



Nutrition Stakeholder Mapping Tanzania 2018

Supported by:



In conjunction with



CATALYST TEAM

Stakeholder mapping to enable data-driven decision-making

Contents of this presentation:

- Mapping of donor and DP focus
 - Geographical
 - Target group
 - NMNAP outcome

Purpose of this presentation:

- Enable the DPG to discuss focus and coordination going forward

Data used for analyses:

- November 2017 DPG mapping
 - **Please note that only the projects that specified district coverage were included in the analyses**
- 2017-2018 district Annual Work Plan data as collected from LGAs by TFNC

Suggested next steps:

- Discuss how we can optimise our approach as DPG to cater to Tanzania's needs
- Fill any data gaps to ensure comprehensive overview and facilitate better decision-making

To access this document and source data, go to: this will be placed in the TFNC website

Executive summary

Donor spend in regions has limited correlation with regional stunting rates

- Shinyanga and Tabora with higher than median donor spend but lower than average stunting rates
- Katavi, Rukwa, Ruvuma, Tanga with high stunting rates but limited donor spend

Project coverage of regions is relatively strong with 21/26 mainland regions having projects, but district coverage is less

- 60 out of 173 mainland districts (~1/3) without any project coverage
- Within 21 covered regions, still 28 districts without any project

Donor spend most on Governance and least on IMAM, where district projects focus most on MIYCAN and least on Info Systems

- Both in absolute terms (USD figure) and relative terms (estimated NMNAP budget distribution between KRAs)
- At national level, Information Systems has high focus

Adolescents receive least attention, with pregnant & lactating women and children under 5 as most mentioned beneficiaries

- 4 projects focusing on adolescents vs 21 resp 19 on PLW and under 5s

In many regions, multiple DPs are working on same NMNAP KRAs

- With MIYCAN/SBCC standing out as most 'overlapping' NMNAP key result area

Data was not set up in a user friendly way to support easy analysing

- Required a lot of manual work

Assumptions and data sources used for stakeholder mapping

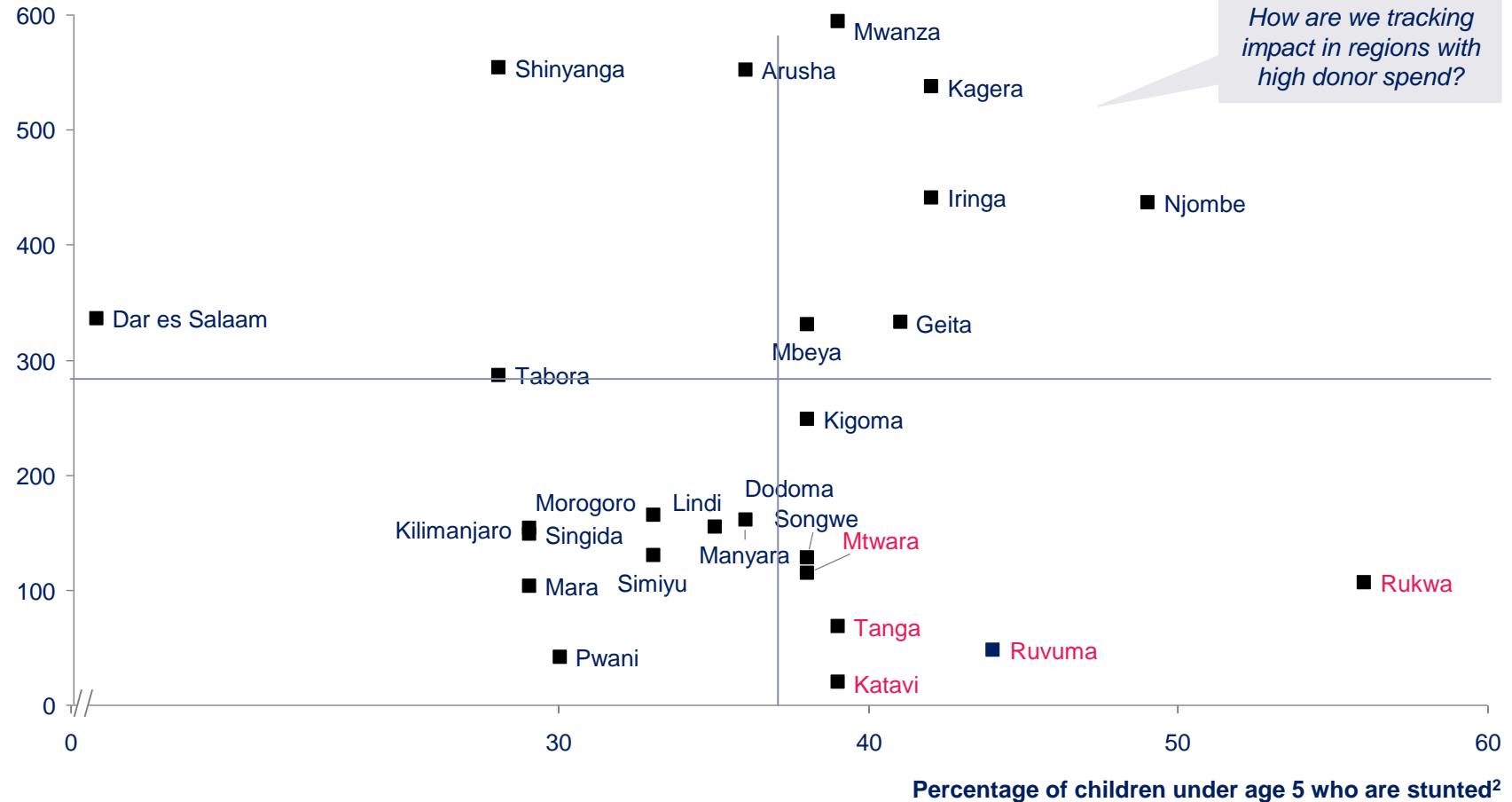
Description	Assumptions
<p>Total Projects Included in Analysis: 32</p> <ul style="list-style-type: none"> • Mainland only • District-level projects only • No data on NCD projects collected 	NMNAP prio SBCC included as 'MIYCAN'

