



Marie McGrath, Co-Director, ENN
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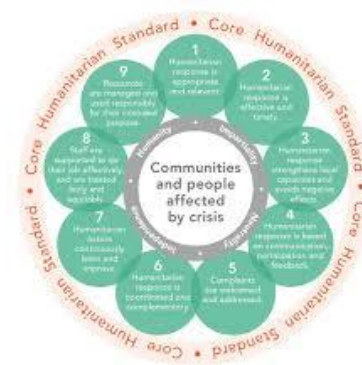


About the ENN



- 1996 ENN established to **manage knowledge** from **humanitarian contexts**
- Scope evolved to include **high burden contexts**, and **emergency-development** interface
- Three core projects: **Field Exchange, Nutrition Exchange, en-net**
- Research, Reviews, Technical Meetings, Facilitation
- Targeted support to **knowledge management** (Global Nutrition Cluster, SUN Movement)

Core Humanitarian Standard on Quality & Accountability



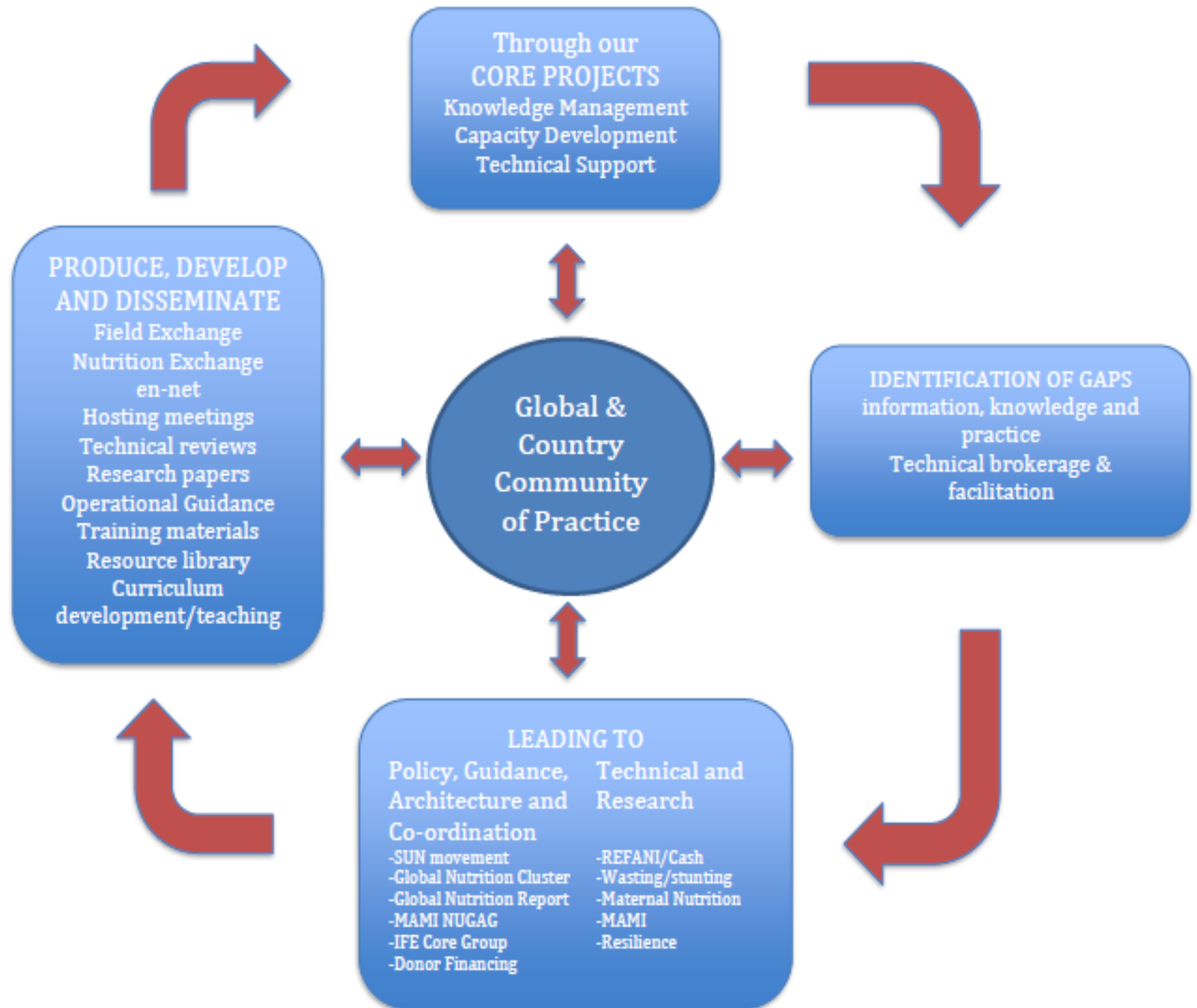
Commitment 7. Communities and people affected by crisis can expect delivery of improved assistance as organisations **learn from experience and reflection.**

