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Summary report on the strategic evaluation of WFP's work on nutrition and HIV/AIDS

Executive summary

The strategic evaluation of WFP's work on nutrition and addressing HIV and AIDS policies serves the dual purpose of accountability and learning, particularly the latter. It is aimed at providing lessons and insights to help guide WFP's positioning in relation to HIV/AIDS and nutrition so as to improve operations at the country level and accountability to affected populations. The evaluation was conducted between October 2021 and November 2022.

The evaluation used a range of data sources to respond to the evaluation questions, including an extensive literature review covering global nutrition trends from 2017 to 2021 and global HIV/AIDS trends from 2010 to 2022, a review of global and country-level documents and data, interviews with more than 160 key informants, six virtual data collection missions and six desk reviews.

The evaluation was timely for both the global nutrition community and WFP internally. A period of considerable global change followed the 2021 United Nations food systems summit and included changes in the Scaling Up Nutrition movement. The Global AIDS Strategy for 2021–2026 focused on accelerating progress in ending AIDS, but the Joint United Nations Programme on HIV/AIDS faced considerable resource constraints. Internally, WFP approved a new strategic plan for 2022–2025 with a commitment to nutrition integration as one of four cross-cutting priorities and people living with HIV are considered as one of several vulnerable groups.

The evaluation findings provide the basis for strategic consideration of the factors that have helped or hindered WFP's contributions to improved nutrition and food security, in terms of the enablers of and gaps in WFP's capacity and organizational arrangements for taking forward the commitment to nutrition integration outlined in the new strategic plan.

In line with WFP evaluation policy (2022) (WFP/EB.1/2022/4-C), to respect the integrity and independence of evaluation findings the editing of this report has been limited and as a result some of the language in it may not be fully consistent with the World Food Programme's standard terminology or editorial practices. Please direct any requests for clarification to the Director of Evaluation.

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The HIV and AIDS policy was relevant at the time that it was written, but over the last 12 years that relevance has diminished. The nutrition policy remains largely relevant, although there has been some global shift in emphasis in some of its key components. Although there are clear references to gender in the nutrition and HIV/AIDS policies, there is limited evidence that gender equality and inclusion issues have been incorporated into programme design and implementation.

The evaluation concludes that the adequacy and performance of the HIV/AIDS and nutrition policies have followed two very different pathways, with nutrition now playing a central role in the new strategic plan while the attention paid to HIV has diminished over time. The commitment to nutrition integration is not yet matched by an institutional architecture for its full implementation. In that regard, the knowledge and capabilities needed to integrate nutrition into programmes are increasing, but the capability to integrate nutrition into WFP systems, such as those for performance measurement, supply chains, partnerships and advocacy, is lagging behind.

To a large extent, nutrition-specific interventions have met the nutrition needs of targeted beneficiaries in affected populations. With respect to performance, effectiveness is largely underpinned by WFP's responsiveness, innovation in certain key areas and strong reputation, especially in emergency and supply chain operations. The implementation of nutrition-sensitive programming with a long-term focus has been affected by funding issues. School feeding has been identified as an entry point for linking local agriculture, food systems and nutrition interventions and as a means of addressing the double burden of malnutrition, but there has been insufficient focus on making systems more nutrition-sensitive and on long-term capacity strengthening. WFP has prioritized the strengthening of strategic partnerships, leading to successful outcomes, but limited investment over the longer term is compromising the ability to sustain coherent approaches to implementation, advocacy and fundraising.

The evaluation report makes six recommendations referring to the need to conduct an internal corporate strategic dialogue aimed at reaching agreement on how best to integrate HIV considerations into programmes; articulate a clear and comprehensive approach to nutrition integration; develop guidance on the operationalization of nutrition integration; enhance capacities in nutrition and HIV throughout WFP; consolidate and communicate learning throughout WFP and use it to inform advocacy approaches; and pursue strategic alliances, focusing on comparative advantages.

Draft decision*

The Board takes note of the summary report on the strategic evaluation of WFP's work on nutrition and HIV/AIDS (WFP/EB.1/2023/5-A) and the management response (WFP/EB.1/2023/5-A/Add.1) and encourages further action on the recommendations set out in the report, taking into account the considerations raised by the Board during its discussion.

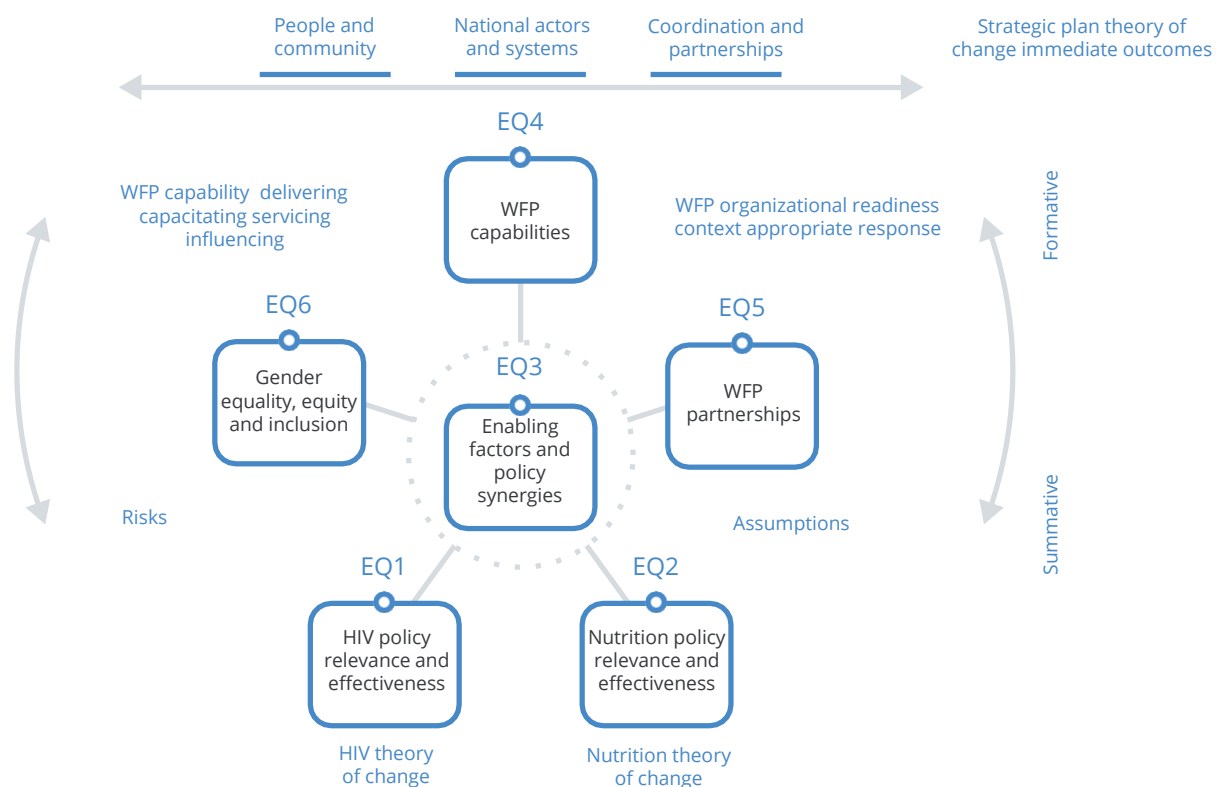
* This is a draft decision. For the final decision adopted by the Board, please refer to the decisions and recommendations document issued at the end of the session.

