

FINAL TECHNICAL REPORT / RAPPORT TECHNIQUE FINAL

ANNEX 9 - EHFP KNOWLEDGE EXCHANGE WORKSHOP

REPORT

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**Final Report of Helen Keller International
Asia-Pacific Regional Standardization Meeting
on
Enhanced Homestead Food Production (EHFP)**

**15-18 January, 2018
Phnom Penh, Cambodia**

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Executive Summary

Helen Keller International (HKI) held an Asia-Pacific Regional Office (APRO) Standardization meeting on the Enhanced Homestead Food Production (EHFP) program from January 15-18, 2018 in Phnom Penh. The overall goal of the meeting was to **standardize and adopt tools and methods in order to improve replicability and impact of EHFP and to assist operationalization of the Minimum Program Standards (MPS)**. Twenty five participants attended the meeting, representing the Bangladesh, Cambodia, Vietnam, Myanmar, and Nepal country offices, as well as APRO, the Africa Regional Office and HKI Headquarters. Two main objectives for the meeting were identified, and served as a basis for the meeting's program and expected outcomes:

1. Review the existing EHFP processes, designs, tools and methods and identify gaps to enhance program quality
2. Create a tool kit to complement the MPS in order to facilitate high quality implementation and replication of EHFP

Over the course of the meeting, 10 sessions were held to address a range of issues related to achieving the above objectives. The session topics and presenters were:

1. How Far Have We Come? *A Summary of Past Meetings and Action Points* (Nancy Haselow)
2. What is EHFP? *A Review and Discussion of the Minimum Program Standards* (Rolf Klemm /Avital Friedman)
3. Nutrition-Sensitive Agriculture and Nutrition Outcomes: *Strength of Evidence and Research Gaps* (Rolf Klemm)
4. Program Design and Planning: *Tools and Methods* (Ame Stormer/Nancy Haselow)
5. Addressing Training Modalities for Core EHFP Components and Strengthening the Program Model (Treena Bishop/ Hou Kroeun)
6. Implementation of Nutrition, Wash and Gender Components including Supportive Supervision, SBCC, Advocacy and Coordination (Pooja Pandey/Ramona Ridolfi)
7. Implementation of Agriculture and Livelihood Components including Supportive Supervision, SBCC, Advocacy, Coordination, and Opportunity For Expansion (Zaman Talukder/Dale Davis)
8. A Toolkit for Monitoring and Evaluating EFHP Programs: *Current Practice, Critical Gaps and Next Steps* (Gary Mundy/Stella Nordhagen)
9. Continued: A Toolkit for Monitoring and Evaluating EFHP Programs: *Current Practice, Critical Gaps and Next Steps* (Meredith Jackson-de Graffenreid/Kenda)
10. Management Issues in EHFP (Keith Porter/Pham Ngoc)

At the close of the meeting, **future action points** were compiled, discussed and tallied, with the following actions emerged as top priorities:

1. Promote systematic and required training (at least an orientation) on project management at various levels, with priority given to the country level staff

2. Standardize user-friendly Project Management Cycle tools and explanations on their use, and include these in the EHFP Toolkit
3. Discuss steps towards a more systematic onboarding procedure
4. Discuss an institutional project start-up and close-out manual for operations, logistics and management needs
5. Create guidelines and tools on consortium and partner management
6. Improve communication strategy, including communications support, website use and social media protocols, particularly for country offices and project

Introduction

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1. Review the existing EHFP processes, designs, tools and methods and identify gaps to enhance program quality
2. Create a tool kit to complement the MPS in order to facilitate high quality implementation and replication of EHFP

In preparation for this strategic meeting, an agenda was developed, based on outstanding action items from the 2010 and 2012 EHFP meetings, APRO strategic meetings, and input from key APRO and country-level staff. The preliminary agenda for the meeting served as a foundation for the course of discussions, but was also flexible to allow for comprehensive discussions and additional time allocation to topics as necessary. The final agenda, as occurred over the course of the meeting, can be found in **Appendix 1**.

Twenty-five participants attended the meeting, representing the Bangladesh, Cambodia, Vietnam, Myanmar, and Nepal country offices, as well as the APRO, the Africa Regional Office and HKI Headquarters. A full participant list can be found in **Appendix 2**. At the beginning of the meeting, the meeting's goal and objectives were introduced. Below is a summary of the contents of each conference session.

Session 1: How Far Have We Come? A Summary of Past Meetings and Action Points (Nancy)

In this session, the **goals, objectives, action points and outcomes of past EHFP meetings** were outlined and briefly discussed. The 2010 EHFP Strategic Meeting goals and objectives were noted, which included the goal "To assess and consolidate innovations for HKI's EHFP model in order to ensure that our contribution to addressing food insecurity and poverty in the coming decade is maximized through our EHFP model". Objectives for the 2010 meeting included 1. To review the current implementation of EHFP programs (who is doing what where), 2. To examine the components of the HFP, discuss how these can be fine-tuned to work better, 3. To carefully review all innovations to the HFP program, and 4. To collect/review materials and tools and decide how these will be standardized and packaged.

Additional objectives included reviewing EHFP M&E and quality assurance systems and discussing how these can be redesigned to be more scientific, reviewing the program's current evidence, reviewing global issues and donor trends and discussing how EHFP can be positioned to address these, identifying operations research needed, identifying a dissemination strategy and publications that are possible in the next 2-3 years, identifying current human resources, technical skills needed and a plan for HKI to become an expert in all areas of EHFP, identifying

other development programs into which the EHFP model can also be integrated in order to scale up quicker, and developing a 5-10 year strategy to expand and innovate EHFP.

Next, the **2011 EHFP follow-up meeting** was discussed. The objective of this meeting was to update and discuss priority action points and progress made since the 2010 EHFP meeting. These included hiring for a new senior position at HQ, developing an early draft of an EHFP position paper, an update on the development of a framework to use the agricultural sector as a 'contact point' for ENA, a new HKI agency policy on gender and diversity equity, developing a Community of Practice on Food Security, Agriculture and Nutrition (including gender aspects), a fundraising update regarding potential donors, and a discussion of priorities for HKI's agriculture-nutrition programming over next 6-12 months.

The goal of the **2012 EHFP meeting** was to improve the effectiveness, impact, and reach of HKI's EHFP program, and generally focused on the core elements of EHFP, how they worked over the last two years and how they might be improved. Objectives of this meeting included 1. To review and reassess the core elements of EHFP across countries, 2. To identify EHFP best practices, innovations and current programmatic gaps, and how these can be addressed, including methods, materials, and tools, 3. To develop and document areas for growth in EHFP approach and design, and 4. To position EHFP for various funders and audiences, both to improve visibility and leverage potential funding opportunities. Action items from this meeting included the development of an M&E manual for EHFP (including PIPs, standard indicators based on literature but with flexibility, qualitative indicators, etc), building expertise and capacity for behavior change communication (BCC) at country level and tapping into the potential of agriculture to maximize nutritional outcomes, developing an EHFP toolkit (including compilation of current materials), incorporating participation and equity into EHFP PIPs, promoting gender sensitization for HKI staff, and incorporating gender indicators for EHFP in the toolkit. There was also a focus on creating a database of tools in English in the future.

An **EHFP meeting was held in March 2016** to focus on the creation, optimizing and implementation of the Minimum Program Standards. Outcomes of this meeting included 1. Consensus on a list of measurable minimum standards for HKI EHFP programs for which we would hold all HKI programs accountable, 2. Consensus on "best practice" tools, templates, indicators and processes that country programs should use (at a minimum) to meet the minimum standards, 3. Plan for "beta-testing" the EHFP MPS in at least one country in both APRO and AFRO, 4. Plan for supporting countries to use the EHFP MPS. Overall, the substantial progression of the EHFP model over the years was pointed out, specifically in terms of increased synchronization and optimization.

A list of participants at the last four EHFP meetings was displayed, noting that there was a core group of individuals who had attended all of the meetings and were a source of institutional memory regarding EHFP, and that the proposed tool kit was a means of documenting that institutional memory for others to use. The group discussed ideas for the current meeting, including the possibility of revisiting the idea of an EHFP operations manual for external use and distribution (and the existence of different EHFP manuals but not one consolidated version), as

well as the need for greater awareness of the tools and manuals that already exist. This new, consolidated document should be accessible on Sharepoint or another place online, and could serve as a handbook, a manual and a descriptor of the MPS. Participants also pointed out that there may be an abundance of documentation on EHFP but not enough that is high quality.

A **discussion of the MPS** followed, with some noting that the MPS is not about the *how*, but rather the *what*. The *how* is what this meeting is for, and any operations manual or other new document should focus on that as well. Participants noted the difficulty and importance of ensuring that the MPS are met through implementation and coordination, and that even though sometimes the whole package of EHFP is not always implemented due primarily to donor interest or funding, all of the MPS must be met to call a program EHFP. Finally, the need for a standardized induction packet for an EHFP project was noted.

Future Action Points:

1. Discuss a new, more interesting, “catchy” name for EHFP
2. Discuss revising the EHFP manual for external use and distribution
3. Establish a synchronized communication system (perhaps every 3 months) on new methods and tools
4. Decide how to ensure that MPS are met (through implementation, coordination, and monitoring) and how to contextualize this
5. Create an Operations Manual for each country office
6. Create a standardized induction packet

Session 2: What is EHFP? A Review and Discussion of the Minimum Program Standards (Rolf/Avital)

This session focused on the new **Minimum Program Standards (MPS) and their application**. It began with a definition and explanation of the MPS: a set of requirements for HKI EHFP programs to meet a minimum level of quality deemed essential in achieving program objectives. These standards are minimum but mandatory, and needed to ensure program quality, define HKI’s unique approach, to harmonize different offices and programs, as an induction document and to hold programs accountable. They are based on best practices and evidence from previous EHFP programs and other nutrition-sensitive agriculture programs outside of HKI.

The **process of developing MPS** included working groups, adapting a common framework, agreeing on goals and objectives, agreeing on MPS per component (identifying tools/templates and what was missing), creating missing tools and sections, internal review and further modification, first release of a draft document and beta testing.

The core objectives of HKI’s EHFP programs were shared, and are as follows:

1. Increased **diversity of production** of nutrient-rich crops (e.g. vegetables, fruits, legumes, and appropriate staples) and animal source foods (e.g. eggs, poultry, goats) and/or fish.
2. Increased **production** of nutrient-rich crops (e.g. vegetables, fruits, legumes, and appropriate staples) and animal source foods (e.g. eggs, poultry, goats) and/or fish.
3. Increased **female purchasing power** (income, disposable income, savings) linked to production and/or processing of produce and/or animal products and fish.
4. Increased **diversity, amount, and frequency of consumption** of nutrient-rich vegetables and fruits, tree crops, staples (e.g. OFSP), and animal and/or fish source foods.
5. Increased **year-round access** to nutrient-rich foods through production, post-harvest processing, storage and/or income.
6. Increased **practice of essential health, nutrition, and WASH behaviors**.
7. Increased **practice of climate-smart and environmentally friendly agricultural methods**.