Quality Criterion: Humanitarian actors continuously learn and improve.

Actions

7.1 Draw on lessons learnt and prior experience when designing programmes.

7.6 The organisation contributes to **peer and sector learning** and innovation in humanitarian response (**networks and communities of practice, action reviews or learning forums, collective learning a catalyst for change**)



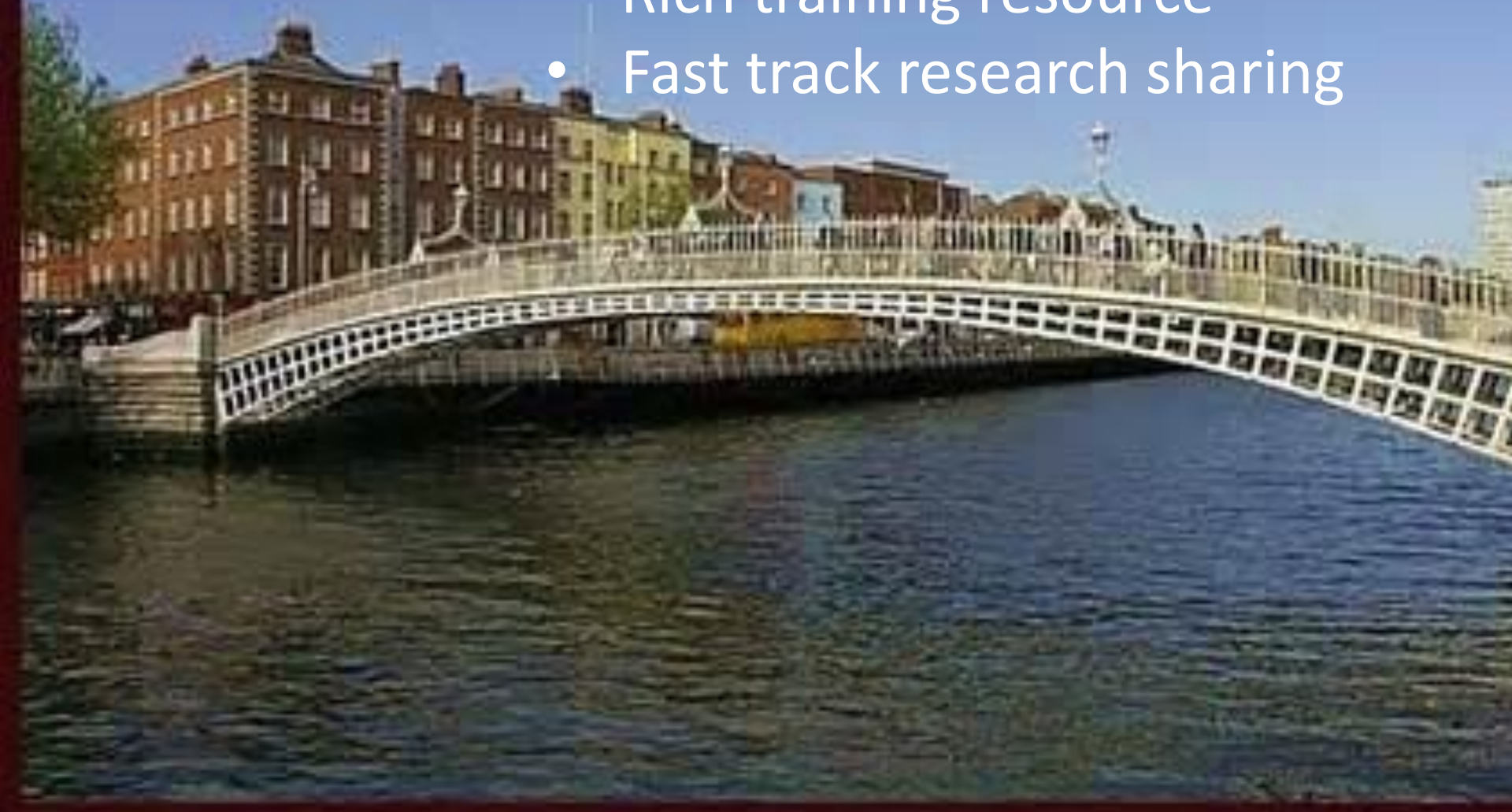
Field Exchange

- **Postgraduate**, international & national audience
- **Technical**, detailed **articles (the 'how')**
- 4,100 print copies to 130 countries
- 3,000 e-copies
- 124,000+ articles online
- **Field Exchange 51: Nutrition sensitive programming (Jan 2016)**



www.ennonline.net/fex

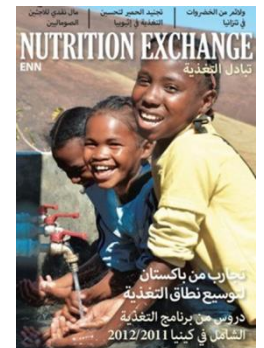
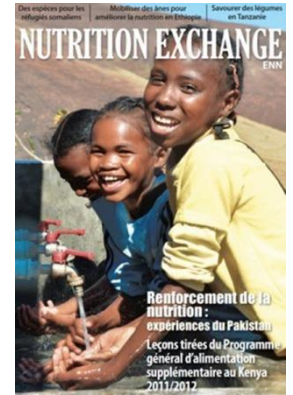
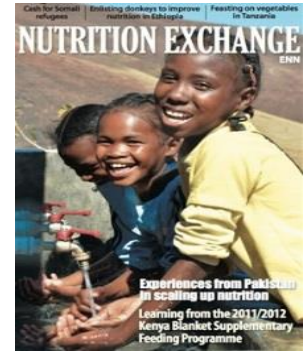
- Bridge academia with field practice
- Inform research agendas
- Rich training resource
- Fast track research sharing



Nutrition Exchange

- National and **sub- national** levels
- Less **technical**
- Short articles and summaries
- Capacity building
- **French, Arabic, English**
- 91 countries
- 19,000 + print copies
- 5,000 soft
- 17,000 page views

www.ennonline.net/nex





- Moderated online technical forum
- Access to rapid **technical** and **peer support**
- Expert moderators
- Anonymous option

Technical thematic areas

- Assessment, Livelihoods, Micronutrients, IYCF,
- **New thematic areas** for SUN Movement countries
- New areas on stunting & research partnerships
- Topical and incites action
 - Ebola and infant feeding
 - European migrant crisis and infant feeding