Introduction

Evaluation features

1. This strategic evaluation had the dual purpose of meeting accountability and learning needs, with a particular focus on learning. The evaluation objectives were to assess the continued relevance of WFP's policies on HIV/AIDS and nutrition and the effects achieved as a result of those policies, and assess the extent to which WFP has sufficient organizational readiness to meet the challenges set out in the Decade of Action on Nutrition (2016–2025) and in corporate guiding frameworks, including the strategic plan for 2022–2025.
2. The evaluation addressed six evaluation questions that consider:
 - the relevance and effectiveness of the nutrition policy;
 - the relevance and effectiveness of the HIV and AIDS policy (evaluation questions 1 and 2);
 - the enabling factors and synergies that have contributed towards (or hindered) effective implementation of the two policies;
 - whether WFP has the capability to integrate nutrition going forward; (evaluation questions 3 and 4);
 - the capacity within WFP to partner effectively in the nutrition and HIV/AIDS policy spaces, and the extent to which partnerships have been transformational in contributing to wider outcomes (evaluation question 5); and
 - whether and how gender equality, equity and inclusion approaches have been integrated into nutrition and HIV/AIDS work across the organization (evaluation question 6).

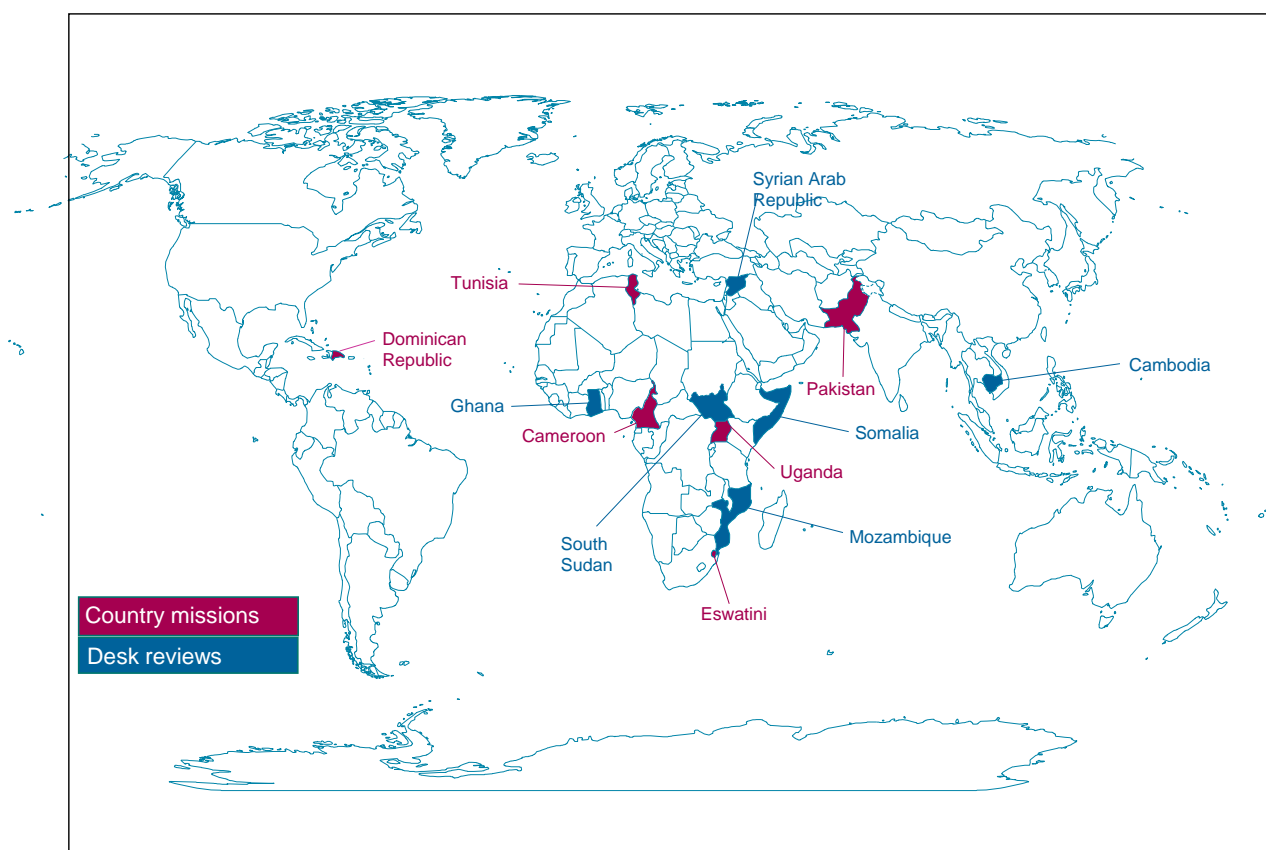
Figure 1: Evaluation conceptual framework



Abbreviation: EQ = evaluation question.

3. A conceptual framework (see figure 1) was developed to show the linkages between the summative and formative aspects of the evaluation.
4. The evaluation was conducted between October 2021 and November 2022. It used a range of data sources to respond to the evaluation questions, including an extensive literature review covering global nutrition trends from 2017 to 2021 and global HIV/AIDS trends from 2010 to 2022, a review of global and country-level documents and data, interviews with more than 160 key informants, virtual data collection missions and desk reviews (see figure 2).

Figure 2: Mapping of virtual country missions and desk reviews



Context

5. In 2015, the Joint United Nations Programme on HIV/AIDS (UNAIDS) declared that Millennium Development Goal 6, “halting and reversing the spread of HIV” had been achieved, and the launch of the Sustainable Development Goals (SDGs) saw HIV/AIDS being addressed as an integral element of several of the goals. In 2016, UNAIDS launched its “fast-track” strategy reflecting the new “test-and-treat” protocols, which – combined with efforts to increase access to treatment – made a dramatic difference in terms of mortality and morbidity rates, with the number of people in treatment rising from 7.8 million in 2010 to 29 million in 2021,¹ and a 31 percent decrease in the number of new infections by 2020. Nevertheless, in 2020, an estimated 10 million people living with HIV/AIDS did not have access to treatment,² and there is a global decline in funding. According to UNAIDS: “Momentum established following global agreement on the Millennium Development Goals (MDGs) in 2000 has been lost in the SDG era.”

¹ Joint United Nations Programme on HIV/AIDS. 2022. [Global HIV & AIDS statistics — Fact sheet](#).

² Joint United Nations Programme on HIV/AIDS. 2021. [Global AIDS Strategy 2021–2026 — End Inequalities. End AIDS](#).

