition vulnerabilities, nutrition strategies and implementing arrangements. The details of issues emerging for each theme were summarised in an inception paper. As part of the process, the review of existing national and sectoral policies was conducted, although informants suggested it was more nominal than substantive.

In the next phase of the process, five regional consultations were held, which attracted district leaders and service providers at all levels, plus academics, civil society groups, cultural leaders, and private sector representatives involved in food production and processing. The workshops examined regional nutrition issues, the status of nutrition planning and the prioritisation of interventions. A total of 10 regional workshops, two in each region, were held, and emerging themes were reported to the UNAP Secretariat. An extra consultation was held with civil society groups such as UCSC SUN, UGAN and cultural leaders from 18 regional entities.

International development partners contributed resources to these participatory processes and provided technical inputs to the initial phase of the consultations. A report on the process was submitted to UNAP Secretariat. The consolidated analysis and text of the NNP inception paper package was assembled by a group of consultants under the guidance of the UNAP Secretariat and forwarded for review to the national Technical Reference Group, constituted from technical experts and international partners. The draft has also been circulated to the nutrition focal points in the non-sectoral ministries. Figure 5 shows the stages in the process to formulate the NNP.

The prevailing perception among informants is that the process was highly participatory. Nevertheless, the consultation process is perceived as rather lengthy and some policy documents are not yet finalised: both the national Nutrition M&E Framework and the National Nutrition Policy have been under development since 2015. It was also perceived that the latter does not describe some critical issues, such as a detailed accountability framework and the role of food security. The comments of reviewers were provided to the UNAP Secretariat and could be incorporated during the technical review stage.



**Figure 5. A model of the NNP formulation process**

Informants considered that while the OPM/UNAP Secretariat is responsible for the coordination of national policy implementation and monitoring, currently it may not be fully equipped in terms of nutrition policy formulation. Informants indicated that the OPM needs multi-sectoral technical advice in the areas of nutrition policy analysis, research and how to manage multi-sectoral programmes and projects. The example of the Tanzania Food and Nutrition Centre was mentioned, which provides similar guidance in the United Republic of Tanzania. It is felt that much could be learned from that model.

### 3.3. Roles of sectors in nutrition policy coordination

The UNAP 2011-2016/17 was formulated as a policy document to improve the nutritional status of young children and women while also aiming to create linkages in nutrition programmes and policies with national and sectoral development policies and strategies in Uganda.

The existence of such linkages can be traced throughout sectoral policy documents reviewed as part of this analysis (Table 4). Informants mentioned that since nutrition is a relatively new cross-sectoral priority, it would be difficult to expect that the main sectoral policy packages would reflect it immediately. They also indicated that in addition to the main policy sectoral packages, one may need to look into a range of other, related sectoral instruments, such as thematic policies and action plans, programmes, projects, and guidelines, many of which contain nutrition-related actions. Some of the sectoral-based policies may also reveal duplications: informants in the health sector noted that the renewed Anaemia Policy and Investment Plan and the revised Reproductive Maternal Child and Adolescent Nutrition Roadmap (both at a draft stage) include similar interventions, and it is not clear to what degree they are complementary. This needs cross-policy analysis and a mechanism to harmonise and resolve duplications.

For reference, we conducted a quick mapping of the nutrition-related policy documents in the health sector. The choice of the sector was dictated by the relatively easy availability of the documents, mostly online. The mapping process yielded a total of 40 documents (Annex 3) and

potentially more. Given that significant resources are allocated to the implementation of each, and that many may contribute to the sector's role in nutrition, an in-depth analysis of their alignment in terms of objectives and interventions could produce valuable insights and recommendations to streamline health sectoral policies for nutrition. Informants indicated that such an analysis is conducted as part of situation analysis stage in the policy development but needs improvement.

Some informants pointed out that each sectors' contributions to the UNAP are partially limited by the nature of their sectoral goals and existing delivery platforms. In respect to the former, an example was given of the health sector's priority to reduce mother and child mortality, in light of which the 2016 renewal of the RMNCH Sharpened Plan took place. To prioritise the interventions, a computer-based model called LiST, the Lives Saved Tool, was used to estimate the impact of scaling-up health and nutrition interventions to prevent the deaths of children and mothers. It was found that interventions that focused on the period around child birth and that prevent infectious diseases yielded the greatest potential reductions in mortality. The calculation of the impact of nutrition interventions, however, resulted in a mathematically modest impact on mortality. Based on this evidence, nutrition interventions have not been strongly prioritised in the Sharpened Plan. Informants expressed hopes that a more nutrition-sensitive prioritisation tool for the health sector might be designed internationally and applied in Uganda.

In relation to sectors' service delivery channels, a respondent from the agriculture sector indicated that as much as the sectors' aspirations under the UNAP are exemplary, they are constrained by the limited platform for delivery. The recent reforms of the agriculture sector brought in the spine extension officers to the sub-county level, but they need training on nutrition education. When the UNAP was formulated, a limited assessment of delivery platforms and capacity was carried out, so the aspirations of the UNAP may exceed the capacity that exists to deliver the Plan.

These two examples reflect the limitations faced by sectors in setting their policy roles for nutrition. Informants felt that these issues could be addressed and important evidence obtained to assist sectoral prioritisation of nutrition to scale up interventions.

### 3.4. Policy review process

As the period of the UNAP is soon to expire, some informants suggested that a review of its implementation will be useful. It was noted that some localised reviews have been conducted in districts that piloted the multi-sectoral approach to nutrition. Additionally, a budget and progress tracking review was conducted between 2014 and 2016 with support from SPRING/USAID<sup>12</sup>. Maps of activities and partners were collated at the mid-term review of UNAP and, although they used different approaches, the information could be interpreted and used for analysis. There are indications that other reviews have been carried out by civil society groups and could contain valuable supplementary information and evidence. In addition, the annual progress reports of the sectors, plus the country integrated SUN annual country reports<sup>13</sup> could be included in the list of resources for such a review. Synthesising and analysing information from these various sources could offer valuable information on the lessons learned and assist with the identifying gaps in implementation and programmes within sectors and nationally. With the forthcoming report on the Uganda Demography and Health Survey (UDHS) 2016, informants considered the moment to review the UNAP as most favourable.

