



SAFANSI II Annual Report

APRIL 1, 2016 – MARCH 31, 2017

THE WORLD BANK

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Abbreviations and Acronyms

AFSP	Agricultural and Food Security Project
BEES	Business, Enterprise and Employment Support for Women in South Asia (BEES Network)
BCC	Behavior Change Communication
BE	Bank executed (grant)
CCT	Conditional Cash Transfers
CDD	Community Driven Development
CEA	Cost-effectiveness analysis
CSOs	Civil Society Organizations
DC	Donor Committee
DfID	Department for International Development, United Kingdom
DFAT	Department of Foreign Affairs and Trade, Australia
EC	European Commission
FAO	Food and Agriculture Organization
FBPWN	Federation of Business and Professional Women in Nepal
FNS	Food and Nutrition Security
GAFSP	Global Agriculture and Food Security Program
GBD	Global Burden of Disease Project
GNI	Gross National Income
ICMR	Indian Council of Medical Research
IE	Impact Evaluation
IHME	Institute for Health Metrics and Evaluation
INPARD	Integrating Nutrition Promotion and Rural Development Project
ISBNPA	International Society for Behavioral Nutrition and Physical Activity
IUHPE	International Union for Health Promotion and Education
IYCF	Infant and Young Child Feeding
JEEVIKA	Bihar Rural Livelihoods Project (JEEVIKA)
JIT	Just in Time (grant)
LANSA	Leveraging Agriculture for Nutrition in South Asia
PER	Public Expenditure Review
RaP	ReAwaking Project
RRA	Rapid Results Approach
SAFANSI	South Asia Food and Nutrition Security Initiative
SAR	South Asia Region
SHD	Sunaula Hazar Din
SO	Social Observatory
SUNITA	Scaling Up Nutrition Initiative Technical Assistance
TOC	Theory of Change
TRP	Technical Review Panel
TTL	Task Team Leader
UNICEF	United Nation's Children Fund
USAID	United States Agency for International Development
VDO	Village Development Organization
WASH	Water, Sanitation and Hygiene
WHO	World Health Organization

Overview of Undernutrition in South Asia

The scale of the undernutrition problem in South Asia is exceptional. Two key indicators of child nutrition status are the stunting and wasting status of those under age five. Stunting, defined as too short for the child's age, is considered as a measure of chronic or recurrent episodes of undernutrition. Wasting, defined as too thin for the child's height, is viewed as a measure of acute undernutrition. South Asia has some of the highest stunting and wasting rates in the world (fig. 1a). Stunting rates vary from 17 percent in Sri Lanka in 2016 to 45 percent in Pakistan in 2012–13, with stunting rates above 30 percent for most countries in the region. Wasting rates vary from 6 percent in Bhutan in 2010 to 21 percent in India in 2015–16, with wasting rates above 10 percent for the majority of countries in the region. Thus, the region is estimated to be home to 62 million out of 155 million stunted children worldwide in 2016 (40 percent of the global stunting burden), and 28 million out of 52 million of wasted children worldwide (54 percent of the global wasting burden).

A key measure of nutrition status among adolescent and adult women is whether they suffer from anemia, a nutrition disorder typically caused by insufficient dietary iron. Current anemia rates for women of reproductive age vary from 26 percent in Sri Lanka to 51 percent in Pakistan (fig. 1b).

A high level of child undernutrition is viewed to come with sizeable economic costs for countries, through the loss of human capital and increased health costs.¹ Studies for low- and middle-income countries find that undernutrition has negative effects along several dimensions. Child undernutrition, measured by stunting and other indicators, is found to be associated with lower motor, cognitive, emotional, and social development, and higher rates of illness, disability, and premature death. An estimated 45 percent of global child deaths per year are attributed to stunting, wasting, and underweight status, along with other measures of undernutrition. Child undernutrition is also found to be associated with poorer socioeconomic outcomes in adolescence and adulthood, measured by, for example, education attainment, student academic achievement, employment, and labor earnings.

Progress in reducing undernutrition in the region has been mixed. For example, Bangladesh and Nepal have shown declines in stunting rates of 1.4 percentage points per year over the 2000s; India has seen a more modest decline of 1 percentage point per year; and Pakistan and Sri Lanka have experienced no decline (fig. 2a). In 2012, WHO adopted global targets for reducing child and maternal undernutrition by 2025. The targets included reducing the child stunting burden by 40 percent, reducing anemia among women of reproductive age by 50 percent, and reducing the child wasting rate to less than 5 percent. Afghanistan, Bangladesh, Bhutan, and Maldives are viewed to be on course to meeting the stunting target, while the rest are off course. All South Asian countries are viewed to off course in meeting the wasting and anemia related targets. Comparisons of Global Burden of Disease estimates between 1990 and 2010 indicate that protein-energy malnutrition and iron-deficiency anemia continue to remain among the leading causes of premature death and disability in the region.

Compared to the rest of the developing world, the levels and trends in child and maternal undernutrition in South Asia appear to be more inconsistent with or insensitive to the (1) level of economic development, (2) the rates of economic growth and poverty reduction, and (3) the presence of several public food, cash, and maternal and child health programs with substantial infrastructure and human resources and sizeable scale

¹ Losses in yearly GDP due to undernutrition have been estimated to be as high as 12 percent in low-income countries.

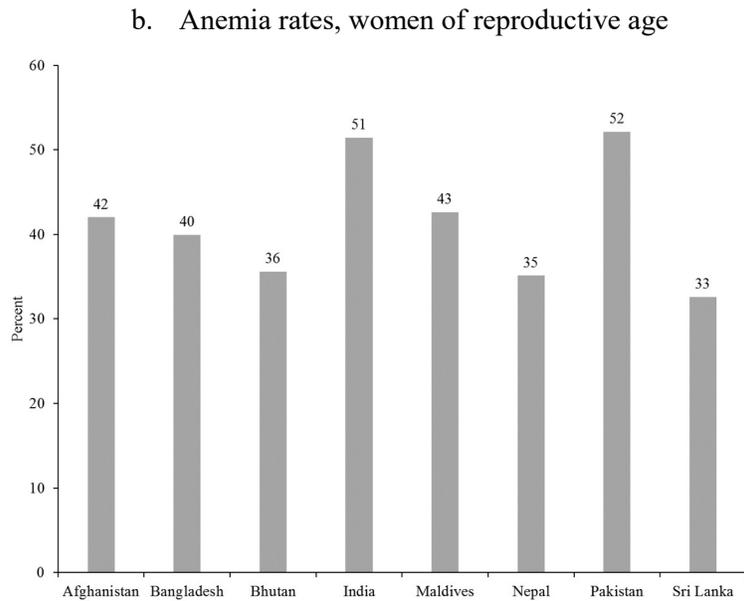
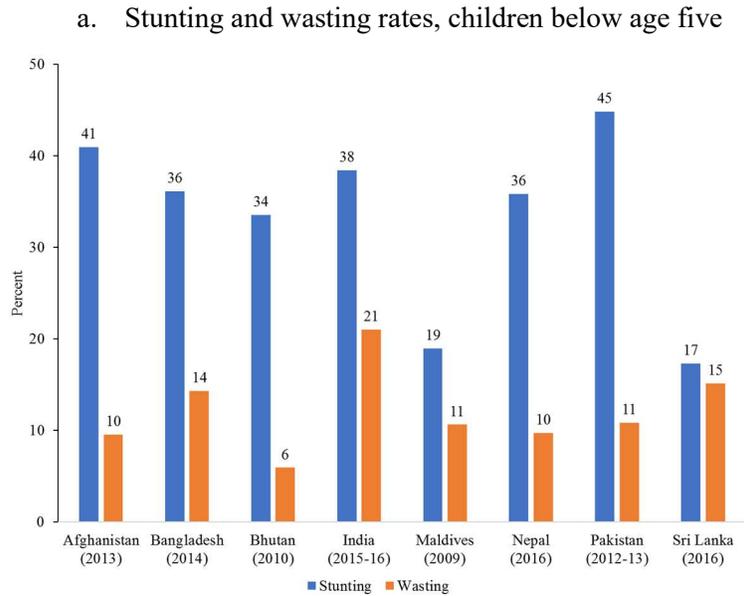
in the region. Over the 2000s, the region's income per capita has more than doubled. Its poverty rate has fallen by more than half, as have under-five and maternal mortality rates (fig 3. shows national trends for these indicators). Stunting and wasting rates for South Asian countries tend to be markedly higher than what would be predicted by national GNI per capita, a pattern we do not see when we examine under-five and maternal mortality rates in the region (fig. 4).

The nature of the nutrition production technology is now well-established in the literature. For example, it is well known that differences in genes explain little of the variation in nutrition status between populations, and that environmental and social factors explain much, and that history matters – that is, undernutrition can be transmitted between generations, and erasing deficits can take time even with substantial improvements in environmental and social conditions. The biological processes behind undernutrition; what nutrition-specific interventions are needed (for example, supplementation and fortification, breastfeeding and complementary feeding, diversification, emergency nutrition) and when these interventions are needed during the lives of women and children; and the relationship of food and feeding, water and sanitation, and reproductive, new-born, child, and maternal health services with nutrition status are also well known.

The outstanding question for nutrition research and practice then is why the application of this production technology has not translated into greater declines in undernutrition in South Asia. The first main suspect is the supply of nutrition-promoting goods and services by the public sector and private markets. Do governments and private markets fail to provide these goods and services, to what extent, in what ways, and why? Specifically, are public initiatives undermined by program design and/or implementation issues?

The second main suspect is the take-up of nutrition-promoting goods and services by households, given their supply. Do households underinvest in nutrition (possibly differentially across household members), to what extent, in what ways, and why? Specifically, is it due to prices (costs), other nonmonetary constraints, or beliefs and preferences? These failures in public and private delivery and household behaviour can interact in complex ways to trap populations at a high level of undernutrition. These areas represent the core focus of SAFANSI in financing initiatives in nutrition advocacy, research, policy, and practice in the region.

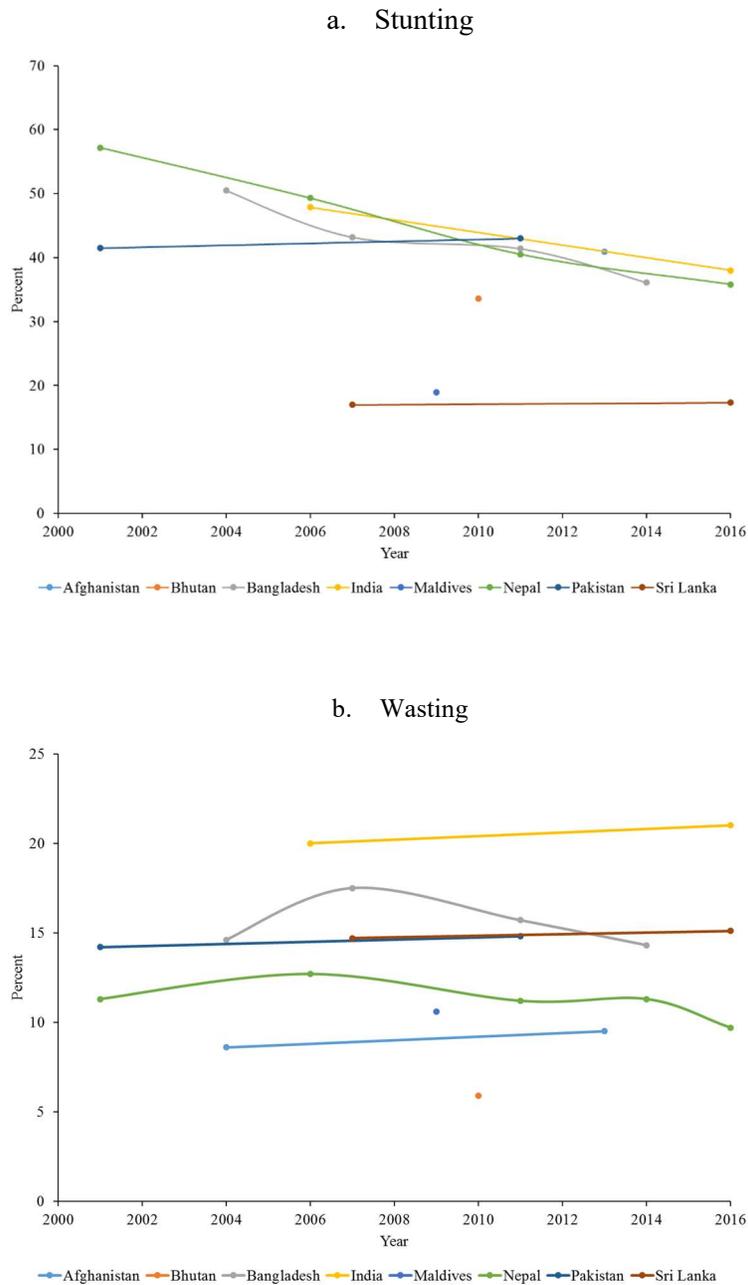
Figure 1. Undernutrition rates, South Asia



Source: Stunting and wasting rates: Demographic and Health Surveys for Bangladesh, Maldives, Nepal, Pakistan, and Sri Lanka, the Multiple Indicator Clustery Survey for Bhutan, the National Family Health Survey for India, and the National Nutrition Survey for Afghanistan. Anemia rates: World Health Organization database.

Note: Stunting rate: share of children under age five with HAZ less than -2 standard deviations; wasting rate: share of children under age five with WHZ less than -2 standard deviations; anemia rate: share of women of reproductive age whose hemoglobin concentration in the blood is less than 120g/L.

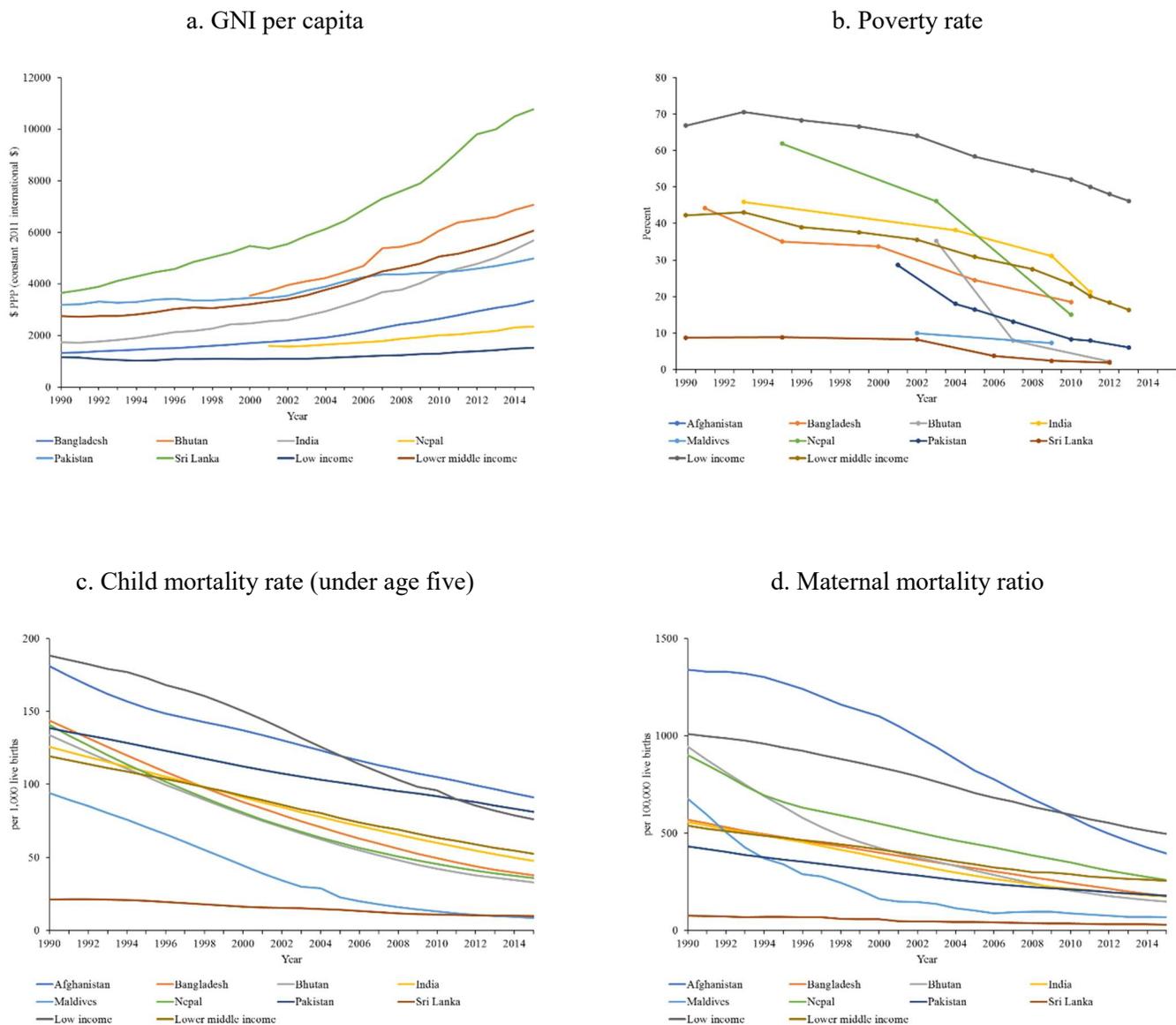
Figure 2. Evolution of child undernutrition rates over the 2000s, South Asia



Source: Demographic and Health Surveys for Bangladesh, Maldives, Nepal, Sri Lanka, the Multiple Indicator Clustering Survey for Bhutan, the National Family Health Surveys for India, and the National Nutrition Surveys for Afghanistan and Pakistan.

Note: Stunting rate: Percent of children under age five with HAZ less than -2 standard deviations. Wasting rate: Percent of children under age five with WHZ less than -2 standard deviations.

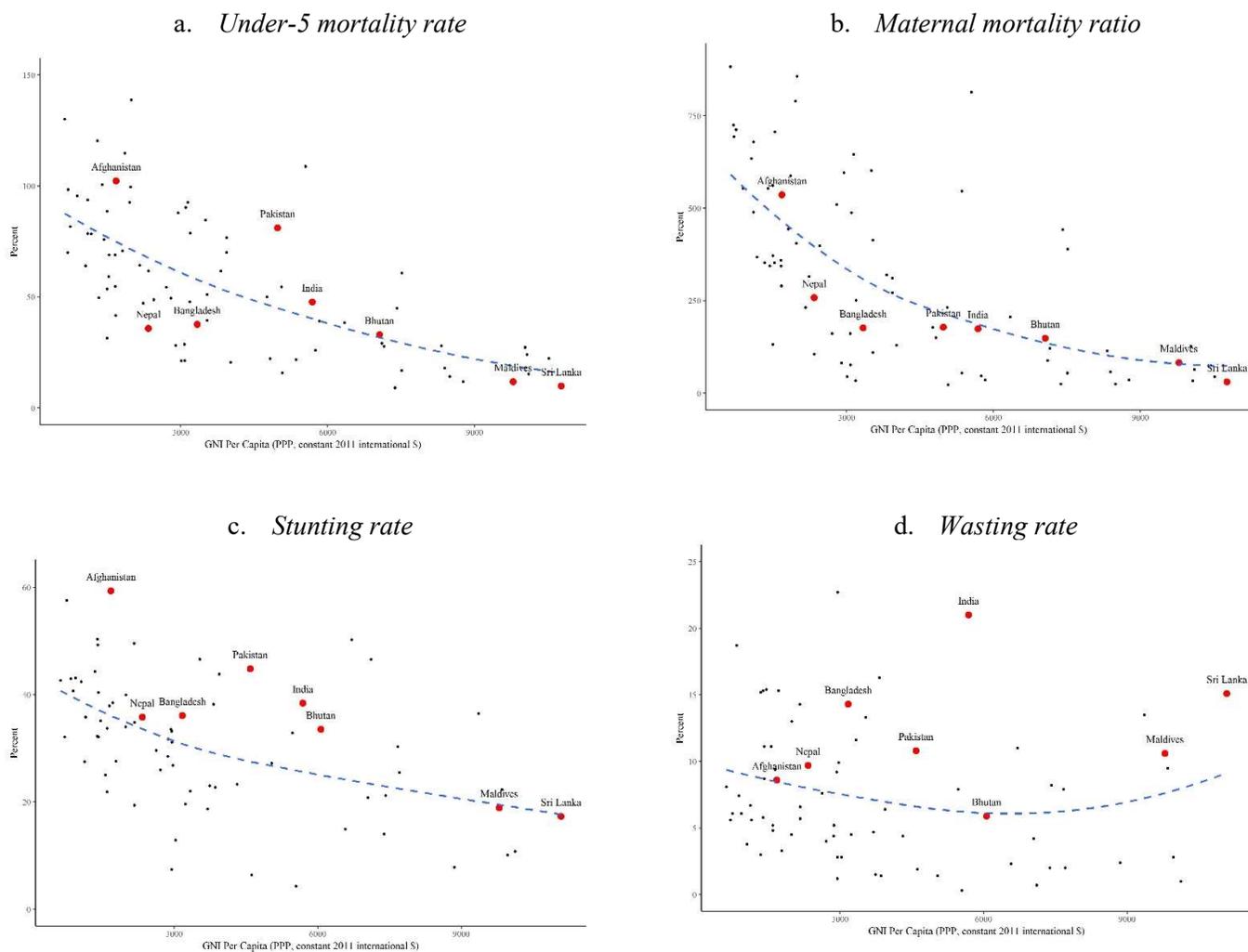
Figure 3. Evolution of selected socioeconomic indicators, 1990 to 2015, South Asia



Source: World Bank WDI database.