6. Since 2015, global attention has shifted from the predominant focus on hunger of the Millennium Development Goals to a more specific focus on nutrition in the SDGs and the anchoring of nutrition policy and programming in the six World Health Assembly global targets for improving maternal, infant and young child nutrition.³ Over the years, a complex global architecture for action on nutrition and food security has formed, with the establishment of several inter-stakeholder coordination mechanisms and umbrella organizations, such as the United Nations Renewed Efforts Against Child Hunger and Undernutrition initiative in 2008 and the Scaling Up Nutrition (SUN) movement launched in 2010.⁴
7. In 2021, nutrition approaches continued to be galvanized by efforts to improve the evidence for nutrition action and an increasing understanding of nutrition's critical role in disease, individual growth and development and countries' sustainable development. While progress has been made in reducing the rates of stunting in children, underweight in women and iodine deficiency, reductions in the prevalence of wasting have been very uneven in some countries, and levels of undernutrition among women and children remain unacceptably high.
8. The funding landscape has changed significantly, with new funding mechanisms emerging. The Nutrition for Growth Summit held in December 2021 resulted in more than USD 27 billion being committed to tackling global malnutrition and hunger. However, the current financial commitment is still nowhere near the amount needed to end malnutrition.⁵

Subject

9. The WFP HIV and AIDS policy was approved in 2010 and was developed in the context of the UNAIDS strategic plan for 2011–2015 ("Getting to Zero")⁶ and the WFP strategic plan for 2008–2013. Since then, there have been three global AIDS strategies⁷ and four WFP corporate strategies,⁸ but the policy has not been assessed since its approval. The HIV and AIDS policy is focused on the provision of short-term support to individuals and households while acknowledging the need for handover strategies given the chronic nature of the condition. The policy includes a logic model with three objectives: ensuring nutritional recovery and treatment success through the provision of nutrition and food assistance; mitigating the effects of AIDS on individuals and households through the use of sustainable safety nets; and increasing government ownership of food and nutrition interventions as an essential part of national HIV/AIDS plans.
10. The 2017 nutrition policy was developed in response to the recommendations from the 2015 evaluation of the previous policy, approved in 2012, and in the context of the WFP strategic plan for 2017–2021, which included "improve nutrition" as one of its five strategic objectives. The policy shifted away from a reliance on product-based solutions towards a holistic focus on all forms of malnutrition and multisectoral approaches, including the intention of improving gender integration. It also placed emphasis on providing support to governments as they develop and deliver national plans and policies for ending

³ World Health Organization. 2014. *Global nutrition targets 2025: policy brief series*.

⁴ The Scaling Up Nutrition movement is a multi-stakeholder collaboration that seeks to catalyse coordinated action for better nutrition in Scaling Up Nutrition member countries.

⁵ United Nations Children's Fund. 2021. *More than US\$27 billion committed to tackle global malnutrition and hunger crisis at the Tokyo Nutrition for Growth Summit*.

⁶ Joint United Nations Programme on HIV/AIDS. 2010. *2011–2015 Strategy – Getting to Zero*.

⁷ Joint United Nations Programme on HIV/AIDS. 2010. *2011–2015 Strategy – Getting to Zero*; Joint United Nations Programme on HIV/AIDS. 2016. *2016–2021 Strategy – On the Fast-Track to end AIDS*; Joint United Nations Programme on HIV/AIDS. 2021. *Global AIDS Strategy 2021–2026 – End Inequalities. End AIDS*.

⁸ WFP. 2008. *WFP Strategic Plan 2008–2013*; "WFP Strategic Plan (2014–2017)" (WFP/EB.A/2013/5-A/1); WFP. 2017. *WFP Strategic Plan (2017–2021)*; "WFP strategic plan (2022–2025)" (WFP/EB.2/2021/4-A/1/Rev.2).

malnutrition and the development of a strategy for improving the availability of, access to and demand for safe and nutritious foods.

Evaluation findings

How relevant and effective is the HIV and AIDS policy?

The relevance of the HIV and AIDS policy has diminished

11. The 2010 WFP HIV and AIDS policy was relevant at the time that it was written. It reflected current evidence on the relationships between HIV/AIDS, nutrition, food security and social protection and responded to WFP mandates. The policy was in step with the WFP strategic plan of the time, but the references to HIV/AIDS in subsequent strategic plans are limited, and the policy's relevance has diminished over the last 12 years.
12. There have been several iterations of the division of labour among co-sponsors of UNAIDS. In 2010, WFP had two leading roles: integrating food and nutrition into the HIV/AIDS response; and addressing HIV/AIDS in humanitarian emergencies, jointly with the Office of the United Nations High Commissioner for Refugees (UNHCR).
13. The feasibility and actionability of the HIV and AIDS policy have been dependent on a range of factors: the commitment and motivation of individual staff members and senior managers, policy guidance, the appetite of national governments to engage with WFP as a partner in HIV/AIDS programming, the appetite of WFP offices themselves, and the availability of funding.
14. Since the policy was approved, global, regional and country-level approaches to addressing HIV/AIDS have changed. Attention has moved away from specific approaches to more HIV/AIDS-sensitive or integrated approaches. All the funding partners interviewed mentioned that a clear framework was needed to support country offices in integrating HIV/AIDS into programmes. This is particularly pertinent in the current funding climate. Stakeholders frequently cited lack of funding and human resources as a reason for reduced attention to HIV/AIDS.
15. Technical support from all levels of WFP has been appreciated by stakeholders. WFP's role as a co-convenor of two inter-agency task teams (IATTs) – working on HIV/AIDS in social protection and HIV/AIDS in humanitarian settings – has played an important part in increasing the global attention directed to those two issues. The achievements are particularly notable in light of the bureaucratic burden attached to the role of co-sponsor of UNAIDS and the limited visible corporate commitment to addressing HIV/AIDS.
16. External stakeholders acknowledged the quality of technical advice and support provided by WFP's HIV/AIDS-focused staff members at all levels. Collaboration among WFP, UNAIDS, UNHCR and the International Labour Organization was reported to be strong, particularly at the regional and global levels. WFP's co-convening role in the IATTs has resulted in multiple high-level products, such as HIV/AIDS-sensitive social protection in fast-track countries in eastern and southern Africa, a 2019 joint UNHCR-WFP information note on HIV/AIDS in humanitarian settings, and guidelines on addressing HIV/AIDS in humanitarian settings. Recently, WFP convened stakeholder workshops for both IATTs and subsequently published reports aimed at influencing the development of a new global AIDS strategy, identified new result areas and held a high-level side-event on the margins of the United Nations High-Level Meeting on AIDS in 2021.
17. The HIV and AIDS policy does not provide a robust results framework against which progress can be measured. Instead, it provides a list of key outputs to be achieved and 12 key indicators. These were revised in the strategic results framework for 2014–2017 and presented in the 2014 monitoring and evaluation guide as four corporate and four optional

indicators. According to a report by WFP's Nutrition Division⁹, in 2020 only 6 of 23 country offices with HIV/tuberculosis (TB)-specific activities included at least one corporate HIV/TB outcome indicator in their annual country reports, namely, Chad, Guinea, Madagascar, Myanmar, Somalia and South Sudan. Around 70 percent of country offices that implemented HIV- or TB-specific activities did not have corporate outcome indicators in their approved monitoring and evaluation logical frameworks. Haiti and Cameroon reported their HIV/TB related indicators only in the narrative sections of their annual country reports rather than in the output and outcome sections.

How relevant and effective is the nutrition policy?