<sup>12</sup> For details, please see <https://www.spring-nutrition.org/publications/briefs/factors-affecting-nutrition-around-uganda-district-and-subregional-snapshots>

<sup>13</sup> At <http://scalingupnutrition.org/sun-countries/uganda/>



## 4. NUTRITION POLICY IMPLEMENTATION

### 4.1. Sectors' accountability mechanisms

In Uganda, the policy objectives of sectors are implemented through a sector-wide approach consisting of four key elements by which sectors are held accountable:

1. Sector investment plans, to capture sectoral expenditure;
2. Sector technical working groups that engage all important stakeholders;
3. A joint annual review and performance report;
4. A performance measurement system monitoring a sector's strategic 'core' indicators.

At the national level, a Joint Assistance Framework (JAF) is put in place to ensure that the government keeps its commitments to finance critical sectors, including health, water and education, and is focused on monitoring results for the current NDP (33). The JAF provides a shared set of actions and targets agreed upon jointly and annually by the Government with its Development Partners. The JAF also serves as the overarching framework for various multi-sectoral plans, including the UNAP.

The major mechanisms of sectoral and national accountability are listed in Table 6 with the key information products they deliver. Implementation progress is judged at the mid-point of the financial year and overall performance at the end, and they are reported by the OPM in the Government Annual Performance Report. Reports of joint assessment missions and annual sector performance reports are the two accountability mechanisms mentioned by most informants. The process is coordinated by each sector's planning department, by issuing reporting guidelines and by compiling departmental inputs. The reports are mainly focused on service delivery and do not necessarily analyse cross-cutting issues, so could be improved by means of assistance to planning and technical departments.

**Table 6. Major mechanisms for accountability of government**  
Source: Guide to Policy Development and Management (2009)

Major mechanisms	Key outputs and reports
Monitoring - use of the OBT	OBT / budget monitoring reports produced by MoFPED
Monitoring - multi-sector performance data analysis	Government Annual Performance Report (GAPR) and half-year report produced by OPM
Monitoring - progress against the National Development Plan (NDP)	National Development Report produced annual by NPA
Monitoring - Joint Assessment Framework (JAF)	JAF reports
Monitoring and reviews - annual joint sector reviews	Annual sector performance reports
Monitoring - local government field visits	Selection of reports produced by many sector and cross-government MDAs
Monitoring - barazas (public meetings)	Reports by the OPM on the views of citizens on service delivery
Review - mid-term reviews, normally funded by development partners	Mid-term review reports on major programmes and projects
Evaluations - historically mainly funded by development partners, but increasing by the GoU	Evaluation reports on major policies, programmes and projects

The UNAP Secretariat is the lead agency coordinating the work on nutrition accountability in Uganda, however informants noted that since the M&E Framework plan of the UNAP has not been finalised, it is difficult to comment on developments in accountability for nutrition. Progress against sectoral nutrition-related indicators is documented in the sectoral annual reports because existing sectoral M&E five-year plans include some indicators related to UNAP. For example, in the health sector annual report 2015, there are data on the coverage of vitamin A supplements given to children under the age of five years since the indicator is on the list of ‘core’ sector performance indicators for the health sector. The same indicator is also used to rank districts’ performance in the Uganda District Health League Table, which is updated annually.

Informants shared a few more examples in this respect, such as the preparation by the MAAIF of the Annual Trends and Outlook Report 2016, which focused on nutrition, and the recent introduction by the MoH of a dedicated Nutrition Monitoring Report. A respondent from the health sector noted that nutrition featured strongly in the 2016 health mid-year Joint Mission Review, but further work is needed to incorporate it into the final joint sector report.

Sectoral information on progress for nutrition actions under the UNAP is reported periodically at the Secretariat meetings, although informants felt that the reporting schedule and content could be better synchronised with sectors’ accountability mechanisms (Table 6). Development partners indicated that meetings are regularly held to report on the results of projects and could be improved by including more structured information on sectors’ progress towards UNAP objectives. Sectoral informants held similar views and felt that by improving accountability for nutrition for sectors through the existing sectoral mechanisms as well as through the ‘routine’ OPM reporting ‘upwards’ to the Cabinet and Parliament, a stronger visibility for nutrition could be ensured, resulting in increased financial allocations and the prioritisation of nutrition in sectoral policy processes.

## 4.2. Policy implementation

The UNAP includes a range of sector-specific nutrition intervention areas, intended for implementation by eight ministries of the Government of Uganda as well as by governmental agencies, such as Uganda Bureau of Standards, sub-national governments, the private sector, civil society organisations, community groups, academia and the mass media. As a result of facilitation by the OPM, more ministries are now engaged in the UNAP, such as the Ministry of Water and Environment, and the inclusion of a wider range of implementing partners is viewed positively. However, most informants feel that multi-sectoral implementation on a large scale has not yet started. In the words of one Informant: “*nutrition has the action plan, now it needs action*”.

The informants identified government and non-government projects and activities which have the potential for scale-up:

- The Uganda Multi-sectoral Food and Nutrition Project was launched in February 2015 under the auspices of the MAAIF with financial support of USD27.68 million from the Government of Uganda and the Global Agriculture and Food Security Programme (GAFSP). A technical coordination unit has been established in the MAAIF. The project aims to strengthen the link between the agriculture, nutrition, health and education sectors, and to use schools and community gardens as means of food and nutrition education and to generate skills, while ensuring complementary health, education and agriculture services at community level. It targets 15 districts.
- In the agriculture sector, a package of training materials was prepared for use by extension service officers. This includes a Food and Nutrition Handbook and Guidelines on Nutrition in Agriculture Enterprise Mixes and a book of food-based recipes for complementary feeding of children. Training of extension workers was conducted in selected districts and the packages will be utilised in 15 districts of the GAFSP Project.

