



RESEARCH
PROGRAM ON
Agriculture for
Nutrition
and Health

LED BY IFPRI

Agriculture for Nutrition and Health

Strategies for Transformative Partnerships

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FOREWORD

CGIAR seeks to ensure that its agricultural research better and more directly serves the needs of the poor. In its new vision ([CGIAR Strategy and Results Framework \(SRF\) 2016-30](#)), it commits to reduce poverty and hunger, improve food and nutrition security for health, and enhance ecosystem resilience through high-quality international agricultural research, partnership, and leadership. The prominence of development outcome targets of improved nutrition and health is quite new for the CGIAR, and the Agriculture for Nutrition and Health (A4NH) research program has been developed to directly and strategically address this new CGIAR commitment.

The starting point for A4NH is that agricultural practices, interventions, and policies can be better adapted and redesigned to improve health and nutrition benefits and to reduce health risks. Agriculture will need to develop and expand to meet the food needs of a growing population from a finite resource base. How agriculture develops to meet this need will have real consequences on the health and nutrition of people. Thus, this research program works at the interface of the agriculture, nutrition, and health sectors.

Moreover, the emphasis placed in the CGIAR's vision that research should contribute more effectively to development outcomes and impacts has helped us think of the three impact pathways – value chains, programs, and policies – through which agricultural research can contribute to improved nutrition and health outcomes and impacts. In adopting this impact pathway approach, A4NH recognizes that fundamental changes in partnerships and capacity development will be required. This document aims to lay out the strategies and principles necessary for successful engagement in partnerships that will lead to enhanced impact on the ground.

During the Phase I of A4NH (2012-14), stakeholder inputs were important in guiding the vision and initial implementation of the research program.¹ Now, as we move forward into planning Phase II (2017-22), we are looking to revise our partnership strategy as well as specify how it is implemented. In this draft, we have proposed ideas across essential stages of the partnering process. We will be incorporating these ideas into the pre-proposal for the next phase of A4NH. Subsequently, we will engage with stakeholders more directly in more detailed planning as part of the A4NH Phase II proposal development.

Innovative partnerships as well as partnership practices will be imperative if A4NH is to contribute usefully to improving nutrition and health for the poor. We look forward to discussions and advice and guidance from our key stakeholders and partners on how A4NH partnerships can make a difference and be truly transformative.

John McDermott

Director, Agriculture for Nutrition and Health (A4NH)

¹ Years 2015-2016 of the program are known as the Extension Phase.

INTRODUCTION

Hunger, malnutrition, and poor health are persistent development challenges that form the focus of the CGIAR research program (CRP) on Agriculture for Nutrition and Health (A4NH). While agriculture has made remarkable advances in the past decades, progress in improving the nutrition and health of poor farmers and consumers in developing countries continues to lag behind. The CGIAR introduced a new system-level outcome (SLO) of improving nutrition and health in 2010 and continues to emphasize nutrition and health outcomes in its newest Strategy and Results Framework (2016-30). A4NH is the research program in the CGIAR portfolio that is specifically designed to address this new CGIAR SLO.

In taking on this new challenge, A4NH recognizes that transformative partnerships will be central for success. Transformative change is required to:

- Forge cooperation between agriculture, nutrition, and health sectors so they work together in new ways, understanding the contributions that each sector can make and how they can work together to achieve more;
- Strengthen the capacity of national research organizations and scientists in these sectors to provide knowledge, evidence, and direction to country, regional and global development goals; and
- Build new relationships between researchers and development implementers and enablers for faster progress in achieving development outcomes and impacts.

The problems of poor nutrition and health are urgent. Contributions to improve nutrition and health in different contexts will be varied and need to be captured from a range of possible sources. For agriculture, the principle premise is that agricultural practices, interventions, and policies can be adapted and redesigned to maximize health and nutrition benefits and reduce health risks.

For A4NH, one of its most important formative tasks is to engage with key partners around a common partnership strategy and according to a set of partnership principles. Our assumption is that better nutrition and health outcomes and impacts cannot be achieved without transforming current partnership approaches. That will include working in partnerships from the inception of an idea all the way to the implementation of research findings. Yet partnership development requires the right set of skills. The existing research that comes together under A4NH already works with an extensive network of partners, which will be adapted where needed. Some of the partnerships that exist are excellent but some may benefit from improvement. There remain great opportunities for many national research and development partners to expand their roles and responsibilities across the spectrum of agriculture, nutrition, and health research for development.