Data sources	Year
<p>Development Partner Group (DPG) Data</p> <ul style="list-style-type: none"> • Data on all projects across Tanzania with data on implementation, time horizons, NMNAP and geographical reach 	November 2017
<p>Annual Work Plan (AWP) Data</p> <ul style="list-style-type: none"> • District-level data on nutrition-related projects and related funding and NMNAP data • Compiled by TFNC Finance 	2017/2018

Target Groups	Sub groups
Pregnant & lactating women	Pregnant Women Lactating Women
Women of reproductive age	Women of reproductive age
Children under 5	Children under 2y Children 2-5y Wasted Children under 5y
Children 5-12 / school children	Children School Children
Adolescents	Adolescents Female Adolescents Male
Mothers/ caregivers	Mothers Caregivers
Vulnerable community members	Vulnerable community members HIV/TB
Farmers	Farmers all levels
Government employees	Local Government Regional Government CHWs

Katavi, Mtwara, Rukwa, Ruvuma and Tanga have high stunting rates but low donor focus

2017-2018 Donor spend + Health basket fund (actual, TZS M)

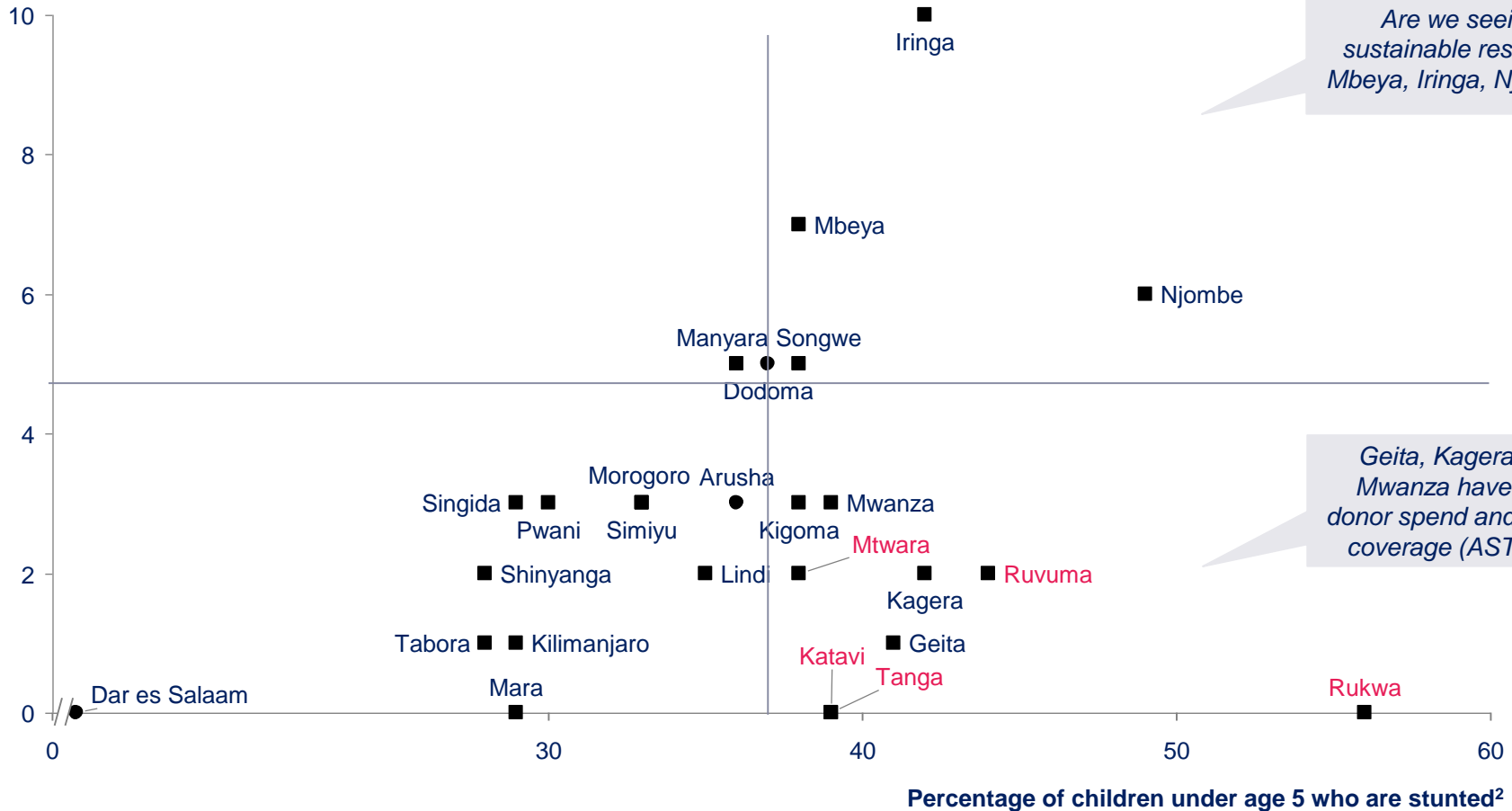


Sources: 1. AWP 2017/2018 2. DHS 2015/2016

Mapping of number of projects per region shows under-focus on same regions

Note: UNICEF project in MIN regions split into separate projects

of projects per Region¹



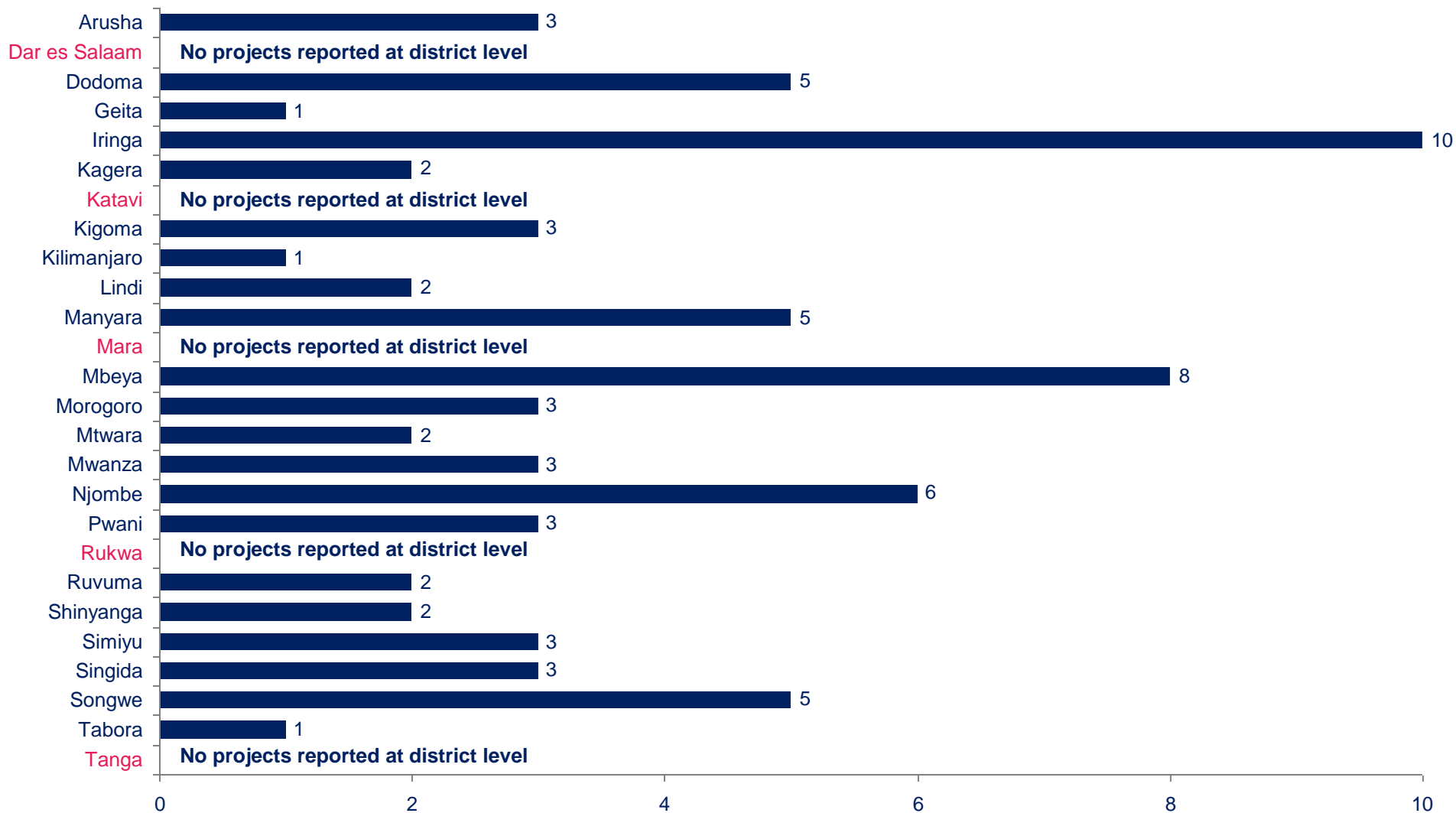
Are we seeing sustainable results in Mbeya, Iringa, Njombe?

Geita, Kagera and Mwanza have high donor spend and district coverage (ASTUTE)