A **group activity** was then carried out, with participants listing which minimum standards are or are not being met by the EHFP programs they are involved with, listing the reasons why and summing up the score per MPS component. Participants then listed steps and support needed to implement the MPS in these areas, and presented these to the group.

Key steps in MPS rollout were noted to be specifying activities, identifying who should lead/be trained/oriented, noting where support is needed, and deciding upon a timeframe. A section of the presentation was also devoted to funding and the extra activities required to ensure programs actually happen as envisioned, including situational assessment, planning and design, implementation, monitoring and evaluation.

In the discussion during and after the interactive section of the presentation, participants noted possible gaps in the MPS, including different foci in different countries and programs, risk reduction and resilience (including going beyond climate smart agriculture), and socially excluded groups (moving beyond gender to target other marginalized groups). It was noted that these issues could be addressed through making them ‘key components’ – i.e. they don’t necessarily have to be objectives. Additional concerns about the MPS included deciding who to target (households or individuals), and that having requirements around gender don’t have to include the Nurturing Connections program. One discussion question raised related to what needs to be documented versus what needs to be a document. Participants also noted the importance of MPS components needing to be planned, delivered *and* understood, especially if programming was delivered according to plan. Overall, some emphasized points of the lecture included that the MPS are *minimum but mandatory*, and that if *something is not written, it doesn’t exist* (as other staff and offices can’t access it),

Future Action Points:

1. Discuss possible gaps and whether to include these in MPS or not, particularly in terms of risk reduction and resilience
2. Discuss the role of gender and GESI in the MPS

3. Discuss systematic grading on whether MPS targets are met or not, and create a reliable and doable process for this
4. Discuss what needs to be documented versus what needs to be a document

Session 3: Nutrition-Sensitive Agriculture and Nutrition Outcomes: *Strength of Evidence and Research Gaps* (Rolf/Jillian/Kenda)

This session discussed the **evidence and research gaps surrounding EHFP** and other nutrition-sensitive agriculture programs. Agriculture and food systems are critical for food and nutrition security, and encompass availability, access, stability and utilization, however more research is needed on each of these areas and their interactions. The current **EHFP model is expected to improve maternal and child nutritional outcomes through several pathways**, including:

1. Access to and consumption of micronutrient-rich fruits, vegetables and poultry or small animal products
2. Breastfeeding and complementary feeding practices
3. Use of public health services by mothers and children
4. Income through sale of surplus products from home gardens & small animal husbandry
5. Empowering mothers by improving their knowledge and skills and influence over household decision making
6. Water, sanitation and hygiene (WASH) practices

Multiple impact pathways regarding the effects of agricultural interventions on nutrition were shown (an HKI model and an outside model), and a chart on the different kinds and strengths of evidence (ranging from weaker case, descriptive and correlational studies to stronger quasi-experimental, experimental and meta-analysis studies) was shown and discussed. Since 2014, 17 peer-reviewed papers analyzing impact evaluations of nutrition-sensitive agriculture, livestock, value chain and irrigation projects, and 28 papers that used survey data to explore linkages between agriculture, women's empowerment, diets and nutrition have been published. This presented and summarized these as well as discussed their applicability to HKI's work and research.

In terms of **crop access**, there is generally strong evidence of a positive association between crop production diversity & dietary diversity. This is more important in physically isolated areas and/or those with imperfect market infrastructure, and where home production diversity is low. Market access modifies relationships and in some contexts more strongly influences dietary diversity, with other modifiers including women's empowerment (seen in Nepal), gender, wealth, control of household decisions and specific nature of farm diversity (seen in Malawi). There is also evidence for a linkage between crop diversity and nutritional status, but it is weak.

In terms of the consumption pathway of **animal foods**, livestock ownership is associated with a greater animal-source food intake, especially milk in young children. Generally, there is a

positive association between dairy production and increased milk consumption (seen in Ethiopia, Tanzania, Uganda & Nepal) and lower prevalence of stunting, and the strength of association varies by context. Overall, the evidence of associations with health and nutritional outcomes is limited, but milk intake is positively associated with child linear growth.

In terms of **income**, there is reasonable evidence that EHFP has increased income *from home produce* – some with a strong counterfactual (Green 2016; Talukder 2000; Bushamaka et al 2005). There is little or no evidence of impact on overall household income, either positive or negative, meaning that EHFP income may be replacing other forms of income. There is also no evidence of contribution of increases in income or HH wealth to dietary outcomes or nutritional status.

In terms of **expenditures**, there is some evidence that a relatively high percentage of income from EHFP is spent on food and/or other services or products that influence child nutritional status. There is no strong counterfactual evidence of impact (either positively or negatively) on total expenditure on food and/or other services/products that influence child nutritional status, and no evidence that EHFP affects overall HH expenditure, either positively or negatively.

In terms of **women's empowerment**, there is evidence that EHFP can increase components identified as related to the concept of empowerment but, historically, few studies have used validated measures, although more recent studies have seen a greater use of the Women's Empowerment In Agriculture (WEAI) index. Evidence does show, however, that EHFP may increase women's control over agricultural assets and involvement in household decision-making. There is little or no evidence linking specific interventions to empowerment outcomes and the mechanisms through which these work. There is emerging evidence of associations between increased scores on some domains of empowerment and improved diets for women and children, and some evidence of associations between increased empowerment and child LAZ scores.

In terms of **women's time use and energy expenditure**, there is not strong evidence on the effects of EHFP, likely as time use and energy expenditures are hard to measure. There is some evidence of a negative impact on women's time spent on childcare, domestic activities, and leisure, and a recent IFPRI review found that reductions in women's reproductive work time are detrimental to nutrition, especially for children, although this is mitigated in non-poor households.

In terms of **WASH**, there is little evidence that WASH-focused interventions affect child length or anemia, however, interventions focusing on **infant and child feeding** were found to increase child length and decrease anemia in Bangladesh, Kenya and Zimbabwe.

It was noted that **non-impact pathways** may have an influence on program effects, with research into them focusing on spillover, sustainability, cost-effectiveness, effective targeting, light versus heavy models, approaches to urban EHFP, environmental impacts of EHFP and the reliability of EHFP impacts. There was weak evidence for a spillover effect serving as a non-

impact pathway, moderate evidence for sustainability, weak evidence for urban EHFP approaches, and weak evidence to date for the impact of resilience.

Lessons learned from nutrition-sensitive agriculture (drawn from Hasleow et al, 2016) include that agriculture is important but not enough to improve nutritional status, and that it is important to target pregnant women and those with children under 2 years of age as well as food insecure areas and disadvantaged households for greatest impact, and to include women's empowerment to maximize health and nutritional outcomes. Additionally, it is vital to design and adapt integrated programs based on evidence, performing equity analyses to address gender and social barriers, basing behavioral change communication interventions on formative research, and to adapt the intervention package to the local context. Finally, it is vital to have an entry and exit strategy, to source locally for better access, affordability and sustainability, to build multi-sectoral collaboration at different levels, to include a robust M&E system, and to document, publish, and disseminate research findings.

Research gaps that were identified and discussed included:

- Are EHFP programs getting too complicated or too loaded?
- What are the key contextual factors that should influence EHFP adaptation?
- What are the long-term impacts of nutrition-sensitive agriculture interventions and how sustainable are these impacts?
- What contexts and processes are essential for the successful scale-up of nutrition-sensitive programs and how much does scale-up cost? How can we more efficiently target EHFP interventions at community- and household-levels?
- Which aspects of women's empowerment are most likely to influence maternal and child nutrition outcomes?
- How should market conditions and/or market types influence EHFP design?
- Are there unintended negative effects of agricultural programs on nutrition (or other outcomes)?

The session was concluded by noting that a response depends on severity of problem, and that stronger program design, targeting, implementation and focus on pathways is needed.

Additionally, production diversity is consistently associated with dietary diversity, but strength of association depends on market and other contextual factors, and it's important to note that production diversity is more important for poorer households in market-limited settings. There is little evidence for an impact of EHFP on linear growth, and the magnitude of all impacts varies by context, location, intensity of program participation and underlying conditions.

Overall, there is very little evidence about how different elements of the EHFP model influence outcomes and much less about the mechanics of implementation and outcomes, leading to a "black box" of implementation where unknown factors exist between a program and its outcomes.

Future Action Points:

1. Discuss priority research questions that HKI can investigate (for example, sustainability, income generation, poverty reduction, the relative contribution of different pathways, scale-up, and social capital as an outcome)
2. Discuss the possibility of simplifying and/or validating measurement tools where gaps exist
3. Develop a 1-2 page concept paper of about gaps in knowledge

Session 4: Program Design and Planning: *Tools and Methods* (Ame/Nancy)

This session focused on pre-project planning (process and thinking to create winning proposals based on evidence), project design (current tools and methods and what is being applied where), and positioning EHFP for more than nutrition (Gender and Social Inclusion (GESI), Resilience, Obesity, Urban Nutrition, Poverty and Livelihoods, Agriculture and Value Chains).

The **project concept** should first be based on evidence, using situation analyses from available sources to determine programmatic and geographic needs, gaps in knowledge and programming to address identified problem, and potential donors, competitors and partners. From here, one can determine which interventions are needed to address existing problems, and what innovations are required. Program design must be grounded in existing resources and constraints. Preliminary discussions and inputs with stakeholders and experts (local and global) must be undertaken, and the funding situation should be assessed as well.

In **developing proposals**, coordination and communication are important. Programmatic aspects should be considered, such as whether EHFP is the prime or sub intervention, if international or local partners are needed, how partnering will work (exclusive or non-exclusive teaming agreements), and how/when partner meetings will take place. Organizational considerations include how to determine the proposal preparation team (internal or using a consultant), what tools will be used to keep planning on track, and how internal communication will be carried out. Situational analyses must be undertaken, with consideration to whether more information is needed and how it might be collected. Program design must be grounded in existing resources and constraints, so the local context and available budget should be assessed. Staffing considerations for the project should be considered, with assessments as to which and what kind of staff are required and job descriptions. Finally, an M&E plan to inform project design (and which is informed by project design) should be created, with tools and methods to illustrate project design, pathways and theory of change.

Building project ownership is also an important step in program design and planning. Local stakeholders must be engaged from the start, remembering that beneficiaries are owners of the program process and results and that an ongoing dialogue with intended beneficiaries, including non-adopters, helps keep program activities relevant. Emphasis should be placed on the community planning process, laying a strong foundation for participation among beneficiaries and partners. NGO selection should include experiences with social inclusion, community mobilization, and working with/for women and other socially marginalized groups.

Regarding **design and planning**, many of the tools used to design and plan an EHFP project are dual use and are also used to help implement the project, or are overlapping and complimentary. These can be reference tools, which one can return to and compare project plans and execution to, to go back to, or more interactive and 'living' tools, which are subject to modifications and revisions as new information becomes available or with new information about the local context.