- In the health sector, integrated and simplified health booklets and flip charts were developed for village health teams and will be scaled-up through the USD150 million GoU/World Bank Reproductive Maternal Child and Adolescent Health Project to reach 66 districts. It will directly support village health teams to promote community-based health services, including services to address nutrition in general, and stunting in particular. It will target districts with low funding and human resource capacity and a high disease burden and will work toward complementarity of services, including those provided through the GAFSP-funded project. In addition, the Nutrition Assessment Counselling and Support (NACS) Programme is consistently engaging health care providers in facilities with a package of nutrition and community support services for people living with HIV/AIDS.
- In the social protection sector, the MoGLSD has prepared an Integrated Community Mobilisation Package, a guide and a flip chart on food and nutrition security and has orientated 134 community development officers. A national mapping of community-based groups was conducted in 2015 to identify potential channels to mobilise communities.
- The private sector is engaged with the Food Fortification Project and the fortification of foods, such as edible oil, is currently mandated in the country.
- Informants mentioned a range of projects including Community Connector and SPRING, both of which support multi-sectoral nutrition actions through agriculture and community participation, focused in 15 districts and equipped with locally developed modules for planning, training, supervising and capacity-building.
- A multi-sectoral School Feeding Policy is being finalised which will address: school meals; micronutrient supplements and deworming treatments; a productive school environment; water, sanitation and hygiene interventions; and education and communication for pupils and communities. The MoH Technical Working Group is leading the work.

A mapping of activities and partners was conducted with support from the REACH initiative and the World Health Organization and the information assisted the DNCCs selected to develop annual nutrition plans and insert nutrition planning into existing district development plans. The Mapping Tool adapted for Uganda and tested in districts provides important evidence on the implementation of programmes and could become a useful evidence-based instrument for district planning for nutrition.

While stakeholders are enthusiastic about these projects, concerns were expressed over the time that has lapsed between endorsing the UNAP in 2011 and the projects' launch. Informants considered that the time-frame of policy instruments such as UNAP is too short to allow for the actual alignment of multi-sectoral implementation efforts through sectoral or multi-sectoral programmes.

Sector-based implementation tracking is prioritised by the UNAP Secretariat. Dedicated technical assistance to support sector-based tracking of implementation will be shortly available to the Secretariat in the OPM in the form of a medium-term M&E consultant. The Nutrition Division of the MoH has also secured an M&E consultant to be placed in their MoH Resource Centre to track nutrition implementation information and produce periodic updates in the form of Nutrition Bulletins to increase the visibility of nutrition actions and to advocate for resources.

The sectoral policies, strategies and plans provide a framework for implementing programmes and projects. A wide range of projects and programmes and other actions are being implemented in Uganda, many of which might not be reported at a national level or captured through sectors' information systems, so multi-sectoral tracking of actions and results is important and should rely on the existing and improved sectoral implementation monitoring systems. An information platform for nutrition could assist with this process by bringing together in one place all the information available.

One of the major constraints to implementation, in the view of informants, is the lack of sectoral funding for nutrition. While a recent increase in funding for agriculture was achieved, the main share is devoted to maximising crop production with a modest investment in non-productive activities, such as extension-based nutrition education programmes. In the health sector, the National Health Accounts 2013/14 report noted an average 3% allocation of funds to nutrition compared with 31% of funds allocated to HIV/AIDS prevention and an actual decrease in funding for nutrition, from 3.98% in 2012/13 to 3.01% 2013/14 (34). Another limitation is the small size and lack of synergy between the various sectoral delivery platforms. These constraints will be addressed through the two multi-sectoral projects in the health and agriculture sectors, financed by the World Bank and the GAFSP.

## Discussion

The findings of this review provide valuable insight into the process of policy-making for nutrition and the role of evidence in shaping decision-making processes in Uganda. The information from reviewing documents and from interviews carried out during the review were collated under four domains of interest: national policy frameworks and nutrition policy formulation, use of evidence in nutrition policy processes, nutrition governance, and nutrition policy implementation. Several themes emerged under each domain and are summarised below in Tables 7a to 7d.

In terms of the **national policy framework for nutrition**, the Government of Uganda's commitments to national and international nutrition initiatives have facilitated the pursuance of nutrition policies and programmes, and a comprehensive multi-sectoral policy framework has been enacted through the Uganda Nutrition Action Plan 2011-2016/17. As a result, nutrition needs are reflected in the National Development Plan II 2015/16-2019/20 and through policies in agriculture, health and social protection. For the majority of the sectoral policies, although nutrition is included, it is not specifically afforded high priority. While nutrition is intended to be prioritised by a number of sectors, sectoral representatives felt that it does not contribute directly to individual sectoral goals and, therefore, it is not reflected as a 'core' or outcome performance indicator of sectors. This poses challenges to the prioritisation of nutrition within sectors and could be resolved by further aligning the sectoral policy frameworks for nutrition, using the nutrition sensitivity criteria, tools and methods of analysis.

**The use of evidence at nutrition policy making** in Uganda is characterised by the availability of a large body of information, but it may not necessarily respond to the information needs of the decision makers. While the UNAP 2011-2016/17 identifies the broad roles that various sectors can play, they need to be developed in more detail by each sector, integrated into routine planning, budgeting and implementation procedures, and implemented down to community level. What seems most missing are some information platforms to monitor those processes and link information to decision-makers within the programmes, sectors, OPM and beyond. Uganda has many impressive pieces in place, including strong administrative procedures in general, and those could come together powerfully for nutrition. A priority is to develop an information platform to monitor and guide the next steps in the country, most of which relate to implementation rather than nutrition policy formulation or coordination *per se*.

**Nutrition governance** is ensured by means of coordination structures mandated at national, sectoral and sub-national levels to advocate for the prioritisation and funding of the nutrition agenda and to ensure the accountability of sectors. One of the critical factors is the 'horizontal coordination' of different government sectors aimed at delivering a coherent effort to fight malnutrition in the country. The coordination challenge is linked to the less-clear sectoral accountability for nutrition and the lack of specific indicators to hold sectors to account for nutritional outcomes, which could help secure their active engagement in improving nutrition. Accountability for nutrition can be improved by setting clear sectoral goals and targets for nutrition and introducing a reporting and monitoring framework and mechanism aligned with the existing sectoral accountability processes. Given the complex nature of multi-sectoral planning for nutrition, more technical capacity and support for policy formulation and analysis is needed at central level, both in the OPM/UNAP Secretariat and within sectoral ministerial bodies.