The nutrition policy remains relevant

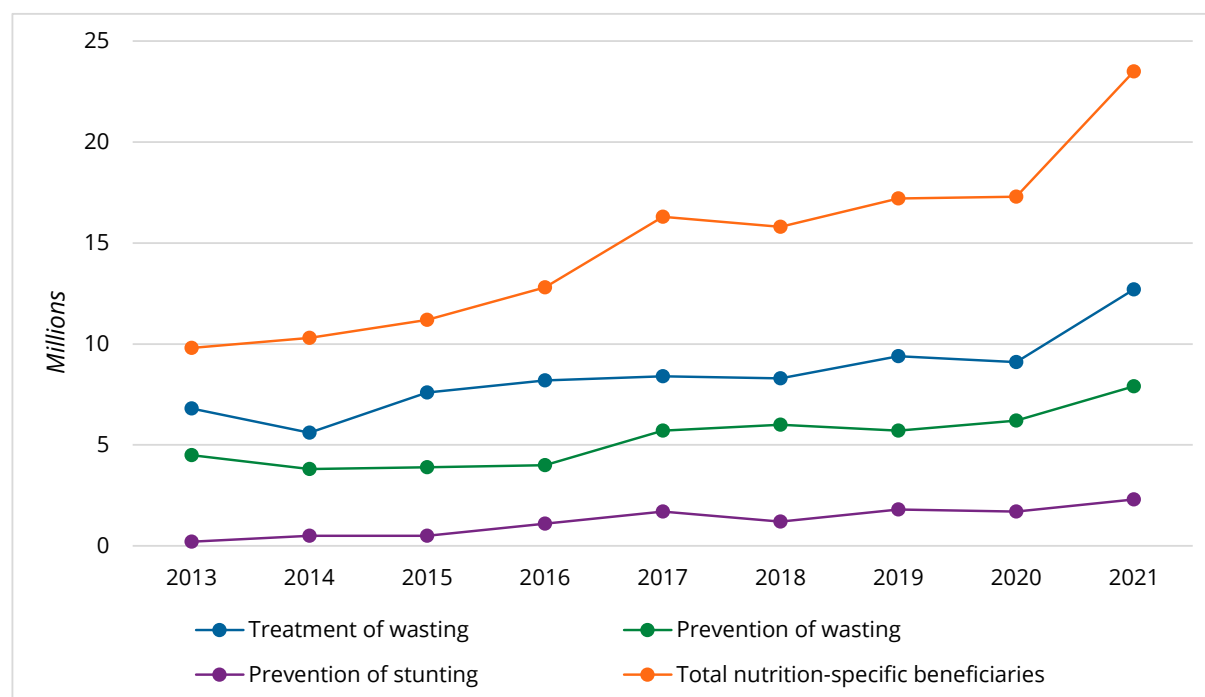
18. The nutrition policy was relevant at the time of publication. The policy met the majority of quality standards, but its actionability was hindered by the limited tools and capacity support for rollout beyond the Nutrition Division. However, strong examples exist where the policy has driven action at both the global and country levels.
19. The nutrition policy reflected the transition from a focus on saving lives to one on both saving lives and changing lives, introducing priorities related to the prevention of stunting and the development of national capacity and strengthened systems with governments. This was in line with global priorities in 2017 that had shifted towards a focus on malnutrition in all its forms, country-led approaches and a renewed emphasis on the prevention and treatment of wasting. The nutrition policy was also well-aligned with the evidence base for approaches to the treatment of moderate acute malnutrition (MAM) that underlined the need for scale-up to save lives, and approaches to MAM prevention that include micronutrient provision, maternal nutrition and improved complementary feeding for young children, including supplementation in food-insecure settings.
20. The nutrition policy remains largely relevant today, although there has been some global shift in emphasis in some of its key components.
21. Evidence suggests that the predominant focus on the treatment of wasting and the prevention of stunting in the nutrition policy is now excessive in light of WFP's current work and varied approaches to preventing malnutrition in an environment where malnutrition is increasingly examined holistically.
22. WFP's work in addressing micronutrient deficiency disease was understated in the policy, while WFP has strengthened its lead and successful role in staple food fortification in many countries and its approaches to the development of specialized nutritious foods and fortified food distribution. While all of these issues are recognized in the policy, they appear to have become a more central part of WFP's portfolio, particularly in relation to the capacity development of governments and partners.
23. The operational setting has changed significantly since 2017, with the coronavirus disease 2019 (COVID-19) pandemic and increasing conflicts, alongside climate change, highlighting how a state of emergency is becoming constant, with ramifications crossing borders and hitting the most vulnerable people and communities hardest. WFP's role as a humanitarian leader in nutrition is therefore of increasing relevance.
24. The nutrition policy is largely coherent with the WFP strategic plan for 2022–2025, although there is need to act on and lead the vision of nutrition integration throughout the organization. The development of a nutrition strategy is currently under way and provides an opportunity to articulate a clear approach to nutrition integration that facilitates WFP's delivery on the commitments set out in the strategic plan.

⁹ WFP. 2021. *HIV/TB in Numbers and Beyond*.

There is an increased focus on nutrition-specific interventions

25. Nutrition-specific interventions for the treatment and prevention of MAM, stunting and micronutrient deficiency diseases have played a significant role in meeting the urgent nutrition needs of affected populations, and the quality of WFP's food assistance has improved since 2017 through the increased use of specialized nutritious foods and fortified foods. WFP has made efforts to channel nutrition-specific interventions through existing nutrition-sensitive social assistance programmes.
26. To a large extent, WFP-supported nutrition-specific interventions have met the nutrition needs of targeted beneficiaries in affected populations. While there are some caveats, including the scale of the response in certain countries and supply chain and funding challenges (discussed further in paragraphs 34–37), the general trend since 2013 has been for year-on-year increases in the number of beneficiaries of nutrition-specific programmes, including in activities for the prevention of wasting, which have seen a considerable increase in programming and resource allocations since 2016 (see figure 3). However, although MAM treatment has met performance targets overall, there remain challenges linked to the coverage of that treatment.

Figure 3. Nutrition-specific direct beneficiaries by activity type and year



Source: "Annual performance report for 2021" (WFP/EB.A/2022/4-A/Rev.1).

27. The extent to which WFP's nutrition-specific and nutrition-sensitive programming has improved access to healthy diets is less well understood owing to challenges affecting the collection and interpretation of monitoring data. Creative models of context-specific, nutrition-sensitive interventions are emerging in food assistance for assets, resilience, social protection, cash-based programming and school feeding interventions. However, evidence of the results of those interventions is not readily available owing to the slow development of systems for rigorous monitoring and data analysis.
28. The scale of nutrition-sensitive activities implemented through WFP-supported interventions has increased considerably since 2017, from no countries reporting such activities in 2017 to 69 countries in 2021. In 2021, 75 percent of the reported activities in the school feeding category, 75 percent in the unconditional resource transfer category, 69 percent in the asset

creation and livelihood category and 82 percent in the smallholder agricultural market support category included a nutrition objective.

