

# How countries and partners are using nutrition scorecard tools

## Background

Nutrition scorecards are multi-sectoral and dynamic management tools for strengthening accountability and driving action towards the attainment of continental and country nutrition commitments. The nutrition scorecard indicators cover various nutrition interventions across different sectors such as health, education, water and sanitation, agriculture and draw data from sector information systems.

Due to its multi-sectoral nature, piloting of the scorecard or phased rollout approach is usually preferred. Rollout of nutrition scorecards by ALMA has been motivated by the achievements of the RMNCAH and malaria scorecards as well as the renewed focus on nutrition across the continent. ALMA has supported Tanzania, Kenya and the African Development Bank (AfDB) to develop and strengthen their nutrition scorecards.

## Tanzania's multisectoral nutrition scorecard

In 2015, Tanzania's scorecard was initiated by the Office of the President of Tanzania, in collaboration with ALMA and partners including UNICEF, WHO, and REACH. The scorecard implemented by the Tanzania Food and Nutrition Center (TFNC) was launched in 2017. The scorecard categories, indicators and targets are based on Tanzania's National Multi-sectoral Nutrition Action Plan (NMNAP) and consists of 11 indicators at national level and 15 indicators at the sub-national level across 10 multi-sectoral categories. The scorecard is decentralized to all 28 regions and used at both regional and council/district level. [The scorecard is reviewed during the regional/council multi-sectoral nutrition steering committee meetings among others.](#)

## Kenya nutrition scorecard

The scorecard was developed in 2019 with support from ALMA in partnership with UNICEF, Save the Children, Kenya Red Cross Society, Action Against Hunger and Terre des Hommes. Scorecard development was guided by national, continental as well as global nutrition priorities. The scorecard comprising of 13 national indicators and 17 subnational indicators across 6 categories was launched in 2020. The scorecard has been decentralised to 32 counties, some of which have developed county rollout action plans to enhance scorecard use. The scorecard is reviewed at the county nutrition technical working group, county nutrition taskforce and County Assembly Health Committee.

## The AfDB Nutrition Accountability Scorecard

The African Development Bank (AfDB), with support from partners including ALMA, developed a continental nutrition accountability scorecard in 2019. The scorecard holds African Heads of State and Government and key decision makers accountable for the globally agreed and Africa-specific nutrition commitments, as well as increase domestic resource allocation for nutrition. The scorecard tracking 20 indicators across 5 categories was launched during the 32nd Ordinary Session of the AU Assembly. It was presented to the AU Specialised Technical Committee (STC) on Health, Population and Drug Control in July 2019 whereby the indicators were revised, and a decision to produce the scorecard biennially was reached. AfDB is in the process of developing an online platform to capture and display data from AU member states and country scorecards will go a long way in supporting this process.

## Impact

### Songwe region, Tanzania

Songwe region in Tanzania used the scorecard to identify poor performing indicators such as Iron Folic Acid supplementation (IFA) and Vitamin A coverage that could be resolved immediately during the regional multisectoral nutrition steering committee meetings through the action of the regional administration. The Regional Commissioner directed the regional pharmacists to ensure all the facilities purchase IFA to deal with stock out issues following which performance improved from 76% to 98% (Q1 to Q4 2017). He further directed facilities to procure vitamin A for routine use following which vitamin A coverage improved from 89% in Q1 to 102% in Q3 2018.

### Shinyanga region, Tanzania

Shinyanga region, Tanzania identified underperforming indicators such as toilet coverage and high dropout rate for post-primary girls. For toilet coverage, the regional Health Officer was tasked to write a letter to the District Executive Directors to implement the requirement of at least a toilet per homestead whereas the national team was informed on the use of a wrong age group to calculate the indicator on dropout rate for post-primary girls

### Mbeya region, Tanzania

Mbeya region, Tanzania identified low use of the scorecard at the regional and council level. To improve scorecard, use by every sector, a reporting tool was prepared and all sector representatives were assigned responsibilities to respond to the underperforming indicators in the scorecard.

### Morogoro region in Tanzania

Morogoro region in Tanzania use the scorecard as an advocacy tool for stakeholders to focus more resources to indicators and regions that are performing poorly. The scorecard has helped to create awareness among decision makers who have in turn committed to release funds for nutrition interventions on time and allocate more resources to indicators that are in red. It has also improved performance of the indicator on counselling mothers on infant feeding from 39% in Q1 to 82% in Q4 2019 by training the community health workers (CHWs) on counselling mothers on infant feeding, creating nutrition clubs with mothers and using pharmacy and safe mother days to sensitize mothers.

## Kenya

In Kenya, counties observed an increase in the numbers of defaulters in the Integrated Management of Acute Malnutrition (IMAM) programme and low reporting rates (timely and completeness) for reporting form MoH 713. Bottleneck analysis of the increased numbers of defaulters in IMAM programme identified that most facilities were out of stock for nutrition commodities whereas low reporting rates were attributed to lack of reporting tools in the facilities. To deal with these issues, the national government prioritised the supply of nutrition commodities to the affected counties, availed soft copies of the MoH 713 form to the counties and encouraged them to locally print the forms.

## The future of the nutrition scorecard

Renewed focus on nutrition at global, continental and national level presents a wonderful opportunity for ALMA to enlist support from partners to roll out country nutrition scorecards. In addition, the AfDB continental scorecard presents a further opportunity to develop and/or strengthen country scorecards. ALMA will continue to support countries and partners to develop more nutrition scorecard across the continent.

## Related partner content

CIFF (Children's Investment Fund Foundation), our partner, has published an [evidence review on the treatment of severe acute malnutrition \(SAM\)](#).

This evidence review includes proposed indicators that can be added to nutrition scorecards (such as the proportion of cases with SAM receiving treatment and the percentage of SAM children who have reached the discharge criteria of complete recovery from SAM).

The analysis shows that many deaths to wasting in children occur in the first six months of life. This is especially the case in the neonatal period and that these deaths are concentrated among infants born with a low birth weight or premature, for whom ready-to-use therapeutic food (RUTF) is not relevant.

Therefore other interventions, such as interventions to support low birth weight and premature babies (including kangaroo mother care and breastfeeding counselling) and strengthening treatment and feeding support for infants under six months with acute malnutrition are more effective in preventing these early deaths.

The paper also shows that delivery of treatment by community health workers is a cost-effective intervention, provided that good coverage is achieved. A major benefit of this strategy is the lower cost incurred by the beneficiary household when treatment is available in the community.