**At the level of policy implementation**, while various activities are undertaken at national and sub-national levels, there are limited resources to deliver programmes on a national scale. It is important to gather evidence on the implementation of programmes to understand what models offer the best impact on nutritional outcomes, so that Uganda can advocate and invest in cost-effective programmes to improve nutrition. Furthermore, Uganda has a robust administrative procedure for developing policies, planning, budgeting and implementation, which offers a

tremendous asset to multi-sectoral implementation efforts, such as for nutrition. A thoughtful, robust information platform is desirable, aimed at identifying the implementation bottlenecks, linking this information to the relevant decision-makers and structures at various levels and then facilitating solutions to the bottlenecks.

Ensuring that all the key actions under the renewed UNAP can be implemented necessitates further integration of sectoral processes to achieve what is called ‘policy coherence’ for nutrition, so that nutrition objectives are addressed in a coordinated and consistent manner throughout both national and sectoral policy-making and accountability processes. Given the critical role of the OPM Secretariat in overseeing and supporting the implementation of UNAP, there is need to strengthen its capacity to comprehensively guide and monitor implementation.

**Table 7a. Issues that emerged from the review: the national policy framework for nutrition in Uganda**

Domain	Category	Insight
National policy framework for nutrition	Importance of nutrition	Undernutrition is recognised as a development problem and is placed high on the national agenda. National policies are perceived to adequately reflect nutrition needs and the provisions of UNAP.
	Sectoral goals	Sectoral goals are clearly outlined and aligned to Uganda Vision 2040 and NDP II objectives. However, nutrition does not contribute directly to sectors’ individual goals. It is a daunting challenge to follow-up policy statements with actions implemented for nutrition.
	Alignment of sectoral policies to Uganda NDP II	Well-established mechanisms exist to assess the alignment of sectoral policies to the NDP II (e.g. Certificates of Compliance issued by the NPA), yet nutrition has low compliance due to low prioritisation within sectors. Dedicated tools, such as checklists, are needed to assess alignment for nutrition within national and sectoral documents.
	Policy formulation process	The policy formulation process is relatively well-defined and followed, yet a Sector Situation Analysis is often a ‘light-touch’ diagnosis only and reviews of complementarity between existing policies and plans tend to be less substantive. Technicians in the ministries need guidance and tools to assess related documents on the policy coherence for nutrition.
		A package of guidelines exists but they are relatively new, disseminated only to selected districts, and do not touch upon issues of policy implementation and monitoring.
	UNAP linkages and influence over sectoral programmes	Nutrition is linked to existing sectoral programmes and sub-programmes. It needs to be clarified whether the linkage is conceptual or substantive. Assessments of the nutrition “sensitivity” of ministries’ existing programmes could be useful.
	Nutrition “sensitivity” of sectoral policies (verified against selected criteria)	The NDP II and three sectoral policy packages, in agriculture, health and social development, are aligned to the UNAP in certain dimensions: nutrition is mentioned in the situation analysis; nutrition objectives, indicators and targets are included in health documents and the NIECD action plan; and interventions from the five of UNAP’s Strategic Objectives are included, to a varying degree.

**Table 7b. Issues that emerged from the review: the use of evidence for developing policies for nutrition**

Domain	Category	Insight
Use of evidence for policy processes	Linkages to decision-making process	Evidence is important for policy formulation because it can guide the decision-making process and assist mobilisation of resources.
		Analysis of the multiple factors contributing to poor nutrition, data on implementation at community level and sectors' performance for nutrition are the most valuable type of evidence for decision-making.
		Data production is not fully linked to the decision-making process as there are gaps between the type of information available and needed (see Table 5). Clarifying the nutrition information needs of decision-makers could be an useful starting point.
		Existing sectoral MIS provide a wealth of data but is limited for nutrition; the quality and capacity for data analysis varies; it is not linked to community data.
		There are no detailed plans, guidance and tools for integrating evidence into various stages of policy process, both at the local and national levels.
		The Integrated Financial MIS and Output Budget Tracking provides data on sectoral budgeting but nutrition-related allocations are not well captured, and could be piloted, using experience from gender and equity budget tracking.
		The Government is moving toward integrated systems: sectoral programme based monitoring (inclusive of input, output and budget data) and the Prime Minister's IMIS. These provide new opportunities to integrate information for nutrition.
	Role of research	Various data and information are used at different stages of the policy process and could be integrated through a nutrition information platform, for regular sector-based analysis and for monitoring multi-sectoral efforts for nutrition.
		Research is important: on the determinants of persistent undernutrition in regions with the highest prevalence, and operations research on implementing nutrition interventions in communities.
		Current sectoral strategic research documents do not appear to prioritise mother and child nutrition.
	Role of evaluations	Sectors need support to effectively mainstream external research (by non-state research actors) into sectors' operations via an institutional mechanism to bring stakeholders together and prioritise and coordinate research agenda on nutrition.
		The UNAP M&E Framework and Plan is under development and will guide the conduct of M&E activities, including evaluations.
	Role of technical assistance (TA)	Ministries' Policy and Planning Departments are responsible for coordinating monitoring activities, including evaluations, but are under-staffed and find it difficult to engage with multiple policy and planning processes.
		TA is viewed positively as it helps cover critical capacity gaps (M&E, strategic communications and planning) and various TA specialists are engaged with UNAP's operationalisation.
	Use of evidence in nutrition policy documents reviewed	UNAP capacity-building plans to be formulated at all levels, including, on TA provision. A Technical Capacity Assessment was conducted and Capacity Development Plans were recommended for districts but not followed-up.
		The use of evidence varies but is generally limited. There is extensive use of governmental statistics but only two documents mentioned evidence in the sense of synthesis (systematic reviews, guidelines, policy or evidence briefs). None of the sectoral documents reviewed mention evaluations in the sense of analysing the effectiveness of a programme.