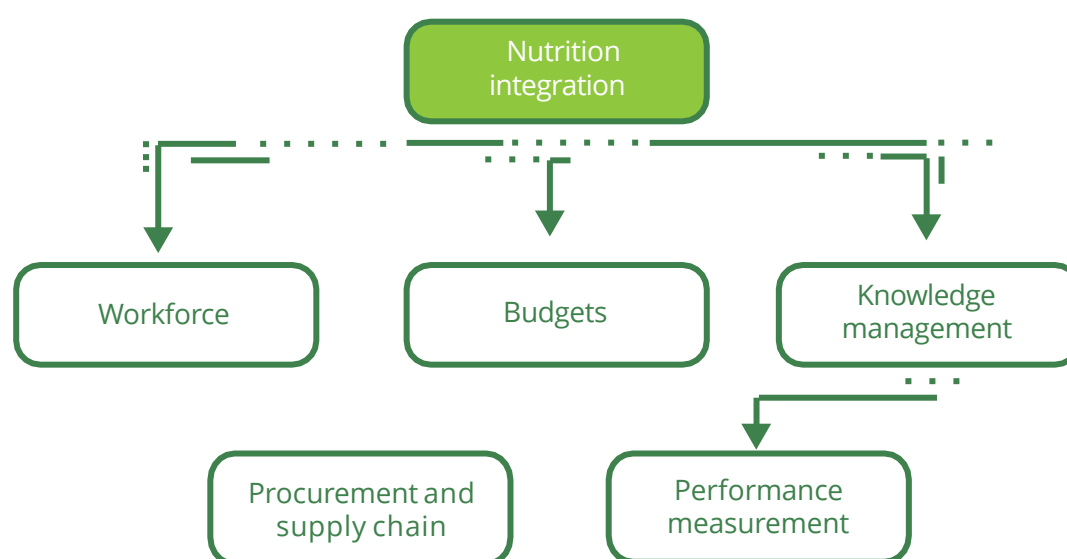
29. WFP is increasingly using cash and vouchers as a means of ensuring that people are able to meet their essential needs. In 2021, WFP transferred USD 2.3 billion in cash and vouchers to 42 million beneficiaries in 69 countries, representing an increase of 10 percent compared with 2020. In 2021, WFP distributed USD 39.3 million as cash, commodity vouchers and value vouchers through nutrition interventions. This is still a relatively small proportion of the total cash and vouchers distributed and demonstrates the potential to make further progress towards WFP's nutrition objectives, although the use of cash and vouchers can add complexity to programming and can be challenging for country offices to manage. Good context analysis and needs assessments (such as Fill the Nutrient Gap assessments) are required, along with the technical expertise to design and implement effective strategies.

School feeding is an important entry point for nutrition interventions

30. School feeding has long been recognized by WFP as an important entry point for nutrition interventions, in alleviating short-term hunger and improving children's nutrition status, particularly when food is fortified and accompanied by de-worming treatment. More recently, school feeding has been put forward as an entry point for linking local agriculture, food systems and nutrition interventions (through home-grown school feeding) and as a means of addressing the double burden of malnutrition. The growing attention directed to home-grown school feeding models has not yet been matched by commensurate attention to capacity strengthening for smallholder farmers, farming associations, women producer groups and the local food systems near schools. There has been insufficient focus on making those systems more nutrition-sensitive, paying attention to food safety issues and designing joint capacity-strengthening strategies for the long term, involving other agriculture and food security stakeholders. School feeding has also been put forward as an entry point for social protection, allowing the further advancement of nutrition-sensitive agendas and capacity building. WFP's new school feeding strategy outlines a broader, more integrated package of school health and nutrition interventions that, through work in partnership and across sectors, will help to guide programmes in addressing many of the challenges discussed above.

To what extent is WFP capable of integrating nutrition across all programmes and functions?

31. The knowledge and capabilities needed to integrate nutrition into programmes are increasing, but the capability to integrate nutrition into WFP systems, such as those for performance measurement, supply chains, partnerships and advocacy, is lagging behind.

Figure 4. Nutrition integration within WFP programmes and functions

32. Nutrition mainstreaming has been present as a concept in WFP thinking since 2004, but very slow progress has been made towards its achievement. The definition of “nutrition integration” for WFP is not yet clear. The strategic plan for 2022–2025 defines nutrition integration as a cross-cutting approach that requires nutrition to be an integral part of analysis and planning across all elements within each of the systems such as design and delivery, capacity and workforce, governance, information systems, technology and finance, making it much broader than “nutrition-sensitive programming”.

How well has WFP maximized the enabling factors that contributed to improved nutrition and food security?

Capacity levels vary across WFP

33. There is a large, dedicated and skilled nutrition team at headquarters, but capacity is sometimes limited by gaps in the overall workforce. The expanding scope of nutrition work is not yet matched by the appropriate skills at the country level and, to a lesser extent, the regional level. While efforts have been undertaken, including strategic workforce planning, there is need for more effective learning and skills enhancement strategies to fill this gap. A much smaller team supports WFP’s HIV response, and country-level HIV focal points – where they exist – frequently have dual roles.

Long-term programming is affected by funding issues

34. A number of WFP’s most significant donors still see WFP’s core mandate solely as saving lives, which affects the effectiveness of programming that requires a long-term perspective. While funding for nutrition-specific programming has increased since 2016, funding for, and the implementation of, nutrition-sensitive programming, which has a longer-term focus, has been affected by the availability of funding. However, several country offices have successfully adopted strategic approaches to the funding of innovative, nutrition-sensitive programmes.
35. While it has been possible to identify several examples where country offices have been able to use relatively small-scale, flexible funding to advocate support for longer-term programming in nutrition and HIV/AIDS at the global level, interviewees stated that there has been a lack of effective advocacy on the part of WFP for its changing lives work. In part, this is related to the need to present evidence of the effectiveness of nutrition-sensitive programming, which is perceived as costly, both within WFP and among many of the organization’s supporters. There has also been limited success to date in telling a consistent and clear story communicating a consistent and clear message on the importance of such

approaches. Efforts have been made to advocate through the Friends of WFP Nutrition group formed by a number of Executive Board members, and there have been some success in obtaining long-term funding for innovative nutrition programming.

36. The evaluation found that considerable data are generated within WFP, particularly evidence from nutrient gap assessments and research. There are examples of such evidence being used strategically to inform the design and formulation of national nutrition policies and to guide the prioritization and design of nutrition-specific, nutrition-sensitive and HIV/AIDS interventions for governments, WFP and other non-governmental actors in many settings, including countries that range from Pakistan to Tunisia to Ghana. Evidence from published research has also been used strategically at the global level to advocate the importance of key priorities in nutrition, such as food fortification and addressing the nutrition impacts of the COVID-19 pandemic.
37. While considerable knowledge and evidence related to nutrition (and to a lesser extent HIV) have been generated within WFP, with examples of their successful use in supporting policy and programming in many settings, the management of knowledge on nutrition and HIV has not been harnessed to its full potential.

To what extent have WFP's partnerships been transformational in contributing to improved nutrition-related outcomes and systems change?

WFP's effectiveness is increased through its work in partnerships

38. There is ample evidence from both nutrition and HIV/AIDS programming that WFP's effectiveness is increased through working in partnership and that working in partnerships has the potential to contribute to improved outcomes, systems change and sustainability.
39. Where WFP has invested time and commitment in partnerships for nutrition, significant results have been seen. There is scope in all WFP partnerships for deeper engagement to maximize potential outcomes. At the global, regional and national levels, WFP relies on strong partnerships throughout its nutrition work, and the quality of those partnerships is fundamental to the achievement of nutrition outcomes and sustainable change. The evaluation identified significant partnership work at the regional bureau level, including contributions to a United Nations joint programme on nutrition and food security in southern Africa, regional funding from Luxembourg for strengthening the nutrition capacity in WFP's Regional Bureau for Western Africa and a European Union-funded regional programme in the Central Sahel.
40. The evaluation identified several examples where country offices have focused on the potentially transformational nature of partnerships with governments, either through work in specific nutrition-related sectors or through an overarching and more strategic approach to identifying WFP's comparative advantage and programming contribution.