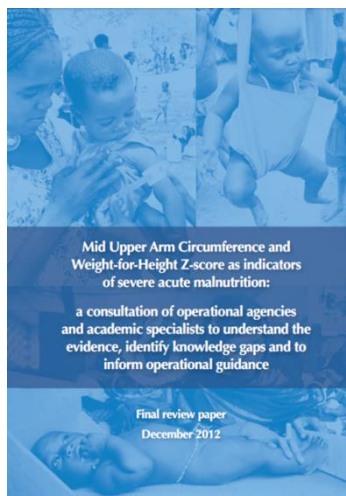
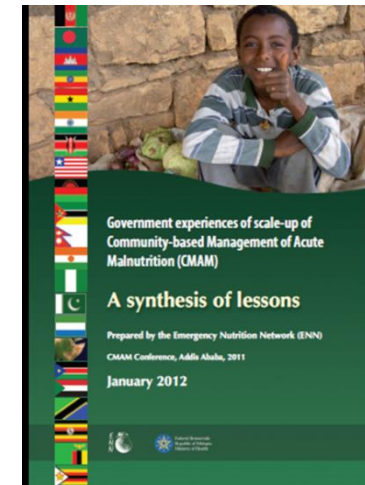
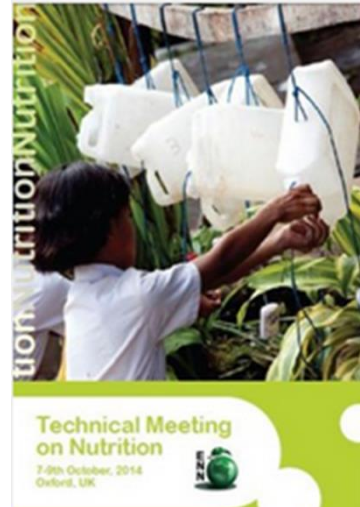
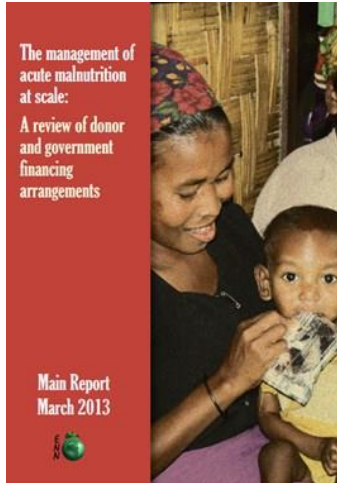
www.en-net.org

Partnerships for research



- New en-net forum area: **Partnerships for research**
- Connect academic researchers & field-based organisations - operational research around nutrition.
- Enable users to:
 - seek partners for research (technical or geographical)
 - solicit general advice on operational research (eg robust research protocol development)
 - seek information on research being undertaken by others in specific technical areas
 - share information on research being undertaken by contributors
look for potential research sites/partners for pilots.
- **Invitation to you:**
 - **Provide occasional support and guidance to this forum area**
 - **Suggest resources and research-related initiatives**
 - **Share research strategies on topical areas**
- Contact en-net moderator, Tamsin Walters, tamsin@enonline.net

Technical Reviews, Meetings



Upcoming:
Resilience & nutrition

Research

- **Research on Food Assistance for Nutritional Impact (REFANI):** To examine the nutritional impact and cost-effectiveness of cash and/or voucher-based food assistance interventions (3 year). <http://www.actionagainsthunger.org/refani>
- **Management of acute malnutrition in infants < 6 months of age (MAMI):** secondary research, reviews, guidance 'stop gap'. <http://www.ennonline.net/ourwork/research/mami>



Upcoming: Stunting & wasting concurrence (secondary data analysis); stunting in emergencies review