Note: GNI per capita is measured in 2011 constant purchasing power parity international dollars; poverty rate is based on \$1.90 per day per person (2011 PPP \$) line; maternal mortality ratio is measured per 100,000 live births; and under-five child mortality rate is measured per 1,000 live births.

Figure 4. Social indicators versus GNI per capita, cross-country bivariate associations



Source: World Bank WDI database.

Note: GNI per capita is measured in 2011 constant purchasing power parity international dollars; poverty rate is based on \$1.90 per day per person (2011 PPP \$) line; maternal mortality ratio is measured per 100,000 live births; under-five child mortality rate is measured per 1,000 live births; stunting rate is the share with HAZ score < -2 standard deviations; wasting rate is the share with WHZ score < -2 standard deviations.

Overview of SAFANSI Program

The South Asia Food and Nutrition Security Initiative (SAFANSI) was conceived at a joint World Bank-DFID South Asia Heads of Agency meeting in 2008 and established in 2010 to address the South Asian Enigma—how chronic malnutrition remains intractable despite high economic growth—by fostering the crosscutting actions that will lead to measurable improvements in food and nutrition security (FNS).² The program was created as a targeted step to advance the FNS agenda and foster intersectoral action in the countries of the South Asia region (SAR).

Phase I of SAFANSI was implemented from 2010 to 2015. Over the course of implementation, promotion of the FNS agenda in SAR evolved to the forefront of policy and decision makers. This was made possible through consistent engagement on FNS through SAFANSI and its development partners by supporting awareness raising, facilitating cross-cutting collaboration between sectors and diverse stakeholders, providing funding to support applied research and FNS programs, and by maintaining good technical efficiency. Since 2010 the FNS agenda gained in importance with many countries in the region adopting nutrition frameworks or national action plans in the last several years. At the close of SAFANSI Phase I in September 2015, the Program had played a catalyst role in driving the FNS agenda among countries in the region and in enhancing FNS sensitivity within the World Bank work program in SAR.

However, much remains to be done to raise awareness and advocacy, build capacity and stimulate behavior change to increase food and nutrition security in the region. The second phase of the SAFANSI Program, which became effective in December 2014, builds on the success and lessons from the first phase to further the FNS agenda.

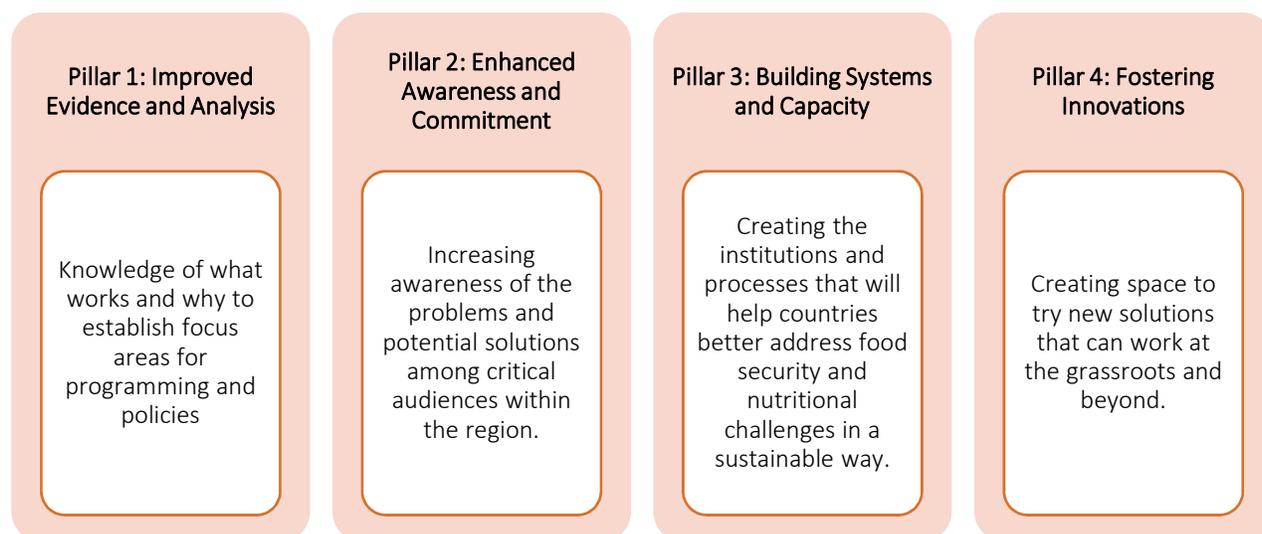
Program Objective

The objective of the South Asia Food and Nutrition Security Initiative Phase II (SAFANSI II) Trust Fund is to improve FNS for individuals and communities in South Asia through a strengthened commitment and increased capacity for more effective and integrated FNS actions across South Asia.

SAFANSI funding can be used to finance Bank executed or recipient executed activities in any of the countries of the South Asia Region (Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka) or regional activities, covering two or more SAR countries. The sectors and themes supported by SAFANSI are (i) agriculture (including livestock, fishing, and forestry); (ii) water supply and sanitation; (iii) health; (iv) social safety nets; (v) health, nutrition, and population; (vi) rural policies and institutions; (vii) public administration; (viii) information and communications; and (ix) regional integration.

² SAFANSI is a multi-donor trust fund administered by the World Bank. As Trustee and Administrator, the World Bank is responsible for program development, implementation, and monitoring & evaluation. Phase II of SAFANSI is financed by DFID and the European Commission.

All activities funded through SAFANSI should be demand-driven and aligned with at least one of its four strategic pillars:



The key principles identified for program success include:

- promoting political leadership and stewardship for FNS outcomes;
- ensuring nutrition outcomes are central to regional and country food security policy and programming;
- promoting an inter-disciplinary, inter-ministerial and cross-sectoral approach;
- building strong partnership among various players working on nutrition, safety nets, and food security;
- adding value to existing country and regional efforts;
- encouraging coherence and coordination among countries and among development agencies on necessary actions;
- focusing on actionable research (what works and what does not); and
- prioritizing action to tackle gender inequality and social exclusion.

SAFANSI aims to complement and supplement other initiatives in the region by adding value to on-going efforts and seeking to exploit gaps or overlooked opportunities to strengthen the FNS agenda and its operationalization. In consultation with the donors the following strategic gaps were identified as priorities for financing from SAFANSI.

1. **Research on critical delivery and behavioral failures.** While evidence is growing, more high-quality research is needed to credibly identify the precise nature of “delivery failures” and household “behavioral failures”. Such research should shed light on heterogeneity and dynamics, recognizing that the extent to which failures and their underlying drivers matters varies over space and time, even in small geographic areas and within communities and over short periods in rapidly-changing societies. Strong formative research would then inform intervention design.
2. **Innovations.** In line with the focus of Pillar 4 “Fostering Innovation”, a strategic priority is the testing of innovations to address public service delivery or market delivery bottlenecks and barriers to household take-up of nutrition-enhancing services.

3. **Data and Capacity Building.** The quality of the descriptive and evaluation research on FNS depends on the extent to which appropriate, rigorous empirical methods are applied to credible, rich, and relevant data. One of the critical gaps identified is the lack of adequate information on government expenditures on nutrition through multi-sectoral interventions. There is limited capacity and there are no tracking systems in place to collect such data. A key priority is to start undertaking Public Expenditure Reviews to track nutrition spending, develop guidance notes, and strengthen government capacity for data collection.

Governance Structure³

The SAFANSI governance structure consists of a Donor Committee (DC), Steering Committee (SC), Technical Review Panel (TRP), and a Secretariat.

- The DC includes a representative from each donor and the World Bank represented by the SAFANSI Program Manager. The DC meets twice a year, virtually or in person, to provide strategic guidance to the SAFANSI program, and review the overall progress of activities and implementation of the Trust Fund.
- The SC comprises representatives from the World Bank South Asia Region, relevant Global Practices, and country management units in the region. The role of the SC is to provide integral oversight over the SAFANSI program and decide on the allocation of funding from the trust fund. The inclusion of country management unit representatives on the SC helps ensure that country units are brought into the discussion of nutrition as a priority development issue, and that SAFANSI grants align and support country priorities.
- The SAFANSI Secretariat comprises a Program Manager, a Program Coordinator, an operations support team and a communications team. The Secretariat is responsible for the day-to-day management and administration of the trust fund.
- A TRP comprising experts from the sector specializations and a representative from the South Asia Region Chief Economist's office is convened when needed to provide technical advice on funding proposals and screen proposals based on alignment with the SAFANSI objectives and principles.

In its second full year of operation SAFANSI issued a call for proposals in January 2017, and held Steering Committee meetings in April 2016 and March 2017. Since inception the Donor Committee has met three times in person; in January 2015 in Brussels; in November 2015 in London; and in April 2017 in Brussels. In the interim several check-in meetings were held – in June 2015, in January 2016, in May 2016, September 2016, and November 2016. The second year of SAFANSI II has focused on implementation of approved activities based on the strategic directions for the trust fund, communications and reporting.

This annual report covers the period April 1, 2016 to March 31, 2017. The current structure of the report reflects recommendations made by and agreed with donor partners during earlier Donor Committee meetings, and, as a result, may not perfectly reflect the reporting outline provided in the donor administration agreements (AA). Similarly, the results framework departs significantly from the indicative results outlined in the AA. The current Results Framework was developed through extensive

³ The SAFANSI Governance Structure is described in the Operations Manual, which was developed in consultation with and approved by the Donor Committee on April 1, 2015.

discussion with donor partners, and adopted and approved by the Donor Committee. See Annex 4 for the current results framework as adopted by the Donor Committee.

Trust Fund Financial Status

As of March 31, 2017, the European Commission (EC) and UK's Department for International Development (DFID) have committed to contribute an equivalent of just over \$26.5 million to SAFANSI II. Total donor payments received amount to \$12.2 million into two Trustee accounts (TF072171 and TF072731)⁴. In September 2016, DFID notified the World Bank that they would be withdrawing their participation in the SAFANSI Program with effect from November 15, 2017; and that the remaining unpaid balance of their contribution (£9.7 million or \$12.7 million equivalent) would be cancelled (see Table 1 for details).

Table 1: SAFANSI Contribution Details

	Donor	Agreement Sign Date	Contribution Amount per countersigned Agreement	Contribution Amount (USD eq.)	Funds Received to date (USD ⁵)	Unpaid Contribution (USD eq.)
TF072171	DfID	12/04/14	GBP 12,600,000	17,241,490	4,458,830	12,782,660
	EC	07/29/14	EUR 7,500,000	8,449,282	6,944,017	1,505,265
TF072731	DfID	11/24/16	USD 866,457	866,457	866,457	0
Total				26,557,229	12,269,304	14,287,925

In keeping with the terms of the contribution agreement for TF072171, the Bank charges a 2% administrative fee for its central units to establish and maintain the SAFANSI II MDTF. This amount is deducted upon receipt of donor payments. In addition, the World Bank earned investment income on undisbursed MDTF funds in the amount of US \$108,078 (see Table 2). Accounting for deposits from contributing donors, the administrative fee, as well as investment income, a total of US\$11,295,427 has been deposited into the trustee account for SAFANSI II (see Table 2).

Table 2: Donor Payments Received for TF072171

Receipt Date	Paid-in Contribution Currency	Paid in USD
12/18/14	GBP 1,400,000.00	2,187,080.00
02/12/15	EUR 3,750,000.00	4,281,412.50
12/09/15	GBP 875,000.00	1,325,187.50
12/09/15	GBP 625,000.00	946,562.50
03/17/17	EUR 2,475,000.00	2,662,605.00
Sub-total		11,402,847.50
(-) Administrative Fee		215,498.46
(+) Investment Income		108,078.43
Total funds deposited in trustee account (USD)		11,295,427.47

⁴ Due to a change in the World Bank Trust Fund cost recovery policy that came into effect on July 1, 2015, DFID's supplemental contribution of \$866,457 was received into a parallel Trustee Fund (TF072731). The terms of the parallel Trustee Fund are the same as for the original Trustee Fund (TF072171), except for the cost recovery policy.

⁵ Exchange rate is based on the actual value date of receipt of funds. Source: World Bank.

For TF072731, investment income in the amount of \$1,668 has been earned to date, resulting in a balance of \$868,125 (see Table 3). There is no administrative fee charged on contributions to the parallel Trustee Fund.

Table 3: Donor Payments Received for TF072731

Receipt Date	Paid-in Contribution Currency	Paid in USD
11/24/16	USD 866,457.42	866,457.42
Sub-total		866,457.42
(+) Investment Income*		1,668.35
Total funds deposited in trustee account (USD)		868,125.77

The total funds deposited into both trustee funds (TF072171 and TF072731) is \$12,163,553. A final payment from the EC in the amount of €1.275million is expected to be called in January 2018. Of the total amount received, \$10.7 million has been allocated (funding decisions plus tentative allocations), \$2.9 million has been disbursed and \$1.4 million is available for future funding decisions (see Table 4)

Table 4: Summary of Financial Status

A. SAFANSI Fund Balance	USD
TF072171	11,295,427.47
TF072731	868,125.77
	12,163,553.24
B. Approved Activities	
Program Management Fee (5%)	613,465 ⁶
SAFANSI Communication Activities	550,000
Project Funds Approved	5,483,000
JIT Funding Approved	280,000
Commissioned Pieces (PER, Regional Nutrition Study, Stocktaking Report)	1,200,000
Total Funding Approved	8,126,465
C. Commitments - Third Call for Proposals Tentative Allocations	2,617,725
D. Funds Available for Allocation [D = (A) – (B) – (C)]	1,419,363
E. Disbursements⁷	2,856,189

⁶ This amount represents 5% of the total donor payments received to date.

⁷ Disbursement details are shown in the SAFANSI portfolio section of the report

SAFANSI Portfolio⁸

As of the end of March 2017, SAFANSI had an active portfolio of 19 projects, including 6 Just-in-Time activities, for a total of \$5.76 million (Table 5 and 6, and Annex 1).

Table 5: SAFANSI Portfolio as of March, 2017 (USD)

No.	Title	Location / Country	GP	SAFANSI Funding	Disbursements	Balance Available
TF0A2780	Technical support to cross-sectoral work on nutrition the North East of India	India	Health, Nutrition & Population	500,000	25,277	474,723
TF0A1098	Burden of Malnutrition for the States of Uttar Pradesh, Nagaland, Uttarakhand, and Meghalaya (Phase I)	India	Health, Nutrition & Population	502,000	501,623	377
TF0A1325	Social Observatory: Catalyzing Improved Implementation in Projects to Improve Food and Nutrition Security	India	Development Economics	1,000,000	622,442	377,558
TF0A0635	Impact Evaluations of the Agricultural and Food Security Project (AFSP) and Sunaula Hazar Din (SHD) Community Action for Nutrition Project	Nepal	Development Economics	988,000	373,420	614,580
TF0A1374	Qualitative Assessment and Knowledge Enhancement of Community-Driven Nutrition Project in Nepal	Nepal	Health, Nutrition & Population	300,000	176,828	123,172
TF0A2323	Costing and Cost-Effectiveness Analysis of Scaling up Nutrition-related Interventions in the South Asia Region	Regional	Health, Nutrition & Population	400,000	194,565	205,435
TF0A1146	Integrating Nutrition Promotion and Rural Development (INPARD) Sri Lanka	Sri Lanka	Agriculture	198,000	196,669	1,331
TF0A4384	Design and Piloting of Conditional Cash Transfers for Maternal and Child Health and Nutrition in Madhya Pradesh (India)	India	Health, Nutrition & Population	250,000	0	250,000
TF0A3110	Leveraging information technology to achieve better nutritional outcomes in the Chittagong Hill Tracts (CHT), Bangladesh	Bangladesh	Agriculture	220,000	28,225	191,775

⁸ The Portfolio as of the end of March 2017 includes only one project approved under the Third Call for Proposals, the Learning from “champions”: Qualitative study on infant and young child feeding and caring practices in Sri Lanka’s estate sector. Nine other projects were conditionally approved subject to revisions to the project proposals (refer to Annex 1, table 8)

TF0A4103	Improved Nutrition through Milk Micronutrient Fortification -- testing the Business Case under the National Dairy Support Project, India (P107648)	India	Agriculture	450,000	1,288	448,712
TF0A3672	Bangladesh Capacity Development in Nutrition Surveillance and Research	Bangladesh	Health, Nutrition & Population	250,000	23,675	226,325
TF0A3887	Capacity development and communication for improved nutrition outcomes in rural households	Bhutan	Agriculture	300,000	0	300,000
TF number not available by March '17	Learning from "champions": Qualitative study on infant and young child feeding and caring practices in Sri Lanka's estate sector	Sri Lanka	Health, Nutrition & Population	125,000	0	125,000
TOTAL				5,483,000	2,144,012	3,338,988

As a knowledge Bank, the World Bank has long been respected for the quality of its analytic and advisory work, and there are cases where the nature of our engagement is more programmatic and conducted over several fiscal years with multiple knowledge products. In other cases, a quick response is needed to meet a **just-in-time (JIT)** request. Therefore, in addition to the regular Calls for Proposals, to enhance the capacity of the Trust Fund to rapidly and flexibly respond to funding needs, SAFANSI includes a Just-in-Time Response window. This window serves to finance micro grants for technical assistance, seminars, training and other support services executed by the World Bank. Requests for just-in-time grants can be submitted to the Secretariat on a rolling basis and are approved by the SAFANSI Program Manager with the endorsement from the relevant Practice Manager and the Country Management Unit (CMU) for country-specific activities. Funds allocated to JIT programs cannot exceed \$50,000 and must be completed within 8 months.

Table 6: SAFANSI Just in Time (JIT) Activities as of March, 2017

No.	Title	Location / Country	GP	SAFANSI Funding	Disbursements	Balance Available
TF0A1834	Dynamics of Rural Growth: Outreach and dissemination	Bangladesh	Agriculture	50,000	49,502	498
TF0A3103	Building Effective Nutrition Communication through Partnerships: Addressing Estate Sector Nutrition Issues in Sri Lanka	Sri Lanka	Health, Nutrition & Population	50,000	39,246	10,754
TF0A2708	Women's Enterprising Initiatives to Ensure Community Food and Nutrition Security in upland Nuwakot	Nepal	Agriculture	50,000	48,786	1,214
TF0A3328	Rural Inclusive Growth and Nutrition in Andhra Pradesh	India	Agriculture	50,000	49,942	58
TF0A3584	Bhutan Food Security and Agriculture Project	Bhutan	Agriculture	30,000	0	30,000
TF0A3566	Bangladesh: Can Conditional Cash Transfers improve child nutrition and cognitive development project.	Bangladesh	Social Protection and Labor	50,000	32,248	17,752
TOTAL				280,000	219,724	60,276

In terms of grant distribution and allocation by country, India has received the largest share of funding (44 percent), followed by Nepal (21 percent) (Table 8 and Annex 3). No funding had been allocated to Pakistan⁹ or the Maldives as of the end of March. Eight projects approved are led by the Agriculture sector and seven projects by the Health, Nutrition and Population Global Practice (Table 9 and Annex 3).

Table 8: Projects by Country

Allocations by Country	No. of Projects	Total Funding	% of Total Approved
Afghanistan	0	\$0	0%
Bangladesh	4	\$570,000	10%
Bhutan	2	\$330,000	6%
India	6	\$2,752,000	48%
Maldives	0	\$ -	0%
Nepal	3	\$1,338,000	23%
Pakistan	0	\$ -	0%
Regional	1	\$400,000	7%
Sri Lanka	3	\$373,000	6%
TOTAL	19	\$5,763,000	100%

Table 9: Projects by Sector

Allocations by Sector	No. of Projects	Total Funding	% of Total Approved
Agriculture	8	\$1,348,000	23%
Health, Nutrition & Population	8	\$2,377,000	41%
Social Protection & Labor	1	\$50,000	2%
Development Economics	2	\$1,988,000	34%
TOTAL	19	\$5,763,000	100%

Commissioned Pieces

The Steering Committee has allocated \$1.2 million for the following three commissioned studies.

Review of Public Expenditures Toward Nutrition in South Asia

There has been a recent increase in the examination of national budgets toward nutrition in developing countries, including in South Asia. Extending this work, the planned review of public expenditures will examine current and development budget allocations toward nutrition-related programs at subnational

⁹ Several proposals for Pakistan were submitted and conditionally approved under the Third Call for Proposals (refer to Annex 1, table 8).

levels; nutrition spending against allocations; sectoral and programmatic distribution of nutrition spending, and the spatial correspondence between nutrition spending and undernutrition indicators.