**Table 7c. Issues that emerged from the review: nutrition governance**

Domain	Category	Insight
Nutrition governance	Governance structure and function	The UNAP Secretariat at the OPM has engaged all relevant ministries and sectors, civil society and development partners.
		Ministries and focal departments are at different stages of multi-sectoral management for nutrition. Nutrition sectoral coordination structures need to be more effectively linked to sectors' existing governance structures.
		District Nutrition Coordination Committees are established in 66 districts, assisted by district Nutrition Focal Points, but remain challenged and not well integrated into existing district planning and budgeting mechanisms.
	Coordination for policy formulation	The formulation of new national nutrition policy is highly participatory but the consultation processes are perceived as lengthy and some policy documents are in a prolonged drafting stage.
		The OPM/UNAP Secretariat coordinates national nutrition policy implementation and monitoring but may not be fully equipped for nutrition policy formulation and in need of technical advice.
	Sectors' role	Sectors' contributions to the UNAP are partially limited by the nature of sectoral goals and existing delivery platforms.
		Sectors' accountability mechanisms are well established.
		Accountability for nutrition can be improved by setting clear sectoral goals and targets for nutrition and introducing a reporting and monitoring mechanism aligned with sectoral accountability processes.

**Table 7d. Issues that emerged from the review: nutrition policy implementation**

Domain	Category	Insight
Nutrition policy implementation	UNAP role	UNAP has started a range of nutrition-focused projects and interventions, including recent multi-sectoral projects launched in the agriculture and health sectors.
	Constraints to implementation	There is time lag between the endorsement of UNAP in 2011 and the launch of nutrition projects. The time-frame of policy instruments, such as UNAP, is viewed as too short to allow for actual alignment of multi-sectoral implementation though sectoral or multi-sectoral programmes.
		Multi-sectoral implementation on a large scale has not yet started: <i>"nutrition has the action plan, now it needs action"</i> . One of the major constraints is lack of sectoral funding for nutrition.
	Role of evidence	Many project-based nutrition activities are not reported at national level or captured through sectors' information systems. Multi-sectoral tracking of actions and results is important. An information platform for nutrition could assist with this process by bringing together all implementation information available and linking it to the decision-making process.



## References

1. Global Scaling Up Nutrition (SUN) Movement Strategy and Roadmap (2016-2020)
2. Benson, T. (2008). Improving nutrition as a development priority. Addressing undernutrition in national policy processes in Sub-Saharan Africa. Research Report 156. Washington, DC: International Food Policy Research Institute. URL: <http://www.ifpri.org/publication/improving-nutrition-development-priority>
3. SUN (Scaling up Nutrition). URL: <http://scalingupnutrition.org/share-learn/planning-and-implementation/aligning-and-costing-nutrition-actions/>
4. Maximising the Quality of Scaling Up Nutrition Programmes Framework (MQSUN) MQSUN Guidance Note 1: Multi-Sectoral Planning for Nutrition. <http://docs.scalingupnutrition.org/wp-content/uploads/2016/04/MQSUN-Multi-Sectoral-Planning-Guidance-Note.pdf>
5. Scaling Up Nutrition (SUN) Movement Strategy and Roadmap (2016-2020). Geneva: SUN Global Secretariat. [http://docs.scalingupnutrition.org/wp-content/uploads/2016/09/SR\\_20160901\\_ENG\\_web\\_pages.pdf](http://docs.scalingupnutrition.org/wp-content/uploads/2016/09/SR_20160901_ENG_web_pages.pdf)
6. Shaxson, L. Evidence and the policy making process. Presentation at CFHSS Congress 2006, York University, Canada. <https://www.odi.org/sites/odi.org.uk/files/odi-assets/events-documents/2906.pdf>
7. NIPN - National Information Platforms for Nutrition. URL: <http://www.nipn-nutrition-platforms.org/>
8. The Uganda Poverty Assessment Report 2016: Farms, cities and good fortune : assessing poverty reduction in Uganda from 2006 to 2013. World Bank. URL: <http://pubdocs.worldbank.org/en/381951474255092375/pdf/Uganda-Poverty-Assessment-Report-2016.pdf> accessed July 12017
9. Ministry of Gender, Labour and Social Development and UNICEF Uganda (2015). *Situation Analysis of Children in Uganda*. Kampala: Ministry of Gender, Labour and Social Development and UNICEF Uganda. [https://www.unicef.org/uganda/UNICEF\\_SitAn\\_7\\_2015\\_\(Full\\_report\).pdf](https://www.unicef.org/uganda/UNICEF_SitAn_7_2015_(Full_report).pdf)
10. Republic of Uganda (2015). *Millennium Development Goals Report Uganda 2015. Special Theme: Results, Reflections and the Way Forward*. Kampala: Government of Uganda and UNDP. [http://www.ug.undp.org/content/dam/uganda/docs/UNDPUg2015\\_UGANDA%20MDG%202015%20FINAL%20REPORT.pdf?download](http://www.ug.undp.org/content/dam/uganda/docs/UNDPUg2015_UGANDA%20MDG%202015%20FINAL%20REPORT.pdf?download)
11. Uganda Demographic and Health Survey. Key Indicators Report. Uganda Bureau of Statistics Kampala, Uganda. March 2017
12. Global Hunger Index. URL: <http://ghi.ifpri.org/countries/UGA/>
13. The Hunger and Nutrition Commitment Index (HANCI 2012 and 2014). Measuring the Political Commitment to Reduce Hunger and Undernutrition in Developing Countries. URL: <https://www.ids.ac.uk>
14. Uganda Bureau of Statistics. Strategic plan 2013/14-2017/18. Theme: enhancing data quality and use.
15. Rukundo P et al. Institutions, legislations, policies, and programmes supporting the right to adequate food in Uganda. 2008
16. Bachou H, Labadarios D. The nutrition situation in Uganda. *Nutrition*. 2002 Apr;18(4):356-8.
17. United Nations Standing Committee on Nutrition. (No date). *Enhancing Coherence between Trade Policy and Nutrition Action*. Geneva: UNSCN. URL: [https://www.unscn.org/files/ICN2\\_TPM/UNSCN\\_Discussion\\_Paper\\_1\\_Trade\\_and\\_Nutrition\\_2015rev\\_en.pdf](https://www.unscn.org/files/ICN2_TPM/UNSCN_Discussion_Paper_1_Trade_and_Nutrition_2015rev_en.pdf)
18. The Republic of Uganda. Comprehensive National Development Planning Framework (CNDPF) 2009. URL: <https://www.multisectoralnutritiontoolkit.co.ug/index.php/plan-and-budget/title-comprehensive-national-development-planning-framework-cndpf/>
19. Mucha, N. Implementing Nutrition-Sensitive Development: Reaching Consensus. 2012. URL: [http://www.securenutrition.org/sites/default/files/resources/attachment/english/Bread\\_nutrition-sensitive-interventions.pdf](http://www.securenutrition.org/sites/default/files/resources/attachment/english/Bread_nutrition-sensitive-interventions.pdf). Accessed July 2, 2017.
20. Compendium of Actions for Nutrition: <http://www.reachpartnership.org/documents/312104/fa572e1e-b8a9-48bf-89c0-cd3afb203c60>
21. Shekar, M., Lee, Y-K. (2006). *Mainstreaming Nutrition into Poverty Reduction Strategy Papers: What Does It Take? A Review of the Early Experience*. Washington, DC: World Bank. URL: <http://documents.worldbank.org/curated/en/578351468324276905/pdf/418740Nutritio10discussion01PUBLIC1.pdf>
22. Kiregyera, B. Assessment of National Agricultural Statistical Systems and their Capacity to Meet PRSP Requirements. Paper presented at Seminar on a New Partnership to Strengthen Agricultural & Rural Statistics in Africa for Poverty Reduction and Food Security, September 2002 Paris, France.