The first A4NH proposal used stakeholder inputs in guiding its vision and scope. During the first phase of implementation (2012-14) a number of new partnerships were established. These included:

- New global and regional networks for agriculture and nutrition developed to support country ownership and performance in proving nutrition outcomes;
- Engagement with nutrition academies and leadership forums;
- Partnerships with business schools and private companies for enhancing value chains for pulse-cereal foods;
- Partnerships with agriculture-health researchers in West/Central Africa. East/Southern Africa; South Asia and Southeast Asia.

However, as we start to plan and implement Phase II of A4NH, it is critical that we engage our partners in a systematic and specific process of refining a partnership strategy and re-assessing our partnership principles. The original three A4NH impact pathways are still valid. However, over time we have revised our thinking on objectives and particularly for more mature areas of research with clearer prospects for impact at scale, we have developed very specific [theories of change \(ToCs\)](#), with important assumptions about partner capacity, incentives and engagement. While our partnership strategy is grounded in impact pathways and ToCs, how partnerships are implemented are critical. Partnership principles in A4NH need to consider capacity, equity, performance, and new behaviors.

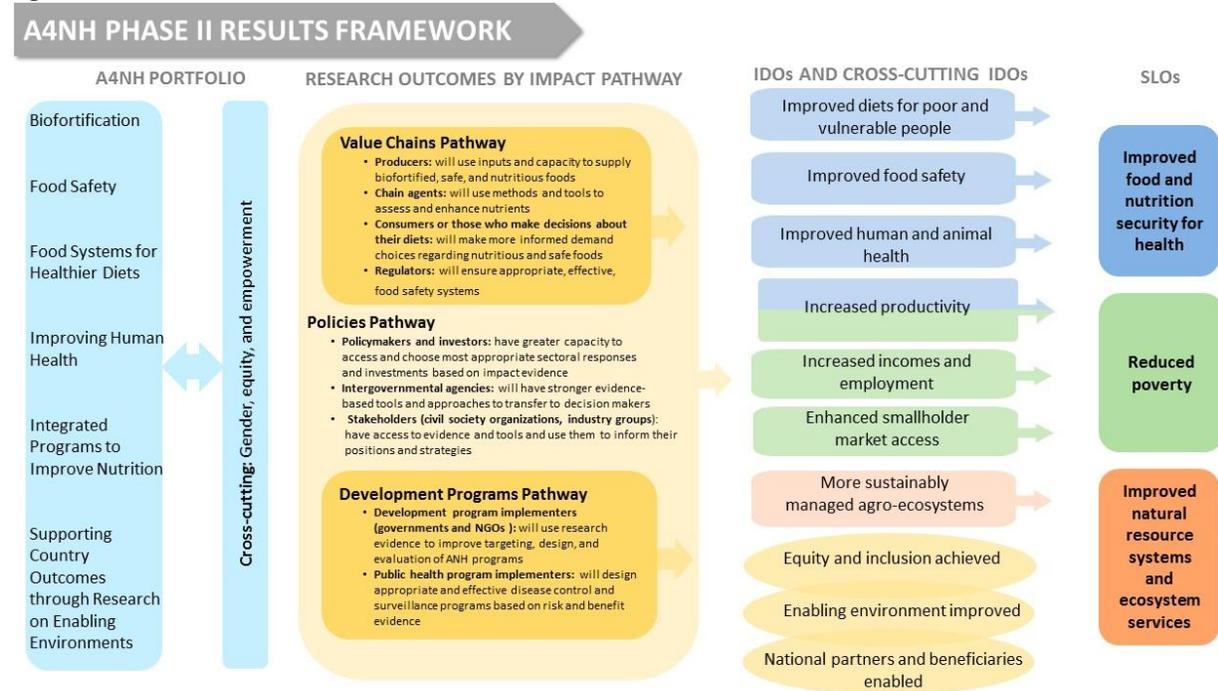
This strategy and principles document begins by briefly describing the research program and its flagships. It then addresses the principles for partnerships around this program and some key steps for moving forward in the planning, development, and management of transformative partnerships.