Ending Malnutrition in South Asia Regional Report

South Asia is widely viewed to be a negative outlier in global progress toward reducing child and maternal undernutrition. In recent years, there has been a substantial increase in data and rigorous, innovative research on child and maternal health and nutrition for South Asia as well as other parts of the low- and middle-income world. Drawing mostly on these data and research, the proposed report aims to examine the factors that contribute to the current high levels of undernutrition and/or poor progress in reducing undernutrition in the region, and derive considerations and recommendations for future data collection and research, as well as development policy and practice to address undernutrition. Apart from drawing on existing data and research, the report will commission and take advantage of additional data and research in key areas with less or weaker evidence. Key topics would include the links between shocks (economic, natural, conflict); climate change; urbanization; private food systems; water, sanitation, and hygiene; food quality; and beliefs and social norms and undernutrition.

SAFANSI Stock-taking Report

Promotion of the food and nutrition security (FNS) agenda in the South Asia Region has evolved to the forefront of policy and decision makers. This has been possible in part through consistent engagement on FNS through SAFANSI and its development partners by supporting awareness raising, facilitating cross-cutting collaboration between sectors and diverse stakeholders, and by providing funding to support applied research and FNS programs. The stock-taking report will capture and review the research and knowledge that has been generated with support from SAFANSI, and facilitate knowledge sharing, replication across countries and identification of gaps.

Program Outputs and Results

In the current reporting period, SAFANSI supported a total of 19 projects: 13 are active and six have been completed. These projects have delivered and disseminated a number of important analytical studies, impact evaluations, and innovative monitoring tools, as well as substantially leveraged World Bank funding. This section provides a summary overview of some of the outputs and results from SAFANSI-funded activities. Project-specific achievements can be found in Annex 2. In addition, Annex 4 provides results (actual and target) against the agreed outcome and output indicators included in the SAFANSI Results Framework, which was developed in collaboration with and adopted by the SAFANSI Donor Committee.

SAFANSI-financed projects have informed five food and nutrition programs and action plans in Bangladesh and Sri Lanka. The Regional Costing and Cost-effectiveness Analysis project has underpinned the Bangladesh Second National Plan of Action for Nutrition (NPAN2), and the Integrating Nutrition Promotion and Rural Development (INPARD) project has supported development of Sri Lanka’s National Nutrition Plan. Moreover, the Bangladesh Dynamics of Rural Growth project served to strengthen the new Five Year Plan of the Government of Bangladesh, Systematic Country Diagnostic (SCD), and Country Partnership Framework (CPF). In addition, SAFANSI-financed projects have supported design and/or evaluations of nine Bank-financed projects in the South Asia Region, with total costs amounting to US\$1.94 billion. Table 10 provides a list of Bank-financed projects informed by SAFANSI grants:

Table 10: SAFANSI grants informing Bank-financed projects

Country	SAFANSI Grants		World Bank-financed Project	
	SAFANSI Project	Support	WB Project	Total Cost
Afghanistan	Regional Costing and Cost-effectiveness Analysis	Budgeting	System Enhancement for Health Action in Transition (SEHAT) Project	US\$100 mil
Bangladesh	Sri Lanka INPARD	Design of nutrition component	Bangladesh Nuton Jibon Project	US\$200 mil
	Can Conditional Cash Transfers Improve Child Nutrition and Cognitive Development?	IE design	Income Support Program for the Poorest Project (ISPP)	US\$ 300 mil
India	Social Observatory (SO)	Nutrition-sensitive M&E, Impact Evaluations (IEs)	Bihar Rural Livelihoods Project (Jeevika)	US\$163 mil
			Bihar Transformative Development Project (Jeevika 2)	US\$290 mil

			Tamil Nadu Empowerment and Poverty Reduction Project	US\$273.7 mil
			National Rural Livelihood Project	US\$500 mil
	Rural Inclusive Growth and Nutrition	Nutrition-sensitive IE design	Andhra Pradesh Rural Inclusive Growth Project	US\$75 mil
Nepal	SHD Impact Evaluation	IE household survey (mid-term and end term)	Sunaula Hazar Din (SHD) Community Action for Nutrition Project	US\$40 mil
	Qualitative Assessment and Knowledge Enhancement of Community-Driven Nutrition Project	IE qualitative survey		
Total Funds Leveraged				US\$1.94 billion

SAFANSI supported Information and Communications Technology (ICT) based innovations, including household nutrition monitoring and behavioral change communication (BCC). In supporting monitoring and evaluation of the rural livelihoods projects in India, the *Social Observatory (SO)* project developed an innovative Participatory Tracking (P-tracking) method to monitor food and nutrition security and other project impacts at household level. The data collected through P-tracking are used by the project team, as well as community-based institutions (such as self-help groups and village organizations) as a management tool. P-tracking and other SO monitoring and evaluation methodologies are being adopted by governments and NGOs, including a nationwide effort in Indonesia. Five videos on P-tracking were produced and disseminated on the SO’s website. In Bangladesh, the *Leveraging IT for Better Nutrition Outcome project focuses on behavioral change on nutrition intake among ethnic minority women of reproductive age and children under five years of age in the Chittagong Hill Tracts (CHT)*. The project trained four local NGOs to produce and disseminate health and nutrition videos. Thus far, four videos have been produced in local languages, which were disseminated to 1,700 women and men in 80 targeted villages. The project has also developed an open-source data management system to track training delivery and behavioral changes. In Sri Lanka, the *Nutrition Communication* project trained 50 youth in the Estate Sector, where nutrition status is lagging behind the rest of the country, on dissemination of nutrition messages through social media and developed a Facebook group (links are available in Annex 6).

There are increasing numbers of significant partnerships with governments, the UN, development agencies, foundations, universities, and the private sector. For instance, in India, the *Global Burden of Disease (GBD)* project studied the burden of malnutrition and disease in four states (Uttar Pradesh, Nagaland, Uttarakhand, and Meghalaya), which was co-financed by the Gates Foundation and implemented

in collaboration with nearly 500 researchers in 50 countries (detailed in Box 1). In Bangladesh, the new *Capacity Development in Nutrition Surveillance and Research* project supports evidence-based decisions on multi-sectoral nutrition programming for adolescent girls in Sylhet. Study partners include James P. Grant School of Public Health (JPGSPH) at BRAC University, Bloomberg School of Public Health at Johns Hopkins University, and UNICEF. Bangladesh Scaling Up Nutrition (SUN) will lead a policy platform for dissemination. Moreover, in India, the new *Milk Micronutrient Fortification* project is being implemented in partnership with the national Dairy Development Board (NDDDB) and Tata Trust, to pilot a business model for fortified milk production, generation options for consumer promotion, and scale-up the Bank-supported National Dairy Support Project (NDSP).

Box 1: Leverage and Partnership: India Global Burden of Disease (GBD) Project

The *Global Burden of Disease (GBD)* project studied the burden of malnutrition and disease in four states in India, which were Uttar Pradesh, Nagaland, Uttarakhand, and Meghalaya. The study was co-financed by the Gates Foundation and implemented in collaboration with nearly 500 researchers in 50 countries led by the Institute for Health Metrics and Evaluation (IHME) at the University of Washington. The report uncovers diseases, injuries, and risk factors that cause poor health, ranging from poor diets to alcohol and drug use in four targeted states vis-à-vis the national average. Key findings include:

- Over the past 25 years, India has seen significant gains in life expectancy, with larger gains in life expectancy for females than males. The gap between male and female life expectancy has been widening over the past 25 years.
- Gains in life expectancy have come from reducing deaths from diarrhea, lower respiratory infections, and other common infectious diseases, and to a lesser extent preventing deaths from neonatal disorders, HIV/AIDS, and tuberculosis.
- An examination of premature mortality in the four targeted states shows that two communicable, maternal, neonatal, and nutritional diseases (diarrhea and neonatal preterm birth complications) cause the most premature mortality in Meghalaya and Nagaland. Meanwhile, non-communicable diseases account for the most premature mortality in Uttar Pradesh and Uttarakhand.

Building on this report, the Indian Council of Medical Research (ICMR), the Public Health Foundation of India (PHFI) and IHME are working together with a large number of stakeholders across India to expand this study to estimate the disease burden and risk factor trends for all states in India.

SAFANSI's studies and evaluations have been disseminated widely through Bank and project websites and at national and international conferences. The India *Social Observatory* delivered eight studies in the reporting period, which were published on their new, improved website (<http://socialobservatory.worldbank.org>), together with P-tracking videos and other web articles. All reports were co-authored by the Bank, multilateral development agencies (such as IFPRI), and/or universities (including UC Berkley, Florida State University, Stanford University, and Georgetown University) and were peer reviewed. The SO also participated in national and international conferences in India, US (at Harvard University and the World Bank), and Belgium (UNU-WIDER Gender Conference). In Sri Lanka, the *INPARD* final impact evaluation also had a wide participation by ministries and national representatives

as well as international universities (detailed in Box 2). The results were presented at national and international conferences in Sri Lanka, Brazil, and Belgium (SAFANSI Donor Committee meeting).

Box 2: Sri Lanka Integrating Nutrition Promotion and Rural Development (INPARD)

Final Impact Evaluation

SAFANSI-I financed the *Integrating Nutrition Promotion and Rural Development* (INPARD) project. In conflict-affected North East Province, INPARD built on social capital developed by a Bank-financed community driven development project, ReAwaking Project (RaP) and supported nutrition promotion activities implemented through multi-sectoral government stakeholders, including health, agriculture, rural development, administration, education, fisheries and Samurdhi (poverty eradication national program). SAFANSI-II supported the INPARD final impact evaluation, with the participation by the Ministry of National Policies and Economic Affairs, Ministry of Health, Ministry of Economic Development, Ministry of Agriculture, Ministry of Education, WHO, UNICEF, University of Colombo, University of Sri Jayawardenapura, University of Jaffna, Eastern University of Sri Lanka, Oxford University, and the Australian National University. Key results include:

- There was an increase in vegetable consumption in INPARD areas. Both men and women were having an extra 2 servings or 160 grams per week per person. In control areas, there was a small loss (0.1 of a serving) among men and women.
- There also was an increase in men and women with “healthy weight” and with a healthy waist circumference in INPARD areas.
- School data showed that there was a drop in the number of INPARD schools with sweets, chocolate or ice cream available within schools for students to purchase. In these schools, students who did NOT have fast food in the past week increased from 12 to 23 percent among girls and from 7 to 18 percent among boys.

INPARD’s multisectoral approach in nutrition generated substantial interests in academia and among international agencies. Between 2015 and 2016, the INPARD results were shared widely through the INPARD team’s participation in Sri Lanka Medical Association Scientific Sessions, Global Food Security Conference in Ithaca, and International Society for Behavioral Nutrition and Physical Activity (ISBNPA) in Edinburgh, WHO’s dialogues on non-communicable disease prevention in Geneva, and International Union for Health Promotion and Education (IUHPE) conference in Brazil. Moreover, INPARD informed the World Bank-financed CDD project in Bangladesh, *Nuton Jibon*, in designing its nutrition component. It is also supporting the Government of Sri Lanka in developing its National Nutrition Plan.

In the agriculture and health/nutrition sectors, SAFANSI-supported projects are increasingly focusing on women, ethnic minorities, and/or underserved areas. As seen above, in Bangladesh, SAFANSI projects are targeting adolescent girls in Sylhet (*Capacity Development in Nutrition Surveillance and Research* project) and ethnic minority women in CHT (*Leveraging IT for Better Nutrition Outcome* project), while in Sri Lanka, SAFANSI is targeting Estate Sector workers (*Nutrition Communication* project) and school-aged children and their families in the post-conflict Northeast (*INPARD*). In Bhutan,

the newly-approved *Capacity Development and Communication* project also targets pregnant and lactating mothers in remote rural areas in Samtse district through nutrition and health awareness raising communication. In Nepal, SAFANSI is supporting impact evaluations for the World Bank-supported *Sunaula Hazar Din (SHD) Community Action for Nutrition* Project, which helps communities address key risk factors in the first 1,000-day window, thus, targeting pregnant and lactating mothers and children under two years old (detailed in Box 3 below). In India, building on a large-scale household survey, the Cross-Sectoral Work on Nutrition in the Northeast is to understand factors influencing nutrition and health of adolescent girls, pregnant women, and children in Nagaland, Assam, and Meghalaya States through a qualitative survey. Meanwhile, in Bangladesh and Nepal, the concept of a nutritious “one-dish meal”, developed by a SAFANSI-I supported project in Sri Lanka,¹⁰ is being replicated by women in CHT (*Leveraging IT* project) and earthquake-affected Upland Nuwakot (*Women’s Enterprising Initiatives project*).

¹⁰ The “one-dish meal” are low cost and prepared fast (within 30 minutes) with locally available ingredients. The idea was developed by Viluthu, Sri Lankan women’s civil society organization, which is a member of BEES Network. BEES or Business, Enterprise, and Employment Support for Women in South Asia, is a knowledge-sharing and learning network of civil society organizations that are working to enhance women’s economic empowerment through training and cooperative investment.

Box 3: Nepal Sunaula Hazar Din (SHD) Impact Evaluations

In Nepal, SAFANSI I supported the *Scaling-up Nutrition Initiative Technical Assistance* (SUNITA), with funding from the Government of Australia's Department of Foreign Affairs and Trade (DFAT). SUNITA co-financed the World Bank-supported *Sunaula Hazar Din (SHD) Community Action for Nutrition*

Project, which supported the Rapid Results for Nutrition Initiatives (RRNIs) to address key risk factors in the 1,000-day window through community mobilization, goal setting, and development and implementation of action plans in a 100-day period. Key findings from the household and qualitative surveys were:

- Most common goals selected by the targeted VDCs in the first few cycles were: (i) ending open defecation (53 percent), (ii) using clean and safe water (46 percent), and (iii) increasing consumption of animal protein among pregnant women and young children (27 percent).
- The treatment VDCs are 6 percent more likely to have access to improved toilets than control VDCs, which could be attributed to SHD implementation vis a vis goal selection. While only 5 percent of treatment VDCs selected mothers to take iron and folic acid (IFA) for 180 days as a goal, mothers in the treatment VDCs are 4 percent more likely to do so than those in control VDCs.
- The goal selections are more likely directed to benefit entire communities rather than SHD's target population, who are pregnant and lactating mothers and children under two years old, to avoid disputes.
- While there were good practice VDCs which improved knowledge and practices among the SHD target populations, the qualitative survey also found that women's participation in action plan implementation was less likely substantive and often ethnic minorities were not participating in SHD activities.

In the social protection sector, SAFANSI-financed projects continue to support design and evaluations of nutrition-focused conditional cash transfer (CCT) programs, which provide cash payments to poor households meeting certain behavioral requirements related to health and nutrition improvement. In Bangladesh, the new *CCT for Child Nutrition and Cognitive Development* project is supporting the development of an Impact Evaluation strategy for the IDA-financed Income Support Program for the Poorest Project (ISPP). The design includes an evaluation of the relative cost-effectiveness of each arm of the ISPP intervention (ante-natal care, growth monitoring and promotion, cognitive development) with respect to their impact on child development outcomes and readiness for school. In India, the new *CCT for Maternal and Child Health and Nutrition* project is supporting the Government of Madhya Pradesh in designing and developing the State's CCT program, by building on four national programs managed by the Department of Women and Child Development, National Health Mission, and Department of Health and Family Welfare.

Communications Activities

In the last reporting period, the SAFANSI communications team focused on redesigning the SAFANSI website, and the development and dissemination of the findings and messages emerging from SAFANSI-sponsored activities by using media platforms most accessible to worldwide audiences.

Donor Visibility

In line with our Communications and Visibility Strategy, which was adopted by the Donor Committee in July 2015, all products financed by SAFANSI acknowledge the financial support of our donors, and each product includes disclaimer language indemnifying the financiers and the World Bank Group from the opinions expressed therein, per the agreement. SAFANSI strives to have a unified and distinctive look for its knowledge sharing and communications efforts, down to the visual elements such as colors, fonts and logotypes. At the center of this is the acknowledgement and recognition of SAFANSI's partners, through the incorporation of partner logotypes as a core branding element of the SAFANSI visual identity, which we do at every opportunity through the monthly Newsletter and email communications, the SAFANSI website and any promotion for events.

Activities

The team has significantly increased its online presence with a newly designed website which organizes content by program overview, projects, products and donor information. The site url is now clean (www.worldbank.org/SAFANSI) and relatively short, and is better indexed for easy google searching. We have also added a section to accommodate our new blog series and 3 new videos that were developed over the past year.

The screenshot shows the World Bank website page for the South Asia Food and Nutrition Security Initiative (SAFANSI). The page layout includes a navigation bar at the top with links like 'WHO WE ARE', 'WHAT WE DO', 'WHERE WE WORK', 'UNDERSTANDING POVERTY', and 'WORK WITH US'. The main content area features a featured article titled 'Tackling Undernutrition in Sri Lanka's Plantations' with a video player. To the right, there are sections for 'CONTACT', 'RELATED' content (including 'Malnutrition Prevalence in South Asia' and 'Global Food Security'), 'VIDEO', and 'BLOGS'. At the bottom, logos for the World Bank, Australian Government, UKaid, and European Commission are displayed.

<http://www.worldbank.org/safansi>

The SAFANSI blog series has been quite successful, and over the first quarter of 2017, the top 3 most popular/read/shared blogs posted in the South Asia region of the World Bank’s website are about SAFANSI programs. Each blog post had over 13,000 reads on just the SAFANSI website (not including Facebook and other social media platform impressions). This year, a significant effort has been made to invest in social media outreach that seems to be paying off.

*This year, SAFANSI content reached **1,207,191 people** in South Asia through 25 Facebook posts.*

Further to this **276,224 people** engaged actively with SAFANSI stories, of which:

- **128,554** reacted to SAFANSI stories with a “Like”;
- **8,219** clicked the link to continue reading the stories on the SAFANSI website;
- **219** people commented on the SAFANSI stories; and
- **670** people shared the SAFANSI stories.

This number shows proactive engagement, and sharing of content with friends and peers signals that the content has high relevance and that trust with the SAFANSI brand is established. We rely heavily on social media and web promotion to reach government counterparts, collaborators and partners easily and at relatively little cost by leveraging our web presence and by ensuring that when research is finalized, it is disseminated quickly and through the relevant online channels (in addition to project-level dissemination activities). Additionally, six program briefs were developed and 4 videos were launched and are available on the new SAFANSI website. Per the results framework, SAFANSI II has also been tracking the number of unique, external downloads of SAFANSI publications and unique external visits to the SAFANSI website. Please see **Output 1.3** of the Results Framework in **Annex 4** for more detail.

Other communication efforts include hosting or participating in events and forums that promote information sharing and dialogue about the most relevant food and nutrition topics across South Asia. For example, in November 2016, SAFANSI presented a dissemination event entitled “Preliminary Findings from the Global Burden of Disease Study in Four States of India” in Delhi. The event featured researchers from the Public Health Foundation of India (PHFI) and the University of Washington who partnered with the SAFANSI team, and discussed outcomes and preliminary findings of the research.

SAFANSI also held a workshop in Nepal in January 2017 on Impact Evaluation Methods. Participants for the workshop included senior officials from the Ministry of Agricultural Development (MoAD), Ministry of Land and Development (MoLD), and three of the agriculture projects supported by the World Bank in Nepal – Rani Jamara Kulariya Irrigation Project (RJKIP), Project for Agriculture Commercialization and Trade (PACT) and the Agriculture Food and Security Project (AFSP).

In March 2017, the SAFANSI team attended the Scaling Up Nutrition (SUN) workshop—Knowledge Management in Support of SUN Countries—which allowed knowledge management (KM) platforms, institutions and agencies to share their efforts to improve nutrition through knowledge sharing and discuss practical ways to better coordinate efforts to ensure country stakeholders can capitalize on various regional and global knowledge management initiatives. As an outcome of this meeting SAFANSI received interest from Emergency Nutrition Network (ENN), Global Panel on Agriculture and Food Systems for Nutrition (GloPan), Public Health Foundation of India (PHFI), Leveraging Agriculture and Nutrition in South Asia (LANSA), and International Food Policy Research Institute (IFPRI) to partner together on an event series, which will promote similar research agendas that will support the nutritional platform event series that SAFANSI will lead with the goal to feature facilitated discussions focusing on what government approaches should be used to support multi-sectoral nutrition programming and action. These events will also address budgeting for nutrition at the country and regional levels through concerted action taken by governmental institutions, with input from development partners and academia. The groups will explore how policy is integrated into government structure, track nutrition spending, and resulting actionable change. Please see **Outputs 1.4** and **2.3** of the Results Framework in **Annex 4** for more detail.

Throughout the Reporting year, the trust fund’s largest grant, the Social Observatory, has given several presentations and seminars discussing various aspects of the program’s work, including the following keynotes: Harvard University conference of Social Exclusion and Poverty Eradication, and at the GPSA Annual Conference at the World Bank, a lecture at the Harvard Kennedy School, as well as talks at the Aga Khan Foundation in Ottawa, Canada, 3ie in Delhi India, Center for Policy Research in Delhi, Ashoka University in Sonapat, India, UNU-WIDER Gender Conference in Namur, Belgium.