To what extent has WFP taken a gender equality, equity and inclusion approach to its nutrition work, including HIV, in humanitarian, development and peace settings?

The integration of gender equality and inclusion into programming is limited

41. Overall, the evaluation found limited evidence that the gender equality and inclusion issues identified in analyses have been taken into account in programme design and implementation. The main conclusions of the 2020 evaluation of the gender policy were that "WFP is missing opportunities to ground the design and development of programmes in a comprehensive contextual analysis of the needs and interests of women, men, girls and boys and the pathways needed to deliver the four objectives of the policy. Consequently, country offices often struggle to translate GEWE [gender equality and women's empowerment]

concepts into clear actions tailored to their individual CSP [country strategic plan] strategic outcomes.”

42. Common issues emerging from other evaluative evidence available at the time of the evaluation, show that the primary focus has been on ensuring gender parity and has been inconsistent across programmes; gender analysis is needed for a better understanding of the issues that underpin food insecurity and malnutrition and to inform a gender-transformative approach; and the most common hindering factors are a lack of capacity in country offices, a lack of dedicated budgets for addressing the gender issues identified, and weak lines of accountability.
43. The majority of the country strategic plans in the countries examined by the evaluation team can be rated as “gender- and inclusion-sensitive”. There is often limited capacity within the country office, with gender, protection and HIV often being the responsibility of a single person with multiple focal point roles. While there is some evidence of gender analysis being undertaken, there is far less evidence of that analysis being used to inform programming, and limited evidence from monitoring is available, other than disaggregated data.
44. Regarding inclusion, some age-disaggregated data are collected, but those data are generally related to specific programmes. While disability was sometimes mentioned, there is little evidence of specific analyses or of the integration of the disability issues identified into programming. Other issues related to inclusion (such as migrants and internally displaced persons) are mentioned in the contextual analysis of country strategic plans, but are seldom reflected in strategic outcomes, expected outputs or key activities.

Conclusions

45. The following conclusions provide an overall assessment of WFP’s capability and organizational readiness for implementing the nutrition and HIV components of the new strategic plan.

CONCLUSION 1. HIV is a highly relevant issue for WFP in delivering on its mandate of reaching the most vulnerable people and leaving no one behind. Significant changes, both technical and financial, in the HIV landscape over the past 12 years mean that the 2010 HIV and AIDS policy is no longer relevant. At the same time, the absence of a strategy for managing declining funding and an over-reliance on one source of funds puts the reputation of WFP at risk.

46. WFP has undertaken high-quality work in supporting governments in including nutrition and food security issues in their HIV programmes and taking HIV into account in their nutrition programming and in supporting national governments in HIV-sensitive social protection, supply chain and logistics operations in emergency settings. WFP’s mandate, based on its leadership in and reputation for being able to deliver, guides and equips it for this work.
47. The absence of a strategy for managing the risks of declining funding and an over-reliance on one source of funds from UNAIDS renders WFP’s current HIV programming highly vulnerable and puts the organization’s reputation at risk. Food insecurity can be a setback to progress towards the targets of the response to the COVID-19 pandemic, and a worsening HIV situation can be a setback to progress towards nutrition targets in countries with high prevalence of HIV.
48. Specifically, very little attention has been dedicated to advocating HIV-sensitive programming as an essential part of the “leave no one behind” agenda. Such advocacy is crucial in enabling a strategic approach to HIV across relevant WFP platforms. As a starting point, an enhanced focus on advocacy of HIV-sensitive approaches requires a more systematic approach to monitoring progress under existing programmes. The current focus

on numbers of beneficiaries has not been sufficiently complemented by qualitative data on the effects of capacity strengthening and social protection initiatives.

CONCLUSION 2: The nutrition policy was aligned with global priorities and the evidence available at the time of its development. However, it does not encompass the vision of nutrition integration set out in the new strategic plan for 2022–2025, and a robust articulation of “nutrition integration” is needed in order to ensure implementation. At the same time, there is a tension between the need for the policy to be broad enough to cover the range of WFP activities in nutrition and the need to provide adequate focus in order to drive investments and ensure the availability of specialized skillsets.

49. WFP has demonstrated that it has the capacity to adapt its programming, capitalize on its comparative advantages and, in some cases, be innovative in keeping up with changing nutrition priorities while remaining relevant. Given the expanding scope of work on nutrition, and resource constraints, the need to clearly define WFP’s areas of comparative advantage in terms of coherence with the positioning of other agencies is increasingly urgent.
50. Areas of critical focus for WFP in nutrition include the continued importance of the saving lives agenda in humanitarian settings as WFP’s non-negotiable core business, covering both the treatment of MAM in line with evolving guidance and the prevention of all forms of malnutrition, including by improving the nutritional quality of general food assistance and food assistance for assets. The nutritional quality of food assistance has been increasing, along with the use of various transfer modalities that ensure nutritional outcomes from social protection, livelihoods and primary health interventions. There are still challenges and gaps to be filled in improving WFP’s focus on the accessibility and availability of safe, healthy and affordable nutritious food, and in more predictive distribution platforms consistent with nutritional resilience, predictability and forecast-based financing systems for anticipatory assistance.
51. There has also been an increasingly effective focus on areas such as the provision of technical support for scaling up food fortification, work at the emergency–development nexus aimed at protecting nutrition, including by advocating nutrition-sensitive social protection, and support for food systems that improve nutrition, which is of particular importance where contextual analysis of the causes of malnutrition justify.
52. WFP has been innovative, responsive and timely in preventing all forms of malnutrition and promoting healthy diets, but there is considerable scope to achieve greater reach and coverage in the following areas: nutrition-sensitive programming of school feeding and food assistance; programming that improves the nutrition sensitivity of national social protection mechanisms, which has a potential role in the prevention of malnutrition; programmes that influence the adoption of healthy diets, including by addressing overweight and obesity, particularly through evidence generation and advocacy; and the implementation of behaviour change strategies identifying the drivers that influence behaviours, particularly in terms of the availability and affordability of food options throughout value chains.

CONCLUSION 3. With respect to the performance of WFP, effectiveness is largely underpinned by its responsiveness, innovation in certain key areas and strong reputation, especially in emergency and supply chain operations.

53. Investment in context-specific evidence generation has supported advocacy efforts and led to improved programming approaches at the country office level but has been used less effectively for advocacy at the global level, where much of the excellent work carried out by WFP is still not sufficiently visible.