A **situational analysis** is the first step in project design, and helps decide where the work will be focused, the needs according to the context, local trends, and other information regarding upon what areas an EHFP program might need to focus. Data often come from both national and local sources, such as DHS, MICS, government reports, previous project information (from HKI and other organizations), or academic literature, and can be used to write the background section of the proposal. Situational assessments are critical steps for any EHFP project to understand the existing context of the target communities for which the project is proposed/designed. This is vital particularly because health-related behaviors are difficult to change and are affected by personal, cognitive, economic, social, cultural, and structural factors, some of which are not apparent to implementers, even those that have worked in the geographic areas with similar target populations. Therefore, formative research possibly involving both qualitative and quantitative methods is required, as it informs the recruitment and retention of participants, determines measurement procedures and the acceptability of certain interventions, and because it reveals gaps in and otherwise supports implementation.

Another important design and planning tool are **Program Implementation Pathway (PIP) diagrams**, a visual description of how a project's input, activities and outputs are delivered and how these could be utilized by intended beneficiaries to achieve desired outcomes and impact. PIPs provide a summary for communicating the project rationale and are important for program planning, delivery, utilization and M&E. The M&E information based on a PIP generate data on how well the project is being implemented and any problems in the delivery of the intervention. The data can also cover resource constraints, motivation and skills of project personnel, utilization of outputs by intended beneficiaries and whether the target population is being reached. PIPs differ from Log Frames in the connection between elements. For each part of the PIP one needs to map out all the elements and share those details with implementers, including local staff so everyone knows what will be monitored and all of the areas to be addressed in order to accomplish the overall goal. This aids in project planning and monitoring, especially in terms of time planning and identifying assumptions at all levels of the framework, from input to process to outputs.

A **Theory of Change (TOC)** is another important planning and design tool. It is the foundation for the design, implementation and evaluation of an EHFP program model, and visually demonstrates how the different program activities link together in a causal pathway, resulting in the improved nutrition status of mothers and their children. Because there are many factors that affect nutrition outcomes, TOCs are multidimensional, encompassing other external factors beyond the control of the project but which can affect project implementation, such as local political conditions, conflict, extreme weather disasters, and more. The TOC takes these

into consideration, but also clarifies the areas of intervention within the project and how far the proposed project can reach considering external factors. The TOC breaks down each level of the process into its component parts that must be achieved at the next level below in the diagram.

A **Logical Framework** is a detailed description of the program, showing how activities lead to outputs and how these will lead to the outcomes and goals. It is normally shown as a matrix, called a Log Frame, and is linear with all activities leading to outputs leading to outcomes and impacts – there are no cyclical processes or feedback loops. The Log Frame includes space for risks and assumptions, although these are usually only basic, has a column for indicators (separating it from the TOC and PIP tools) and doesn't include evidence for why one thing will lead to another. The linking from inputs to impacts and the indicators and sources of data to demonstrate that this has occurred are the main components that separate a log frame from other planning documents.

GANTT charts help plan timelines of activities, including what the various activities are, when each activity begins and ends, how long each activity is scheduled to last, where activities overlap with other activities and by how much, and the start and end date of the whole project. There are two levels of GANTT charts that can be used in program design, a proposal GANTT and a project GANTT.

The second part of this session focused on **positioning EHFP** with other areas and the challenges surrounding this. Regarding GESI, participants wondered if this component of EHFP was enough to satisfy donors and it was reiterated that our gender work doesn't have to be only through the Nurturing Connections curriculum. Another concern was that because EHFP program design is currently very heavy, gender is often the section that gets left out when resources are sparse. Because of this, we need to work on GESI integration, allocation of resources to GESI activities, and buy-in on GESI by our implementers. Regarding resilience and EHFP, participants wondered how we might measure resilience, or if it's more efficient to measure things we think improve resiliency (income, livelihood opportunities, etc). Resilience has three interconnected dimensions at the individual and community level, including awareness and knowledge (absorptive), practice (adaptive) and sustained behaviors (transformative), and these should be kept in mind in resilience programming.

Regarding **Obesity and EHFP**, this is potentially an area for growth in the future, especially in peri-urban and urban areas, and in schools, but it may need to be packaged more broadly – instead of targeting obesity, a focus on NCD prevention in general could be more appealing to donors. Ways that EHFP could address obesity were noted, such as through the first thousand days programming and through the promotion of healthy foods and diet (which we already do for prevention of undernutrition), as well as by starting school gardening programs, promoting physical activity and by focusing on urban areas. The point was also raised that perhaps our best approach for tackling obesity is not through EHFP, but by working with industry or some other mechanism. In urban programming, we might adapt EHFP to promote innovative gardening techniques, increased access to inputs and markets, green zones, promoting production and increasing agricultural efficiency. EHFP can also be tailored as a poverty

reduction program, requiring formative research and using findings to assess HH economic wellbeing and leveraging donor advocacy. Finally, the notion of the importance of EHFP producers in the global food system was brought up, especially as this is a global area of interest and could be an area to focus on when securing funds.

Future Action Points:

1. Send tools for proposal development, templates of situational analyses, and any other communication on the program design process (to be used in the EHFP Toolkit)
2. Document the proposal development process, including team and consultant, tools, budgets, communication with the team, donor needs and more. Send in samples of well-structured and well-written concept notes, proposal design workshop curriculums, PIPs and Theories of Change (to be used in the EHFP Toolkit)
3. Create position papers on EHFP focusing on topics beyond nutrition (for example, GESI, resilience, obesity, livelihood and poverty reduction, EHFP in urban, EHFP producers as part of food system and more)

Session 5: Addressing Training Modalities for Core EHFP Components and Strengthening the Program Model (Treena/Kroeun)

To start this session, **EHFP programming in Cambodia** was discussed, particularly in relation to training processes, methods and tools. Training should be designed based on project objectives, and is often in the areas of agriculture, essential nutrition actions/essential hygiene actions (ENA/EHA), marketing of EHFP produce, Nurturing Connections or food processing. Content can be derived from **relevant manuals or handbooks and made into a curriculum**, which then would be used to inform a training schedule. This is done at the household, village model farm (VMF), trainers and management levels. A number of resources can be used for training, such as manuals/guides, posters, counseling cards and leaflets. **A training calendar** is also important, in order to ensure that all the various trainings at different levels and for different projects are planned adequately in advance and to ensure maximum benefit to participants. Participant availability and project timelines should be considered.

Additionally, a **training action plan** is important to ensure a standard quality of training, to define the roles and responsibilities of leaders and staff members, and to ensure that tasks are assigned and completed properly and on time. This should be done at least one month before a training. Around this same time, **a training needs assessment** should be conducted, in order to assess training needs in terms of knowledge and skills, and to ensure that training contents are in line with participant needs. **Pre- and post-tests** should be conducted to assess changes in participants knowledge, and can be returned to participants to highlight strengths and areas for growth. **A VMF training checklist** should be used to assess quality of VMF and household training, and **a training evaluation** should be conducted to assist facilitators in tailoring the training to participants and improving for the next training. Finally, **a follow-up plan (in the form of a chart)** should be used to manage participants, trainers and training requirements effectively.

Some lessons learned from Cambodia include that training on agriculture, aquaculture, marketing, gender, ENA/EHA, and food processing can be easily integrated under one EHFP project, but that project staff workload and household interest has been an issue. Additionally, most of the EHFP project staff have an agriculture background, so training may need to focus on areas where staff lack expertise in, such as ENA/EHA and Nurturing Connections. One-day trainings for households on agriculture, aquaculture and poultry combined were found to be too much, perhaps related to an observed high rate of absence among training participants (up to 30%).

Next, the **SAPLING project** was discussed in relation to trainings. SAPLING's goal is to improve gender-equitable food security, nutrition, and resilience in vulnerable people in the CHT region of Bangladesh. It is a **twoyear training program with 48 integrated sessions** conducted by field facilitators and community health service workers. Curriculums for trainings were designed with participants' life experiences, needs and culture in mind, combining a life-coaching approach with technical assistance for increased skills and knowledge. Trainings were provided in the areas of horticulture, poultry, and livestock, integrating information on nutrition, gender, finance, disaster risk reduction, WASH and natural resource management. Technical assistance was given using a seasonal chart to monitor crops, climate, likelihood of natural disasters, and other factors affecting agriculture and EHFP programming. Instead of focusing on VMFs, the SAPLING project is structured around demonstration farms and lead farmers, which could include different farms and farmers serving as leads for different topics depending on expertise and ability. This system was adopted from the SPRING project and may be more suited to the geographic spread of households' plots in the Chittagong Hill Tracts.

The poultry rearing sessions are a good example of **training integration**, where training started on the technical aspects of poultry rearing but also included the nutritional benefits of poultry, how to construct sheds, protecting disease transfer through WASH practices, and financial management, using small-scale poultry rearing as an example. Different levels of trainings are necessary depending on the audience, with different trainings given to technical officers, field facilitators/ community health service workers, program beneficiaries, and those in positions of management.

Basic training for field facilitators, community health service workers and others at that administrative level at the field-level focused on job technical knowledge and support, using the Training of Trainers (TOT) method and adapting to participants' skills and knowledge levels. Topics covered included gender sensitization, data collection, group formation, facilitation, horticulture, poultry and livestock, ENA/EHA, Nurturing Connections, WASH, household preparedness and disaster risk management (DRM), savings and marketing. Conducted over 40 days, this training aimed to prepare staff to conduct group trainings and household level support.

For **program beneficiaries**, trainings aimed to increase knowledge levels to raise income and access to nutritious food, with content focusing on horticulture, gender, poultry-raising, WASH,

financial management and more. Trainings use a participatory approach to increase learning, with many group discussions in sessions located in community centers. **Demonstrations and mock trials were used to promote hands-on learning, with a Field Facilitation manual serving as a guide for trainers. IEHFP supervisory training was also conducted for Program Managers, Upazila Coordinators and Union Supervisors,** with the goal of improving monitoring and evaluation in the field. Field monitoring of sessions, identifying areas of program weaknesses, and understanding programmatic needs and providing logistics and support were key topics over a three day training. Additionally, a short-term food security training was conducted, with a curriculum structured to strengthen capacity with the expectation that participants would acquire new knowledge that would translate into action regarding food security, sustainable agriculture, climate change risk analysis, adaptation and vulnerability assessments.

Trainings should support an enabling environment and can target everyone from government workers, health staff, teachers and pharmaceutical retailers to community leaders, local skilled birth attendants, peer educators and health volunteers. **Clear implementation guidelines and curriculums with the appropriate tools** need to be sufficiently oriented with management and field staff. Clear communication channels among all the project staff are very important, or else mismanagement will happen, such as some groups receiving seeds before relevant trainings. It is recommended to schedule each session on a convenient day and time so that all the participants can attend. Training should be completed before relevant inputs are distributed and refresher sessions for all participants to recap horticulture sessions on harvesting should be held before winter and summer seed distribution. Finally, field facilitators should be trained in three or four different phases over the year so quality of the training is ensured and knowledge retention is increased.