Knowledge Management support



Scaling Up
NUTRITION

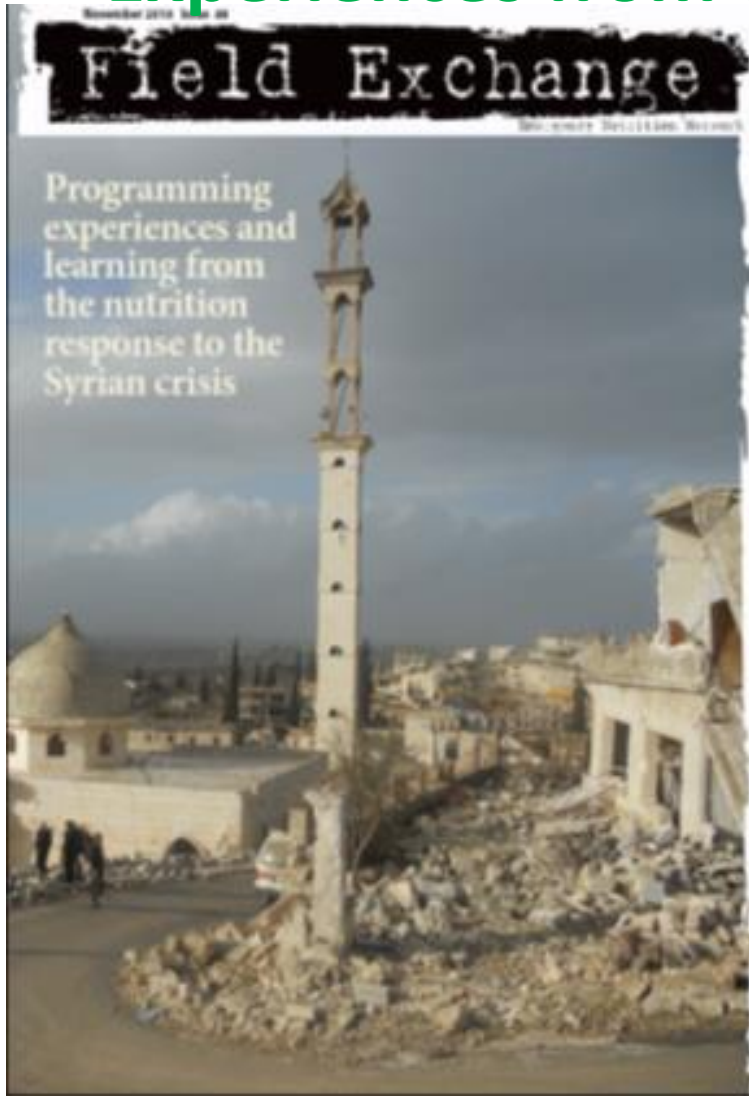
ENGAGE • INSPIRE • INVEST



Global
NUTRITION
CLUSTER



Experiences from the Syria nutrition response



Now online: www.enonline.net/fex

Field Exchange 'special' on Syria response

- Process: meetings, calls, field visit, editorial support
- 64 detailed field articles
- Cash, coordination, shelter, WASH, health, acute malnutrition treatment, IYCF
- Syria, Lebanon, Turkey, Jordan, Iraq, regional
- Snapshot innovative, interesting programming, fantastic open engagement by humanitarian staff
- Technical & programmatic level.....analytical capacity, technical leadership, coordination, financing
- NOT an evaluation, editorial overview help collective learning

Syria context (2014)

- 10.8 million people assistance in Syria
- 3+million Syrian refugees in neighbouring countries (3.59 million, end 2014)
- Majority not in camps, many in urban settings
- Programme of support – host governments, traditional, non-traditional humanitarian communities
- Humanitarian access hampered in Syria
- Role of non-traditional and affected population significant but poorly documented
- **Multi-sectoral & multi-stakeholder response averted a nutritional and health crisis**

Treatment of acute malnutrition

- Nutrition assessment
 - Syria U5s: **11.5% GAM** & **27.5% stunting** (2009), **37% anaemia** (2011)
 - Lebanon U5s 2012: **4.4% GAM**, **12.2% stunting**
 - Jordan non-camp U5s 2012: **5.1% GAM**, **12.2% stunting**
 - Jordan camp U5s 2012: **4.8% GAM**, **15.9% stunting**
- “Acceptable” GAM rate *but* risk of increased prevalence & absence of national capacity to treat cases
- **Scale up AM treatment** in Jordan & Lebanon (not in Turkey)
- Interesting articles, including integrated treatment, training



Treatment of acute malnutrition

- Lebanon Nov 2013 (GAM):
 - Initial results: 5.9% (9% Bekka valley)
 - Corrected results: **2.2%** GAM, 0.4% SAM
 - Jordan April 2014 (GAM): **1.2%** non-camp, **0.8%** camp
- Was the drive to scale up treatment of AM necessary in Lebanon and Jordan?
- Could limited resources been put to better effect elsewhere?
- Why just focused on GAM? What about Anaemia & Stunting?

Infant & young child feeding



- Breastfeeding and infant formula use common
- IYCF response: **breastfeeding support**
- GAPS in attention & action to support **non-breastfed infants**
 - Small scale, low coverage
 - Biased IYCF indicators, low BF rates yielded breastfeeding actions
 - Needs indicated in assessments & programme experiences, unwilling to compromise on standards
- **Complementary feeding risk** identified but problematic delivery & variable action
 - Jordan: 1 year delay in Zaatari, camp; Lebanon: high risk

Questions & observations



- Control of infant formula to protect breastfeeding: technical tensions public health v individual right
- What to do when prevalent practice is not ideal?
Fear of support = promotion
- Known gaps in policy guidance and absent programme models for the Middle Eastern context
- Lack of strong critical analysis of the IYCF situation
- Weak stewardship of technical response
- Lack of national & regional preparedness

Is there more to nutrition?