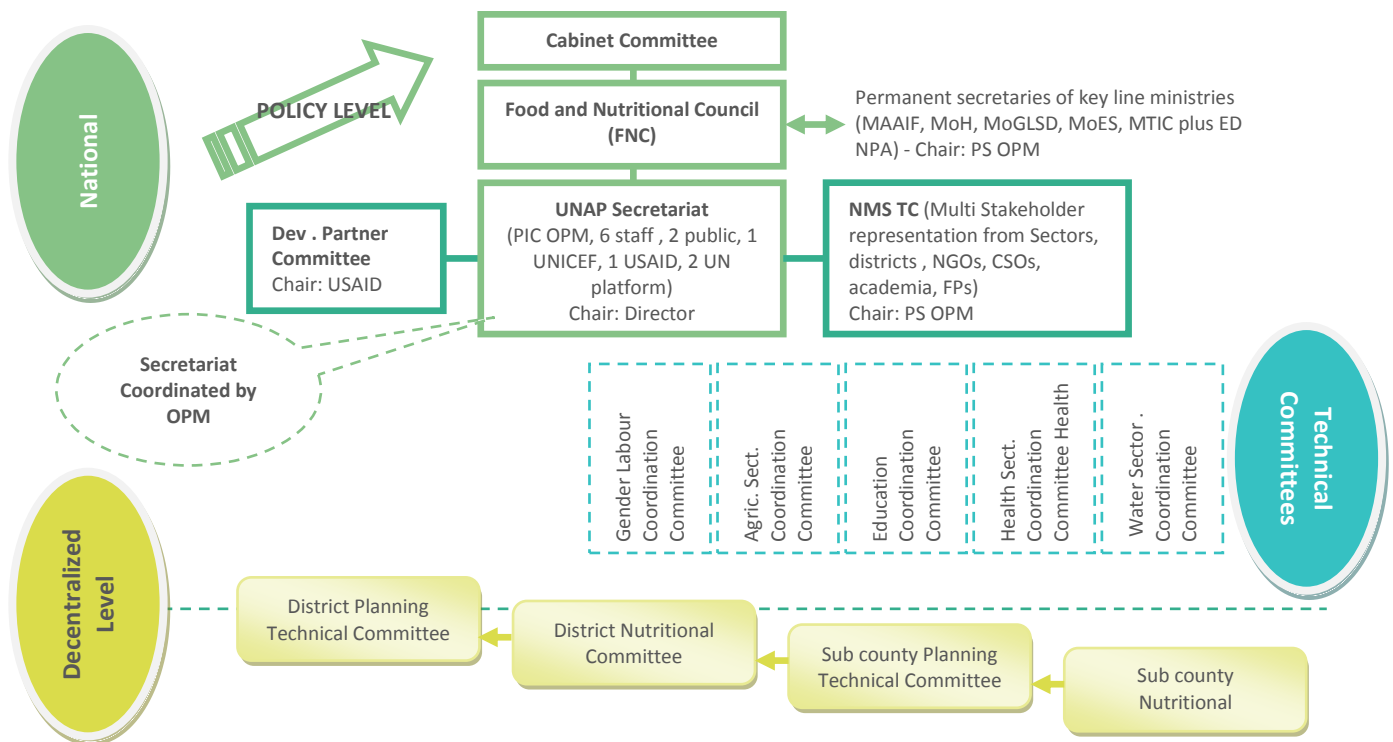
23. Nabyonga-Orem, J, Mijumbi, R. Evidence for informing health policy development in lowincome countries (LICs): perspectives of policy actors in Uganda. *Int J Health Policy Manag* 2015; 4: 285-293
24. Tuffrey, V. (2016). Nutrition surveillance systems: their use and value. London: Save the Children and Transform Nutrition. URL: [https://www.savethechildren.org.uk/sites/default/files/images/Nutrition\\_Surveillance\\_Systems.pdf](https://www.savethechildren.org.uk/sites/default/files/images/Nutrition_Surveillance_Systems.pdf)
25. URL: <http://ovcmis.mglsd.go.ug/home.php?linkvar=About%20OVCMS2&action=Home>
26. Swingler G, et al. A systematic review of existing national priorities for child health research in sub-Saharan Africa. *Health Research Policy and Systems*. 2005
27. <http://naro.go.ug/journal/ug/mmenu/2/Guide-to-Authors.html>
28. <https://rgt.mak.ac.ug/sites/default/files/Research-Proposal-Thesis-Format-Ver-4-April-2011.pdf>
29. Renewed Efforts Against Child Hunger and undernutrition (REACH) Annual report 2015. URL: <http://www.reachpartnership.org/documents/312104/6721827f-7306-4b31-b389-c1bcfcfc7d2b>
30. Ministry of health of Uganda. Accelerating Nutrition Interventions in Uganda: Report of the Baseline Assessment of Masindi, Kibaale, Hoima, Iganga, Luuka, and Namutumba Districts. 2014. URL: <http://apps.who.int/iris/bitstream/10665/252535/1/WHO-NMH-NHD-16.4-eng.pdf?ua=1>
31. Semakula, R.; Hodge, J.; & Lewis, A (2015) Country Report - UGANDA. Leveraging Agriculture for Nutrition in East Africa (LANEA). FAO, IFPRI.
32. Food and Agriculture Organization. Capacity assessment for improved nutrition: Case Study Uganda. Brief. 2015. URL: <http://www.fao.org/3/a-i4662e.pdf>
33. National Planning Authority (2013). *Mid-Term Review of the Uganda National Development Plan*. National Planning Authority of Uganda. Kampala: National Planning Authority. URL: <http://npa.ug/wp-content/uploads/NDPI-MTR-Results-Framework-Report.pdf>
34. Ministry of Health of Uganda. Uganda Health Accounts. Financial years 2012/13 and 2013/14. URL: [health.go.ug/download/file/fid/1334](http://health.go.ug/download/file/fid/1334)

