Abstract

A multi sector effort is essential to improve the nutritional status of children and women. For effective and efficient implementation of multi sector interventions, each sector should be well positioned to deliver the required services. With the aim to understand the bottlenecks to effective implementation of nutrition operations in Nepal and provide strategies and recommendations to overcome these challenges, researchers from the World Bank conducted a qualitative study in 2016/17 entitled: “Study of Operational Strategies to Reduce Malnutrition in Nepal”. This research brief highlights various institutional structures and non-government partnership arrangements that contribute to effective implementation of nutrition related activities.

Institutional Structure and Non-Government Partnership for Nutrition Programs

In Nepal, addressing malnutrition has traditionally been viewed as the responsibility of health sector only. However more recently, other sectors have recognized that they have a role to play. It is important for all sectors that work on nutrition related tasks to take stock of their institutional structures and human resources to ensure effective implementation.

A Dedicated Project/Program Management Unit

Substantial evidence points to the need for establishing a dedicated program/project management unit (PMU) for nutrition specific or sensitive interventions. For instance, the Ministry of Health (MOH) has a Nutrition Section under the Child Health Division with dedicated staff who have the sole responsibility of executing nutrition interventions as per their mandate. This section effectively designs, implements and monitors activities based on an annual work plan and budget. The Agriculture and Food Security Project (AFSP) under the Ministry of Agriculture Development (MOAD) also has a central PMU manned and supported by adequate staff to implement project activities.

In other cases, for example under the Sunaula Hazar Din (SHD) project which was implemented by the Ministry of Federal Affairs and Local Development (MOFALD), the PMU staff were involved in other projects and other ministerial jobs in addition to implementing the SHD project.

This bifurcation of roles and responsibilities created tension as staff were pulled in different directions.

Human Resource with Adequate Capacity

Although addressing malnutrition has now been recognized as multi sector agenda and different ministries have come to understand their roles, success depends on the capacity of individual agencies to deliver their tasks.

The MOH is continuing to oversee its nutrition specific interventions with staff who are equipped with adequate capacity. The nutrition specific services are delivered through its health facilities including hospitals, primary health care centers and health posts. Female Community Heath Volunteers (FCHVs) are also actively involved. Although the MOH is fairly-well equipped to deliver such services, its capacity is enhanced by the technical and financial support of donors such as UNICEF, USAID, UNFPA and World Food Program (WFP).

New ministries which have recently recognized their roles in combatting malnutrition should ensure that they have adequate capacity to implement their share of work. For example, to better deliver food security and nutrition interventions under the AFSP, the MOAD sought technical assistance from various
supporting structures including the Nepal Agriculture Research Council, the Department of Food Technology and Quality Control, and the Food and Agriculture Organization.

On the other hand, the SHD Project by MOFALD suffered implementation challenges at the local level because of inadequate human resources. MOFALD being a new ministry to implement the standalone nutrition project had to rely on the capacity of the Village Development Committees (VDCs) for project management at the local level, even though: (i) activities under the SHD Project were very different from other activities that VDCs had experience with implementing and supervising; (ii) VDCs did not have adequate knowledge about the complex nature of malnutrition; and (iii) VDC members were already quite busy and otherwise occupied.

It is important that relevant ministries work towards creating the required human resource positions to implement nutrition related interventions. Simultaneously, until such provisions are available, services should be procured through non-government partnerships.

**Non-Government Partnerships**

Non-government partners can play a critical role in strengthening public service delivery of nutrition interventions. They can either be an International/Non-Governmental Organization (I/NGO), a technical firm or a United Nations’ organization. They can be hired through the government’s budget or be part of technical assistance provided by Development Partners.

Non-government partnerships can provide technical expertise related to nutrition specific and sensitive interventions, human resource deployment, supervision and monitoring and information management. If a non-government partnership is deemed necessary, then it should be recruited early in the process.

Evidence from the field suggests that some NGOs were not performing their assigned tasks in various government and donor run projects. They were not paying salaries to their staff and obliging with their duties. It appeared in some cases that NGOs had bid quite low to win the contract and later they could not perform very well.

**Policy Lessons:**

- Establish a dedicated Implementing Unit with adequate human resource who have responsibility for implementing the nutritional interventions which will ensure focus and prevent distractions from other ministerial work.
- Non-government partnerships play an important role and nutrition projects/programs should build in such opportunities.
- Given the possibility of non-performance by the hired non-government partners (be it NGOs or private firms), their accountability can be ensured by paying for verified results.


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