Other recommendations for trainings include not skipping the practical and hands-on sections, especially at the base levels. Supportive supervision and tools should be integrated into trainings and planned for ahead of time. It is important to be flexible in our models and find out exactly what participants like and find most useful in the trainings and then emphasize this so the sessions have intrinsic value to participants. Short reminders and **refresher trainings** are useful to remind households of key messages, and intangible incentives could also be used. Trainings should be documented using **a registration book with photos and time stamps.** Finally, having participants write their future goals and action plans to see progress and worth throughout the trainings is useful.

Certain challenges are often encountered in training sessions. High turnover in supervisors and trainers is often an issue, as is dropout and participant engagement. Not being able to attend a workshop due to 'lack of time' may have underlying reasons behind it, such as timing and planning of attending a workshop. It is also difficult to test participant knowledge and learning in non-literate populations, and that is a challenge to address going forwards. There is a need for **a participant action plan or micro-plan that helps participants identify how to apply learnings from trainings into communities** – this is important as often trainings cover too complex and detailed instructions without real-life examples. Loss of quality over the course of the training and a lack of supportive supervision for leading the trainings are issues, and it is

also important to create enabling environments for behavior change that engages gatekeepers and stakeholders at multiple levels. Implementation guidelines and the appropriate tools to use should be clear to staff leading the training, and it was emphasized that if the staff don't understand the 'why' of a program, you won't get the 'what', and quality control will suffer. When designing trainings, start with the theory of change (where are we going, what are we trying to achieve), and ensure the program and trainings are integrated to promote better outcomes. Finally, participants raised the question of an EHFP core training manual as a potential future goal for HKI.

Future Action Points:

1. Discuss the possibility of a core training manual (a standardized curriculum) and how detailed it should be
2. Discuss how to test participant knowledge and learning in non-literate populations.

Session 6: Implementation of Nutrition, Wash and Gender Components including Supportive Supervision, SBCC, Advocacy and Coordination (Pooja/Ramona)

To start the session, the **implementation of the Suaahara program in Nepal** was discussed. In Suaahara, Social and Behavior Change Communication (SBCC) materials were tailored based on formative research identifying aspirations of beneficiaries, with one single campaign ("*Mother Knows Best*") linking all activities and materials together. The use of cellphones was important, with a telephone number available for mothers to send questions and feedback to, and push messages with key reminders sent to participants. The frequency of contact is very important, and Suaahara II has 60 contact points identified by the Government of Nepal to be reached during the first 1,000 days. Audience analysis is important as this context is always changing, particularly in the areas of demographics, age differences between change agents, phone ownership, participation in health mothers groups, preferred source of information and family structures. Additionally, attention should be paid to the significant generational gaps in education, culture, technology use and more, which are especially pertinent in the quickly developing South Asia region.

Through the Suaahara program, administrators learned to think about both the demand and supply side of programs, to think differently for disadvantaged groups, and to invest in frontline workers using non-monetary incentives (including Suaahara frontline workers, MoH workers, government agriculture technicians, community volunteers, and community nutrition facilitators). Additionally, management needs to monitor programs and understand whether or not follow-up visits/home visits for key households are occurring and why. Cost is a limiting factor that dictates the number of households visited, and thus targeting is important and raises certain questions: do we need a census to identify the groups, and is this a sustainable and feasible system that is compatible with government ownership?

Other **lessons learned** include that theory is often emphasized, but we need to focus more on implementation – for instance, how programs are administered in different contexts, or how much training is ideal and necessary. Linking back to the research priority on sustainability (not

just hand-over to the government, but in terms of systems, services and activities), we need to focus on researching which participant behaviors are one-off or more complex and need to be touched on more frequently, and the dose-response of frequency of visits in terms of scalability. We should look to private sector advertising more for examples of effective SBCC, as it often is highly effective due to its emphasis on emotions and aspirations over functionality. Marketing research has shown that advertisements on shared aspirations are often effective because people are part of same culture. This can be used to monitor and evaluate what is needed for beneficiaries to make meaningful change

The **Nurturing Connections program** was discussed in relation to EHFP as well. First, the adaptation process was explained, focusing on the steps of formative research, content review/translation, training and validation, draft content review, implementation planning and rollout, and monitoring and supportive supervision. Gender analysis should be conducted, combining findings and recommendations with team workshop interpretation and past experiences to create a context-specific gender strategy. Adapting the Nurturing Connections manual across contexts has been successful with some lessons learned. In terms of content review and translation, this has generally been successful, but care should be taken to address lack of ownership in manual adaptation from project staff, and to use local translators who know the context rather than official translators whose language isn't practical or useful for localized use. In terms of the training of trainers and validation, there has generally been positive feedback on this methodology, with validation essential for further adjustments. However, care should be taken to allocate proper amounts of time to edit content, spacing training sessions one week-long per block so that course content can be assimilated and behavior changes initiated, and ensuring validation of courses actually occurs. Finally, in the realm of monitoring and supervision, qualitative supervision and self-reporting feedback forms have been successfully developed and tested, but monitoring coverage is often low and falls to the gender specialist, with a lack of allocation of resources for timely re-training and support.

Nurturing Connections implementation has occurred in Bangladesh in the SUCHANA and SAPLING projects, as well as earlier through the BEAM (2012), TOPS grant (2015) and ANGEL (2016-17) programs. These began as standalone components of 10-12 sessions in mixed groups every week or second week. Local and country offices had core staff as master trainers, and later integrated versions dropped activities and included only activities more easily linked to technical trainings. In Cambodia, Nurturing Connections was implemented as a standalone program in the FF4F project and in the women-centered EHFP program. Here, the standalone component took place in a one-hour session, with seven sessions of mixed groups at a bi-monthly frequency. Repetitive activities were dropped, and the program added in a focus on domestic violence and intra-household management of income. These changes were the result of feedback from the field and the gender analysis results that the sessions were not relevant to the Cambodian context and that the training course was "too heavy" in terms of the time burden involved. In West Africa, the CHANGE program adapted and tested Nurturing Connections programs in two countries (Senegal and Cote d'Ivoire), with key features including a standalone component of 16 connections that included "sister-wives" in polygamous households in weekly sessions adapted by non-HKI staff.

Focusing on **implementation and operations**, in terms of setting, validation is crucial in testing the dynamics of activities, as cultural and environmental factors can influence these. In adapting the content of sessions to context, the original NC manual offers a range of activities that can be chosen from to best suit the setting, but facilitators should keep in mind that some activities are viewed as repetitive by participants, and efforts should be made to adapt these. Session frequency is flexible and can be adapted locally, but there is sometimes little clarity or consistency around what is a good interval of frequency. Additionally, buy-in by staff is critical, and interpretation workshops are useful to ensure local staff understand findings. Difficulties in implementing gender components into EHFP programs include that GESI staff are often not integrated into HKI staff, difficulties in translation of materials from one country to another occur, inadequate training time and validation are allocated to GESI components, and low monitoring coverage takes place due to a lack of re-training and support. A strategy for operations is needed where field staff and frontline workers are not skilled at the many different aspects needed for appropriate GESI implementation. HKI should increase the involvement and training of project staff in GESI work, recruit staff more oriented to the HH approach and who are sensitive to participants' time needs and schedules. It was also suggested that there should be an increased focus on financial decision making, sessions for men, and community involvement.

When undertaking **manual adaptation**, involvement of relevant project staff for ownership and understanding should be increased, from research to adaptation and monitoring. Allocation of resources toward capacity building of field staff should be increased, especially if volunteers or inexperienced staff are involved, particularly in the areas of facilitation and coaching in order to diversify skillset. Validation is required after any initial training of trainers or other significant changes. In the implementation and monitoring processes, recruitment should be oriented to the household approach, and field planning more sensitive of participants' commitments and potential interruptions. Finally, a plan is required for high quality monitoring of field activities involving all relevant project staff.

In the realm of **content and participation**, there should be an increased focus on financial decision making, as well as designing specific sessions for men on household support. Additionally, ENA and EHFP as topics should be aligned in trainings, and there should be an increased focus on community involvement, including health workers, local leaders, and value-chain and market actors. In impact assessments, **an M&E toolkit should be used to research impact and minimum indicators, and differences in impact should be assessed** (particularly comparing light versus heavy versions, and integrated versus standalone programs), and a social cost benefit analysis across countries should be conducted.

After presentations on Nurturing Connections, an **interactive activity** was conducted where the group was split into 3 to discuss project implementation, lessons learned, research, skill development, and monitoring and evaluation in the context of different programs. This was followed by a group discussion. Participants noted that it would be useful to have a generic guideline on SBCC application in the field to guide programs and promote standardization. Lessons learned need to be documented, and the questions of what should be institutionalized (adapted into a tool that could be used in other countries) and how/when formalized reports

on challenges should be created were raised. The importance of formative research was emphasized, particularly because contexts change so quickly, and it was noted that subsequent formative research can be of a different (probably smaller) scale, that processes should be focused on, and that review of existing materials is also important.

Participants also discussed what tools, resources and protocols can and cannot be standardized, whether or not programs should have a minimum standard for SBCC, and that multi-pronged approaches and different points of contact are important. The importance of documenting the frequency of touch points was emphasized, particularly in terms of competing messages and what a contact point is from the household perspective.

Two main research questions that were identified focused on the combination of different types of touches, and the frequency of contact, the latter being particularly challenging to monitor as households interact with many different personnel, including government staff and it is difficult to ascertain the intensity and frequency. In terms of budget, a longer curriculum should be considered, targeting fewer households but with a higher frequency and quality. This should be taken into consideration during proposal development, but balanced with donor requirement considerations.

Overall, we should be more mindful in promising and delivering programs, defining who our target populations are and making sure we reach them effectively. Lastly, the group made a short list of recommendations for processes to institutionalize, including the adaptation process, past experiences implementing projects in similar areas, operationalizing tools and standards for implementing these tools.

Future Action Points:

1. Discuss targeting specific groups (particularly the questions of are censuses needed, and how to get a valid denominator)
2. Discuss the research priority on sustainability (focusing on systems, services and activities)
3. Discuss moving from SBCC to SBC and the possibility of a generic guideline on SBC application in the field to standardize and guide our programs, and how this should be incorporated into the EHFP Toolkit
4. Document lessons learned for each method and tool/area (to be included in the EHFP Toolkit), and discuss the inclusion of formalized reports on lessons learned in EHFP projects
5. Discuss what to institutionalize and standardize for use in all countries, and where flexibility at the country level is needed.
6. Discuss if program intensity and exposure should be a MPS?

Session 7: Implementation of Agriculture and Livelihood Components including Supportive Supervision, SBCC, Advocacy, Coordination, and Opportunity For Expansions (Zaman/Dale)

This session discussed **agriculture and income generating activities**, focusing on supportive supervision methods and tools for quality programs as well as effective advocacy and coordination. For high quality implementation of agriculture and income generation programs,

learning sessions are critical, and steps must be made to collaborate and partner with local and national governing bodies and NGOs, particularly in the planning stages. Additionally, a pre-assessment of the context and beneficiaries, focusing on geography, socioeconomic status, capacity, levels of motivation and acceptance, scope, and access should be carried out. The pre-assessment stage takes time and can delay program starting, but is essential for effective interventions. In farming programs, these findings determine the type of agriculture to be used (vegetables, poultry, pigs, goats, or a combination of these), which should be tailored to participants' needs, as well as other possible income generating activities (such as food processing).