## ANNEXES

- Annex 1. UNAP Organisational Chart
- Annex 2. Governance structure in the health sector
- Annex 3. Mapping of nutrition-related policies in the health sector
- Annex 4: Counts of nutrition terms in major policy documents
- Annex 5: Definitions of terms used in the report

## Annexe 1: Organisational structure of the Uganda Nutrition Action Plan (UNAP)

Source UNAP M&E Framework (draft).



## Annex 2. Governance structure in the health sector

Source: Guidelines For Governance And Management Structures. 2013. Ministry of Health of Uganda.

ROLES	STRUCTURES	MEMBERS
Strategic policy direction	SENIOR TOP MANAGEMENT	Minister of Health (Chair) Minister of State, PS, DGHS and Directors
	TOP MANAGEMENT COMMITTEE	Minister of Health (Chair) Minister of State, PS, DGHS, DHS P&D, DHD C&C, Commissioners and EDs of Semi-autonomous Institutions
Operational policy direction	HEALTH POLICY ADVISORY COMMITTEE	PS (Chair) HDP (Co-Chair) DGHS, DHS P&D, DHD C&C, Commissioners, Representation from HDPs, Private Sector, CSOs, Line Ministries, Referral Hospitals, DHOs & Semi-autonomous Institutions
	SENIOR MANAGEMENT COMMITTEE	DGHS (Chair) Heads of Departments, Divisions, Units and Sections, Program Managers and Technical Advisors, Registrars
	TECHNICAL WORKING GROUPS (14)	Representatives from MoH, HDP, CSOs, PHPs, Professional Associations, Semi-autonomous Institutions, Health Consumers
Technical direction	HEAD OF DEPARTMENTS	Clinical and Curative Services, Finance and Administration, Community Health, Quality Assurance, Planning and Development, Nursing, National Disease Control

## Annex 3. Mapping of nutrition-related policies in the Ministry of Health.

Source: Authors compilation

Health Sectoral Policy	Health Thematic intra-sectoral policies
<ol style="list-style-type: none"> <li>1. 2<sup>nd</sup> Health (sector) Policy 2010-2020</li> <li>2. Health research policy 2012-2020 (sets to Develop and implement a national health research plan and agenda with specific priority areas)</li> </ol>	<ol style="list-style-type: none"> <li>1. Nutrition: Anaemia Policy 2002 (and new draft)</li> <li>2. Regulations on Breast Milk Substitutes 2011</li> <li>3. Community-based platform: Community Health Workers Policy</li> <li>4. National medicines policies 2015</li> <li>5. School health policy</li> </ol>
Health Sectoral Strategy/ Programmes	Health Thematic Strategies
<ol style="list-style-type: none"> <li>1. Child and new-born Survival Strategy 2010-2015 (due for renewal)</li> <li>2. Roadmap for Reduction of Maternal and New-born Mortality 2007-2015 and 2017-2025</li> <li>3. Health sector quality improvement framework and plan 2015/16-2019/20</li> </ol>	<ol style="list-style-type: none"> <li>1. Nutrition: Nut Advocacy and Communication Strategy 2013</li> <li>2. Uganda Food Fortification Programme 2004</li> <li>3. Community-based platform: Village health teams Strategy</li> <li>4. Infectious diseases: Malaria reduction strategy; Malaria Reduction Strategic Plan 2014-2020</li> <li>5. HIV: Prevention of Maternal to Child Transmission Strategic Vision 2010-2015 (inc. breastfeeding)</li> </ol>
Sectoral Plans	Thematic plans
<ol style="list-style-type: none"> <li>1. Health Sector Strategic Plan IV 2015-2020 (one nutrition indicator (vit.A coverage) out of 11 core sector indicators)</li> <li>2. M&amp;E plan for Health Sector Strategic &amp; Investment plan 2010/11 - 2014/15 (includes 14 strategic indicators of scale-up to nutrition services)</li> <li>3. RMNCH Sharpened plan and Investment case 2013</li> <li>4. National Quality Improvement Framework and Strategic Plan 2010/11 - 2014/15 (details Quality Improvement Interventions and Indicators for breastfeeding counselling, treatment of diarrhoea, and severe malnutrition, etc.)</li> <li>5. harmonisation of research activities and a prioritised national research agenda developed by 2012)</li> <li>6. Health Information Systems Plan 2010-2015</li> </ol>	<ol style="list-style-type: none"> <li>1. Nutrition: Operational Framework for Nutrition 2009</li> <li>2. Maternal Infant and Young Child and Adolescent Nutrition (MIYCAN) Road Map (drafting stage)</li> <li>3. Anaemia Plan 2014 and Strategy (at drafting stage)</li> <li>4. Food Fortification Strategy (drafting stage)</li> <li>5. Integrated Community management of malnutrition Action Plan 2010</li> <li>6. President's Malaria Initiative: Uganda Malaria Operational Plan FY 2015</li> <li>7. Immunisation Multi Year Plan 2012-2016 (platform to deliver vitamin A supplementation, de-worming, growth monitoring)</li> <li>8. HIV investment plan and HIV elimination campaign</li> <li>9. New-born Essential Action Plan</li> </ol>
Subject guidelines	
<ol style="list-style-type: none"> <li>1. Maternal nutrition (2010)</li> <li>2. Infant and young children feeding</li> <li>3. Integrated management of acute malnutrition</li> <li>4. Integrated community case management of childhood illness</li> </ol>	<ol style="list-style-type: none"> <li>5. Routine Immunisations (includes vitamin A supplementation)</li> <li>6. The Integrated National Guidelines on Antiretroviral Therapy, Prevention of Mother to Child Transmission of HIV and Infant &amp; Young Child Feeding</li> <li>7. Village Health Team (VHT) Handbook</li> <li>8. Other, potentially unidentified</li> </ol>