Sources: 1. DPG 2017 2. DHS 2015/2016

Backup slide: DPG-reported district-level projects per region

Note: UNICEF project in MIN regions split into separate projects

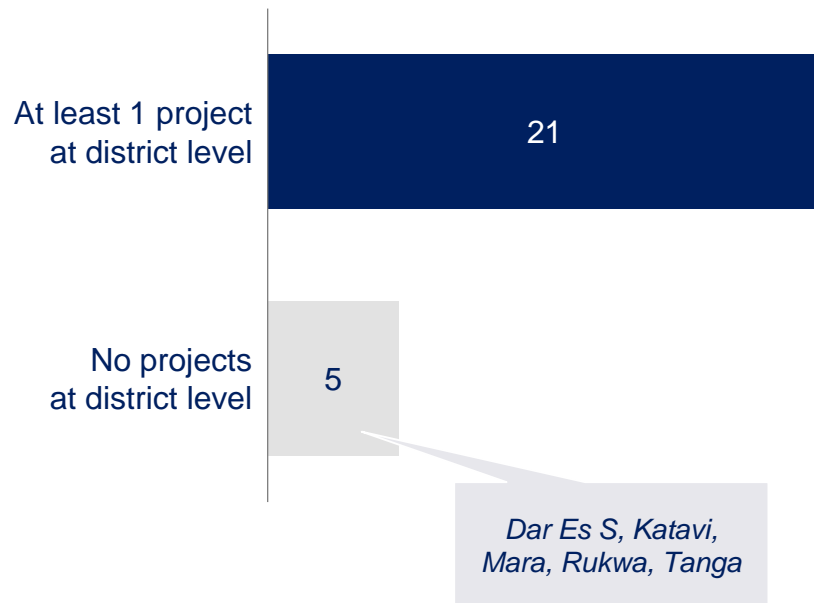


Source: DPG 2017

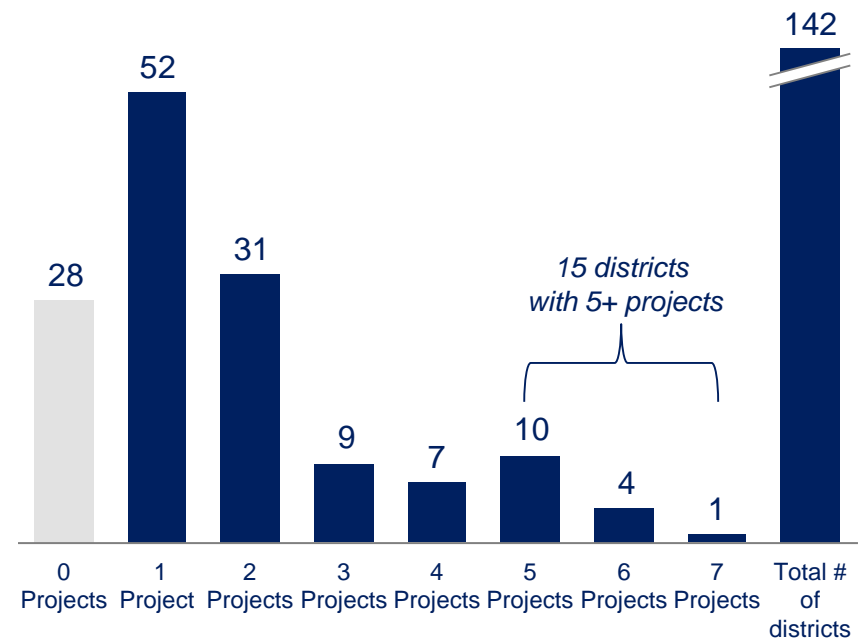
In 21 regions with projects, 28/142 (20%) districts *not* covered

15 districts with 5 projects or more

Regions covered with projects at district level



District coverage in 21 regions with projects

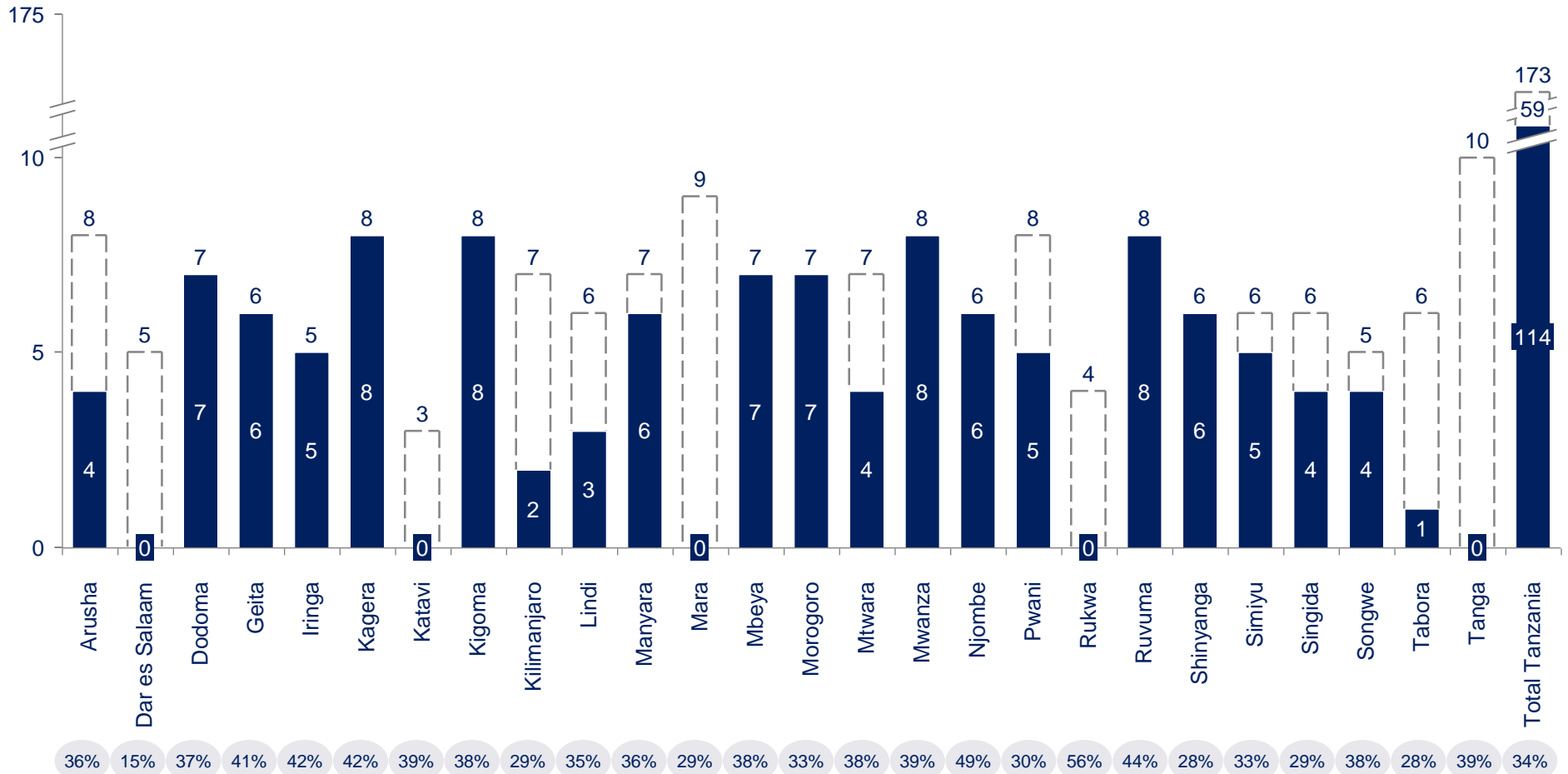


Source: DPG 2017

Backup slide: number of districts reached in each region

In total: 59 districts out of 173 with no project coverage (1/3 of total number of districts)