- Over-emphasis on AM and IYCF
- ✓ Sector responded in good faith
- Afrocentric approach – expect high GAM & mortality, what we can do v need, donor driven programming
- Distracted from a sector wide and more holistic needs assessment of all nutrition problems
- Where was more attention needed?
- ✓ Anaemia, stunting, non-communicable diseases (NCDs), nutrition vulnerability

Anaemia

- Background U5s 29.2% (37%,) (2011)
- U5s prevalence:
 - Jordan **Zaatari camp: 48.4%**, host community, 26.1% (2014)
 - Lebanon U5s 21% (Nov 2013)
- UNHCR guidelines and options on anaemia (& stunting) prevention and treatment
- Prevalent/increased anaemia & declining wasting – food quality (access, choice)

Stunting

- Little attention to discerning trends, underlying causes, potential interventions
- Field Exchange articles cite rates, no action
- Trends
 - Stunting 27.5% (Syria, 2009)
 - Jordan camps: 15.9% (2012), 17% (2014)
 - Jordan non-camps: 8.2% (2012), 9% (2014)
 - Lebanon: 12.2% (2012), 17.3% (2013)
- Humanitarian scrutiny justifiable – severe stunting mortality & prevalence
- Who is scrutinising data & what this means?
- What is the role of nutrition specific and sensitive actors in the development community?

Non-communicable diseases (NCDs)

- Nutrition component – diabetes, hypertension, heart disease, obesity
- Significant public health problem in older people especially – access to treatment hampered
- No analysis of suitability or cost of suitable foods via voucher schemes
- Should voucher scheme agencies ensure suitable foods are available, promoted, affordable?
- How to ensure nutrition counselling be part of the NCD care package?
- Does sector have adequate guidance or is this the responsibility of development actors?

Assessing vulnerability

- Vulnerability criteria to assist with targeting decisions (various tools & score cards for targeting)
- Cash programming huge
- Little use of nutrition indicators (wasting, stunting, anaemia) to help define & understand vulnerability
- Nutrition surveys - **define communities in most need** of nutritional support or determine the **nutrition impact** of cash targeting decisions taken
- **Nutrition indicators** (including anaemia and stunting) could have been useful to help define households for inclusion in **cash transfer** programmes
- Missed opportunity for robust research on nutrition impact of cash programming (large gap)

Question about leadership and critical analysis

- How do we hold ourselves **accountable** and institutionalise **learning** to strengthen future response ensuring it is more needs based?
- Remains a lack of clarity around roles, responsibilities & leadership on nutrition (work in progress)
- Need nutrition sector evaluation during a large scale emergency programme
- Averted an acute nutrition crisis BUT more analytical and broader nutrition lens was needed

Inform policy & programming

- Field Exchange extended editorial
- Targeted FEX **regional dissemination** (UNHCR regional portal)
- **Global Nutrition Report 2015**
 - Panel 9.8 Improving accountability for nutrition actions during emergencies (**Carmel Dolan, Jeremy Shoham, Lola Gostelow, Dayna Brown**)
- **Global Forum for Improving Humanitarian Action** (World Humanitarian Summit 2016), NY, June 2015
 - Submitted position paper on Syria experiences & sectoral accountability for technical response
- **Operational Guidance on IFE**, update 2016
 - ENN/UNICEF led

Join *your* network



- Write for ENN's publications & encourage others
 - Field experiences
 - Published and unpublished research (MSc, applied areas)
 - Across sectors, emergency & development
- Support practitioners working in challenging contexts
 - en-net 'Partnerships for research' thematic area
- Share through your networks/tweets/blogs (www.ennonline.net)
- Use rich field experiences in learning
 - Case study material in teaching, inform research agendas
- Contact: marie@ennonline.net

PANDAMONIUM



50 ISSUES of INSPIRED BRAINSTORMING.