## Annex 4. Counts of nutrition terms in major policy documents

Terms	Agriculture Policy (2013)	ASSP (draft, as of 06/16)	Social Protection Policy (2015)	Programme Plan of Interventions for Social Protection Strategy 2015/16-2019/20	RMNCAH Sharpened Plan (2016)	Health sector development plan 2015/16-2019/20	National Development Plan II 2015/16 - 2019/20
<i>For comparison*:</i>							
policy	100	122	57	41	36	67	225
ministry	38	26	14	38	56	23	79
government	79	86	60	71	64	54	436
<i>Nutrition-sensitive:</i>							
nutrition	15	30	3	3	35	18	61
hunger / hungry	0	2	0	0	1	4	20
diet	0	0	0	0	2	3	2
vitamin	0	0	0	0	4	6	0
food	33	132	8	23	3	10	133
stunt*	0	2	0	0	6	4	13
wast* (in nutrition context)	0	0	2	0	3	3	9
anemi* / anaemia	0	0	0	0	13	5	2
weight (under / over)	0	0	0	0	4	8	1
obese / obesity	0	0	0	0	5	3	0

Note: term count excludes titles, tables of content, abbreviation and reference lists.

\*The frequency of the terms 'policy' 'ministry' and 'government' were recorded for comparative purpose.



## Annex 5. Definitions of terms used in the report

---

**Action plan** (e.g. a national plan of action on nutrition) arises from policy, and contains detailed operational plans, budgets, goals and targets.

**Coherence** is the promotion of mutually reinforcing policy actions across government departments and agencies, thereby achieving the agreed objectives.

**Data** are any fact or figure.

**Evaluation** is an assessment, as systematic and impartial as possible, of a policy, programme or project, and its contribution to global objectives. It focuses on expected and achieved accomplishments and examines the results chain, processes, contextual factors and causality in order to understand achievements, or the lack thereof. It aims to determine the relevance, impact, effectiveness, efficiency and sustainability of the interventions and the contributions of implementing bodies (source: Operationalising National M&E Policy Guide. OPM Uganda).

**Evidence** is defined as *“information or data that supports or rejects a conclusion or anything that increases the estimate of the probability of the truthfulness of a proposition”*. Statistical evidence focuses on understanding what can be generalised; qualitative evidence focuses on understanding context. Both types of evidence are needed to inform policy-making.

**Evidence-based policy making** is an approach to policy decisions that *“aims to ensure that decision-making is well-informed by the best available evidence”*.

**Information** consists of data presented in a context so that it can be applied or used.

Information becomes **knowledge** when connections and links to other information items are analysed to facilitate critical thinking and reasoning. M&E and monitoring exercises are more useful when they provide information, not raw data, and when they support the development of knowledge.

**Indicators** are generally described as *“a parameter [a property that is measured and observed], or a value derived from parameters, which points to, provides information about, or describes the state of a phenomenon/environment/area, with significance extending beyond that directly associated with a parameter value”*.

**Policy** is a written statement of commitment (generally in broad terms) by a nation state. Action plans (see above) and policies are both instruments to accelerate nutrition actions. Nutrition policy establishes goals of improvements in nutritional conditions more specifically and for developing countries often in terms of reduction in malnutrition rates at a population level, and in terms of improved food and nutrition security.

**Policy coherence** is generally understood as the *“promotion of mutually reinforcing policy actions across government departments and agencies creating synergies towards achieving the agreed objectives of the Sustainable Development Goals (SDGs) adopted in September 2015”*.

**Review** is an assessment of performance or progress of a policy, sector, institution, programme or project, periodically or on an ad-hoc basis. Unlike evaluations, which assess the results (outcomes and impacts) of initiatives, reviews tend to emphasise operational aspects, and are therefore closely linked to the monitoring function. Reviews may be structured as periodic events at which performance of the subject matter is discussed amongst key stakeholders. (Source: Operationalizing national M&E Policy Guide. OPM Uganda).





**NiPN**

National Information  
Platforms for Nutrition

## Summary

The aim of this study was to identify and understand the factors that influence policy-making for nutrition in Uganda, and understand the sources and use of evidence to help formulate those policies. A review of inter-sectoral and sectoral policy documents related to nutrition was undertaken and interviews were conducted with national policy-makers and stakeholders working in nutrition in five ministries and agencies, plus representatives of development partners and academia. The study reveals that some robust administrative procedures for policy making, planning, budgeting and implementation are in place and provide a good basis to increase the effectiveness of the implementation of programmes to improve nutrition. It also concludes that even if a large body of information related to the nutritional status of the Ugandan population is available, it may not necessarily meet the needs for information of decision makers or be easily accessible. It emphasizes the need for more technical capacity for inter- and intra-sectoral coordination, strategic planning as well as for monitoring and evaluation.

National Information Platforms for Nutrition is an initiative of the European Commission's Directorate General for Cooperation and Development, also supported by the United Kingdom Department for International Development and the Bill & Melinda Gates Foundation.



BILL & MELINDA  
GATES foundation

## GSF-NIPN

Agropolis International  
1000 avenue Agropolis  
34394 Montpellier cedex 5  
France

[www.nipn-nutrition-platforms.org](http://www.nipn-nutrition-platforms.org)  
[gsf\\_nipn@agropolis.fr](mailto:gsf_nipn@agropolis.fr)