Additional activities over the last reporting period focused on maintaining the structure for Knowledge Management and Communications to follow up with grant recipients to track deliverables coming in from phase 2. This included:

- Identifying and appointing an Operations Officer responsible for daily operations of knowledge management and communications which involves making task teams aware of requirements for deliverables, providing guidance on dissemination activities and visibility requirements, and curating incoming deliverables for further dissemination;
- Launching the SAFANSI external website to disseminate curated and cleared grant products;
- Sponsoring and/or planning and delivering dissemination events on SAFANSI issues and activities;
- Creating and disseminating an internal Factiva Newsfeed to provide regular media updates to the SAFANSI Core Team, Steering Committee, and SAFANSI task teams;
- Documenting the international, regional, and national landscape of Food and Nutrition Security programs and agreements to increase the understanding of SAFANSI’s relative position and identify potential partnerships;
- Continuing to work with partners such as the SecureNutrition platform and Food Security, Nutrition, Agriculture and Poverty (FSNAP) working group for cross-fertilization of ideas and cross-marketing of messages within and outside of the World Bank;
- Creating or contributing to briefs and talking points for World Bank management on SAFANSI progress and FNS issues;
- Preparing materials and logistics for SAFANSI operational meetings; and
- Preparing communication materials on SAFANSI findings.

A full list of publications and various knowledge products from the SAFANSI grants can be found in **Annex 5**.

Moving forward, SAFANSI KM & Communications is planning an outreach series of roundtables and workshops in the region that will seek to bring together client governments and donors to ensure better strategic alignment of programs that support nutrition, and to ultimately identify pathways for sustainable government support of nutrition outcomes through government programs.

Program Risks

The SAFANSI Risk Matrix was developed with and adopted by the Donor Committee (see Annex 6). The Risk Framework outlines the primary risks to the SAFANSI program and proposed mitigating measures. The risks are reviewed annually at the Donor Committee meeting, and the risk matrix updated accordingly. During the reporting period the primary risks to the Program were project implementation risks. Changing country priorities resulted in the cancellation of the Afghanistan “Assessing the Effectiveness of Nutrition Awareness and Early Cognitive Stimulation Interventions in Early Childhood Development Programs”. A number of grants approved for India have experienced delays in the start of activities whilst awaiting Government approval for the proposed activity. Furthermore, elections and local disruptions due to unrest or natural disasters (e.g./flooding) can have an impact on the speed of implementation. Overall, however, activities are advancing well and disbursements have picked up over the past year.

DFID's announcement in September 2016 to withdraw from SAFANSI as of November 15, 2017, and cancel any outstanding contributions to the program, has significantly decreased the overall funding envelope for the program. With the reduced funding, the program has had to significantly scale down the number of activities funded and the size of the grants, with the risk that the overall program objective and impact will be affected. Remaining funds will need to be strategically managed and allocated to minimize this risk.

Looking Forward

Just over two years into the second phase of SAFANSI, the program is funding 19 activities, of which 13 are active and six have been completed. In addition, nine proposals are pending final approval by the SAFANSI Steering Committee and, if approved, will start implementation in the fall of 2017. With this robust portfolio, the program has a broad geographic and thematic reach, and initial findings from the ongoing and completed activities, provide valuable insights into the food and nutrition security situation and ongoing challenges in the South Asia region.

Looking forward at the SAFANSI work program for the next year (2017 – 2018), the following three areas have been identified as priorities:

- **Strategic management and allocation of the remaining funds.** With the program end disbursement date at the end of September 2019, it is proposed that available funds are allocated during the upcoming reporting period to provide sufficient time for the implementation of activities prior to the TF closing. Given limited funding remaining in the Trust Fund, funds should be allocated strategically to fill gaps and maximize the impact of the funding.
- **Communications and Knowledge Sharing.** With a robust active portfolio, SAFANSI communications and knowledge sharing activities will again be a main priority for the upcoming reporting period. In addition, to maintaining SAFANSI's successful online presence through the SAFANSI website and social media outreach, the communications team will launch a series of roundtables and workshops in the region that will seek to bring together client governments, donors, partner organizations and other stakeholders to facilitate exchange and advance strategic alignment of programs that support nutrition.
- **Implementation of grants.** The successful implementation of SAFANSI grants and dissemination of outputs and results will continue to be an important area of focus for the upcoming year. Task teams will be supported by the SAFANSI Secretariat and Communications Team in the implementation of activities, knowledge sharing and dissemination of results.

In the implementation of the 2017 – 2018 work program, the SAFANSI Secretariat will continue to liaise with the donors through regular correspondence, check-in meetings and the annual Donor Committee meeting.

Annex 1: SAFANSI II-funded activities as of March 31, 2017

1. SAFANSI Grants as of March, 2017

No.	Title	Location / Country	GP	Total Project Budget	SAFANSI Funding
1	Technical support to cross-sectoral work on nutrition the North East of India	India	Health, Nutrition & Population	\$500,000	\$500,000
2	Burden of Malnutrition for the States of Uttar Pradesh, Nagaland, Uttarakhand, and Meghalaya (Phase I)	India	Health, Nutrition & Population	\$502,000	\$502,000
3	Social Observatory: Catalyzing Improved Implementation in Projects to Improve Food and Nutrition Security	India	Development Economics	\$4,000,000	\$1,000,000
4	Impact Evaluations of the Agricultural and Food Security Project (AFSP) and Sunaula Hazar Din (SHD) Community Action for Nutrition Project	Nepal	Development Economics	\$988,000	\$988,000
5	Qualitative Assessment and Knowledge Enhancement of Community-Driven Nutrition Project in Nepal	Nepal	Health, Nutrition & Population	\$300,000	\$300,000
6	Costing and Cost-Effectiveness Analysis of Scaling up Nutrition-related Interventions in the South Asia Region	Regional	Health, Nutrition & Population	\$1,200,000	\$400,000
7	Integrating Nutrition Promotion and Rural Development (INPARD) Sri Lanka	Sri Lanka	Agriculture	\$198,000	\$198,000
8	Design and Piloting of Conditional Cash Transfers for Maternal and Child Health and Nutrition in Madhya Pradesh (India)	India	Health, Nutrition & Population	\$500,000	\$250,000
9	Leveraging information technology to achieve better nutritional outcomes in the Chittagong Hill Tracts (CHT), Bangladesh	Bangladesh	Agriculture	\$220,000	\$220,000
10	Improved Nutrition through Milk Micronutrient Fortification -- testing the Business Case under the National Dairy Support Project, India (P107648)	India	Agriculture	\$490,000	\$450,000
11	Bangladesh Capacity Development in Nutrition Surveillance and Research	Bangladesh	Health, Nutrition & Population	\$300,000	\$250,000
12	Capacity development and communication for improved nutrition outcomes in rural households	Bhutan	Agriculture	\$300,000	\$300,000
13	Learning from "champions": Qualitative study on infant and young child feeding and caring practices in Sri Lanka's estate sector	Sri Lanka	Health, Nutrition & Population	\$125,000	\$125,000
TOTAL				\$10,148,000	\$5,483,000

2. SAFANSI Just in Time (JIT) Activities as of March, 2017

No.	Title	Location / Country	GP	Total Project Budget	SAFANSI Funding
1	Dynamics of Rural Growth: Outreach and dissemination	Bangladesh	Agriculture	\$50,000	\$50,000
2	Building Effective Nutrition Communication through Partnerships: Addressing Estate Sector Nutrition Issues in Sri Lanka	Sri Lanka	Health, Nutrition & Population	\$50,000	\$50,000
3	Women's Enterprising Initiatives to Ensure Community Food and Nutrition Security in upland Nuwakot	Nepal	Agriculture	\$50,000	\$50,000
4	Rural Inclusive Growth and Nutrition in Andhra Pradesh	India	Agriculture	\$50,000	\$50,000
5	Bhutan Food Security and Agriculture Project	Bhutan	Agriculture	\$30,000	\$30,000
6	Bangladesh: Can Conditional Cash Transfers improve child nutrition and cognitive development project.	Bangladesh	Social Protection and Labor	\$50,000	\$50,000
TOTAL				\$280,000	\$280,000

3. Third Call for Proposals

Out of the 14 proposals submitted, **the Steering Committee approved one proposal unconditionally for the full amount requested, 9 proposals conditionally with reduced budgets, and 4 proposals were rejected** (Table 7, Table 8 and Table 9). Proposals approved conditionally are being revised by the respective task leaders to incorporate technical feedback from the technical review panel and to update the budget. Revised proposals will be resubmitted to the Steering Committee for final approval and confirmation of allocation of funding¹¹.

Table 7: Proposals approved under the Third Call for Proposals

No.	Proposal Title	Country	Sector	Funding Requested	Funding Allocated
1	Learning from "champions": Qualitative study on infant and young child feeding and caring practices in Sri Lanka's estate sector	Sri Lanka	Health, Nutrition and Population	\$125,000	\$125,000
				\$125,000	\$125,000

¹¹ Out of the revised proposals, 8 were approved for total funding of \$2,617,725 after the current reporting period.

Table 8: Proposals conditionally approved under the Third Call for Proposals

No.	Proposal Title	Country	Sector	Funding Requested	Notional Allocation
1	Tamil Nadu AgriFood Hub Pilot Program	India	Agriculture	\$275,000	\$225,000
2	Enterprise Development for Nutrition and Sanitation, Bihar, India	India	Multi-sector	\$500,000	\$355,000
3	Nutrition Parliament: Parliamentarians and State Legislators for Collective Action	India	Agriculture	\$497,395	\$270,000
4	Behavior Change and Service Delivery Innovations for Strengthening WASH-Nutrition Links	India, Pakistan	Water	\$1,200,000	\$ -
5	Adolescent nutrition in Pakistan: identifying opportunities and setting priorities	Pakistan	Health, Nutrition and Population	\$866,000	\$267,800
6	Technical design support for nutrition focused Conditional Cash Transfer (CCT) pilot rollout in Punjab	Pakistan	Social Protection	\$500,000	\$424,000
7	Tracking Nutrition Expenditure in Pakistan	Pakistan	Multi-sector	\$500,000	\$350,000
8	Addressing critical failures of Infant and Young Child Feeding (IYCF) in South Asia	Regional (Bangladesh, India, Nepal, Pakistan, Sri Lanka)	Health, Nutrition and Population	\$595,821	\$325,925
9	Improving Nutrition through Modernizing Agriculture in Sri Lanka (INMAS)	Sri Lanka	Agriculture	\$650,000	\$400,000

\$5,584,216 \$2,617,725

Table 9: Proposals rejected under the Third Call for Proposals

The following proposals were submitted under the Third Call for Proposals, but were not approved for SAFANSI funding for several reasons: (i) the proposed research lacked innovation; (ii) the proposal was insufficiently linked to the SAFANSI objectives and strategic priorities; or (iii) the proposal was not aligned with country priorities.

No.	Proposal Title	Country	Sector	Funding Requested	Funding Allocated
1	Fish in the first 1,000 days of life: Nutritional impact of micronutrient-rich small fish supplement during pregnancy and lactation; A randomized intervention study in Bangladesh	Bangladesh	Environment	\$879,950	\$ -
2	Transformational Micronutrient-Rich Small Fish Solutions for Better FNS Outcomes for Women and Children in Sindh, Pakistan	Pakistan	Multi-sector	\$445,000	\$ -
3	Strengthening Bhutan's Nutrition Strategy and Interventions	Bhutan	Multi-sector	\$300,000	\$ -
4	Madhya Pradesh Rural Road Improvement	India	Transport	\$500,000	\$ -

\$2,124,950

Annex 2: Outputs and Results from SAFANSI Projects

In the current reporting year, SAFANSI II has financed 19 projects: 13 are active, while 6 are completed. 10 projects are in agriculture, 7 projects are in health/nutrition, and 2 projects are in social protection. Most of these projects are multi-sectoral in their design and/or interventions: some agriculture and social protection projects target the critical first 1,000-day window, while others are co-led by task team leaders (TTLs) from agriculture and health/nutrition. There also are projects led by other sectors, such as poverty and inequality and social development, which support impact evaluations of agriculture or health/nutrition projects through quantitative and qualitative surveys. By country, India has the largest number of projects (6 projects), followed by Bangladesh (4 projects), Nepal (3 projects) and Sri Lanka (3 projects). As indicated in table 10 there are currently no SAFANSI projects in Afghanistan, the Maldives or Pakistan¹². However, the on-going regional project supports the design of a nutrition action plan in Afghanistan (and Bangladesh), while four projects for Pakistan were conditionally approved under the Third Call for Proposals (see Annex 1, Table 8).

Table 10. SAFANSI II Portfolio for the reporting period April 1, 2016 – March 31, 2017

	Active			Completed			Total by Country
	Agriculture	Health/ Nutrition	Social Protection	Agriculture	Health/ Nutrition	Social Protection	
Afghanistan							0
Bangladesh	1	1	1	1			4
Bhutan	2						2
India	2	1	1	1	1		6
Nepal	1	1		1			3
Pakistan							0
Sri Lanka		1		1	1		3
Regional		1					1
Total by Sector	6	5	2	4	2	0	Ag: 10 HN: 7 SP: 2
Total	13			6			19

The below provides details of active and completed projects, including outputs and results, followed by an introduction of pipeline projects in India (3 projects), Pakistan (3 projects), Sri Lanka (1 project), and Regional (1 project).

¹² A previously-approved project for Afghanistan “Assessing the Effectiveness of Nutrition Awareness and Early Cognitive Stimulation Interventions in Early Childhood Development Programs” in Afghanistan was dropped, due to changing country priorities. Four projects for Pakistan are awaiting approval under the Third Call for Proposals.

1. Active Projects

Project: Leveraging information technology to achieve better nutritional outcomes in the Chittagong Hill Tracts (CHT)	
Country: Bangladesh	Grant amount: \$220,000
Project duration: 2016 – 2018	TTL: Pushina Kunda Ng'andwe ; Jamie Greenawalt
<p>Background and Objectives: The objective of this activity is to enhance knowledge and behavioral practices that improve the intake of nutritious foods among women of reproductive age and children under the age of 5 in the Chittagong Hill Tracts. This will be achieved by developing digital content through a participatory process involving community members to promote consumption of nutritious indigenous foods threatened by an increasing influx of nutritionally void packaged food products. Communities will be trained and mentored on general nutrition, healthy and nutritious food preparation and be provided with a platform to demonstrate, share and disseminate cooking videos using simple technology. These activities are expected to contribute to the promotion of readily available and accessible nutritious foods [inclusive of indigenous foods in the CHT area] that support a sustainable system for food and nutrition security in the area.</p> <p>Outputs: In partnership with Digital Green, 15 MJF and other NGO participants were trained to produce and disseminate nutrition training videos in local languages. Four videos have been produced on care and nutrition in the first 1,000-day window. During this reporting period, 1,700 villagers were trained through 320 sessions in 80 villages. An open-source data management system has also been developed to track training delivery and behavioral change.</p>	

Project: Capacity Development in Nutrition Surveillance and Research	
Country: Bangladesh	Grant amount: \$250,000
Project duration: 2016 – 2019	TTL: Ziauddin Hyder
<p>Background and Objectives: This project supports the Government of Bangladesh in making evidence-based decision on multisectoral nutrition programming for adolescent girls through conducting research and dissemination of its findings. The proposed task will harness the latest evidence from two surveillance projects, namely the nationally representative Food Security Nutritional Surveillance Project (FSNSP) and the Project for Advancing the Health of Newborns and Mothers (PROJAHNMO) from Sylhet.</p> <p>Outputs: James P Grant School of Public Health (JPGSPH) at BRAC University has been procured. A data analysis plan was developed by a joint Bank/JPGSPH/UNICEF research team, and specific data sets were prepared for analysis. Necessary linkage has been established with the country SUN/nutrition focal point (Additional Secretary at the Ministry of Health) who will organize and lead a policy platform to</p>	

disseminate outcomes of the planned analysis. This Project also collaborates with Bloomberg School of Public Health at Johns Hopkins University.

Project: Can Conditional Cash Transfers improve child nutrition and cognitive development?	
Country: Bangladesh	Grant amount: \$50,000
Project duration: 2016 – 2019	TTL: Aneeka Rahman
<p>Background and Objectives: This just-in-time grant aims to provide a comprehensive assessment of the impact of conditional cash transfers on children’s cognitive development and nutrition outcomes in early ages in Bangladesh. The results of the evaluation will assess and help improve the design of a nutrition-sensitive conditional cash transfer program, and thereby contribute to a better understanding of changes in children’s nutrition and cognitive development outcomes.</p> <p>Outputs: The grant has helped the team develop and finalize the impact evaluation (IE) strategy for the IDA-financed Income Support Program for the Poorest project (ISPP). The IE is to collect baseline and endline data at the household level to understand the following: does participation in ISPP lead to an increase in household consumption, food and protein intake, and dietary diversification? Does it improve anthropometric outcomes? Does it improve a set of child cognitive and language developmental outcomes? Does it lead to increased and early enrollment in primary school? Does it lead to improved women’s decision-making ability? In addition, the evaluation will also look into the relative cost-effectiveness of each arm of the intervention (ante-natal care, growth monitoring and promotion, cognitive development) with respect to their impact on child development outcomes and readiness for school. This is particularly important given the innovative payments system, which is likely to have significant implications on the efficiency and cost of implementing CCTs. The strategy and findings will be disseminated to wider stakeholders, once the baseline report is prepared later in FY2018.</p>	

Project: Capacity development and communication for improved nutrition outcomes in rural households	
Country: Bhutan	Grant amount: \$300,000
Project duration: 2016 – 2019	TTL: Winston Dawes
<p>Background and Objectives: The project will improve dietary diversity and care practices of pregnant and nursing women in remote rural areas in Bhutan which will address malnutrition in the first 1,000-day window of opportunity. This will be carried out by identifying change agents and drivers of food habits to develop materials and collaboratively engage target groups in behavior change communication (BCC) activities in Samtse Dzongkhag. The two proposed components follow a BCC theory of change. By way of a series of studies and pilots, digital content, participatory platforms, and/or exposure visits will be developed and organized. Furthermore, the project will strengthen the enabling environment for GAFSP-funded FSAPP by rooting the project in very specific social contexts, distilling and aiming to</p>	

address the multiple drivers of malnutrition. This will help ensure both acceptability of interventions among involved communities, sustainability of improved practices and potential for scaling-up.

Outputs: The grant became effective in January 2017. Work has started on the preparation of TORs and the identification of consultants. Field work on the SAFANSI grant will commence as soon as the GAFSP funding is launched in June.

Project: Food Security and Agriculture Productivity Project	
Country: Bhutan	Grant amount: \$30,000
Project duration: 2016 – 2017	TTL: Winston Dawes
<p>Background and Objectives: The objective of this activity is to support cross country knowledge sharing and capacity building of Bhutan’s Ministry of Agriculture and Forests (MoAF) project team, and learn from community based, market-driven approaches in Nepal and Pakistan, in order to improve the design and implementation of the GAFSP-funded Food Security and Agriculture Productivity Project (FSAPP).</p> <p>Outputs: The study tour from Bhutan to Nepal took place between April 17-25 (study tour to Pakistan was dropped due to security concerns). A delegation of 10 professionals from the MoAF visited the World Bank-supported Agriculture and Food Security Project (AFSP), which focuses on technology development, dissemination, adaptation, and nutrition promotion. Lessons learned include re-introduction of farmer field school (FFS) in Bhutan, small grants to support community-level projects, bottom-up facilitation, and CSO and private sector participation in FSAPP. The incorporation of lessons learnt in project design and implementation and the action plan outlining responsibilities and the way forward will be closely monitored by the FSAPP task team in both the short and long terms.</p>	

Project: Technical support to cross-sectoral work on nutrition the North East of India	
Country: India	Grant amount: \$500,000
Project duration: 2015 – 2017	TTL: Patrick Mullen
<p>Background and Objectives: The primary objectives of this task are to better understand the barriers to improved nutrition and health in three states in North East (i.e., Nagaland, Assam and Meghalaya) and to help state governments develop strategies and programs to address these issues. While large scale household surveys (such as the NFHS-4) provide state-level estimates for nutrition indicators, they are unable to provide an in-depth understanding of the range of possible factors influencing the nutrition and health of children, adolescent girls and pregnant women in these states. By financing qualitative assessments and targeted quantitative surveys in the region, the grant is to contribute to the identification of key gaps and barriers to improved nutrition, and subsequently, through the technical assistance enable states to design and implement strategies to mitigate these barriers.</p>	

Outputs: Survey guides for focus group interviews and key informant interviews were developed, and the qualitative study in Nagaland is underway. Results of the study will be used to refine the community results based financing strategy under the Bank-supported Nagaland Health Project in discussion with the Department of Health and Family Welfare, Nagaland. Based on this, a specific work plan will be developed, which aims at providing technical assistance to the Dept. of Health for strengthening implementation of the results based financing strategy by strengthening knowledge and capacities of the communities on nutrition specific and sensitive actions. The task team is yet to received DEA clearance to proceed on technical work in the States of Assam and Meghalaya, which was also proposed in the grant.