54. WFP allocates limited resources to investing in people-centred needs assessment, including gender and inclusion analyses aimed at ensuring that approaches are better tailored to communities. Investment in context-sensitive programme design with a clear focus on gender equality, equity and inclusion is not sufficient.
55. WFP collects many data but is not yet a data-driven organization. There is a recognized need to pay more attention to monitoring, including by addressing the gaps in existing indicators, particularly qualitative indicators, improving the feasibility and practicability of good-quality data collection against the core indicators, and increasing the resources allocated to the use and valid interpretation of data to support programming.
56. There are more complex challenges at the strategic level, where decisions regarding WFP's corporate commitment to programming and the adjustment of its organizational structure are still to be made. These challenges will be difficult to overcome given the issues related to ensuring complementarity and delivering at considerable scale with relatively few resources on the ground, which are stretched by both the demands of donors and bureaucratic requirements.

CONCLUSION 4: The commitment to nutrition integration articulated in the new strategic plan for 2022–2025 is not yet matched by the institutional architecture for full implementation. While WFP has made some progress in ensuring a nutrition workforce that is adequate in terms of size and skills, particularly over the past five years, not all decision makers understand the importance of taking nutrition outcomes into account in WFP operations.

57. Donors, governments, international agencies and local partners still see WFP as a food-focused organization. The move from a focus on the quantity of food (calories) to increased attention to quality (nutrients) has shown some progress. However, progress has been hampered by funding limitations, supply disruptions linked to the COVID-19 pandemic and the lack of corporate results framework indicators that measure the quality of the food basket.
58. There are both internal and external challenges to nutrition integration. The internal challenges are relatively straightforward to identify and include a gap in the internal capacity for nutrition integration; a lack of concrete guidelines on putting nutrition integration into practice in programming and operations; and a need for broad internal buy-in so that WFP becomes a nutrition-focused organization. External challenges can be more difficult to overcome and include obtaining and allocating funding for nutrition programming, positioning emerging nutrition priorities beyond hunger targets, strengthening governments' accountability and public investments and achieving complementarity among United Nations entities in accelerating nutrition integration into efforts to achieve the SDG targets.
59. Nutrition Division staff at the headquarters and regional levels are proficient and knowledgeable and contribute increasingly within the global nutrition community but are often inadequate for work on strategic planning, partnership development, advocacy and engagement with governments.

CONCLUSION 5: In its HIV and nutrition programming, WFP has prioritized the strengthening of partnerships with other United Nations entities, governments, non-governmental organizations, the private sector and academia. This has resulted in a blossoming of relationships, leading to successful outcomes. However, in all types of partnership, limited investment over the long term compromises the ability to sustain and improve collaboration and complementary and collaborative approaches to implementation, advocacy and fundraising.

60. WFP has made significant contributions to research with academic partners, analysis, such as nutrient gap assessments, and coordination forums such as the 2019 Global Action Plan on Wasting, the Global Nutrition Cluster and the SUN movement. All of those contributions have been taken forward in WFP's work at the country level, with South-South cooperation arrangements establishing linkages on specific issues between countries and with the private sector, and WFP forging linkages and agreements at the global, regional and national levels.
61. WFP works closely with government partners, contributing to government responses, engages in close collaboration with other United Nations entities and non-governmental organizations and works effectively with the private sector and academia, with evidence that this has the potential to contribute to wider outcomes, systems change and increased sustainability. The most interesting examples are those where a country office has focused on the potentially transformational nature of partnerships with government, either through work in specific nutrition-related sectors or through an overarching and more strategic approach to identifying WFP's comparative advantage and programming contribution, such as through nutrition-sensitive and gender- and shock-responsive social protection programmes.

Recommendations

62. The following recommendations are derived from consideration of the full set of evaluation conclusions and are focused on ensuring that WFP has the organizational readiness to meet the challenges set out in the new WFP strategic plan for 2022–2025. While a single lead entity has been proposed for each sub-recommendation, strong and consistent cooperation from all contributing entities will be critical for the successful implementation of the recommendations.

Recommendation	Responsibility (with other contributing entities in brackets)	Priority	Deadline for completion	Rationale
<p>Recommendation 1: Changes in the HIV landscape over the last 12 years call for an internal strategic discussion aimed at reaching agreement on how best to integrate HIV into WFP programming so as to ensure that WFP's global commitments to the HIV response and to "leaving no one behind" are met.</p> <ul style="list-style-type: none"> ➤ A corporate analysis should be conducted to inform the development of a clear statement on WFP's position on HIV and on how that position will be integrated into work throughout the organization, together with an updated strategic response to HIV with cross-organizational accountability. ➤ The updated strategic response should determine whether to develop a new policy or strategy and should include a costed implementation plan setting out responsibilities, accountability, the human and financial resources needed to deliver the response, and a fundraising plan. ➤ Bring together existing guidance and available tools and use them to identify the strengths and opportunities and the gaps to be addressed with a view to ensuring that key programmatic areas are HIV-sensitive and that consideration of HIV can be effectively integrated throughout WFP systems. 	Nutrition Division (with the support of the Programme and Policy Development Department)	High	December 2023	<p>HIV remains a highly relevant issue for WFP in delivering on its mandate of leaving no one behind. To meet that mandate, WFP needs to increase its internal resources in order to strengthen programming in social protection, optimize HIV-sensitive approaches across divisions and support the transition from an implementation role to an enabling role.</p> <p>Accountability for this work must extend beyond the Nutrition Division because many WFP units need to be involved in delivering on the mandate.</p> <p>Linked to conclusion 1.</p>

Recommendation	Responsibility (with other contributing entities in brackets)	Priority	Deadline for completion	Rationale
<p>Recommendation 2. The new nutrition strategy currently being developed should articulate a clear definition of, and a comprehensive approach to, nutrition integration so that WFP can deliver on the commitments set out in the strategic plan for 2022–2025.</p> <p>The nutrition strategy must set out a clear definition of nutrition integration and an overview of what it entails for the whole organization. The strategy is also expected to provide clarity on several issues that were not sufficiently emphasized at the time that the previous policy was approved. Those issues include:</p> <ul style="list-style-type: none"> ➤ WFP's role in and contribution to micronutrient deficiency prevention through a combination of approaches for both saving lives and changing lives; ➤ clear development of the concepts related to healthy diets, including the mitigation of the nutrient intake gap for the prevention of undernutrition, which is also part of the prevention of all forms of malnutrition (including overweight and obesity), and of how to achieve them through actions on both the supply and demand sides, setting out the implications for WFP divisions, especially in fragile settings, addressing food choices and setting out practical approaches that address realities on the ground; ➤ reinforcement of WFP's role in supporting all nutritionally vulnerable population groups, including a clear articulation of the approach to HIV/AIDS-sensitive programming; ➤ a clear delineation of WFP's remit in and approach to nutrition in humanitarian settings that takes into consideration the long-term nutrition benefits and gains from recovery and development; and ➤ a resource plan setting out the human and financial resources needed to ensure that the organization-wide approach is sufficiently and effectively resourced to pursue delivery as intended from the outset. 	Nutrition Division	High	December 2023	<p>The current nutrition policy remains relevant, but its implementation entails a refinement of the focus to bring it up to date with current priorities and evidence and to clearly encompass the vision of nutrition integration set out in the new strategic plan for 2022–2025.</p> <p>Linked to conclusion 2.</p>