The **private sector** should be engaged in a way that goes beyond simply making linkages – a platform for marketing should be created for beneficiaries, and their negotiation skills promoted, as many women farmers are used to marketing only at the household level. In working with the private sector, both parties (the farmer and the trader) should benefit to create a sustainable partnership, and barriers to this (such as transport) should be addressed. It is important to note that HKI currently lacks an effective tool or guideline for group marketing, and this is an area for growth. The questions of whether in-house skills and capacity that current staff have would be enough, or whether outsourcing or partnerships would be needed to promote better marketing protocols was raised. A potentially useful tool going forwards is having a **decision tree or set of assessment criteria for VMFs who are market-ready**, recording who fulfills indicators in order to receive the marketing intervention.

Resilient farming practices should be emphasized, including using tolerant plant varieties based on geographic conditions, practicing efficient water management and post-harvest product management, using tunnels or plastic houses to counter variation in weather and promoting access to market networks. Additionally, a “One Health” approach to households who live on small mixed farms should be encouraged, where a clean and healthy environment for the family and surrounding area is maintained to promote health and nutrition. To promote value chain opportunities, care should be taken to ensure a proper selection process for IGA , considering context, ecology, market source, distance, access to transportation and more, as well as providing inputs and capacity building interventions to beneficiaries and regular supervision and coaching for quality assurance. Multiple enterprises need to be a focus, diversifying the produce for ‘garden to plate’ and ‘farm to market to plate’ approaches, depending on the crop. Additionally, good governance in marketing should be promoted in order to ensure that the producers benefit, particularly in terms of market management committees and growers collectives and cooperatives.

Sustainable scale-up was another focus of this presentation, with sustainability defined as a program being able to sustain itself on a beneficiary level in implementation areas, not necessarily through handover to governing bodies or local partners. Currently, we have no systematic approach for scale-up, and because EHFP is an expensive intervention, we may want to focus on governments supporting it through policy and legislation rather than scale-up. A question the group discussed was what do we want to scale-up – EHFP or Nutrition Sensitive Agriculture in general. Overall, it was advised that HKI should look at the gaps in different

contexts and globally and target services based on those. Finally, it is vital to plan both scale-up and a handover or exit strategy in each country early on, as it will inform the design of programs. One challenge is that EHFP interventions are often hard to handover because of their multi-sectoral nature, and we will have to figure out how to best address this.

Next, **supportive supervision**, an approach that supports mentorship, joint problem solving, and communication between supervisors and supervisees, was discussed. This occurs at differing frequencies at varying levels, from monthly visits to community-frontline workers, monthly meetings and feedback with partner NGOs, quarterly district visits with multisectoral teams, and quarterly visits with program partners and other major stakeholders (government and program officials, and technical and implementing partners). Supportive supervision needs to be timely, smart and effective, linked with training to maintain quality and guided by an implementation plan. **Tools such as monthly performance data sheets, targets and integrated checklists can be used**, with benefits increasing when the technical team conducts supportive supervision and can coach and review participants.

Challenges in supportive supervision include acquiring enough layers of staffing that systems function, standardizing the entire process (not just checklists), and ensuring all staff know *why* they are doing what they're asked to do. In yearly work plan development, envisioning exercises should be used to focus on program goals, and additionally, courses in project management and leadership should be promoted and offered to staff, as well as the use of new project management tools and software.

To document the current level of knowledge and practices on the project recommended behaviors, it is important to identify gaps in the adoption of the practices, provide individual feedback and facilitate problem solving, provide individual technical coaching, and track behavior change and rate of adoption. This promotes interaction between beneficiaries and project staff, and can be used as a planning tool to prioritize activities and monitoring visits. **Movement tracking sheets should exist for each geographic/target area, with monthly targets for technical officers and frontline workers being followed and progress reviewed at monthly meetings.**

Methods and tools for effective advocacy and coordination include promoting government partnerships to promote policy changes and key interventions, providing regular progress updates to all stakeholders, using media for programs at scale, creating policy briefs on successful aspects of programs, and disseminating intervention results at all levels. The group discussed the lack of standardization or proper protocol surrounding advocacy, and the option of hiring a consultant for this brought up. A process to collect and disseminate advocacy materials seems to be needed, with adequate budgeting for this as well. Social behavioral change was discussed as well, which is promoted through radio shows, 'edutainment' programs, annual events and days, and cooking demonstrations, as well as household visits. Opportunities for expansion include focusing on the urban poor, linkages with micro-credit institutions, private sector partnerships, finding insurance for small landowners, and nutrition governance.

This was followed by a group exercise, where participants were asked to brainstorm around the questions:

1. What are the most important elements of high quality agriculture and income generation interventions?
2. What has worked and what hasn't in managing supportive supervision?
3. Effective advocacy and coordination – methods and tools?

Future Action Points:

1. Develop clear guidelines for group marketing
2. Discuss IGA strategy, and whether in-house skills or outsourcing should be used
3. Discuss the balance between sustainability and scale up, and how to standardize scale-up procedures
4. Discuss creating a standardized decision tree and assessment criteria for market-ready VMFs to guide when the marketing intervention is implemented
5. Collect Supportive Supervision tools for movement tracking sheets, monthly targets, standard integrated checklists and detailed implementation plans
6. Promote staff capacity building by taking courses in project management and leadership, and utilizing new project management tools and software beyond Excel
7. Develop advocacy strategy and tools and define a process for these

Session 8: A Toolkit for Monitoring and Evaluating EFHP Programs: *Current Practice, Critical Gaps and Next Steps* (Gary/Stella)

This session started with a reminder of some targets for the end of the meeting, including finding agreement on what should be part of an EFHP Monitoring Toolkit (what things do we want to institutionalize and standardize), identifying what materials and resources we have already and the gaps that need to be filled, and selecting a core group to develop and complete the EFHP Monitoring, Evaluation and Research toolkit (and creating a timeline for this). It was emphasized that a lot of monitoring and evaluation knowledge is in someone's head, not on paper, which leads to difficulties in onboarding new personnel and leaves gaps when staff leave. We need to decide what is "toolkit-able" and put everything we can in documents so that information can be passed on when administrative changes occur. Induction and orientation packets are needed before our toolkits can even be used, as toolkits need context and an introduction, so we need to work on creating a standard induction process, particularly in monitoring and evaluation.

Monitoring, Evaluation and Research (MER) This session began by distinguishing between evaluation, monitoring and research. Together, they are a set of endeavors undertaken to ensure the quality and efficacy of programs. Evaluation looks at outcomes and the fulfillment of objectives (and understanding what we learned from them), while Monitoring is a continuing

function of an ongoing intervention and used by implementers as a management tool. Research is a systematic and detailed study of a subject in order to discover new information or reach a new understanding about it. All components of MER are overlapping but have a distinct purpose, and the Kellernet has a whole toolkit of research tools that can be used.

A series of true/false questions was asked as a group activity, with participants moving to one side or the other based on if they thought a statement was true or false. These questions focused on **IRB approval and dataset security issues**, with the goal of reminding participants of the importance of proper IRB procedures and taking care to protect data and beneficiaries confidentiality. Participants were told that they should assume IRB is always needed and that national requirements always trump HKI requirements for approval, as well as reminded of where Human Subject Research certificates can be obtained and their use and validity. It was noted that we may want to take the standard modules out of these online courses and translate them into relevant languages, perhaps tailoring them to project focuses and design. The new HKI Responsible Conduct of Research guide should serve as a starting reference point for staff involved in MER, as well as online research tools and templates.

Part of the **Minimum Program Standards focuses on MER**. In terms of monitoring, links to new resources available can be found in the MER section of the MPS, **including an MER plan template and example, minimum monitoring indicators, a log-frame and PIP, sampling guidance, a budget template and a reporting calendar**. Moving forwards, we may want to standardize (in order of importance) **question modules for common measures, annotated analysis codes, checklists for garden, poultry, livestock and aquaculture, measures of program exposure, monitoring procedures, and activity monitoring forms**. Two immediate opportunities to standardize tools and guidance include the SMART indicator list and a central database for all EHFP monitoring data (MPS 7.3), which we currently lack. The group spoke about common metrics, discussing the purpose, current status and the extent of standardization needed for often used indicators. These included program coverage, implementation/adoption, intermediary outcomes such as income/overall HH wealth, maternal/child dietary diversity, child minimum acceptable diet, child anthropology, Household and VMF monitoring procedures, WASH and the HFIAS, FCS, and WEAI measures. The group discussed how pre- and post-tests might be adapted to non-literate populations, the difficulty in calculating EHFP reach and sustainability, and final questions were raised to the group, including:

- Do we want to specify DHIS2 for all EHFP projects? If not, what are the rules as to when and when not? Projects over a certain value? Do we need guidance for proposals as much as for projects?
- What guidance do we want to provide on setting up monitoring dashboards?
- What guidance do we want to provide on use of monitoring data?

Future Action Points:

1. Create induction and orientation packets so that toolkits can be better used
2. Remind staff of the importance of dataset protection and confidentiality

3. Translate standard IRB course modules into relevant languages
4. Discuss how to calculate how many households EHFP reaches

Session 9: Continued: A Toolkit for Monitoring and Evaluating EFHP Programs: Current Practice, Critical Gaps and Next Steps (Meredith/Kenda)

This session started with a background on the **Suaahara II** program, a 5-year multi-sector nutrition project operating at scale in 40 districts to reach over 1.5 million women and children. The results framework for the Suaahara II project was discussed, with objectives leading to the overall goal of improving the nutritional status of women and children. Implementation levels ranging from national and district to community and household were discussed, as well the various target groups in these levels and how they might be reached, such as adolescents (at the household level) who can be reached through schools and women development workers (community level) through private sector means (district). The Core Package was compared to the Core-plus Package, which adds outreach health services and home gardens/poultry with income generation and market linkages.

Lessons learned from the Suaahara II program include the importance of considering skill set and staff resourcing in terms of monitoring, as well as internet connectivity and bandwidth issues and the size of computer servers that are required to store the datasets. Suaahara II began using the DHIS2 System in April 2017, which is an open sourced system that every country team could potentially benefit from. Staff performance should be monitored and accounted for in the workplan, and expectations and questions from different implementation levels should be managed, remembering that different projects have different needs and wants that require different but complimentary datasets to meet various objectives. **A detailed implementation plan (DIP)** should be created and customized to program needs, but it may be useful to build this capacity internally. Using external consultants who create DIPs may lead to problems down the road as it's difficult to change these after the fact if we don't understand how the system was constructed. It pays off long-term to invest in staff who are DHIS2 certified (or to help them become certified), and this should be accounted for when creating proposals. Additionally, more thought needs to be put into management tools and should start with what is known about user needs and balanced between cost and use. The program found that trainings on data use are useful but only if people have been trained in person before (using skype only for refresher training).