Project: Social Observatory - Catalyzing Improved Implementation in Projects to Improve Food and Nutrition Security

Country: India

Grant amount: \$1,000,000

Project duration: 2015 – 2019

TTL: [Vijayendra Rao](#)

Background and Objectives: With SAFANSI-I, Social Observatory (SO) was set up to (a) diagnose how market, government, and behavioral failures affect food and nutrition security (FNS) outcomes, (b) use these diagnoses to improve designs of ongoing rural livelihoods development projects in India, such as Bihar Rural Livelihoods Project (JEEVIKA) and Tamil Nadu Empowerment and Poverty Reduction project, and (c) improve the implementation of these interventions by building adaptive capacity. The objective of SAFANSI-II project is to consolidate the work under SAFANSI-I, to further improve adaptive capacity, while improving the diagnosis of how market and government failures affect food security; supporting an experimentation-based approach to improve program design and implementation for FNS outcomes; taking the SO approach to new program interventions that aim to improve the functioning of the top-down public programs for food and nutrition security in India; and seeding a system of adaptive capacity to catalyze implementation for FNS outcomes in one new, nutrition focused programs in South Asia.

Outputs. There have been a number of outputs, based on the culmination of several years of work: eight reports and papers (four of which were published under the World Bank Policy Research Working Paper), 13 web-based articles and videos on SO methodology and findings on a new SO website, and a MIS manual for Jeevika. SO team also delivered 6 academic seminars in US, India, and Belgium.

All reports and papers are co-authored by the Bank, multilateral development agencies (such as IFPRI), and/or universities (including UC Berkley, Florida State University, Stanford University, and Georgetown University). Keynotes on SO were made at Harvard University conference of Social Exclusion and Poverty Eradication and at the GPSA Annual Conference at the World Bank. Also, seminars were made at the Harvard Kennedy School, the Center for Policy Research in Delhi, Ashoka University in Sonapat, India, and UNU-WIDER Gender Conference in Namur, Belgium.

There has been an enthusiastic reception on SO approach within the Bank and around the world. Research findings have so far been downloaded a total of 30,000 times. SO innovations, such as Participatory Tracking (P-Tracking) Method, are being adopted by governments and NGOs around the world,

including a nationwide effort in Indonesia. The P-tracking method for village planning, in particular, will help village governments develop more effective plans to solve their food security, water and sanitation needs.

Key outputs are summarized below (also detailed in Annex 6):

- **Bank's Policy Research Paper on "Who should be at the top of bottom-up development: A case-study of the National Rural Livelihoods Mission in Rajasthan, India."** This paper has important implications for the management of bottom-up community based interventions which are widely used for food and nutrition security interventions. It shows that careful thought must be given to whether such interventions are best managed by state governments or the center. It demonstrates that in the case of Rajasthan, the state government was a much better choice than the center for a variety of reasons.
- **Bank's Policy Research Paper on "Relief from Usury in Bihar"**. This is a research paper on the randomized control trial (RCT) of Bank-supported Jeevika in Bihar, showing its large impact on reducing high-interest money lender credit.
- **Bank's Policy Research Paper on "Scaling-Up on the Frontlines: A Qualitative Analysis of Implementation Challenges in a CDD Project in Rural India"**. An in-depth qualitative analysis of on how Self-Help Group (SHG) interventions can suffer important implementation challenges as they scale-up.
- **Bank's Policy Research Paper on "Deliberative Democracy in India"**. This paper describes the origins of gram sabhas and summarizes the current literature on the subject.
- **Two more papers on Gram Sabhas in India.** These are meetings, sanctioned by the Indian constitution that are held in every village between two to four times a year, depending on the state. The meetings are tasked with vetting beneficiaries for anti-poverty projects and ratifying the allocations of village budgets, including the sanctioning of housing and toilets. One paper uses novel text-as-data techniques to understand the nature of gender inequality within them, testing whether women have less voice than men. And another evaluates whether a woman-centered SHG intervention can make such forums more gender sensitive. This has very important implications for the management of food and nutrition security interventions because last-mile targeting and allocations decisions for such interventions are made in the gram sabha.
- **Paper on Gender and Jati.** This paper, shows that our understanding of the relationship between caste and gender inequality in India may not be accurate because of the use of broad caste categories such as Scheduled Caste (SC) and Scheduled Tribe (ST) that are used by most Indian surveys. This may have important implications for the targeting of anti-poverty programs.
- **Report on Impact Evaluation of the Tamil Nadu Poverty Alleviation (Pudhu Vaazhvu) Project (PVP) intervention.** This report shows that Phase 2 of the PVP intervention performed well in its first year, but then did not perform as well as a similar intervention by the State Rural Livelihoods Mission.
- **New, improved SO website.** <http://socialobservatory.worldbank.org> The website has had a great impact on disseminating the work of the Social Observatory. The site is best viewed on a browser such as Chrome, Mozilla or Safari, it is unfortunately not yet optimized for Internet Explorer.
- **Videos, articles, and blogs.** They have been posted on the website to allow easy dissemination of research findings and also highlight the various innovations made by the Social Observatory. These include topics such as the Science of Adaptive Management, on using MIS system, and participatory data collection (detailed in Annex 6).

- **Monitoring Information System (MIS) for the Jeevika intervention in Bihar.** We have helped Jeevika make great strides towards developing an effective MIS system for all 12 million of its potential beneficiaries in Bihar.

Project: Design and Piloting of Conditional Cash Transfers for Maternal and Child Health and Nutrition in Madhya Pradesh	
Country: India	Grant amount: \$250,000
Project duration: 2017 – 2019	TTL: Mohini Kak ; Patrick Mullen
<p>Background and Objectives: The project supports the state government in determining the overall strategy and design of a conditional cash transfer (CCT) program aimed at improving maternal and child health and nutrition practices and service utilization within the critical 1,000-day period. It will draw on the implementation experience of CCT programs in India, including in Madhya Pradesh, as well as on lessons and best practice from international experience. Technical support will also be provided for piloting the CCT program, through the development of systems required for implementation such as (i) systems for registration of beneficiaries and recording achievement of conditions, (ii) payment systems (iii) operational procedures and manuals (iv) communication and awareness generation (v) monitoring and evaluation systems (vi) strategies for inter-departmental coordination; and (vii) grievance redressal mechanisms. While the state government is expected to finance and lead the implementation of the pilot, continued technical assistance will be provided by the Bank to ensure implementation and monitoring systems developed are working effectively.</p> <p>Outputs: The task was approved by the Department of Economic Affairs (DEA) in March 2017. The context has changed since the Department of Health and Family Welfare, Madhya Pradesh submitted their request for technical assistance for the design of a conditional cash transfer program on maternal and child health and nutrition. The Government of India announced a National Maternity Benefit Program (MBP), which is planned as a conditional cash transfer (CCT) program targeted at pregnant women and children up to 3 months old. The MBP is expected to be implemented by the Department of Women and Child Development (DWCD), Madhya Pradesh. Since the CCT proposed by the Department of Health and Family Welfare, also focused on a similar target group (pregnant women to children up to 2 years of age), to avoid duplication of efforts, the team has initiated a dialogue with the DWCD, to discuss collaboration and direct the technical assistance to support the roll out of the proposed MBP. The work plan will be developed by June 2017.</p>	

Project: Improved Nutrition Through Milk Micronutrient Fortification – Testing the Business Case under NDSP-India	
Country: India	Grant amount: \$450,000
Project duration: 2016 – 2019	TTLs: Ashi Kohli Kathuria ; Edward William Bresnyan

Background and Objectives: This project aims to increase household access to micronutrients and enhance the contribution of the dairy sector to improving food and nutrition security of these households in India. This would test and demonstrate the operational, technical and financial feasibility of the production and marketing of Vitamin A- and D-fortified milk through milk unions, as well as build the capacity of the National Dairy Development Board (NDDB) to serve as a national resource center for milk fortification. The proposed project will permit the National Dairy Development Board (NDDB) to: (a) pilot a business model for fortified milk production; and (b) generate options for consumer promotion and scale-up within the National Dairy Support Project.

Outputs: The grant became effective in January 2017. An initial planning meeting was held among the Bank, NDDB, and Tata Trust (private foundation). Consultant is expected to be hired in May 2017.

Project: Impact Evaluations of the Agricultural and Food Security Project (AFSP) and Sunaula Hazar Din (SHD) Community Action for Nutrition Project

Country: Nepal

Grant amount: \$988,000

Project duration: 2015 – 2018

TTL: [Susumu Yoshida](#)

Background and Objectives: The project is to undertake impact evaluations (IEs) for the Agricultural and Food Security Project (AFSP) and the SAFANSI I-funded Sunaula Hazar Din (SHD) Community Action for Nutrition Project. The AFSP IE focuses on the impact of the technology adoption and nutrition enhancement components at mid-term. SHD IE is to assess, through a household survey, effectiveness of an innovative Rapid Results Approach (RRA), by which communities are motivated to achieve a self-selected goal in 100 day cycles on nutrition outcomes and community development.

Outputs: SHD mid-term evaluation was completed. The survey found significant increases among participating Village Development Committees (VDCs) in the number of (a) households using improved toilets and (b) mothers taking iron and folic acid (IFA) for 180 days (both PDO indicators). Most common goals selected by the VDCs were: (i) ending open defecation (53%), (ii) using clean and safe water (46%), and (iii) increasing consumption of animal protein among pregnant women and young children (27%). The treatment VDCs are 6% more likely to have access to improved toilets than control VDCs, which could be attributed to SHD implementation vis a vis goal selection. While only 5% of treatment VDCs selected IFA in-take as a goal, mothers in the treatment VDCs are 4% more likely to take IFA for 180 days than those in control VDCs. The mid-term evaluation report was finalized in April 2017 and shared with the project team and the client.

The research team is working on a few academic papers out of this evaluation, which will be presented to the project team, client, and academics. The team had an impact evaluation workshop in January in Kathmandu and discussed AFSP evaluation design, which was participated by 30 government officials and donor representatives. AFSP mid-term evaluation is postponed to end-2017 due to delay in implementation.

Project: Qualitative Assessment and Knowledge Enhancement of Community-Driven Nutrition Project	
Country: Nepal	Grant amount: \$300,000
Project duration: 2015 – 2018	TTL: Kaori Oshima
<p>Background and Objectives: The objective of this grant is to improve the evidence base and understanding of the design and process of Sunaula Hazar Din (SHD, Community Action for Nutrition Project) at the community level. Paying special attention to gender and social inclusion perspectives (e.g., low caste and ethnic minorities), the evidence on the nutritional outcomes and social dynamics generated by the study will provide strong design and implementation inputs to SHD, and to dialogues on health and nutrition improvement in Nepal.</p> <p>Outputs: The final report was completed in April 2017. The study observed some good practice VDCs that successfully improved knowledge and practice of the target population (i.e., pregnant and lactating mothers, who could ensure children’s 1,000-day window since conception), with strong community buy-in, transparency in decision making processes, well-developed plans, and local leadership. However, it also found that SHD’s Rapid Results 100-day model was implemented overall in isolation without building capacity of coaches and community-based implementation teams or effectively linking existing platforms, such as local government and technical experts. To avoid disputes, community-driven goal selection is likely directed to benefit to entire community rather than SHD’s target population. Women’s participation in work plan implementation was found less substantive, and often minorities were not participating in SHD activities. The report will be disseminated at a national workshop and a Bank internal knowledge sharing activities.</p>	

Project: Learning from “champions”: Qualitative study on infant and young child feeding and caring practices in Sri Lanka’s estate sector	
Country: Sri Lanka	Grant amount: \$125,000
Project duration: 2017 – 2019	TTL: Yi-Kyoung Lee
<p>Background and Objectives: The objective is to identify successful behaviors of positive deviants that could enable estate sector residents to achieve better nutrition outcomes. While the majority of nutrition studies and interventions tend to focus on problems and barriers that prevent children from reaching their full potential, the proposed positive deviance (PD) project will enable the key stakeholders to: (i) identify successful adaptive behaviors that exist in the target estate communities; and (ii) design (and subsequently implement) strategies and programs that promote their adoption by the target population.</p> <p>Outputs: The grant has recently been approved and is expected to become effective mid-2017.</p>	

Project: Costing and Cost-Effectiveness Analysis of Scaling up Nutrition-related Interventions in the South Asia Region	
Country: Regional	Grant amount: \$400,000
Project duration: 2015 – 2018	TTL: Meera Shekar
<p>Background and Objectives: The overall development goal of this project is to strengthen the allocative and technical efficiencies for country-led planning, budgeting, and prioritization of nutrition interventions through health, nutrition, population, social protection, water, sanitation and hygiene (WASH), education, and agriculture and rural development programs in up to 5 high-burden countries in South Asia (i.e. Afghanistan, Bangladesh, India, Nepal, Pakistan, and Sri Lanka), and thereby enhance the impact of national and international investments. The SAFANSI-II project finances costing analyses, including (a) costing for the scale-up of nutrition interventions, (b) performing cost-effectiveness analysis (CEA) comparing different scale up scenarios (e.g. scale up by intervention package, scale-up by sub-region/state), (c) building capacity by training national staff in the methodology and the use of the costing and CEA tools to identify the most effective interventions for scale-up, and (d) disseminating the findings at the appropriate national, regional and global fora, with a focus on facilitating south to south exchanges. The project is co-financed by UNICEF and Gates Foundation.</p> <p>Outputs: Costing studies are near completion in two SAR countries: Bangladesh and Afghanistan. The reports include analytics on anticipated nutrition results based on the cost- effectiveness of specific nutrition interventions and several scenarios to scale up cost-effective nutrition interventions. Specifically, they are to serve as inputs into the operationalization of the National Nutrition Policies and plans in both countries. In Bangladesh, the analytic work has fed into the preparation of the Second National Plan of Action for Nutrition (NPAN2). Data on the cost, protocols, and coverage of nutrition programs were collected from key stakeholders within the government (Ministry of Health and Family Welfare, Ministry of Food and Agriculture, National Nutrition Service, and others), UN (e.g., UNICEF, WFP), NGOs (e.g., Helen Keller International - HKI), and research institution. In Afghanistan, they are contributing to the budgeting for the IDA-financed System Enhancement for Health Action in Transition (SEHAT) Project by providing data on per-capita costs of service provision, which will be used for contracting with the NGOs delivery nutrition services. The team collaborated with Ministry of Public Health and UNICEF in collecting data on the cost of providing a package of key high-impact nutrition interventions included in Afghanistan’s basic package of health services.</p> <p>Full drafts of reports for both countries are completed and are currently undergoing internal revisions and reviews before finalization. The next steps include extensive dissemination in-country with government and partners.</p>	

2. Completed Projects

Project: Dynamics of Rural Growth: Outreach and Dissemination	
Country: Bangladesh	Grant amount: \$50,000
Project duration: 2015 – 2016 (completed)	TTL: Madhur Gautam
<p>Background and Objectives: The just-in-time grant is to inform policies and actions to strengthen and sustain the enabling environment for more rapid growth, and for food and nutrition security in Bangladesh. The study on the Dynamics of Rural Growth was financed by SAFANSI I with the following findings: (a) 87% of rural households still rely on farm income; (b) lack of credit remains a constraint to rural non-farm enterprises; (c) the largest share of public expenditure on agriculture goes to fertilizer subsidies; (d) crop diversification is an important priority; and, (e) private sector should be allowed in the seed sector.</p> <p>Outputs: The study was completed and delivered in June 2016. The main report was published in the Directions in Development publication series and widely disseminated. An in-country launch and dissemination workshop was held in Dhaka in May 2016. The report was very well received by the Government. Key findings have informed Bangladesh's new Five Year Plan and also provided key inputs to the Systematic Country Diagnostic (SCD) and Country Partnership Framework (CPF). The Planning Commission has shown strong ownership of the report. The launch of the report was extremely successful, with the Minister for Rural Development as the Chief Guest. Both the Minister and the Senior Secretary and Member, General Economics Division, Planning Commission, strongly endorsed the report and highlighted the importance of the main findings to the government's strategy and policy decisions for poverty reduction and shared prosperity. The launch of the report, attended by the Country Director and Director for the Agriculture Global Practice, was widely covered in the press - all major newspapers had the reports messages as a featured headline and all major TV news channels covered the event in the daily news.</p> <p>Government requested technical assistance which the Bank has agreed to and is now supporting the Ministry of Rural Development. One direct outcome of the study was a new project on livestock and dairy development, and discussions are underway for another project with the Ministry of Agriculture. The team is now in the process of developing technical papers for publication in formal journals.</p>	
Project: Burden of Malnutrition for the States of Uttar Pradesh, Nagaland, Uttarakhand, and Meghalaya (Phase I)	
Country: India	Grant amount: \$502,000
Project duration: 2015 – 2016	TTL: Ramesh Govindaraj
<p>Background and Objectives: The objective of this grant is to produce estimates of the burden of malnutrition and disease for four states in India – Uttar Pradesh, Nagaland, Uttarakhand, and Meghalaya – consistent with the estimates and methods used for the overall Global Burden of Disease (GBD) Project. GBD provides tools to quantify levels and trends of health loss due to diseases (including malnutrition),</p>	

injuries, and risk factors for 187 countries from 1990 to 2010. It is a collaborative project of nearly 500 researchers in 50 countries led by the Institute for Health Metrics and Evaluation (IHME) at the University of Washington. Co-financed with the Gates Foundation, the SAFANSI-II project in India is to produce an essential tool for evidence-based nutrition and health policymaking and comparative metrics for different causes of premature death and disability. In this phase, the project is to identify data and networks of collaborators and make preliminary estimates for the four states.

Outputs: The final deliverable - a study report entitled, "India in Transition: Health Outcome Trends in the States of Meghalaya, Nagaland, Uttar Pradesh, and Uttarakhand,"- has been completed and submitted. The report provides information about the diseases and injuries that prevent Indians from living long and healthy lives. It also sheds light on risk factors that cause poor health, ranging from poor diets to alcohol and drug use. Finally, the report compares the health performance of the four states of Meghalaya, Nagaland, Uttar Pradesh, and Uttarakhand to that of India as a whole. Key findings include:

- Over the past 25 years, India has seen significant gains in life expectancy, with larger gains in life expectancy for females than males. The gap between male and female life expectancy has been widening over the past 25 years.
- Gains in life expectancy have come from reducing deaths from diarrhoea, lower respiratory infections, and other common infectious diseases, and to a lesser extent preventing deaths from neonatal disorders, HIV/AIDS, and tuberculosis.
- An examination of premature mortality in the four states of Meghalaya, Nagaland, Uttar Pradesh, and Uttarakhand shows that two communicable, maternal, neonatal, and nutritional diseases (diarrhoea and neonatal preterm birth complications) cause the most premature mortality in Meghalaya and Nagaland. Meanwhile, non-communicable diseases account for the most premature mortality in Uttar Pradesh and Uttarakhand.
- In 2015, ischemic heart disease was the leading cause of health loss in India as a whole and in Uttarakhand. Leading causes of DALYs varied across the other states, with diarrheal diseases, diabetes, and chronic obstructive pulmonary disease leading in Meghalaya, Nagaland, and Uttar Pradesh, respectively.
- With the exception of Meghalaya, in 2015 the leading dietary risk factor for the other three states and India as a whole was low whole grains. Diets low in whole grains can contribute to cardiovascular disease and to diabetes and urogenital, blood, and endocrine diseases. In Meghalaya, the leading dietary risk factor component was low fruit.

A well-received dissemination event, participated in by 61 senior government officials, development partners, academic institutions, and policy think tanks, was held on November 8, 2016 in New Delhi. Building on this initial work supported by SAFANSI and the Gates Foundation, the Indian Council of Medical Research (ICMR), the Public Health Foundation of India (PHFI) and the Institute of Health Metrics and Evaluation (IHME) at the University of Washington, Seattle are now working together with a large number of stakeholders across India to estimate disease burden and risk factors trends for all the states in India.