Recommendation	Responsibility (with other contributing entities in brackets)	Priority	Deadline for completion	Rationale
<p>Recommendation 3. WFP should develop and implement a systematic process for, and clear guidance on, the effective operationalization of nutrition integration.</p> <p>The process of embedding the appropriate systems and structures for, and guidance on, nutrition integration throughout WFP should include the following:</p> <p>i) Systems:</p> <ul style="list-style-type: none"> ➤ Define and ensure resources for the role that the Nutrition Division (including nutrition staff in regional bureaux and country offices) will play in supporting other units of WFP at the headquarters, regional bureau and country office levels, with clear objectives. ➤ Develop consistent messages for fundraising, partnerships and advocacy purposes, working with other United Nations agencies and the global nutrition community, particularly in advocacy efforts. Communication and marketing aimed at enhancing WFP's profile as a nutrition-focused, HIV/AIDS-sensitive organization are key. ➤ Consider how WFP will fund departments' adaptation of their approaches and development of staff and system capacity. ➤ Enhance efforts to mainstream gender at the organizational level. <p>ii) Internal structures:</p> <ul style="list-style-type: none"> ➤ Define the roles and enhance the understanding of staff throughout WFP in relation to their contributions to improved nutrition, particularly when working across the organization. 	<p>Nutrition Division (with the support of: Programme – Humanitarian and Development Division; Social Protection Unit; School-based Programmes; Cash-based Transfers Division; Gender Office; Partnerships and Advocacy Department).</p>	<p>High</p>	<p>December 2023</p>	<p>The commitment to nutrition integration articulated in the new strategic plan for 2022–2025 has been welcomed but is not yet matched by an institutional architecture for its full implementation.</p> <p>Linked to conclusions 2 and 4.</p>

Recommendation	Responsibility (with other contributing entities in brackets)	Priority	Deadline for completion	Rationale
<ul style="list-style-type: none"> ➤ Invest in dialogue with implementing partners at the local level so as to strengthen their understanding of their roles in supporting nutrition outcomes in programmes and operations. <p>iii) Guidance:</p> <ul style="list-style-type: none"> ➤ Develop operational guidance on how to integrate nutrition across supporting systems. 				
<p>Recommendation 4. Continue to enhance capacities in nutrition and HIV/AIDS throughout WFP with a view to strengthening existing nutrition and HIV/AIDS expertise and approaches, and ensure nutrition integration through the recruitment of skilled staff, the development of the various skillsets required and, particularly, the matching of skills to contexts and programme aims.</p> <ul style="list-style-type: none"> i) Across WFP, the development of capacities and skillsets should include: <ul style="list-style-type: none"> ➤ at the headquarters level, increasing the number of staff members focused on HIV/AIDS using internal core funding; ➤ at the headquarters and regional bureau levels, enhancing advocacy for HIV/AIDS- and nutrition-sensitive programming with senior management at all levels; and ➤ at the country office level, building the capacity of country directors as advocates for nutrition- and HIV/AIDS-sensitive programming. ii) In addition, there is a need to continue to build the capacity of nutrition advisers at the regional bureau and country office levels, which should include the development or employment of skillsets that meet contextual support needs and objectives, including approaches to supporting governments in strengthening systems for improved dietary 	Nutrition Division (Human Resources Division)	High	December 2025	<p>There is a need for enhanced capacity strengthening and increased nutrition knowledge throughout WFP's workforce, from field monitors to country directors and throughout headquarters.</p> <p>Linked to conclusions 2 and 4.</p>

Recommendation	Responsibility (with other contributing entities in brackets)	Priority	Deadline for completion	Rationale
<p>diversity and nutritional outcomes, and strengthening cross-sectoral work on HIV/AIDS across various sectors.</p> <p>iii) The building of the capacities outlined above should be informed by the continuous identification and addressing of organizational learning needs so as to improve staff capacity and, in turn, improve the design and implementation of nutrition-specific and nutrition-sensitive strategies and programmes.</p>				
<p>Recommendation 5. Elevate the status of knowledge management and learning and equip the knowledge management team in nutrition with the skills and accountability needed to reach and work across units, consolidating and communicating learning throughout WFP and informing advocacy approaches.</p>	Nutrition Division	High	December 2023	<p>The positioning of WFP more firmly in the development arena will take more time and further work and should be based on an evidence and research strategy.</p> <p>Linked to conclusions 1, 2 and 3.</p>
<p>5.1 <i>Monitoring</i>: Revise and develop monitoring indicators and systems to ensure the collection of indicator data that are meaningful and fit for purpose in providing evidence of programme outcomes. This work includes focusing on system readiness to ensure that the data can measure the qualitative outcomes of both nutrition and HIV/AIDS programming, and should feed into the systematic use of data analysis to inform progress monitoring on programmes.</p>	Nutrition Division (with the support of the Research, Assessment and Monitoring Division)			
<p>5.2 <i>Assessment</i>: Collaborate further with the Research, Assessment and Monitoring Division on reviewing and enhancing nutrition integration and the utilization of assessment data and information to improve needs identification and the design of nutrition and HIV/AIDS programmes.</p>	Nutrition Division (with the support of the Research, Assessment and Monitoring Division)			

Recommendation	Responsibility (with other contributing entities in brackets)	Priority	Deadline for completion	Rationale
<p>5.3 <i>Evidence</i>: Build on the learning from the successful evidence generation and advocacy approaches of country offices, such as cost of diet and Fill the Nutrient Gap analyses and research studies, to develop WFP's reputation as an evidence-driven organization. Achieve this through continued investment in evidence, evaluation, research and data on HIV/AIDS and nutrition, with enhanced understanding of gender and inclusion dimensions and the development of a research plan or strategy.</p>	<p>Nutrition Division (with the collaboration of the Research, Assessment and Monitoring Division; Innovation and Knowledge Management Division; Office of Evaluation)</p>			
<p>Recommendation 6. WFP should build on its investments in partnerships by nurturing long-term relationships and shared aims in HIV/AIDS and nutrition in order to deliver resilient and long-term gains for HIV/AIDS and nutrition programmes through the complementarity of partners' capacities. WFP needs to focus on its comparative advantages and continue to pursue strategic alliances.</p> <p>The approach to partnerships should include:</p> <ul style="list-style-type: none"> ➤ building on existing partnerships within the United Nations system in order to ensure strategic engagement in the development of complementary approaches to programming, implementation, advocacy and fundraising, with clearly defined roles in specific settings; ➤ building on established relationships with regional and national government partners in work on nutrition and HIV/AIDS to facilitate advocacy of long-term, multi-year financial support from donors; and ➤ engaging with local and regional partners to leverage local advocacy, knowledge and capacities, including by making space for partners' participation in programme design, implementation and monitoring. 	<p>Nutrition Division (regional bureaux; country offices)</p>	<p>Medium</p>	<p>December 2025</p>	<p>In all types of strategic partnership, there is scope for increased two-way investment in relationships over the long term, improving coordination, collaboration and coherent approaches to implementation, advocacy and fundraising.</p> <p>There is the potential to leverage results that are much more than the sum of their parts and to elevate WFP's contribution to global outcomes in nutrition.</p> <p>Linked to conclusion 5.</p>

Acronyms

COVID-19	coronavirus disease 2019
IATT	inter-agency task team
MAM	moderate acute malnutrition
SDG	Sustainable Development Goal
SUN	Scaling Up Nutrition
TB	tuberculosis
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNHCR	Office of the United Nations High Commissioner for Refugees