Lessons learned from the **DHIS2 system** include flexibility in mode of data entry (mobile and paper) but that behavior can be changed over time, that updating a database is continual and never ends, and that a data system will be used by different teams for different purposes (such as by the WASH team for input distribution, the agriculture team for targeting and workplan updating). Modeling of data and programming integration proved very useful, as did field-friendly feedback (such as color coded maps and excel tracking) and an integrated system that served as a 'one-stop shop' for field teams. Overall, a system such as this is staff heavy, as at scale it means a large amount of data needs to be both entered and verified, and the whole

entry system, dashboards, and more need to be created, but it is also very useful for donor reporting. Finally, MER systems should always be reviewed and approved by the National Human Rights Commission, to ensure ethical and regulatory responsibilities are met to protect the welfare and interests of respondents and their confidentiality.

The presentation then focused on the role of research in project design and planning. First, the **Affordable Nutritious Foods for Women (ANF4W)** project was discussed, with research conducted both internally and outsourced, with the objective of identifying barriers to women's consumption of nutritious foods. Methods included in-depth interviews with representatives of the target population, interviews with key informants on issues related to nutrition in the community, focus group discussions with the target population (male farmer groups and female farmer groups) on the topic of hidden hunger, nutritional needs during pregnancy and lactation, and food preparation, and 24-hour diet recall and food frequency modules, as well as a baseline survey.

Key findings were used to inform SBCC messaging, and included that nutritious foods are expensive, malnutrition is not perceived as a problem for the community, and that food preparation and cooking methods were not optimal for nutrient retention. Additionally, gender differences were found to be important, with participants noting that men and women often did not eat together and men were unaware that their wives do not eat the same quantity and quality of foods that they eat. Information was also collected on the preferred mediums of information dissemination (courtyard sessions, individual counseling) and **types of tools participants like (food cards, posters, dramas)**.

Going forwards, information should focus on the importance and benefits of intake of nutritious food, which kinds of nutritious food which are really available and affordable for the target population (minimum of change in food patterns to achieve significant improvements), the importance of meal composition (food variations, quantity/proportion of the different ingredients), and the role of the homestead garden to support nutritional intake. At the behavioral level, changes will affect food procurement (own production or from the markets), preparation and distribution in the family, with women increasing awareness of their own nutritional needs and men increasing in responsibility for equitable dietary intake in the family.

SAPLING research included a baseline survey, household census, annual monitoring, focus group discussions during proposal development to learn about types of disasters and how people had been impacted, a large qualitative study to inform SBCC, livelihood, GESI (including adolescents, PWD, and elderly), WASH, and Disaster Risk Management (DRM) strategies. Here, in-depth interviews were conducted with husbands, wives, female heads of household, and ethnic group leaders, and focus group discussions and participatory rural analysis (PRA) group activities were conducted with different groups (adolescent girls, adolescent boys, mixed age women, mixed age men) on topics including Disaster Risk Management, WASH, Daily Clock, Adolescent Goals and Experiences, Resource Mapping, and Transect Walks. A barrier analysis was conducted for exclusive breastfeeding (EBF) and complimentary feeding (CF), additional

WASH focus group discussions were carried out by a partner consultant, and a Market and Value Chain Assessment was conducted as well.

For the Myanmar EHFP project, a baseline survey was conducted, along with a large qualitative study to inform SBCC and activity design. This included focus group discussions and participatory rural analysis group activities and in-depth interviews as well, the latter using food cards to conduct pile sorts and ranking exercises. In the Climate Change, Nutrition and Food Security study, mixed methods (quantitative and qualitative) were used to study the impact of climate events on food security and nutrition. The qualitative section was conducted to better understand people's experiences and their knowledge and understanding of the concept of nutrition and climate change. All in all, the study was not technically formative research as it was not carried out at the beginning of a project but findings are still relevant to many programs going forwards.

In the **SPRING** (Strengthening Partnerships and Innovations in Nutrition Globally) study, a quantitative and qualitative handwashing study was conducted, including interviews with closed and open-ended questions and observations of handwashing practices. A spillover study was carried out as well, with focus group discussions with groups of women who had adopted SPRING-promoted practices, but were not project participants to identify which practices were or were not adopted and why, as well as what motivates women to adopt HFP, nutrition and hygiene practices using their own resources. A quantitative and qualitative sustained practices study was also conducted, with focus group discussions with groups of SPRING Farmer Nutrition School graduates by year of graduation and a survey.

For **NOBO JIBON**, a baseline survey, gender analysis, qualitative study for MCHN SBCC strategy, and end-of-project interviews with participants and project staff to assess effectiveness of programming to address gender inequality were conducted. For the **Making Markets Work for Women** program, a baseline survey, market and value chain analysis, and a gender and social analysis were conducted, the latter being a qualitative study that used participatory rural analysis tools and a participatory approach in which project participants and project staff were actively involved in the analysis.

When considering the MPS in terms of research and program design, questions come up, including what do we standardize, what goes into a checklist to determine if you need formative research and which methods you should use, what goes into a toolkit, and what gaps and strengths currently exist? We already have a guideline for research which also applies to formative qualitative research, and the MPS for formative research is, simply, to do it! It can be done pre-proposal, during operations, or during implementation, but it must be carried out to meet EHFP minimum program standards. It can be tailored in scope and focus to the program, but should include a literature review and can be a part of operations and implementation research. Anecdotal information gives us ideas on where to collect data, and qualitative data, once coded, turns into data that can be assessed quantitatively, with mixed methods data collection giving us a more comprehensive view of our target population, as well as the *what, why and how* of certain behaviors and norms.

Operations research uses data to make better management and programmatic decisions, while implementation research uses data to determine the effectiveness of program interventions. This can be done quantitatively (with numerical data used to identify trends and casual/correlative relationships between variables) and/or qualitatively (using non-numerical data to understand the social and cultural background of beneficiaries, and to evaluate staff needs and behaviors). Studying and understanding behavior, in order to change it to promote health, means looking into culture, talking to beneficiaries and trying to understand how they think about things such as social norms and perceptions. Issues we commonly want to know about include risk reduction behaviors, influencers, why knowledge is not practiced, barriers to behaviors, community structure, and how we can capture the aspirations of beneficiaries, all while considering variation across age, culture, and religion. **Things that may be useful to standardize include guidance to determine what formative research is needed and past methods and tools available and examples of standard questions, protocols, proposals, informed consent forms, rationales and more.**

Decision-making trees are also important in deciding whether formative research is needed, what methods and tools should be used, and the role that focus groups should play. These can include budgets, tables, and linkages to sample protocol and justification documents. The objectives of research should always be thought through thoroughly, with a smaller situational assessment conducted and included in proposal development and a larger one conducted after the project begins. These should be focused on a concept the program needs more information about, often holes found in data or questions that the data brings up, and can concern beneficiaries or management. Tools we currently have include:

- Survey modules for baseline data collection, annual monitoring, routine monitoring, and a household census
- An adolescent health and goals partial viewpoint tool and a hygiene interview guide
- Tools related to gendered division of labor, including a daily activities time measure, a seasonal calendar and a production interview guide
- Tools to measure change in sociocultural norms over time, comparing past and present values
- Tools to investigate decision-making and control of assets, including community and household resource and asset mapping, and a decision-making interview guide
- Tools to measure production practices, including a seasonal calendar and a production interview guide
- WASH tools including an observation guide for handwashing, a handwashing interview module, a WASH focus group guide, WASH mind mapping tools, and an individual WASH interview guide
- Tools to measure nutrition, including mind mapping for IYCF and maternal nutrition, a barrier analysis for EBF and CF, and a food and nutrition interview guide
- A guide for disaster risk management focus group discussions
- A tool for cultural consensus modeling

Participants then discussed the presentation, noting that we may want a standardized key informant guide, and that research needs IRB approval but that while simply talking to communities doesn't, it's sometimes a better idea to obtain approval because you can't apply retroactively. Additionally, the group emphasized the importance of consent and confidentiality in all kinds of research, with the ideas of having a code of conduct signed by researchers to ensure this, and introducing a standardized strategic matrix to reinforce decision-making. Participants noted that the process of getting approval from HQ, IRB, or other bodies is far more complex and bureaucratic than it seems on the surface so adequate amounts of time in program planning should be allocated. Additionally, partnering on research should be seriously considered, as it can become complicated, bureaucratic, and difficult to maintain our standards on these projects.

The group also discussed focus groups in terms of hiring facilitators (age, qualifications and gender all need to be factors when hiring facilitators), the importance of facilitation and how it can affect data. Additionally, focus groups are most effective in contexts where dynamics prevent certain members from talking too much but that in situations where the human resources and skills aren't available to ensure quality data from focus groups, another form of research should be considered.

Future Action Points:

1. Document the process of building out DHIS2 (or any system), emphasizing user needs
2. Continue filling in research table, adding in potential funders
3. Discuss formative research methods and tools for different technical areas of inquiry and structuring formative research justifications, protocols and budgets
4. Promote human subjects training for more staff, particularly those who have direct contact with beneficiaries
5. Discuss protocols for working with research partners, particularly in terms of final review/sign off and documented MOUs/working agreements
6. Promote training on the use of qualitative methods
7. Have a document noting who is a resource expert

Session 10: Management Issues in EHFP (Keith/Ngoc)

This session focused on **project management**, the discipline of initiating, planning, executing, controlling and closing the work of a team to achieve specific goals and success criteria in proper time. A good manager ensures smooth and proper implementation to achieve what needs to be achieved, communicating the vision of the project to partners and staff and coordinating relevant structures and systems to make sure the work plan is followed.

In the current **EHFP management situation**, our strengths include extensive experience, good planning and systems management, caring, smart and dedicated staff, a self reflective attitude at the organizational level, a high availability of general tools (available on the Kellernet), effective meeting preparation and follow-up, and flexibility. However, many of our tools are not standardized, we are often not as systematic as we should be, we lack a standard induction

packet and a project startup manual, and there is often a disconnect between planning and feasibility, with management only somewhat aware of field realities. Additionally, there is a lack of an organizational structure to file tools and templates in which wastes time or means the proper tools aren't used, as well as a lack of enforcement in using tools.

We need more consistency and coordination in management reflection meetings, and more communication between different departments (procurement, finance, programming, operations). We also should focus more on staff, making sure we don't assign technical people as managers without providing management training and guidance, focusing more on retaining trained staff, linking management training to HKI tools, and making sure staff know and understand the project needs and purpose, the value of certain indicators, and the action plan. Finally, we need to improve on budget forecasting, with more regular meetings between budgeting and program staff, and we need guidelines for consortium management.