Project: Rural Inclusive Growth and Nutrition in Andhra Pradesh	
Country: India	Grant amount: \$50,000
Project duration: 2016 – 2017	TTL: Parmesh Shah
<p>Background and Objectives: The main objective of this SAFANSI just-in-time grant is to provide technical assistance for the monitoring and evaluation activities of the agriculture and nutrition linkages interventions of the Rural Inclusive Growth (RIG) project in Andhra Pradesh (AP) and Telangana.</p> <p>Outputs: The grant helped strengthen nutrition-focus on overall impact evaluation design for AP RIG (the activities focused only on this project, as one in Telangana had operational difficulties). The design includes assessment of the impact on nutrition outcomes of greater local availability of nutritious foods, with and without nutrition awareness campaigns, and to disentangle demand and supply effects and the role of availability and affordability. The results of process monitoring, which incorporated nutrition related information, indicate that there is demand from local shops for fresh produce and for training on sale and use of hygiene products, so these interventions will receive attention as implementation progresses, hopefully contributing to greater availability of nutritious and hygiene products at the local level. The design will be presented to the client and other donors. It could be replicated by other rural livelihoods projects supported by the Bank.</p>	

Project: Women’s Enterprising Initiatives to Ensure Community Food and Nutrition Security in Upland Nuwakot	
Country: Nepal	Grant amount: \$50,000
Project duration: 2016 – 2017	TTL: Pushina Kunda Ng'andwe
<p>Background and Objectives: The just-in-time grant aims to increase opportunities for improved food and nutrition security of targeted communities in Nuwakot district through winter food production, and training seed banks, food preservation, and food enterprise development/management. Prior to the earthquake, Nuwakot was categorized as minimally food insecure with a pre-existing global acute malnutrition prevalence of 9.9%. However, after the earthquake, the district was classified as one of the most food insecure districts in Nepal, because agricultural production has been interfered by displacement of families, damage to land, and disruption of livelihood supply chains. The project is implemented by the Federation of Business and Professional Women in Nepal (FBPWN), with support from the Tarayana Foundation in Bhutan, which includes a (a) donation of 1,000 packs of germinated winter vegetable seeds, (b) training farmers, mostly women, in organic vegetable production, (c) training the farmers in community food bank management, food preservation techniques, and nutrition/meal design and preparation education, and (d) providing business development services to producers to create sustainable food enterprises that can continue to serve local markets.</p> <p>Outputs: Tarayana Foundation has given 1,000 packets of vegetable seeds and trained 91 women on organic farming, nutritional food awareness and development of “one dish meals” (focusing on eating nutritionally balanced meals with locally available food), and agribusiness development. The support provided under the project has been a good example for continuing women’s group agro business for</p>	

sustainability as well as a demonstration effect on the remaining young of the work/income earning opportunities in village in all the 3 VDCs of the upper Nuwakot. The knowhow and skills created in farming organic vegetables, the conditions established, such as starting of community seed center, community vegetable collection center, and the business management skills including business plans developed has created a demand among the women in the two cooperatives to take agro based business enterprise to the next level of development. This is well evidenced by the initiatives that have been taken by two women’s cooperatives in the construction of the vegetable center and restoration of water source for irrigation by mobilizing different local resources, government help and from their own contributions from the cooperatives.

Project: Building Effective Nutrition Communication through Partnerships: Addressing Estate Sector Nutrition Issues

Country: Sri Lanka

Grant amount: \$50,000

Project duration: 2016 – 2017

TTLs: Kumari Vinodhani Navaratne; Dilinika Peiris

Background and Objectives: The grant (a) creates an evidence based public policy dialogue via offline and online communication platforms on estate nutrition issues to lead to the development of an estate nutrition plan of action; and (b) develops a collaborative network of public, private and NGO partners engaged in advocacy, community mobilization and ICT to take forward the development and implementation of an estate nutrition plan of action. Over the last decades, studies have shown that the estate nutrition status is lagging behind the rest of the country, despite many nutrition and health interventions. In previous round, the SAFANSI-financed study has identified gaps in multi-sectoral approaches to nutrition interventions, suggesting improved knowledge and understanding of the multi-sectoral determinants of nutrition. This grant supports mapping of key stakeholders and pilot innovative communication outreach in Estate, using ICT and social media.

Outputs: The Multisectoral Nutrition Assessment in Sri Lanka's Estate Sector was finalized and printed. A dissemination and outreach strategy was developed following a targeted approach based on the findings of the communication needs assessment, an activity undertaken as part of this grant. Evidence generated from the Multisectoral Nutrition Assessment (MNA) was used to facilitate dialogue via online and offline communication platforms on estate nutrition issues. A short video documentary captured the key messages of the report and was widely disseminated online as well as at stakeholder meetings to stimulate a policy dialogue. At the national level, the findings of the MNA were disseminated to key stakeholders including Regional Plantation Companies, Ministry of Health officials and NGOs. Representatives from the donor community were also present. The need for strategic approaches such as Behavior Change Communication engaging communities were discussed and flagged for follow up. A media strategy using all three Sri Lankan languages (English, Sinhala and Tamil) was followed and highlights of the report and the grassroots initiatives building community youth capacity for better nutrition were placed in widely read newspapers in all three languages. 50 youth were trained on the key findings of the MNA, including nutrition message dissemination through social media.

Project: Integrating Nutrition Promotion and Rural Development (INPARD)	
Country: Sri Lanka	Grant amount: \$198,000
Project duration: 2015 – 2017	TTL: Ulrich K. H. M. Schmitt , Seenithamby Manoharan

Background and Objectives: The grant development objective of the INPARD program is to investigate whether a multi-sectoral rural development program can be utilized to deliver nutrition promotion intervention within rural Sri Lanka and whether this is effective in improving nutrition outcomes. Building on social capital developed by a Bank-financed community driven development project, ReAwaking Project (RaP), in conflict-affected North East Province, SAFANSI-I financed Integrating Nutrition Promotion and Rural Development (INPARD) Project. INPARD supported nutrition promotion activities implemented through multi-sectoral government stakeholders, including health, agriculture, rural development, administration, education, fisheries and Samurdhi (poverty eradication national program). INPARD’s multi-sectoral approach in nutrition generated substantial interests in academia and among international agencies. In 2015, INPARD was presented at a symposium on multi-sectoral approaches to nutrition promotion hosted by Sri Lanka Medical Association Scientific Sessions, Global Food Security Conference in Ithaca, and International Society for Behavioral Nutrition and Physical Activity (ISBNPA) in Edinburgh, and WHO’s dialogues on non-communicable disease prevention. It will also be presented at the International Union for Health Promotion and Education (IUHPE) conference in Brazil in May 2016.

Outputs: The follow-up impact evaluation was completed. A quantitative evaluation of the intervention showed that vegetable consumption among both men and women increased in INPARD areas by extra 2 servings or 160 grams per week per person, while there was a small loss (0.1 of a serving) among men and women in control areas. Similarly, we recorded an increase in the percentage of men and women classified as 'healthy weight' and an increase in prevalence of those with a healthy waist circumference in INPARD areas. There also was an increase in the prevalence of individuals with a healthy waist circumference in INPARD areas for both sexes. Moreover, INPARD interventions were heterogeneous across different villages and areas, as they were identified by the individual community, thus, the targets of the interventions between districts and villages varied. In areas where high salt consumption was prioritized as an issue, there were large decreases in the percentage of people adding salt to rice.

School data also show that there was a drop in INPARD areas in the number of school with sweets, chocolate or ice cream available within schools for students to purchase. In INPARD schools, the percentage who did not eat fast food in the past week increased from 12% to 23% among females and from 7% to 18% among males. In the INPARD intervention group, the percentage of male and female pupils who had low levels of consumption (“less than one time per day” or “I did not drink milk in the past 30 days”) decreased. There was a slight increase in the intervention group the proportion of students who said they had not had soft drinks in the past 30 days.

INPARD study was participated by Ministry of National Policies and Economic Affairs, Ministry of Health, Ministry of Economic Development, Ministry of Agriculture, Ministry of Education, WHO, UNICEF, University of Colombo, University of Sri Jayawardenapura, University of Jaffna, Eastern University of Sri Lanka, University of Oxford, and the Australian National University. Most importantly, the study supports Government of Sri Lanka to develop National Nutrition Plan with these data.

3. Pipeline

Project: Tamil Nadu Nutrition House Pilot Program	
Country: India	Grant amount: TBD
Project duration: 2017 – 2019	TTL: Izabela Leao
<p>Background and Objectives: The project development objective (PDO) of the impact evaluation is to estimate the causal effect of the Nutrition House Pilot Project in Tamil Nadu on nutrition indicators, and explore whether access to nutritious meals and services in the project areas result in increased nutrition outcomes. A key intervention will seek to prepare nutrient-dense snacks and foods out of goods that are easily perishable or underutilized and that, in some cases, would otherwise be wasted. The transformation of the recovered food waste into nutrient-dense snacks and foods will take place at the Nutrition House, and will be prepared by beneficiaries (students) of the Chefs Certification Program. The Nutrition House will host a restaurant-school that will offer workshops on nutrition and the benefits of underutilized foods, as well as on traditional recipes. The pilot will benefit communities by addressing the issue of food loss and waste through innovation and technology, while promoting safe and nutritious foods and services.</p>	

Project: Enterprise Development for Nutrition and Sanitation, Bihar, India	
Country: India	Grant amount: TBD
Project duration: 2017 – 2019	TTL: Mohini Kak, Vinay Kumar Vutukuru and Mio Takada
<p>Background and Objectives: This program will support (i) the design of a strategy for the development of nutrition and sanitation social enterprises in Bihar; and (ii) provide technical assistance for implementation of the same, contributing to improving access of nutrition and sanitation products and services to households as part of the recently approved Bihar Transformative Development Project (USD 415 million) in the state.</p>	

Project: Nutrition Parliament: Parliamentarians and State Legislators for Collective Action	
Country: India	Grant amount: TBD
Project duration: 2017 – 2019	TTL: Ashi Kohli Kathuria
<p>Background and Objectives: The objective of this project is to improve the understanding of nutrition as a development issue among the Parliamentarians and State Legislators in India in order to seek all party solutions to increase public accountability on nutrition for better access to safe and nutritious food. Success will be measured in terms of the number of Parliamentarians and State Legislators that are</p>	

engaged in a collective action and commit to good nutrition through influencing public policy, programs, and institutional arrangements on food and nutrition in targeted areas.

Project: Adolescent nutrition in Pakistan: identifying opportunities and setting priorities	
Country: Pakistan	Grant amount: TBD
Project duration: 2017 – 2018	TTL: Inaam Ul Haq
Background and Objectives: The objective of this work will be to provide concrete policy and program options to improve adolescent nutrition in Pakistan, based on evidence of the magnitude and distribution of nutrition problems, their determinants and potential factors that could facilitate or impede progress.	

Project: Technical design support for nutrition focused Conditional Cash Transfer (CCT) pilot rollout in Punjab	
Country: Pakistan	Grant amount: TBD
Project duration: TBD	TTL: Sohail Saeed Abbasi and Yoonyoung Cho
Background and Objectives: This project aims to improve the demand and uptake of health and nutrition services and promote key behaviors conducive to positive nutritional outcomes in Punjab pilot districts. The proposed activities will support Punjab Social Protection Authority (PSPA). The technical support will ensure that the design parameters and processes meet the technical standards along the results chain.	

Project: Tracking Nutrition Expenditure in Pakistan	
Country: Pakistan	Grant amount: TBD
Project duration: 2017 – 2019	TTL: Akmal Minallah Khan
Background and Objectives: This project will aim to establish a monitoring system for nutrition-specific and nutrition-sensitive public expenditure and embed it within the public financial management systems in Pakistan. The project will work closely with the Controller General of Accounts, the institutional custodian of the public financial management system, to establish a system of tracking nutrition-specific and nutrition-sensitive expenditure.	

Project: Improving Nutrition through Modernizing Agriculture in Sri Lanka (INMAS)	
Country: Sri Lanka	Grant amount: TBD
Project duration: 2017 – 2019	TTL: Seenithamby Manoharan
<p>Background and Objectives: The project will assess whether a larger agriculture project could be integrated into multi-sectoral interventions and to improve the nutritional status of individual farmers, their families and communities. It will add a significant amount of new evidence in identifying challenges for the implementation of common interventions and possible solutions to address them. This study aims to involve academia, a number of government ministries along with the media. Events will be organized for different levels of interactions from top to bottom at village, district, provincial and national levels.</p>	

Project: Addressing critical failures of Infant and Young Child Feeding (IYCF) in South Asia	
Country: Regional	Grant amount: TBD
Project duration: 2017 – 2019	TTL: Ashi Kohli Kathuria
<p>Background and Objectives: With the overall purpose of strengthening Infant and Young Child Feeding (IYCF) in South Asia, the project will address two critical failures of IYCF in selected countries in two ways. First, it will identify the challenges, barriers to and facilitating factors for appropriate IYCF behaviors, programs and policies, particularly as they relate to both (1) working women engaged in both formal and informal sectors and living in urban settings; and (2) the Baby Friendly Hospital Initiative (BFHI) for promoting & protecting breastfeeding in health facilities during the time of delivery and hospital stay. Second, it will develop options to address the challenges identified, make policy and programmatic recommendations and advocate for their adoption.</p>	

Annex 3: SAFANSI Dashboard as of March 31, 2017

Figure 1: Percentage of funding allocated by Country (%)

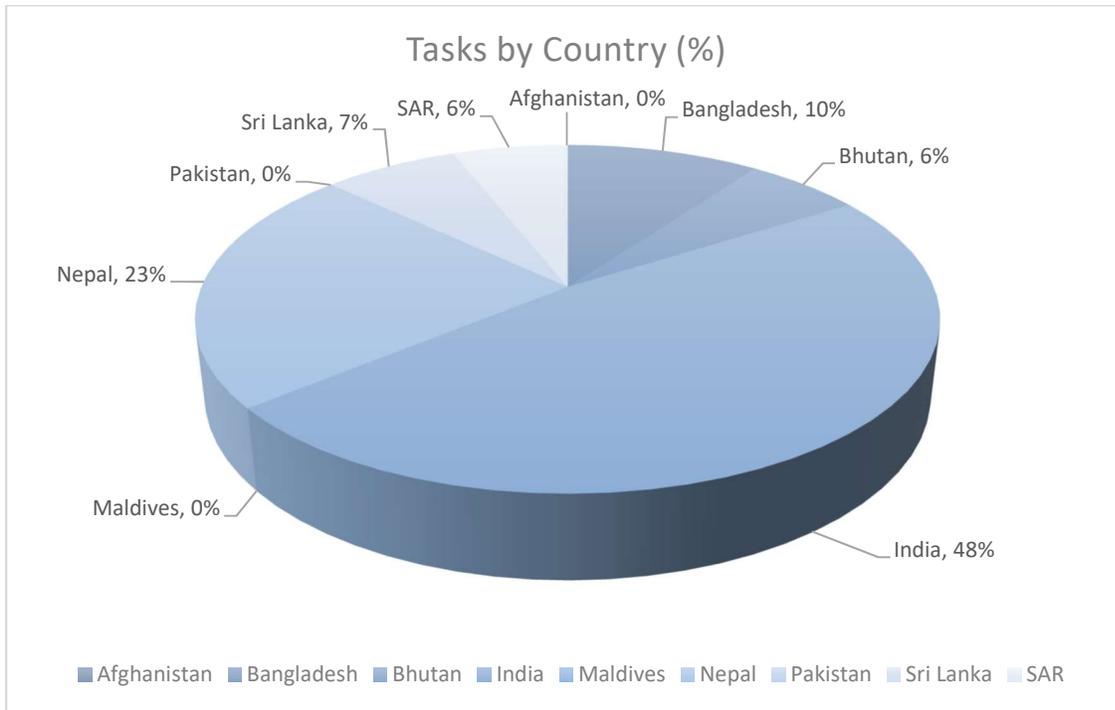


Figure 2: Funds Allocated by Country (US\$)

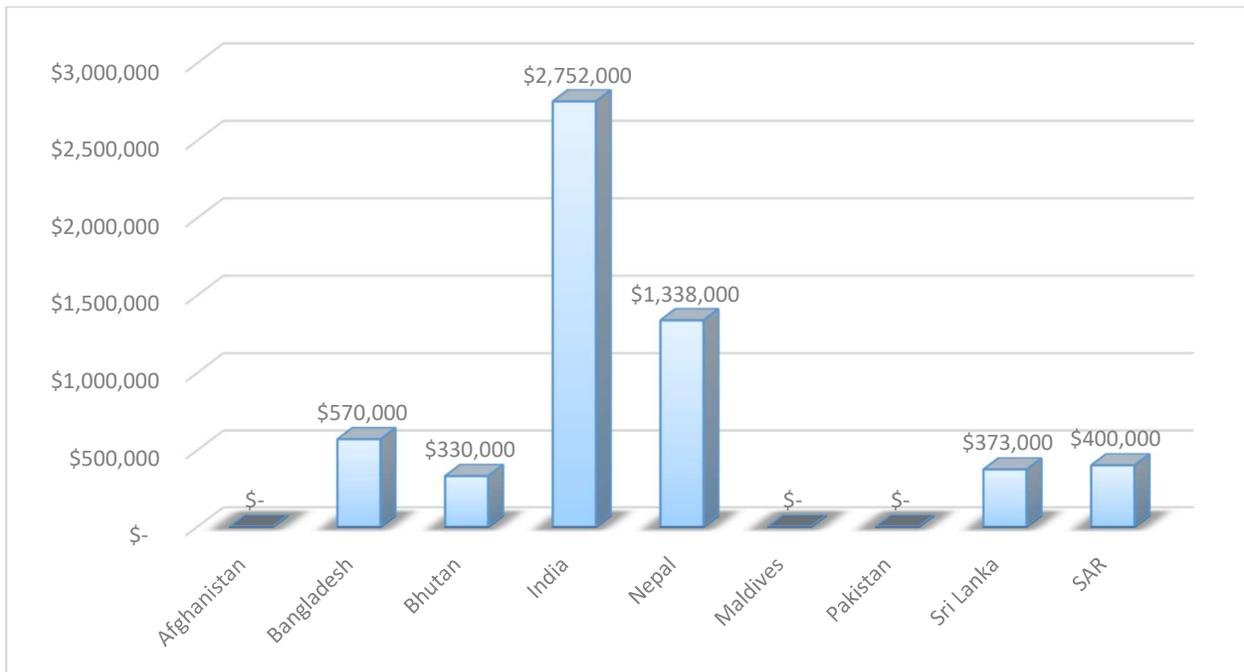
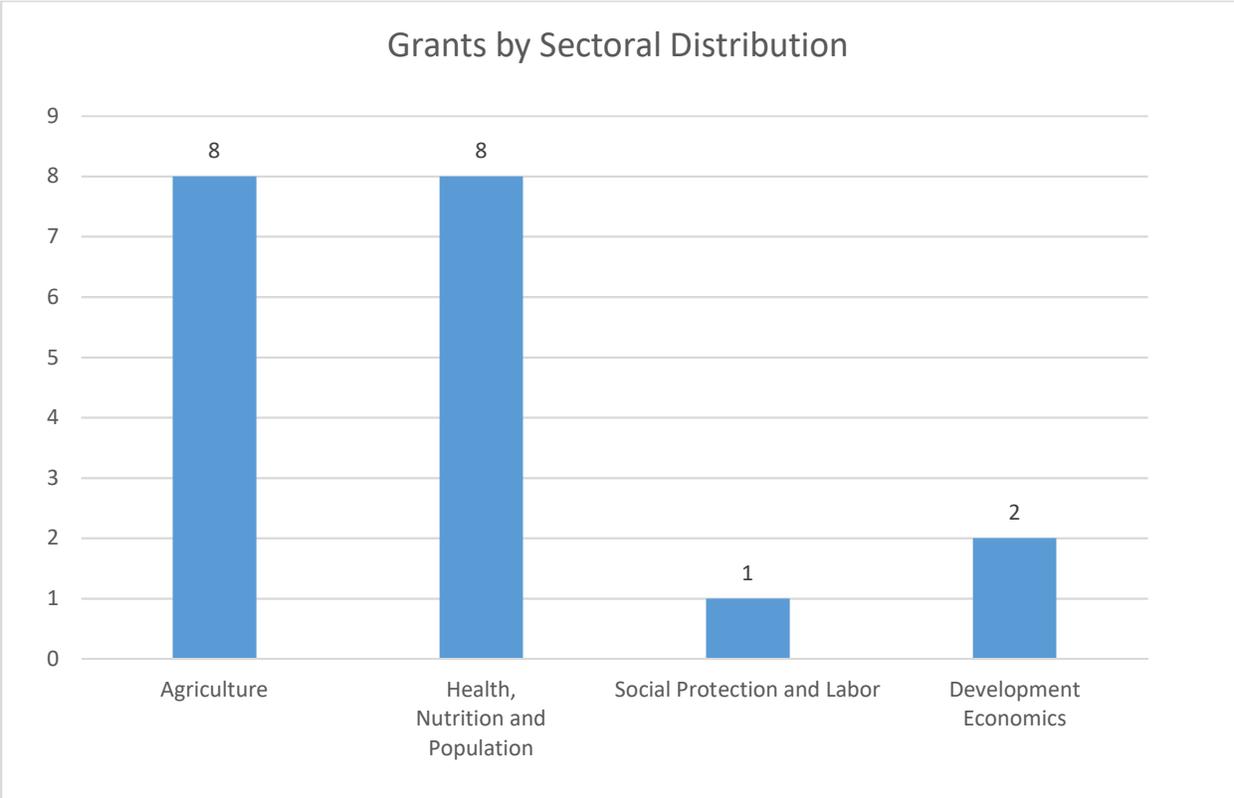


Figure 3: Grants by Sectoral Distribution



Annex 4: Results Framework¹³

Impact Indicators

(Agreed by EC and DFID. Not included in WB Results Framework)

Impact	Impact Indicators ^{*14}	Baseline	2020
<i>To improve food and nutrition security for individuals and communities in South Asia, especially among the poorer disadvantaged section of society in South Asia with particular focus on women of reproductive age and their children, especially those under two years of age</i>	<ul style="list-style-type: none"> • Prevalence of stunting (children under 5) • Prevalence of wasting (children under 5) • Prevalence of low-birthweight babies 	0	

¹³ The SAFANSI Results Framework was developed by the World Bank in collaboration with the SAFANSI Donors, and adopted by the SAFANSI Donor Committee. The Results Framework is a living document. Future targets are updated annually based on additional project approvals.