of districts with project coverage out of total # districts in that region

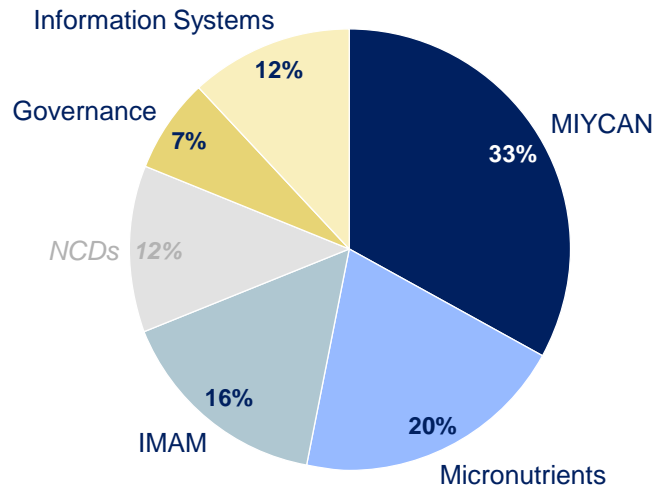


Sources: DPG 2017. DHS 2015/2016

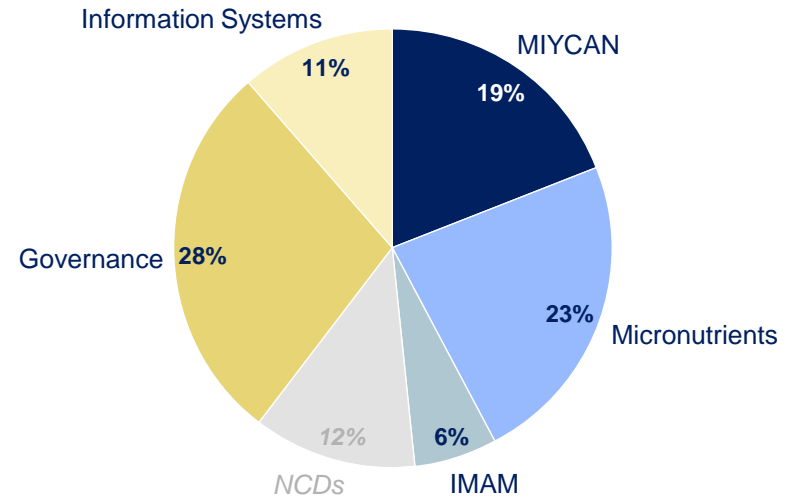
x% Percentage of children under age 5 who are stunted

Relative donor spend at Regional/LGA level high on Governance and low on MIYCAN and IMAM

Target budget district distribution as per NMNAP



Regional/LGA-level donor spend distribution



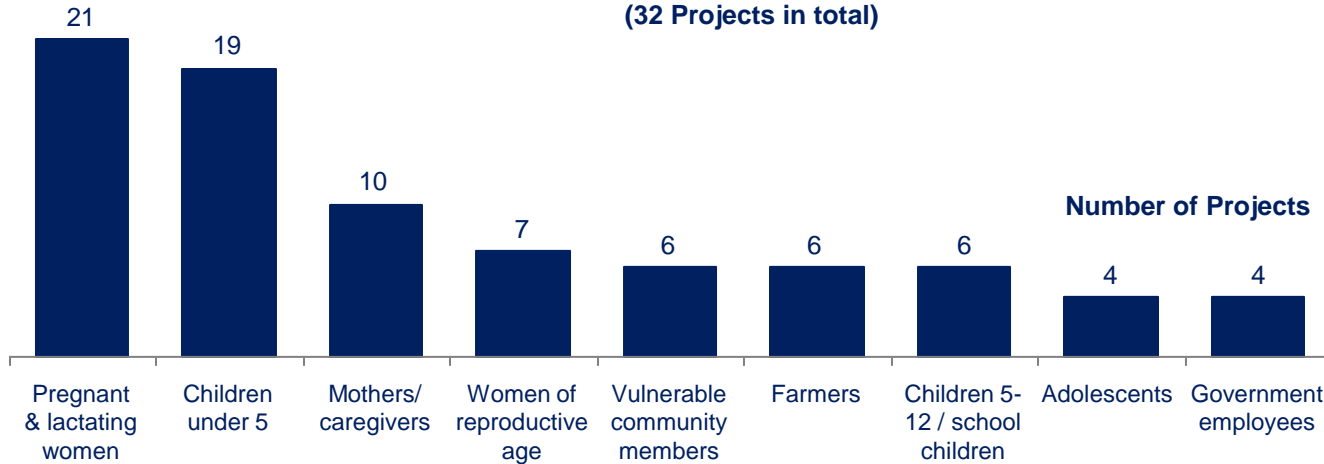
Note:

- Includes regional donor spend
- Includes regional/LGA spend out of Health Basket Fund
- Excludes Nutrition Sensitive (as separately included in NMNAP)
- Due to lack of NCD data we fixed at 12% for ease of comparison

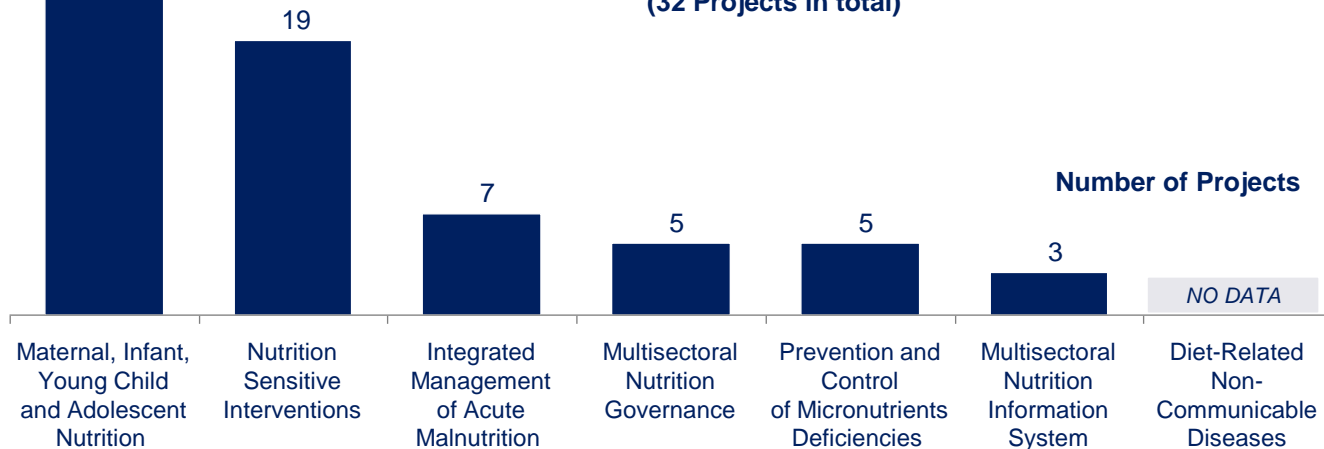
Source: AWP 2017/2018

Adolescents and Information Systems with relatively low DP attention at district level