Some additional notes about **EHFP project management** include that some of the MPS address project management, that there are differences in tools and approaches between country offices but certain elements are more common (ex. Gantt charts and training plans), and that the scale of the project greatly influences the quality and intensity of project management. Country office staff are not systematically given project management orientation or training, and because many Country Directors have background in public health rather than management, management experience, skills and capacity can vary greatly. Project management is often driven more by donor formats (proposal log frames for example) than HKI management standards, and we spend a lot of time and effort "figuring it out" by adopting and developing new tools instead of following standardized protocols.

A **group activity about Project Cycle Management** was then carried out, with participants in small groups identifying management actions and tools at different stages of the EHFP project cycle, as well as the factors for success and common challenges encountered, then discussing these together. Next steps to combat challenges included establishing a **Project Cycle Management toolkit, which would adopt and adapt the best existing HKI tools and other open-source tools and provide one tool for each purpose**, which would be mandatory unless donor requirements needed otherwise. A Project Cycle Management training resource should also be created and available on Kellernet, consisting of a 20 to 30 minute videos and PowerPoint presentations on important PPT concepts and tools, with links to more detailed external training resources. Additionally, we could improve the MPS checklist or establish a checklist of key management tools and actions at each project stage to facilitate efficient and systematic oversight country and regional directors.

Often **neglected management actions** include human resources management, communications, procurement, budget management, essential meetings and event, government engagement planning and reporting. In terms of **Human Resources (HR)**, staff turnover is an issue, and we need to focus on how we can motivate and empower staff. Job description development is important, particularly at the middle level of management and as a starting point for performance evaluations. It is also important to limit overlap between positions and make sure that positions are revised and don't become obsolete due to

accommodate someone who's been with HKI a long time. We should focus on attracting talent with a competitive salary and benefits, as well as building a good reputation, and improve induction training on the code of conduct and other important matters. It was also noted that the Birches tool is often misunderstood and shouldn't be used as an "end all be all".

Our **communications** section also needs improvement, as it can be outdated, haphazard, lacking in a feedback loop, inconsistent, and siloed. Globally, HKI does not have a Communications Strategy, which is a clear area for growth as communications affects everything. This includes communities who we work with not recognizing us, poor recognition limiting our fundraising, potential talented staff not interested in HKI because they do not know about our work or who we are, and a lack of power in advocacy due to lack of recognition. It is important to understand context in communications, which is often an area for misunderstandings with HQ, as their priorities often are more funding-focused. In this way, country offices may need to play a bigger role in communications going forwards. We often run into administrative issues in terms of social media, which we should address, and going forwards we should take advantage of younger staff who often know how to use social media well for promotion. Overall, we need to increase our social media presence, as it is an area in which we fall behind our competitors.

In terms of **procurement**, we often experience delays due to late requests, insufficient detail in procurement requests, and capacity issues with logistics and administrative staff. There is a perception that procurement is the responsibility of logistics and administrative staff, whereas all staff need to do their part and make sure they understand the rules, guidelines and constraints that dictate procurement. We should address this through the systematic development of a procurement work plan linked to main detailed activity work plan, with a procurement orientation and training session for program staff by country office procurement staff, and improved training and oversight for procurement staff.

Regarding **budgeting**, we need to establish a detailed budget at the design stage, even for concept notes, ensuring we understand donor and our own financial guidelines and cost norms, revising budgets at the inception phase and conducting monthly monitoring and forecasting. We should conduct design meetings at least once during the design phase, a kick off meeting less than one month after an award, and field-level implementation, project management and budgeting meetings at least monthly. Additionally, a mid-term review should occur around halfway or earlier into a project timeline, with an end of project review workshop focusing on lessons learned held in the last month of the project. To conduct efficient meetings, we should establish and share the agenda ahead of time, invite participants in time, nominate a chair, minute taker and timekeeper, start and end on time, keep meeting minutes and distribute them quickly, document clear action points for individuals, and systematically follow up on previous action points.

In terms of **government engagement**, we need to involve government bodies at the decision-making level during the assessment stage, as well as in participatory meetings, in the development of program implementation guidelines, and in the review process. We can also

create study tours and send them to international meetings and conference to present project successes. Finally, when working with government bodies, we should ensure our programs are in line with national strategies and development goals. In **reporting our findings**, we need to establish and enforce detailed timelines and assign roles and responsibilities in work plans, as well as try to link the timing of monitoring and evaluation actions to a reporting schedule.

Conclusion

At the close of the meeting, future priority action points were identified for EHFP programming, which include the following:

1. Promote systematic and required training (at least an orientation) on project management at various levels, with priority given to the country level staff
2. Standardize user-friendly Project Management Cycle tools and explanations on their use, and include these in the EHFP Toolkit
3. Discuss steps towards a more systematic onboarding procedure
4. Discuss an institutional project start-up and close-out manual for operations, logistics and management needs
5. Create guidelines and tools on consortium and partner management
6. Improve communication strategy, including communications support, website use and social media protocols, particularly for country offices and projects

**EHFP Standardization Meeting Agenda
January 15-18, 2018**

Goal: To standardize and adopt tools and methods in order to improve replicability and impact of EHFP and to assist operationalization of the Minimum Program Standards (MPS)

Objectives:

3. Review the existing EHFP processes, designs, tools and methods and identify gaps to enhance program quality
4. Create a tool kit to complement the MPS in order to facilitate high quality implementation and replication of EHFP

DAY 1) Monday, 15 January: 9:00-6:00 – Setting the Stage		
9:00-9:30		
<ul style="list-style-type: none"> ☐ Welcome and introduction of participants ☐ Presentation of objectives and anticipated outcomes 		
Topic and Structure	Expected Outcomes	Facilitator
<p>9:30-10:00 - How far have we come? A review of action items from previous meetings EHFP meetings and what has been accomplished</p> <ul style="list-style-type: none"> ☐ <i>Presentation regarding previous meetings, outcomes and action points, as well as current status</i> ☐ <i>Discussion:</i> <ul style="list-style-type: none"> - <i>What have been challenges to moving forward on certain action points?</i> - <i>Do remaining points need to be reprioritized?</i> - <i>What can we do to ensure that action items (both from past meetings and this meeting) are accomplished?</i> 	<ul style="list-style-type: none"> ☐ Reintroduction of prior action items to group ☐ Plan for how to achieve these and objectives for the meeting ☐ Prepping group to think over the next 4 days about actions that are necessary and how to achieve them 	Nancy
Coffee Break 10:00-10:30		
<p>10:30-12:30 - What is EHFP? Review and discussion of the Minimum Program Standards (<i>Please read the MPS document thoroughly before this session</i>)</p> <ul style="list-style-type: none"> ☐ <i>A review of the core elements that were agreed upon at the MPS meeting in 2015</i> ☐ <i>Discussion regarding MPS elements and adherence to/ deviations from core elements including projects that do not meet and those that exceed the MPS</i> ☐ <i>Given what was drafted in 2015 and what actually is implemented, how close are we to these core components of EHFP?</i> 	<ul style="list-style-type: none"> ☐ Reaffirmation of the MPS ☐ Identification of deviation from the MPS and why ☐ Identification if need to reassess MPS given time from draft to now 	Rolf/Avital
Lunch 12:30-1:30		
<p>1:30-3:00 – Strength of the evidence and research gaps</p> <ul style="list-style-type: none"> ☐ <i>A review of current evidence available regarding nutrition-sensitive agriculture and EHFP components</i> ☐ <i>Discussion as to where the critical gaps in evidence are</i> 	<ul style="list-style-type: none"> ☐ Summary table of evidence ☐ List of critical gaps in evidence 	Rolf /Jillian/ Kenda
Coffee Break 3:00-3:30		

Appendix 1: 2018 EHFP Standardization Meeting Agenda

<p>3:30-6:00 - Program design and planning</p> <ul style="list-style-type: none"> ☐ <i>Setting the stage for what needs to happen for project design and planning</i> ☐ <i>Examples of formative research for project design and planning (Meredith)</i> ☐ <i>Examples of formative research for gender in project design (Ramona)</i> ☐ <i>Discussion of current tools and methods and what is being applied where (and what is appropriate) to aid program design and planning</i> ☐ <i>Positioning EHFP for future funding including for poverty reduction and livelihoods, urbanization, gender, the triple burden of malnutrition, other settings and/or outcomes?</i> 	<ul style="list-style-type: none"> ☐ Understand methods and tools for design and planning ☐ Discussion on what is required to position EHFP for different settings and outcomes 	<p>Ame/Nancy</p>
<p>DAY 2) Tuesday, 16 January: 9:00-4:00 - Implementation</p>		
<p>Topic and Structure</p>	<p>Expected Outcome</p>	<p>Facilitator</p>
<p>9:00-11:00 - Addressing training modalities for core EHFP components and strengthening the program model</p>	<ul style="list-style-type: none"> ☐ Understand different levels of training audiences and level of information required for each ☐ Understand different means of reaching audiences ☐ Discussion about integrated vs stand alone training ☐ Identification of best practices, tools and methods and gaps 	<p>Treena/Kroeun</p>
<p>Coffee Break 11:00-11:30</p>		
<p>11:30-1:00 - Implementation of nutrition, wash and gender components including supportive supervision, SBCC, advocacy and coordination</p>	<ul style="list-style-type: none"> ☐ Understand what is needed to accomplish WASH, gender and nutrition behavior change ☐ Identification of supportive supervision methods and tools to ensure high quality implementation ☐ Identification of means, methods and tools for effective advocacy and coordination in these areas 	<p>Pooja/Ramona</p>
<p>Lunch 1:00-2:00</p>		
<p>2:00-4:00 – Continued Implementation of nutrition, wash and gender components including supportive supervision, SBCC, advocacy and coordination</p>	<p>☐ Same as above</p>	<p>Pooja/Ramona</p>
<p>No Coffee Break- River Boat cruise 5:00 pm – leave Khmer Surin at 4:30 <i>Pizza, snacks and drinks</i></p>		