¹⁴ SAFANSI is intended only to *contribute* to impact level indicators, which provide context for the interventions supported. Baseline and end line data taken from the Global Nutrition Report (existing data sources).

Impact Indicator baseline data sets (from 2015 Global Nutrition Report):

	% Stunting <5s	% Wasting <5s	% LBW
Afghanistan	40.9	9.5	-
Bangladesh	36.1	14.3	22
Bhutan	33.6	7.6	9.9
India	47.9	20	28
Maldives	20.3	10.2	11
Nepal	40.5	11.2	17.8
Pakistan	45	10.5	32
Sri Lanka	14.7	21.4	17

Outcome Indicators¹⁵¹⁶

Outcome	Outcome indicators	Baseline	Year 1 (FY16)	Year 2 (FY 17)		Year 3 (FY 18)	Year 4 (FY 19)	Comments
			Results	Results	Target	Target	Target	
Governments and development partners have increased commitment, funding and capability to improve food and nutrition security in South Asia.	1. Number of food and nutrition policies, programs or action plans developed and adopted by Governments with financial or technical support from SAFANSI: a) which are multi-sectoral and evidence-based; and b) which support women and girls of reproductive age and/or children <2 years of age	a) 0 b) 0	a) 0 b) 0	a) 5 b) 2	a) 9 b) 5	a) 12 b) 8	a) 17 b) 11	Bangladesh Dynamics of Rural Growth informed Bangladesh's new Five Year Plan and provided key inputs to the Systematic Country Diagnostic (SCD) and Country Partnership Framework (CPF). Regional Cost Effectiveness Analysis informed Bangladesh Second National Plan of Action for Nutrition (NPAN2). Sri Lanka INPARD informs Sri Lanka's National Nutrition Plan.
	2. Contribution ¹⁷ of SAFANSI to the design, implementation or evaluation of World Bank nutrition-sensitive projects. (a) number of projects	a) 0 b) 0 c) 0	a) 1 b) \$125 m c) 0	a) 9 b) \$2.06b c) 14.6m	a) 6 b) c) 2,000	a) 10 b) \$2.1b c) 15 m	a) 15 b) \$2.15b c) 15.5 m	Regional Cost Effectiveness Analysis informs budgeting for Afghanistan System Enhancement for Health Action in Transition (SEHAT) Project (\$100 m). Bangladesh conditional cash transfer project supports IE

¹⁵ Demonstrating SAFANSI *contribution*, and attribution where possible.

¹⁶ All data is cumulative.

¹⁷ For the purposes of measurement, a contribution would take the form of direct financial support for studies or dialogues that lead to policy reform/creation, technical advice provided through SAFANSI-funded programs or as a result of SAFANSI-funded programs, or policies/programs that cite SAFANSI materials as reference in their development.

Outcome	Outcome indicators	Baseline	Year 1 (FY16)	Year 2 (FY 17)		Year 3 (FY 18)	Year 4 (FY 19)	Comments
			Results	Results	Target	Target	Target	
	(b) volume of lending (c) beneficiaries reached ¹⁸							design for Income Support Program for the Poorest Project (\$300 m / 600,000 beneficiaries). India Social Observatory (SO) supports design and evaluations of Tamil Nadu Empowerment and Poverty Reduction Project (\$ 273.7 m / 1.5 m beneficiaries), National Rural Livelihood Project (\$500 m / 4.8 m), Bihar Rural Livelihoods Project (Jeevika, \$163 m/ 1.2 m), Bihar Transformative Development Project (Jeevika 2, \$290 m/ 5 m). India Rural Inclusive Growth developed a nutrition-focused impact evaluation design for Andhra Pradesh Rural Inclusive Growth Project (\$75 m / 500,000). Nepal SHD IE supported midterm impact evaluation (\$40 m / 2,000 wards). Sri Lanka INPARD's multisectoral approach to nutrition through a CDD platform is replicated in Bangladesh Nuton Jibon (\$200 m / 1 m). Beneficiary

¹⁸ Estimated/projected or actual beneficiaries, if and when this data is available.

Outcome	Outcome indicators	Baseline	Year 1 (FY16)	Year 2 (FY 17)		Year 3 (FY 18)	Year 4 (FY 19)	Comments
			Results	Results	Target	Target	Target	
								numbers are according to project appraisal documents (PADs).
	3. Proportion (a) and Number (b) of SAFANSI-supported grants scoring at least ‘moderately satisfactory’	a) 0% b) 0	a) 36% b) 4	a) 100% b) 18	a) 80% b) 15	a) 80% b) 20	a) 80% b) 25	The majority of projects are rated satisfactory for PDO, with a few rated moderately satisfactory due to some delays in implementation.
	4. Number of national or sub-national comprehensive multi-sectoral nutrition budgets developed ¹⁹	0	0	0	0	2	3	There are two promising pipeline projects: Nutrition Government in India and Tracking Nutrition Expenditure in Pakistan. These projects could facilitate development or tracking of multi-sectoral nutrition budgets. Targets are revised for Years 3 and 4.

¹⁹ Multi-sector budgets can indicate spending in line ministries/departments directed to activities that will contribute to achieving nutrition outcomes as defined in national/subnational policies/strategies

Output Indicators²⁰

Pillar 1 - Improved Evidence and Analysis

Output 1	Output indicators	Baseline	Year 1 (FY16)	Year 2 (FY 17)		Year 3 (FY 18)	Year 4 (FY 19)	Comments
			Results	Results	Target	Target	Results	
Improved evidence and analysis available on the effects of interventions on Food and Nutrition Security outcomes in South Asia	1.1 Number of peer reviewed studies published that help to improve evidence and analysis on Food and Nutrition Security. ²¹	0	1	12	20	27	31	11 peer reviewed studies were delivered in the current reporting period: SHD IE (qualitative) in Nepal, Dynamics of Rural Growth in Bangladesh, 8 reports by India SO, and Multisectoral Nutrition Assessment (MNA) in the Estate Sector in Sri Lanka.
	1.2 Number of communications products ²² published.	0	3	21	22	34	35	18 products include: 4 nutrition videos by Bangladesh IT in CHT, 13 web-based articles and videos by India SO (downloaded 30,000 times), and one youth nutrition Facebook platform by SL MNA in Estate Sector.
	1.3 Number of (a) unique, external downloads of SAFANSI publications and	a) 0 b) 0	a) 11,225 b) 3,119	a)13,226 b) 6,888	a)12,000 b) 5,000	a) 950 b) 9,000	a) 1050 b)11,000	

²⁰ All output indicators are directly attributable to SAFANSI and will include gender disaggregated information wherever possible. All data is cumulative.

²¹ Multi-sector budgets can indicate spending in line ministries/departments directed to activities that will contribute to achieving nutrition outcomes as defined in national/subnational policies/strategies.

²² Communication products are materials that derive from technical studies/outputs financed by SAFANSI. They are intended to extend the audience of SAFANSI messages, and thus the impact of SAFANSI activities, from technical experts to policymakers, opinion leaders, interested lay-persons, and (where appropriate) the general public. They can take the form of newsletters, articles, briefs, talking point memos, videos, photo essays, and social media communications

Output 1	Output indicators	Baseline	Year 1 (FY16)	Year 2 (FY 17)		Year 3 (FY 18)	Year 4 (FY 19)	Comments
			Results	Results	Target	Target	Results	
	(b) unique external visits to the SAFANSI website.							
	1.4 Number of WB or partner led knowledge sharing events at which SAFANSI evidence or analysis is presented.	0	5	17	8	25	35	There were 12 dissemination events in the last reporting period: Nepal AFSP/SHD IE, Bangladesh Dynamics of Rural Growth dissemination, and SL MNA, and India Global Burden of Disease. SL INPARD and India SO participated in international academic conferences. Targets are increased for Years 3 and 4.

Pillar 2 – Enhanced Advocacy and Awareness

Output 2	Output indicators	Baseline	Year 1 (FY16)	Year 2 (FY 17)		Year 3 (FY 18)	Year 4 (FY 19)	Comments
			Results	Results	Target	Target	Results	
Improved awareness of Food and Nutrition Security-related challenges and demonstrated action among	2.1 Number of Ministers, parliamentarians, public officials and/or development partners participating in SAFANSI supported FNS awareness raising events.	0	502	674	194	700	750	172 Bhutanese, Nepalese, and Indian public officials participated in workshops or study visits. Targets have been increased for Years 3 and 4.

Output 2	Output indicators	Baseline	Year 1 (FY16)	Year 2 (FY 17)		Year 3 (FY 18)	Year 4 (FY 19)	Comments
			Results	Results	Target	Target	Results	
decision makers in South Asia.	2.2 Number of FNS media stories resulting from SAFANSI or SAFANSI-supported activities, products or knowledge ²³ .	0 (0)	35	55	23	65	70	India SO published 13 web-based articles. Bangladesh Leveraging IT published 4 nutrition awareness videos. SL MNA developed 2 on-line videos and 1 Facebook page managed by youth in Estates Sector. Targets have been increased for Years 3 and 4.
	2.3 Number of priority platforms, networks and/or groups actively strengthened or supported through SAFANSI that explicitly advocate for improved food and nutrition security.	0	4,102	5,958	81	6,100	6,500	91 women cooperative members in Nepal, 50 youth nutrition platform members in SL, and 1,715 NGO members and targeted CHT villagers in Bangladesh were reached. Targets were increased for Years 3 and 4.
	2.4 Number of SAFANSI grants with a successfully implemented ²⁴ communication or engagement strategy. ²⁵	0	1	7	10	17	25	6 projects successfully implemented planned communication activities: Nepal AFSP/SHD IE, Bangladesh Dynamics of Rural Growth, SL MNA in Estate Sector, India SO, India GBD, SL INPARD, and

²³ Including any qualitative evidence of reach where available.

²⁴ Strategy objectives met.

²⁵ This is intended to capture work that goes beyond individual 'products' (such as a publication or media story) and delivers a targeted / coordinated package of relevant dissemination or advocacy activities to key audiences in order to achieve a stated objective (e.g. share key emerging evidence / ensure specific government officials take 'X' action/s etc).

Output 2	Output indicators	Baseline	Year 1 (FY16)	Year 2 (FY 17)		Year 3 (FY 18)	Year 4 (FY 19)	Comments
			Results	Results	Target	Target	Results	
								Bangladesh IT Leveraging in CHT.

Pillar 3 – Wider and Stronger Systems and Capacity

Output 3	Output indicators	Baseline	Year 1 (FY16)	Year 2 (FY 17)		Year 3 (FY 18)	Year 4 (FY 19)	Sources
			Results	Results	Target	Target	Results	
Governments and development partners have strengthened policy and programming capacity to achieve FNS outcomes for the poor and disadvantaged.	3.1 Number of policy makers, government officials or practitioners trained for effective FNS program development, delivery and/or monitoring.	0	600	674	425	700	1078	172 Bhutanese, Nepalese, and Indian public officials participated in workshops or study visits. Year 3 target has been increased.
	3.2 Number of FNS systems supported through SAFANSI that help to improve food and nutrition data, monitoring and use. ²⁶	0	4	15	7	20	25	Nepal AFSP/SHD IE (household and qualitative survey), SL INPARD, India GBD (in Uttar Pradesh, Nagaland, Uttarakhand, and Meghalaya), India Rural Inclusive Growth and Nutrition (in Andhra Pradesh), and nutrition service delivery costing studies in Afghanistan and

²⁶ With a focus, where possible, on reaching the poorest and most disadvantaged, and with a capacity to disaggregate data.

Output 3	Output indicators	Baseline	Year 1 (FY16)	Year 2 (FY 17)		Year 3 (FY 18)	Year 4 (FY 19)	Sources
			Results	Results	Target	Target	Results	
								Bangladesh (Regional cost and cost effectiveness). Targets have been increased for Years 3 and 4.

Pillar 4 – Fostering Innovation

Output 4	Output indicators	Baseline	Year 1 (FY16)	Year 2 (FY 17)		Year 3 (FY 18)	Year 4 (FY 19)	Sources
			Results	Results	Target	Target	Results	
New and innovative FNS interventions tested and/or implemented at the community level.	4.1 Number of promising new concepts / technologies / approaches that are evaluated or tested with target groups (and number thereof that specifically address gender issues). ²⁷	0 (0)	7 (7)	21 (21)	9 (4)	25 (25)	30 (27)	India SO published 8 evaluation papers and developed Participatory Tracking (P-Tracking) methodology and MIS manual. Also, India GBD developed a mechanism to assess disease burden and risk factors in four states. India Rural Inclusive Growth developed a nutrition-focused impact evaluation. SL MNA in Estate Sector developed a youth nutrition Facebook communication network. Targets have been increased for Years 3 and 4.

²⁷ The poor and disadvantaged, particularly girls, women of reproductive age and children under two

Output 4	Output indicators	Baseline	Year 1 (FY16)	Year 2 (FY 17)		Year 3 (FY 18)	Year 4 (FY 19)	Sources
			Results	Results	Target	Target	Results	
	4.2 Number and percentage of tested FNS interventions that have been adopted for replication and/or scaling-up.	0 (0%)	0	4	7	15	18	India SO's P-Tracking is replicated by governments and NGOs, including nationwide effort in Indonesia. India GBD is being replicated in all Indian states. Nepal Women's Enterprise Initiative in Newakot replicated "one dish meal" developed by a women's NGO in Sri Lanka. SL INPARD's multisectoral approach to nutrition in a CDD platform is replicated in Bangladesh Nuton Jibon.
	4.3 Number of beneficiaries reached through food and nutrition security innovation pilots, a) total # reached, b) # women, c) # children under 5 years of age reached. ²⁸	a) 0 b) c)	a) 100,750 HHs b) 1,750 c) 350	a) 100,906 b) 1,871 c) 350	a) 2,000 b) 500 c) 350	a) 102,000 b) 2,000 c) 700	a) 105,000 b) 2,300 c) 1000	91 women were trained on one dish meals through Nepal Women's Enterprise Initiative, 50 youth were trained on nutrition communications through social media in the Estate Sector, and 1,715 NGO workers and targeted CHT villagers were trained through nutrition videos in Bangladesh. Targets have been increased for Years 3 and 4.
	4.4 Number and percentage of innovation	0 (0%)	0 (0%)	0 (0%)	11 (80%)	15 (80%)	21 (80%)	Based on project reports, beneficiary feedback was overall

²⁸ With a focus on under two year olds to address stunting

Output 4	Output indicators	Baseline	Year 1 (FY16)	Year 2 (FY 17)		Year 3 (FY 18)	Year 4 (FY 19)	Sources
			Results	Results	Target	Target	Results	
	pilots where communities and clients report satisfaction.							positive on Bangladesh CHT, SL INPARD, India GBD, and India SO.

Annex 5: Publications and Knowledge Products

1. Bank Policy Research Working Paper Series

Joshi, S. and Rao, V., "Who should be at the top of bottom-up development: A case-study of the National Rural Livelihoods Mission in Rajasthan, India", World Bank Group Development Research Group Poverty and Inequality Team Policy Research Working Paper 7996, March 2017 (India: Social Observatory)

It is widely acknowledged that top-down support is essential for bottom-up participatory projects to be effectively implemented at scale. However, which level of government, national or sub-national, should be given the responsibility to implement such projects is an open question, with wide variations in practice. This paper analyzes qualitative and quantitative data from a natural experiment in the state of Rajasthan in India, where a large national flagship project that mobilized women into self-help groups for micro-credit and created a women's network for other development activities was implemented in two different ways. Some sub-regions were given to the state government of Rajasthan to manage, while the Government of India centrally managed other sub-regions. The study finds that the nature of top-down management had a large bearing on the nature and quality of local-level facilitation. Centrally and locally managed facilitators formed several groups with similar financial performance. But centrally managed facilitators formed groups that were less likely to engage in collective action, be politically active, and engage with other civil society organizations. These results raise important questions on how responsibilities for participatory development projects should be devolved, and how the nature of management affects the sustainability of bottom-up intervention.

<http://documents.worldbank.org/curated/en/969661488810217801/pdf/WPS7996.pdf>

Vivian Hoffmann, V., Rao, V., Surendra, V., and Datta, U., "Relief from Usury: Impact of a Community-Based Microcredit Program in Rural India", World Bank Group Development Research Group Poverty and Inequality Team Policy Research Working Paper 8021, April 2017 (India: Social Observatory)

The impact of micro-credit interventions on existing credit markets is theoretically ambiguous. Previous empirical work suggests the entry of a joint-liability lender may lead to a positive impact on the informal lending rate. This paper presents the first randomized controlled trial-based evidence on this question. Households in rural Bihar, India, were offered low-cost credit through a government-led self-help group program, the rollout of which was randomized at the panchayat level. The intervention led to a dramatic 14.5 percent decline in the use of informal credit, as households substituted to lower-cost self-help group loans. Due to the program, the average rate paid on recent loans fell from 69 to 58 percent per year overall. Rates on informal loans also declined slightly. Among landless households, informal lending rates fell from 65.5 to 63.2 percent, decreasing by 40 percent the gap in rates paid by landless versus landowning households. Two years after the initiation of the program, significant positive impacts on asset ownership among landless households were apparent. Impacts on various indicators of women's empowerment were mixed, and showed no clear direction when aggregated, nor was there any impact on consumption expenditures.

<http://documents.worldbank.org/curated/en/619581491240135589/pdf/WPS8021.pdf>

Parthasarathy, R. and Rao, V., "Deliberative Democracy in India", World Bank Group Development Research Group Poverty and Inequality Team Policy Research Working Paper 7995, March 2017 (India: Social Observatory)

This paper traces the evolution of deliberative institutions in India to understand the role of deliberation in democratic life, as well as the ways in which deliberative bodies influence, and are influenced by, entrenched social inequality. The paper first unpacks the historical roots of Indian deliberation in the pre-colonial and colonial periods, emphasizing the ways in which religious traditions fostered a culture of debate and dialogue. The paper then explores the interplay between Western liberal philosophers, most notably Henry Maine, and Indian political thinkers, including Gandhi and Ambedkar, on participatory democracy in India. The discussion then highlights the continued dialogue between Indian and Western ideas in the push for greater participatory development. Finally, the paper probes the current incarnation of state-sponsored deliberation in India—namely, village assemblies known as *gram sabhas* under the constitutionally mandated system of Indian village democracy or *Panchayati Raj*—and reviews the growing empirical scholarship about these village assemblies.

<http://documents.worldbank.org/curated/en/428681488809552560/pdf/WPS7995.pdf>

Majumdar, S., Rao, V., and Sanyal, P., “Scaling-Up on the Frontlines: A Qualitative Analysis of Implementation Challenges in a CDD Project in Rural India”, World Bank Group Development Research Group Poverty and Inequality Team Policy Research Working Paper 8039, March 2017 (India: Social Observatory)

This paper analyzes four years of qualitative data observing a large participatory anti-poverty project in India as it scales up from its first phase (covering 400,000 households) to its second (covering 800,000 households). Focusing on the frontlines of change—at the village level, the analysis finds that the key difference between implementation in the two phases of the project was that facilitators in the first phase deployed a discourse that was carefully “co-produced” with its beneficiaries. Through careful groundwork and creative improvisation, facilitators incorporated the interests of multiple stakeholders on the ground while bringing beneficiaries into the project. However, as the project scaled up, participants were mobilized quickly with a homogenous and fixed script that lacked the kind of improvisation that characterized the first phase, and which failed to include diverse stakeholder interests, objectives, and voices. These differences significantly reduced the intensity of participation and its concomitant social impacts. The study finds that the work of facilitators was embedded in a larger shift in organizational priorities within the project, which in turn was responding to a shift in the political climate.

<http://documents.worldbank.org/curated/en/610721493131639450/On-the-frontlines-of-scaling-up-a-qualitative-analysis-of-implementation-challenges-in-a-CDD-project-in-rural-India>

2. Bank Directions in Development Publication Series

World Bank Group, “Dynamics of Rural Growth in Bangladesh: Sustaining Poverty Reduction”, Agriculture Global Practice, Report Number 103244-BD, May 2016 (Bangladesh: Dynamics of Rural Growth Dissemination)

The rural economy in Bangladesh has been a powerful source of economic growth and has substantially reduced poverty, especially since 2000, but the remarkable transformation and unprecedented dynamism in rural Bangladesh are an underexplored, underappreciated, and largely untold story. The analysis identifies the key changes occurring in the rural economy, the principal drivers of rural incomes, the implications for policy, and related actions to foster future growth, further reduce poverty, and improve food security and nutrition. A substantial strength of this study is its empirical foundation, consisting of three sets of detailed data on rural households. Two of the datasets are unique in tracking the same set of households for more than two decades. These data make it possible to examine how change is occurring within and among rural households; they shed considerable light on trends that tend to be obscured at

more aggregate levels of analysis. Nationally representative surveys and aggregate secondary data provide complementary and contextually rich insights into the household data.