Projects per target group
(32 Projects in total)



Projects per NMNAP priority
(32 Projects in total)



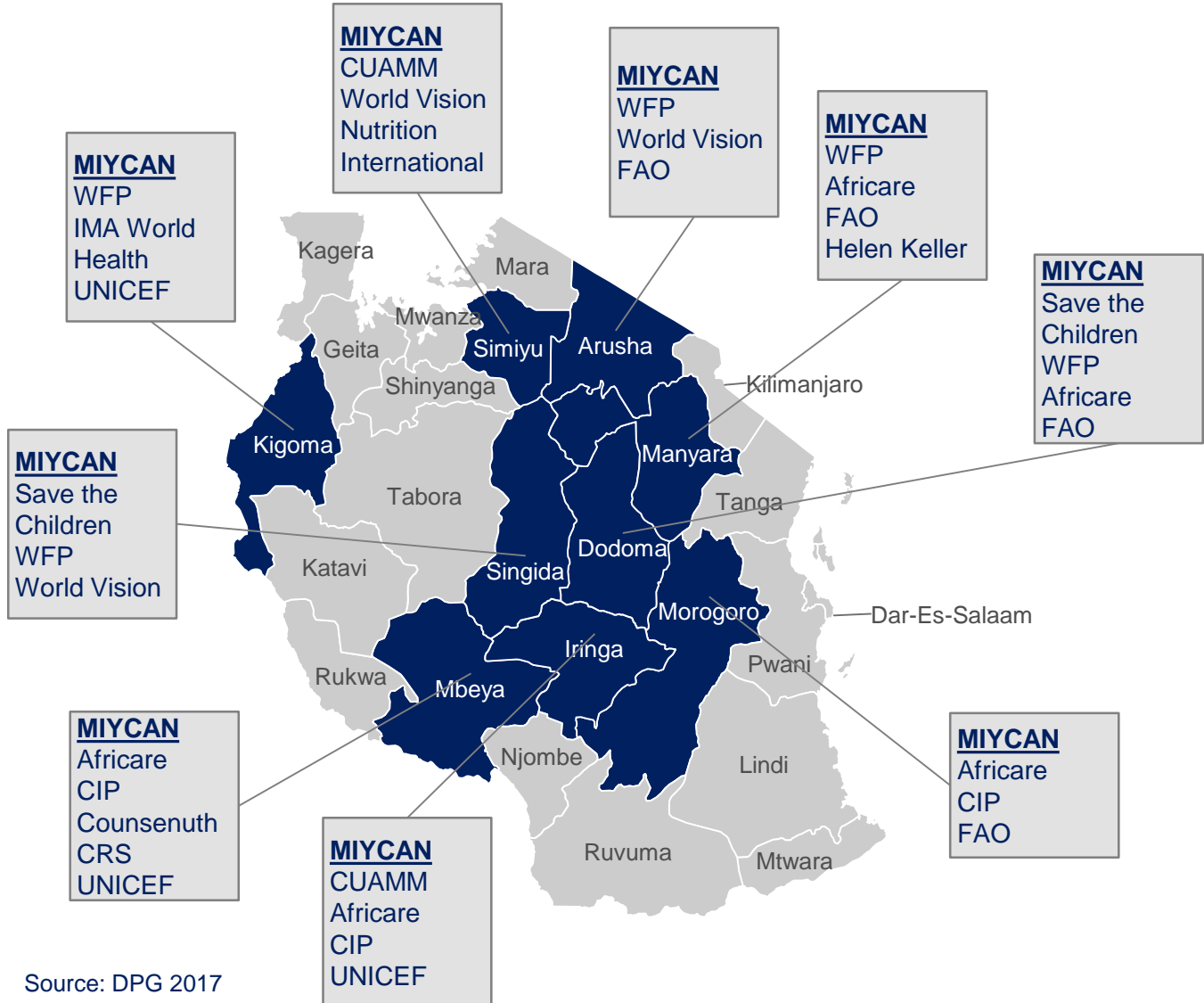
Is our current focus on target groups and NMNAP outcomes a conscious decision?



Source: DPG 2017

We are largely working in same areas – are we coordinating, learning from each other, and actively avoiding overlap?

MIYCAN: Maternal, Infant, Young Child and Adolescent Nutrition



Source: DPG 2017

Tanzania overall:

at least 7 DPs are working on SBCC:

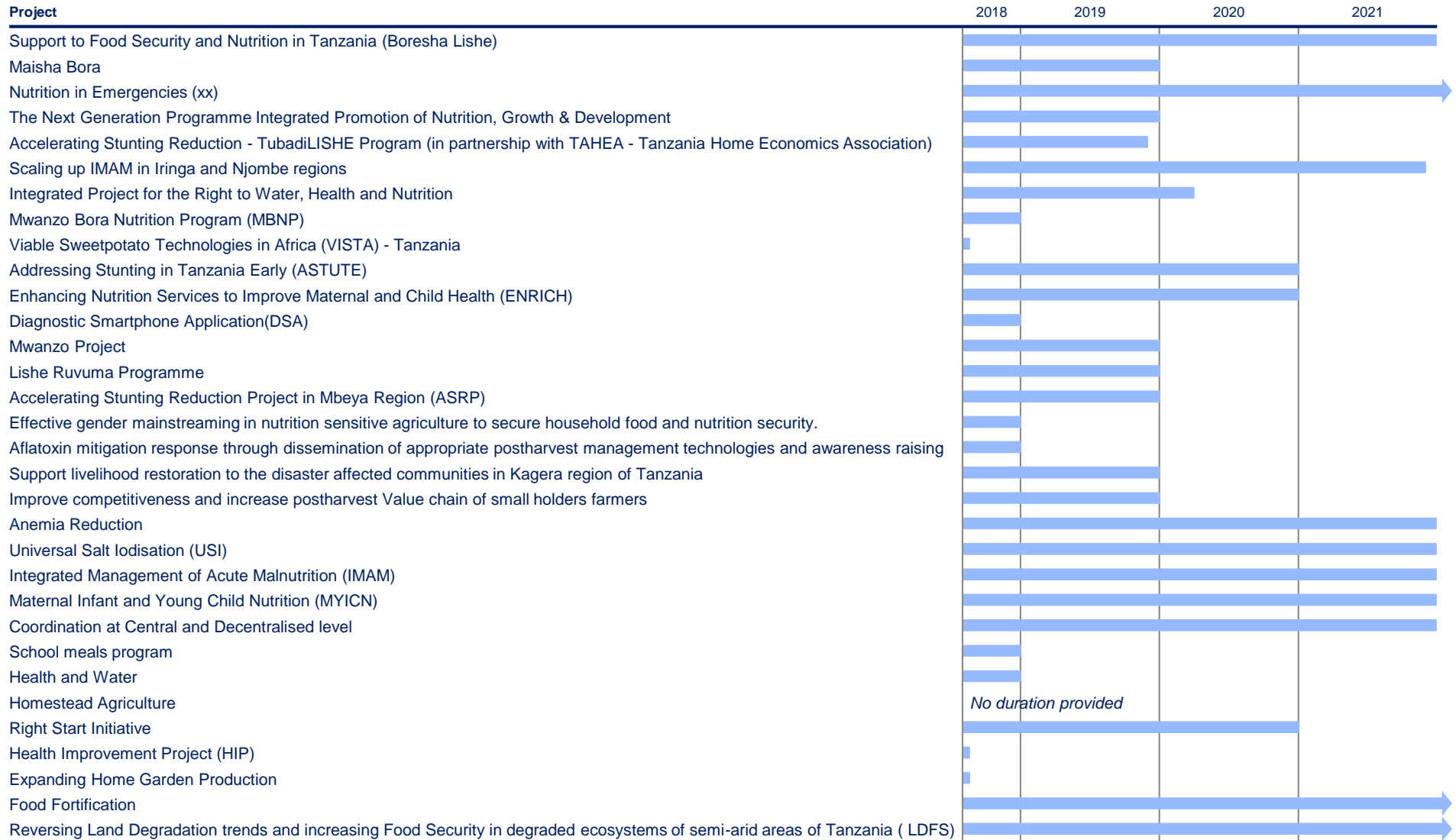
CUAMM, WFP, World Vision, FAO, UNICEF, AKF, HKI

→ Are we taking a consistent approach? Do we share learnings?



Current projects end between 2018 and 2022

How do we plan, design and coordinate beyond that? How do we share lessons learned? How do we set LGAs up for sustainable impact?



Source: DPG 2017

For higher-quality insights and decision-making, important to collect our data in a different way

Data input

Data issues

1

Insufficient granularity

- Data inputs are missing descriptions
- Description does not align directly with NMNAP outcomes
- Spreadsheet is missing granular information on beneficiary, wards



- 17 projects excluded due to missing district-level data
- No information on wards level and beneficiary level

2

Relevant data points missing

- Several data points left out; e.g. funding amount (per programme, outcome, target group), responsible ministry, delivery mechanisms etc.



- No insight in how donor spend is used

3

Spreadsheet not set up for analysis

- Spreadsheet is inflexible and time consuming to fill out
- Structure of data is complicated to analyze due to overlaps




- Analyses required a lot of manual work

For discussion: do we agree these analyses are helpful?

How can we collect the information in a more robust and user friendly way, e.g. through a survey?

Mock up: Stakeholder Mapping search tool v2.0




TFNC Nutrition Cockpit

Stakeholder Mapping

Welcome [First Name, Last Name] | [English](#)

Home
? Help

Select NMNAP Outcome	Select Regions	Select Districts	Select Development Partner
<input type="checkbox"/> Outcome 1...	Region 1 <input type="text" value="Select"/> ▼	District 1 <input type="text" value="Select"/> ▼	Partner 1 <input type="text" value="Select"/> ▼
<input type="checkbox"/> Outcome 2...	Region 2 <input type="text" value="Select"/> ▼	District 2 <input type="text" value="Select"/> ▼	Partner 2 <input type="text" value="Select"/> ▼
<input type="checkbox"/> Outcome 3...	Region 3 <input type="text" value="Select"/> ▼	District 3 <input type="text" value="Select"/> ▼	Partner 3 <input type="text" value="Select"/> ▼
<input checked="" type="checkbox"/> Outcome 4... 	Region 4 <input type="text" value="Select"/> ▼	District 4 <input type="text" value="Select"/> ▼	Partner 4 <input type="text" value="Select"/> ▼