Appendix 1: 2018 EHFP Standardization Meeting Agenda

DAY 3) Wednesday, 17 January: 9:30 – 5:00 – Implementation and MER		
Topic	Expected Outcomes	Facilitator
9:30-12:30 - Implementation of agriculture and livelihood components including supportive supervision, SBCC, advocacy and coordination, opportunity for expansions (marketing, insurance, loans etc)	<ul style="list-style-type: none"> ☐ Discussion of issues involved with high quality agriculture and income generating activities-- best practices, tools and methods and gaps☐ ☐ Agreement on supportive supervision methods and tools to ensure high quality implementation ☐ Identification of methods and tools for effective advocacy and coordination in these areas 	Zaman/Dale
Coffee Break 10:30-11:00		
Lunch 12:30-1:30		
1.30-5:00 - A toolkit for monitoring and evaluating EFHP Programs: current practice, critical gaps and next steps <ul style="list-style-type: none"> ☐ Discussion on purpose of EHFP MER toolkit. What is for a toolkit and what is for other knowledge management strategies? ☐ Discussion of current tools and methods and what is being applied where (and what is appropriate) for MER ☐ Discussion of critical short and longer term gaps ☐ Discussion on plan to fill the gaps 	<ul style="list-style-type: none"> ☐ Identification and agreement on current tools: methods, measures, guidance, templates, reporting and use ☐ Identification and agreement on the critical gaps in the short-term, and medium to longer-term gaps ☐ Draft workplan, timeline, and responsibilities for filling gaps and completing MER toolkit 1.0 	Gary/Stella
Coffee Break 3:00-3:30		
DAY 4) Thursday, 18 January: 9:30 -5:30 – MER and Management		
Topic	Expected Outcome	Presenters
9:30- 11:00 – A toolkit for monitoring and evaluating EFHP Programs: current practice, critical gaps and next steps <ul style="list-style-type: none"> ☐ Discussion of terms: formative research, qualitative research, and operations research. What can we toolkit on each of these, and what are for wider knowledge sharing? ☐ Discussion of current practice -- varying aims and objectives, tools and methods for formative research ☐ Discussion of what is appropriate for formative research design, methods/techniques, and transformation into program design ☐ Discussion of current practice -- varying aims and objectives, tools and methods for operations research ☐ Discussion of critical short and longer term gaps for formative and operations research ☐ Discussion on plan to fill the gaps 	<ul style="list-style-type: none"> ☐ Identification of current practice, methods and tools for formative research ☐ Agreement on what is good practice in formative research ☐ Identification of short and longer-term gaps for formative and operations research and plans for filling these ☐ Identify what is 'toolkitable' and what other knowledge management strategies may be needed to strengthen formative and operations research 	Meredith/ Kenda
Coffee Break 10:00-10:30		

Appendix 1: 2018 EHFP Standardization Meeting Agenda

Lunch 12:00-1:00		
1:00-4:00 Management issues ☒ <i>What are the management issues involved in implementing EHFP</i> ☒ <i>What tools and methods are needed to implement from a management perspective</i>	☒ Understand management items and issues ☒ Identification of existing tools and any current gaps	Keith/Ngoc
Coffee Break 2:30-3:00		
4:00-5:30 Wrap Up ☒ <i>Wrap up, next steps and assignment of tasks!</i>	☒ Wrap up of the meeting ☒ Discussion and agreement on next steps to create toolkit for EHFP ☒ Assignments and deadlines for completion of materials needed	Nancy/Ame

Appendix 2: 2018 EHFP Standardization Meeting Participant List

2018 EHFP Standardization Meeting Participant List		
#	Name	Office
1	Shirin Afroz	HKI Bangladesh
2	Natalie Amstutz	HKI Asia Pacific Regional Office
3	Aubrey Bauck	HKI Vietnam (Leeland Fellow)
4	Treena Bishop	HKI Bangladesh
5	Kenda Cunningham	HKI Nepal
6	Dale Davis	HKI Nepal
7	Avital Friedman	HKI HQ
8	Fred Grant	HKI Africa Regional Office and HKI Asia Pacific Regional Office
9	Nancy Haselow	HKI Asia Pacific Regional Office
10	Meredith Jackson deGraffenried	HKI Asia Pacific Regional Office
11	Erica Khetran	HKI Myanmar
12	Hou Kroeun	HKI Cambodia
13	Myint Lwin	HKI Asia Pacific Regional Office
14	Nguyen Mai	HKI Vietnam
15	Gary Mundy	HKI Asia Pacific Regional Office
16	Pham Kim Ngoc	HKI Vietnam
17	Stella Nordhagen	HKI Africa Regional Office
18	Pooja Pandey	HKI Nepal
19	Keith Porter	HKI Cambodia
20	Victoria Quinn	HKI HQ
21	Ramona Ridolfi	HKI Asia Pacific Regional Office
22	Ame Stormer	HKI Asia Pacific Regional Office
23	Zaman Talukder	HKI Bangladesh
24	Amin Uddin	HKI Bangladesh
25	Jillian Waid	HKI HQ

EHFP Meeting Action Points

Session 1: How Far Have We Come? A Summary of Past Meetings and Action Points (Nancy)

7. Discuss a new, better or shorter name for EHFP
8. Discuss revising the EHFP manual for external use and distribution
9. Establish a synchronized communication system (perhaps every 3 months) on new methods and tools
10. Decide how to ensure that MPS are met (through implementation, coordination and more) and how to contextualize this
11. Create an Operations Manual for each country office
12. Create a standardized induction packet

Session 2: What is EHFP? A Review and Discussion of the Minimum Program Standards (Rolf/Avital)

5. Discuss possible gaps and whether to include these in MPS or not, particularly in terms of risk reduction and resilience
6. Discuss the role of gender and GESI in the MPS
7. Discuss systematic grading on whether MPS targets are met or not, and create a reliable and doable process for this
8. Discuss what needs to be documented versus what needs to be a document

Session 3: Nutrition-Sensitive Agriculture and Nutrition Outcomes: Strength of Evidence and Research Gaps (Rolf/Jillian/Kenda)

4. Discuss priority research questions that HKI can investigate (for example, sustainability, income generation, poverty reduction, the relative contribution of different pathways, scale-up, and social capital as an outcome)
5. Discuss the possibility of simplifying and/or validating measurement tools where gaps exist
6. Develop a 1-2 page concept paper of about gaps in knowledge

Session 4: Program Design and Planning: Tools and Methods (Ame/Nancy)

4. Send tools for proposal development, templates of situational analyses, and any other communication you have on program design process (to be used in the EHFP Toolkit)
5. Document the proposal development process, including team and consultant, tools, budgets, communication with the team, donor needs and more. Send in samples of well-structured and well-written concept notes, proposal design workshop curriculums, PIPs and Theories of Change (to be used in the EHFP Toolkit)
6. Create position papers on EHFP focusing on topics beyond nutrition (for example, GESI, resilience, obesity, livelihood and poverty reduction, EHFP in urban, EHFP producers as part of food system and more)

Session 5: Addressing Training Modalities for Core EHFP Components and Strengthening the Program Model (Treena/Kroeun)

3. Discuss the possibility of a core training manual (a standardized curriculum) and how detailed it should be
4. Discuss how to test participant knowledge and learning in non-literate populations.

Session 6: Implementation of Nutrition, Wash and Gender Components including Supportive Supervision, SBCC, Advocacy and Coordination (Pooja/Ramona)

7. Discuss targeting specific groups (are censuses needed, how to get a valid denominator, etc)
8. Discuss the research priority on sustainability (focusing on systems, services and activities)
9. Discuss moving from SBCC to SBC and the possibility of a generic guideline on SBC application in the field to standardize and guide our programs, and how this should be incorporated into the EHFP Toolkit
10. Document lessons learned for each method and tool/area (to be included in the EHFP Toolkit), and discuss the inclusion of formalized reports on lessons learned in EHFP projects
11. Discuss what to institutionalize and standardize for use in all countries, and where flexibility at the country level is needed.
12. Discuss if program intensity and exposure should be a MPS?

Session 7: Implementation of Agriculture and Livelihood Components including Supportive Supervision, SBCC, Advocacy, Coordination, and Opportunity For Expansions (Zaman/Dale)

8. Develop clear guidelines for group marketing
9. Discuss IGA strategy, and whether in-house skills or outsourcing should be used
10. Discuss the balance between sustainability and scale up, and how to standardize scale-up procedures
11. Discuss creating a standardized decision tree and assessment criteria for market-ready VMFs to guide when the marketing intervention is implemented
12. Collect Supportive Supervision tools for movement tracking sheets, monthly targets, standard integrated checklists and detailed implementation plans
13. Promote staff capacity building by taking courses in project management and leadership, and utilizing new project management tools and software beyond Excel
14. Develop advocacy strategy and tools and define a process for these

Session 8: A Toolkit for Monitoring and Evaluating EFHP Programs: Current Practice, Critical Gaps and Next Steps (Gary/Stella)

5. Create induction and orientation packets so that toolkits can be better used
6. Remind staff of the importance of dataset protection and confidentiality
7. Translate standard IRB course modules into relevant languages
8. Discuss how to calculate how many households EHFP reaches

Session 9: Continued: A Toolkit for Monitoring and Evaluating EFHP Programs: Current Practice, Critical Gaps and Next Steps (Meredith/Kenda)

8. Document the process of building out DHIS2 (or any system), emphasizing user needs
9. Continue filling in research table, adding in potential funders
10. Discuss formative research methods and tools for different technical areas of inquiry and structuring formative research justifications, protocols and budgets
11. Promote human subjects training for more staff, particularly those who have direct contact with beneficiaries
12. Discuss protocols for working with research partners, particularly in terms of final review/sign off and documented MOUs/working agreements
13. Promote training on the use of qualitative methods
14. Have a document noting who is a resource expert

Session 10: Management Issues in EHFP

7. Promote systematic and required training (at least an orientation) on project management at various levels, with priority given to the country level staff
8. Standardize user-friendly Project Management Cycle tools and explanations on their use, and include these in the EHFP Toolkit
9. Discuss steps towards a more systematic onboarding procedure
10. Discuss an institutional project start-up and close-out manual for operations, logistics and management needs
11. Create guidelines and tools on consortium and partner management
12. Improve communication strategy, including communications support, website use and social media protocols, particularly for country offices and projects

New EHFP Minimum Program Standards Checklist

The full EHFP Minimum Program Standards Document can be found [here](#).

	Component	<input checked="" type="checkbox"/>
1	EHFP Primer and PowerPoint reviewed	
2	Situational Assessment	
	National and Sub-National Level Indicator Table	
	National and Sub-National Level Potential Partners Table	
	District Level Key Informant Interview	
	District Level Potential Partners Table	
	Village Level Focus Group	
	Gender Analysis Protocol	
3	Design & Planning	
	EHFP Theory of Change (TOC) narrative and graphic	
	EHFP Log Frame	
	Beneficiary selection criteria defined	
	CRC selection criteria defined	
	CRC/VMF contracts	
	Community sensitization plan	
	Production plan developed	
	Procurement plan developed	
	Roles and responsibilities matrix	
	Program coverage map	
	Beneficiary contribution strategy matrix/document	
	Environmental assessment report	
	Exit strategy and sustainability plan	
4	Training & Supervision	
	EHFP training of trainers curriculum	
	Pre-post training questions	
	Training session reports	
	Training session quality review checklists	
	Training plan	
	Supportive supervision plan	
	Supportive supervision checklists	
5	Social and Behavior Change Communication	
	BEHAVE framework table	
	SBCC plan	
6	Program Management	
	Partner organizational capacity and selection matrix	
	Partner roles and responsibilities matrix	

Appendix 4: New EHFP Minimum Program Standards Checklist

	Partner sub-awards	
	Key EHFP staff job descriptions	
	EHFP project organogram	
	Detailed integrated work plan with performance monitoring	
	Detailed budget	
	EHFP budget forecast and monitoring tool	
	Supervision schedule	
	Supervision checklists	
7	Monitoring & Evaluation	
	M&E Plan	
	SMART Indicator List	
	Reporting Calendar	
	M&E Budget	