Gautam, Madhur; Faruquee, Rashid. 2016. Dynamics of Rural Growth in Bangladesh: Sustaining Poverty Reduction. Directions in Development--Agriculture and Rural Development;. Washington, DC: World Bank. © World Bank. <https://openknowledge.worldbank.org/handle/10986/24544> License: CC BY 3.0 IGO.

3. Bank Open Knowledge Repository

World Bank Group, “Multisectoral Nutrition Assessment in Sri Lanka’s Estate Sector”, 2017 (Sri Lanka: Nutrition Communication in Estate Sector)

This Multisectoral Nutrition Assessment assessed the nutrition situation amongst residents of the estate sector, identified the main causes of nutritional deficiencies, as well as gaps in the provision of key nutrition-related services. The findings and recommendations can be used to inform policymakers and planners who are preparing the Estate Health Strategic Policy and Plan, and thereby implement effective multisectoral nutrition and health interventions. To this end, the two main objectives of the study were to: i) Assess the size, severity, and key determinants of undernutrition in Sri Lanka's estate sector. ii) Examine residents' access to—and utilization of nutrition related services and identify the gaps, if any, in institutional and implementation arrangements. The report is organized into six chapters. Chapter second presents the methodology employed (data and framework), Chapter third gives an overview of nutritional status in the estate sector, focusing particularly on maternal and child nutrition. Using a modified UNICEF conceptual framework, Chapter fourth explores the key immediate as well as underlying and basic determinants of undernutrition. Chapter fifth reviews the degree to which nutrition is positioned in the national development agenda and discusses gaps in current nutrition specific and nutrition-sensitive programs, and the last chapter outlines recommendations for the way forward. <https://openknowledge.worldbank.org/handle/10986/26328>

4. Project Impact Evaluations (mid-term and end line) and M&E

World Bank Group, “Nepal: Sunaula Hazar Din - Community Action for Nutrition Project, Impact Evaluation Midline Report”, Development Impact Evaluation (DIME), April 2017 (Nepal: AFSP and SHD Impact Evaluations)

The impact evaluation team is conducting a rigorous evaluation in order to examine the impact of the SHD program on uptake of nutrition-enhancing practices. Following the impact evaluation study design, 141 Village Development Communities (VDCs) were randomly selected to start the SHD implementation in 2014 (early starter VDCs) and the other 141 VDCs begin project activities only in 2016 (late starter VDCs) comprising of 282 VDCs in total. By the time of the midline survey which took place in September – December 2015, early starter communities had completed up to 3 cycles¹, while late starter communities had not started any cycle. For this reason, the difference in outcome indicators between the treatment and control communities can be attributed to the SHD project. The most common goals selected by treatment communities at the time of the midline data collection were (i) ending open defecation (53%), followed by (ii) using clean and safe water (46%), and (iii) increasing consumption of animal protein among pregnant women and young children (27%).

World Bank Group, “Qualitative Study of ‘Sunaula Hazar Din’ Community Action for Nutrition Project Nepal”, Social, Urban, Rural, and Resilience Global Practice and Health, Nutrition, and Population Global Practice, March 2017 (Nepal: SHD Qualitative Assessment)

The study observed some good practice VDCs that successfully improved knowledge and practice of the target population (i.e., pregnant and lactating mothers, who could ensure children’s 1,000-day window since conception), with strong community buy-in, transparency in decision making processes, well-developed plans, and local leadership. However, it also found that SHD’s Rapid Results 100-day model was implemented overall in isolation without building capacity of coaches and community-based implementation teams or effectively linking existing platforms, such as local government and technical experts. To avoid disputes, community-driven goal selection is likely directed to benefit to entire community rather than SHD’s target population. Women’s participation in work plan implementation was found less substantive, and often minorities were not participating in SHD activities. The report will be disseminated at a national workshop and a Bank internal knowledge sharing activities.

Rolta India Ltd., “Jeevika: Solution Design for Mobile / Tab Application”, November 2013 (India: Social Observatory)

MIS manual

5. Other Reports and Papers

Khanna, M., Kochhar, N., and Sakhamuri, S., “Evaluating Tamil Nadu Empowerment and Poverty Alleviation (Pudhu Vaazhvu) Project, Additional Financing Blocks”, no date (India: Social Observatory)

This paper uses a Regression Discontinuity Design to evaluate the difference in performance of two women’s empowerment and livelihoods focused Community Driven Development Programs. The study takes place in Tamil Nadu and compares the Pudhu Vaazhvu Project (PVP) to the Tamil Nadu State Rural Livelihoods Mission (TNSLRM) from 2012 to 2016. Both projects are women centric antipoverty programs, and have the same institutional structure. Our results suggest that PVP has higher first order impacts with better access to credit and savings than TNSRLM. We see no differences in impacts on economic welfare, women’s empowerment, or political participation. We use a triple difference approach to find that longer exposure to PVP leads to decline in economic and welfare impacts.

Parthasarathy, R., Rao, V., and Palaniswamy, N., “Deliberative Inequality: A Text-As-Data Study of Tamil Nadu’s Village Assemblies”, April 2017 (India: Social Observatory)

The resurgence of deliberative institutions in the developing world has prompted a renewed interest in the dynamics of citizen engagement. Using text-as-data methods on an original corpus of village assembly transcripts from rural Tamil Nadu, India, we open the “black box” of deliberation to examine the gendered and status-based patterns of influence. Drawing on normative theories of deliberation, we identify a set of clear empirical standards for “good” deliberation, based on one’s ability both to speak and to be heard, and use natural language processing methods to generate these measures. We first show that these assemblies are not mere talking shops for state officials to bluster and read banal announcements, but rather, provide opportunities for citizens to challenge their elected officials, demand transparency, and provide information about very real local development needs. Second, we find that across multiple measures of deliberative influence, women are at a considerable disadvantage relative to men; they are less likely to speak, less likely to drive the agenda, and less likely to receive a relevant response from state officials. And finally, we show that while quotas for women on village council improve the likelihood that female citizens are heard, they have little impact on the likelihood that they speak.

Parthasarathy, R., Rao, V., and Palaniswamy, N., “Loud, but Unheard: The Challenges of Inducing Women’s Civic Participation”, no date (India: Social Observatory)

Deliberative institutions have gained popularity in the developing world as a means by which to make governance more inclusive and responsive to local needs; however, a growing body of evidence suggests that persistent gender inequality may limit women’s ability to actively participate and influence outcomes in these forums. In response, policy makers have tried to induce women’s participation by leveraging the group-based format of self-help groups (SHGs), which can build women’s social capital and develop their sense of political efficacy and identity. In this paper, we evaluate the impact of one such intervention, known as the Pudhu Vaazhvu Project, on women’s civic participation in rural Tamil Nadu. Using text-as-data methods on a matched sample of transcripts from village assembly meetings, we find that PVP significantly increases women’s participation in the gram sabha along numerous dimensions—meeting attendance, propensity to speak, and the length of floor time they enjoy. While women in PVP villages enjoy greater voice, we find no evidence that they are more likely than women in control villages to drive the broader conversational agenda or elicit a relevant response from government officials.

Paper on Gender and Jati. (India: Social Observatory)

This paper, shows that our understanding of the relationship between caste and gender inequality in India may not be accurate because of the use of broad caste categories such as Scheduled Caste (SC) and Scheduled Tribe (ST) that are used by most Indian surveys. This may have important implications for the targeting of anti-poverty programs.

World Bank Group, “Integrating Nutrition Promotion and Rural Development: Final Report 2016,” 2017 (Sri Lanka: INPARD)

Completion report

6. Blogs

World Bank. **Enabling children to grow: Tackling the multiple determinants of nutrition**, Ashi Kathuria, 08/11/2016, Online. World Bank. <http://blogs.worldbank.org/endpovertyinsouthasia/enabling-children-grow-tackling-multiple-determinants-nutrition>

World Bank. **In Bangladesh, changing behaviors for better health**. Rokeya Ahmed. 01/11/2017, Online. <http://blogs.worldbank.org/endpovertyinsouthasia/bangladesh-changing-behaviors-better-health>

World Bank. **How protein deficiencies impact the health of communities in India**. Parvati Singh. THU, 02/09/2017, Online. <http://blogs.worldbank.org/endpovertyinsouthasia/how-protein-deficiencies-impact-health-communities-india>

7. Program Briefs

Early childhood diarrhea in rural Bangladesh

The study was nested within a larger randomized controlled trial with funding from the World Bank’s South Asia Food and Nutrition Security Initiative (SAFANSI), measuring the benefits of water quality, sanitation, hand washing, and nutritional interventions to improve child health and development. The study involved comparison of outcomes in three study arms. The first arm was a sanitation only intervention, which

consisted of households receiving dual pit latrines and other hardware for the safe handling of child feces, in addition to behavior change interventions to encourage their use. The second arm was a water, hygiene, and sanitation intervention (WHS) where households received the same hardware and behavior change messaging, as well as chlorine tablets for water treatment, a lidded narrow-mouth vessel for safe water storage, and handwashing stations and soapy water at their latrine and food preparation areas. The third arm was a control where households received no interventions. In all, 1,843 households were included in this study.

World Bank. 2016. *Early childhood diarrhea in rural Bangladesh*. The South Asia Food and Nutrition Security Initiative (SAFANSI). Washington, D.C.: World Bank Group.

<http://documents.worldbank.org/curated/en/994521481108174372/Early-childhood-diarrhea-in-rural-Bangladesh>

Jeevika in rural Bihar: social mobilization and cultural transformation

The project in question is the Bihar Rural Livelihoods Project, locally known as Jeevika, translated variously as livelihoods or livelihoods expansion. Jeevika is a very large-scale, community-based poverty reduction operation which began in six districts in 2006 and which will cover all 38 districts in the state by 2022. It is implemented by the state government of Bihar with a concessional loan and technical assistance from the World Bank. The Project's principal intended targets have been very poor women whose participation entailed organizing into self-help groups of between 10 and 15 members. The settings in which the Project is carried out is all-important for examining how a development intervention can have an impact on culture and cultural identity. Bihar is one of the poorest states in the country, and its rural areas are characterized by severe caste hierarchies, patriarchy, and inequality. It is an exceptionally "hard context" in which to introduce a project that purposefully targets women's empowerment, both individually within their households and publicly within their communities.

World Bank. 2016. *Jeevika in rural Bihar: social mobilization and cultural transformation*. The South Asia Food and Nutrition Security Initiative (SAFANSI). Washington, D.C.: World Bank

Group. <http://documents.worldbank.org/curated/en/647801487142077058/Jeevika-in-rural-Bihar-social-mobilization-and-cultural-transformation>

Impacting food security and nutrition outcomes through strengthening livelihoods: the experience from India livelihood projects

While malnutrition affects households across the economic spectrum, the poorest bear the largest burden due to low calorie intake, less diverse diets, high incidence of stunting, as well as underweight and anemic children. The continued co-existence of poverty, food insecurity and malnutrition is a challenge for development because malnutrition is both a consequence of low income and also one of its causes in the long term. Over the past two decades, the poverty alleviation programs in South Asia have evolved into 'livelihood enhancement programs' with an increased emphasis on institution building, financial inclusion, livelihood diversification, productivity enhancement, market linkages, social protection, etc. As the increased economic growth and poverty reduction do not necessarily translate into improved nutrition, these programs have recognized the food and nutrition security (FNS) as an important area of intervention.

World Bank. 2016. *Impacting food security and nutrition outcomes through strengthening livelihoods: the experience from India livelihood projects*. The South Asia Food and Nutrition Security Initiative (SAFANSI). Washington, D.C.: World Bank Group.

<https://hubs.worldbank.org/docs/imagebank/pages/docprofile.aspx?nodeid=26503987>

Integrating nutrition in rural livelihoods and value chains and the role of producer companies

The state of Madhya Pradesh lags behind the country in key health and nutrition indicators. While the India average for percentage of underweight children is 47, in Madhya Pradesh it is 60 percent. The

India average for anemia during pregnancy stands at 58.7 percent with Madhya Pradesh being slightly higher at 60 percent. Similarly, for percentage of low birth-weight children, the India average is 22 percent and for Madhya Pradesh it is 29.5 percent. The World Bank supported the Madhya Pradesh District Poverty Initiatives Project-II (MPDPIP) that was implemented between October 2009 and June 2015 in 14 districts of the state. It mobilized women from 415,684 poor households into self-help groups (SHGs), facilitated credit and livelihood support through 4,070 village-level and 91 cluster-level federations, supported 18 producer companies and 16 cluster enterprises of poor producers, enabled 44,399 rural job aspirants to get and retain jobs, and helped average household incomes to increase by 51 percentage points.

World Bank. 2016. *Integrating nutrition in rural livelihoods and value chains and the role of producer companies*. The South Asia Food and Nutrition Security Initiative (SAFANSI). Washington, D.C.: World Bank Group.

<https://hubs.worldbank.org/docs/imagebank/pages/docprofile.aspx?nodeid=26503961>

The Social Observatory: A picture is worth a thousand words

Development interventions like projects supported by the World Bank all intend to have impacts that outlast the life of the projects themselves. Establishing a useful source of information that project participants and their neighbors can continue to use is one of the most effective ways to achieve this. This is not information about them that is collected and analyzed by outsiders; it is information that comes from them. They are the agents who actively collect and use it. One of the challenges that emerges right away however is how to present that information in a way that is readily accessible and straightforward, including to those who may lack literacy or numeracy, as is the case in so many rural settings. Information graphics is a means of making complex quantitative information readily understandable and relatable in a way that enables people to draw comparisons and to track changes over time. The Pudhu Vaazhvu Project (PVP) in Tamil Nadu is making purposeful use of information graphics through participatory data visualization and tracking, or “P-tracking” as it is more often abbreviated. The PVP is a community-driven development, poverty reduction operation being carried out by the state government through its Department of Rural Development and Panchayat Raj with technical and financial assistance by the World Bank. The P-tracking system developed in collaboration with project participants is used to periodically monitor a number of important indicators relating to livelihoods, health, nutrition, food security, and household well-being.

World Bank. 2017. *A Picture is Worth a Thousand Words*. The South Asia Food and Nutrition Security Initiative (SAFANSI). Washington, D.C.: World Bank Group.

<http://documents.worldbank.org/curated/en/908371487164715229/A-picture-is-worth-a-thousand-words>

A targeted rural livelihoods program in Orissa

The Targeted Rural Initiatives for Poverty Termination and Infrastructure (TRIPTI) project began in Orissa in 2009. It is a participatory livelihoods project based on community mobilization and institution building through self-help groups (SHG) and village level organizations. TRIPTI was designed in part to redress some of the shortcomings of Orissa’s earlier Mission Sakthi program, which accomplished limited outreach by including very poor scheduled castes and tribes in the process of forming self-help groups that serve as the foundation of participatory livelihoods programs throughout much of India. The new project focused heavily on identifying the least advantaged and the most likely to have been passed over by the earlier program. This involved conducting a census and situational analysis within each village, and a subsequent participatory process of villagers classifying households according to their well-being - on a spectrum between very poor and vulnerable and well-off. The evaluation of TRIPTI’s success in improving livelihoods would measure its impacts on households’ indebtedness, savings, access to credit, and consumer spending. The formation of new SHGs and gram panchayat village level federations and the restructuring of several existing ones enables the project to target these groups and federations with community investment funds. The assessment did find evidence of reduced indebtedness to costly informal creditors like moneylenders among the treatment households compared to the control households, as well as a greater likelihood they would borrow from formal credit sources like banks.

World Bank. 2017. *A targeted rural livelihoods program in Orissa*. The South Asia Food and Nutrition Security Initiative (SAFANSI). Washington, D.C.: World Bank Group.
<http://documents.worldbank.org/curated/en/457931487143179754/A-targeted-rural-livelihoods-program-in-Orissa>

8. On-line Communication/Videos

Youth Facebook Nutrition Platform – followed by 107 people (Sri Lanka: Nutrition Communication in Estate Sector)

<https://www.facebook.com/ITShakthi/>

Lactating mothers’ nutritious food and colostrum (Bangladesh: Leveraging IT in CHT)

<https://www.youtube.com/watch?v=NzUS9K8aYsc&t=136s>

Locally available nutritious food (Bangladesh: Leveraging IT in CHT)

<https://www.youtube.com/watch?v=wjfUItsEMbI>

Care and nutrition of Pregnant women (Bangladesh: Leveraging IT in CHT)

https://www.youtube.com/watch?v=v1DcpWIpl_s&t=1s

Child diseases and prevention (Bangladesh: Leveraging IT in CHT)

<https://www.youtube.com/watch?v=Qshz2rCaaM0&t=32s>

Onno Ruhl interview (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/video-onno-ruhl-country-director-india-on-the-social-observatory>

Developing a science of adaptive delivery (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/world-bank-policy-research-talk>

Whose data is it anyway? (India: Social Observatory) (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/whose-data-is-it-anyway>

Can quick project data also be reliable data for action? (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/can-quick-project-data-also-be-reliable-data-for-action>

How do you collect continuous in-depth qualitative data on women's empowerment? (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/how-do-you-collect>

How do you collect data from 100 village meetings in a single day? (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/how-do-you-collect-data-from-100-village-meetings>

How do you collect continuous in-depth qualitative data on women's empowerment? (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/how-do-you-collect>

Participatory Tracking: Visualizations (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/participatory-tracking-community-designed-visualizations>

Participatory Tracking: Data Collection (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/participatory-tracking-data-collection>

Participatory Tracking: Designing Visualizations (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/participatory-tracking-designing-visualizations>

Participatory Tracking: Customizing Visualizations (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/participatory-tracking-customizing-visualizations>

Participatory Tracking: Data Feedback Experiment (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/participatory-tracking-data-feedback-experiment>

Adaptive learning in development projects (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/aga-khan-foundation-canada-talk>

Power to the People (India: Social Observatory)

<http://socialobservatory.worldbank.org/articles/power-to-the-people>

Annex 6: SAFANSI Risk Matrix²⁹

No.	Risk Description	Examples	Gross Risk		Current mitigation	Net Risk		Within risk appetite (Y/N)
			Impact (1-5)	Likelihood (1-5)		Impact (1-5)	Likelihood (1-5)	
External risks								
1	Overlap with other food and security initiatives in the Region.		1	2	Analysis prepared on all food and security actors in the Region to avoid duplication of efforts. Active coordination on the ground.	1	1	y
2	Insufficient or decreased funding availability		4	5	With the DFID exit from SAFANSI and cancellation of outstanding payments, SAFANSI funding availability has been significantly decreased. Active fund management with donors and strategic allocation of remaining funding. Outreach to additional donors to support the program.	4	5	y

²⁹ Last updated following the April 2017 SAFANSI Donor Committee Meeting.

Project implementation risks								
3	Limited commitment from Governments to Food and Nutrition Security		3	2	South Asia region countries have shown increased commitments to Food and Nutrition Security, and many countries/subnational governments adopted nutrition policies/strategies under SAFANSI I. SAFANSI 2 will continue to communicate the evidence and analysis generated by its activities, targeting policymakers, opinion leaders, Bank management, and implementers.	2	1	y
4	Socio-political instability or other disruptions in the region could slow down implementation of the program	e.g./ natural disaster, fuel shortage in Nepal	3	2	Monitoring of socio-political situation in Region and adjusting program implementation accordingly	3	2	y
5	Increased number of Recipient executed activities will slow disbursement rate.	An increased number of RE activities will likely slow down initial disbursement rates due to longer preparation	3	1	Due to limited funding availability, the active SAFANSI portfolio contains no RE activities.	3	1	Y

		times for RE activities						
6	Results Framework does not fully capture the outputs and outcomes of the program		2	3	Results Framework will be reviewed on a regular basis and updated as necessary to reflect the changing program. In addition, the communications strategy will provide qualitative results reporting to complement the quantitative results reporting through the Results Framework.	1	2	y
7	Poor program design and/or quality mean the program is not effective and doesn't deliver against the strategic vision.	e.g. poor quality implementation of the grants	4	2	All proposals are subject to a 2-tier review process--(1) technical panel review for quality and relevance; and (2) a strategic review for relevance to country and regional priorities and overall program progress. Once approved, grants are processed following World Bank Policies and Procedures and held to the same quality standards as Bank-financed activities. as part of the grant processing, projects will be peer reviewed for technical and design quality.	2	1	y
8	Lack of alignment with EC FNS		3	2	Increased information sharing and upstream engagement with EC country delegations.	3	2	Y

	programming for the South Asia region							
Management risks								
9	Lack of alignment with WBG regional priorities		1	1	SAFANSI's objectives are fully aligned with the Region's food and nutrition strategy and active involvement and guidance from technical leads	1	1	y
10	WB task team has insufficient capacity for strong program management		3	1	Full staffing matrix for SAFANSI in place with roles and responsibilities clearly defined	1	1	y
11	Fraud and corruption: Funds are not used as intended.		3	1	All grants are subject to WBG fiduciary control mechanisms. For BE grants, all contracting follows procedures outlined in the rules for procurement of individual consultants or firms. For RE grants, WB financial management, procurement, safeguards, and legal staff are assigned to monitor design and implementation.	2	1	Y