Mock up: Stakeholder Mapping search output v2.0



TFNC Nutrition Cockpit

Stakeholder Mapping

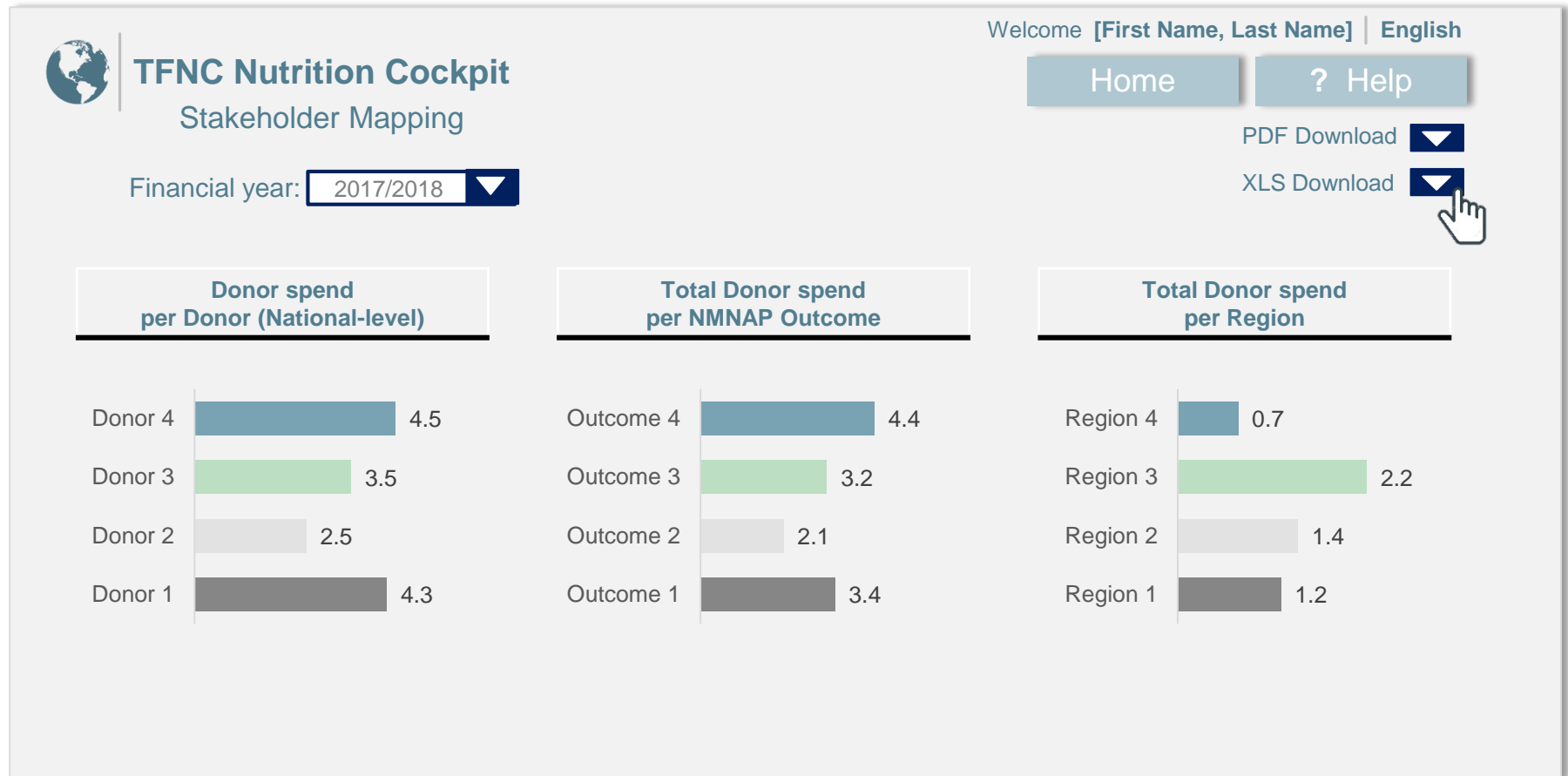
Welcome [First Name, Last Name] | English

Home
? Help

NMNAP Outcome	Activity description	Development Partner	Regions covered	Districts covered	Total Funding (USD)
Outcome 4 ...	Description 1: X... Y... Z...	Partner 1 ...	Region 1...	District 1... District 2... District 3...	Amount USD xxx
Outcome 4 ...	Description 2: X... Y... Z...	Partner 1 ...	Region 1...	District 1... District 2... District 3... District 4...	Amount USD xxx

Version 2.0 to include interactive color-coded maps

Mock up: Overall Donor status v2.0



Catalyst Team to keep output graphs up-to-date

Mock up: Input template for Stakeholder Mapping

Stakeholder Mapping Input Page						
Please enter your details						
Name	Text					
Phone number	Text					
E-mail address	Text					
Organisation	Text					
Organisation web page	Text					
Please describe the project						
Project Name	Text					
Project Description	Text					
Target geography	Regions▼	Districts▼	Wards▼			
Target age	Text					
Target group(s)	Text					
Duration	From▼	To▼				
Total budget	\$					
Donors	Text					
Responsible ministry	Text					
Council sector(s)	Text					
Field implementers	Text					
Please provide information per district						
	NMNAP KRA(s)	NMNAP Output(s)	Number of wards reached	Type of Beneficiaries	Number of beneficiaires	Budget Allocated
District▼	KRAs▼	Outputs▼	Text	Text	Text	\$
District▼	KRAs▼	Outputs▼	Text	Text	Text	\$
District▼	KRAs▼	Outputs▼	Text	Text	Text	\$
District▼	KRAs▼	Outputs▼	Text	Text	Text	\$
District▼	KRAs▼	Outputs▼	Text	Text	Text	\$

Tick-list making it possible to have several regions, districts and wards covered in the project

Whole years drop-down

Option to put any USD amount

Possible to add additional districts

Tick-list making it possible to have several NMNAP priorities in each districts

Free text box making it possible to put numbers and names of wards reached in each district

If budget is not segregated into specific districts, possible to put average budget per district

Food for thought

- 1. How should we divide our focus, on NMNAP priorities and regions/districts?**
- 2. How can we coordinate and collaborate in the regions/districts where we overlap?**
- 3. Is it worth it to collect better data to be able to analyse and inform decision-making? (e.g.donor spend per NMNAP outcome, per target group)**