

AFGHANISTAN

No	Issue	Action plan-Activities	Timeline	Agency responsible	Milestones	Support required
1	Strengthening sustained political attention to nutrition issues	<ul style="list-style-type: none"> Take advantage of planned high level SUN conference. PND will influence framing of the agenda to ensure that key messages on importance of wasting and stunting are delivered. To identify a nutrition champion in highest level, wife of president or any parliament member. The champion should be visible in media for spreading of messages/ engagement of champion in high level nutrition events. Media/ press release on the conference 	<p>August 2017</p> <p>June 2017</p> <p>August 2017</p> <p>August+ beyond</p>	PND/MoPH	<p>Messages delivered</p> <p>Media release</p>	Leadership of MoPH (time efforts, support for inclusion the mentioned points)
2	Weak integration and use of nutrition information in HMIS and other sectors	<ul style="list-style-type: none"> To integrate core nutrition indicators in HMIS (at the moment only screening of AM is in HMIS). Make non integrated indicators part of overall health sector M&E consolidate nutrition sensitive and specific indicators. Streamline electronic software database systems. 	<p>2018</p> <p>2018</p> <p>2018</p> <p>2018</p>	PND/MoPH	<ul style="list-style-type: none"> At least 5 nutrition indicators included to HMIS. Nutrition data analyzed in quarterly HMIS data analysis. 	Hiring of an expert (MoPH, UNICEF)
3	No integration of nutrition supply to health supply chain management	<ul style="list-style-type: none"> To set up a technical working to develop a strategy to integrate it in 	October 2017	MoPH	SAM supply included in essential supply	MoPH, UNICEF, ACF, WHO, WFP.

	system	essential supply list			list	
4	Weak community-based nutrition prevention.	<ul style="list-style-type: none"> Implementation of community-based nutrition package in all provinces. implementation research to inform this strategy for scale up. Strategize to link with community-based social protection initiatives 	2017-2019 2018 2018	MoPH	<ul style="list-style-type: none"> 28000 CHWs received the training Research conducted 	MoPH, UNICEF.
5	Inadequate technical and operational capacity on public nutrition programs at central and field level	<ul style="list-style-type: none"> Advocacy with government and developing partners for long term capacity building and strengthening of all levels actors including nutrition sensitive and specific sectors. 	2018	MoPH (AFSANA)	Comprehensive strategy for capacity development in place	USAID, Canadian embassy, EU, WB, AKF.
6	No capacity for implementation research in nutrition in the country	<ul style="list-style-type: none"> Develop capacity of local institution in implementation research and link with external research institution. 	2018-2019	MoPH	Local institutions conducted research	Technical support to strategize steps.
7	Low coverage of IMAM services (40%)	<ul style="list-style-type: none"> Take advantage of roll out of CBNP to generate demand. Adopt the strategy for prevention and treatment approaches to cover difficult to reach population (MUAC) To continue advocacy to increase government budget allocation for nutrition. Intensify prevention efforts to reduce 	2018-2019 2018 2018	MoPH	Coverage increased by 60%	WB, USAID, Canadian embassy, UNOCHA, UNICEF, WFP.

		burden of wasting and stunting.				
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