THE A4NH RESEARCH PROGRAM

CGIAR has recognized the need for convergence between agriculture, nutrition, and health in its new Strategy and Results Framework (SRF). One of the three System Level Outcomes (SLOs) is *improved food and nutrition security for health*, and A4NH contributes to all four of the Intermediate Development Outcomes (IDOs) under SLO2 (Figure 1). For three of these IDOs – *improved diets for poor and vulnerable people*, *improved food safety*, and *improved human and animal health through better agricultural practices* – A4NH targets all the sub-IDOs. For the IDO on *increased productivity*, A4NH targets one specific sub-IDO related to enhanced genetic gain. The links between nutrition and health outcomes and poverty mean that A4NH’s research must consider and can have important impacts on some indicators of SLO1 on *reduced poverty*, specifically the IDOs on *enhanced smallholder market access* (sub-IDO: reduced market barriers), and *increased incomes and employment* (sub-IDO: increased livelihood opportunities). In collaboration with Water, Land, and Ecosystems (WLE), we expect to contribute to the IDO on *more sustainably managed agro-ecosystems* (mapped to SLO3).

The cross-cutting issues of *gender and youth* and *policies and institutions* have been central to the A4NH results framework in Phase I and the Extension Phase. We will build on important progress in gender and nutrition and enabling the nutrition performance of countries in Phase II, raising the profile of each of these areas within A4NH. *Capacity development* is a critical gap in accelerating agriculture, nutrition, health outcomes and impacts. In addition to capacity in research, there are capacity needs among the actors along each of A4NH’s three main impact pathways (Figure 1). Specific capacity needs are identified and addressed at the flagship level, where more detailed impact pathways and ToCs are developed. At the CRP level, we will collaborate to support key capacity development partners, such as the African Nutrition Leadership Programme, and the Agriculture, Nutrition, and Health Academy. For the fourth cross-cutting issue of climate change, A4NH will work with the CRP on Climate Change (CCAFS) on food systems (A4NH focusing on creating healthy food systems and CCAFS on creating sustainable food systems), climate change and health, and sharing lessons learned around our similar, cross-sectoral policy and advocacy approaches and our convening roles within the CGIAR.

Figure 1. A4NH Phase II Results Framework



OVERVIEW OF THE RESEARCH FLAGSHIPS

Rationale for the A4NH Phase II portfolio

Building on successes from Phase I, two flagships – **Biofortification** and **Integrated Programs to Improve Nutrition** - strengthened their research programs and enhanced their impact orientation during Phase I. While HarvestPlus still has important nutrition efficacy and impact research to do, the evidence base was sufficient to move into the delivery phase in 2014. A4NH-supported investments in an external gender assessment and in developing country level ToCs, (N. L. Johnson, Guedenet, & Saltzman, 2015) are helping to inform this transition. Integrated Programs to Improve Nutrition put in place a solid portfolio of evaluations during Phase I that will allow it to answer key questions about program impacts and cost effectiveness in Phase II. Informed by [an external assessment](#) commissioned by A4NH to better understand how program implementers access and use evaluation findings, Integrated Programs to Improve Nutrition has defined a more detailed ToC and is increasing attention to identifying and communicating the operational implications of research findings for implementers and investors. This work will build on some communications products produced in Phase I, for example the gender-nutrition pathways(Herforth & Harris, 2014) that have been widely used by implementers and researchers.

Responding to the new SRF

Two research areas – **Food Safety** and **Supporting Country Outcomes through Research on Enabling Environments** –were clusters in Phase I and will become flagships in Phase II. A4NH anticipated that food safety would become a higher priority (confirmed by the fact that it is now an IDO in the new SRF) and invested significant effort in Phase I to laying the groundwork for becoming a flagship in Phase II. Key activities included: improving cross-center collaboration, synthesizing lessons learned (Roesel & Grace, 2015), developing ToCs for most promising solutions with potential to go to scale (N. Johnson, Atherstone, & Grace, 2015; N. Johnson, Mayne, Grace, & Wyatt, 2015), and [seeking external input](#) on its

proposed approach and research agenda. Similarly for the flagship on Supporting Country Outcomes, which targets the cross-cutting IDO on *enabling environment improved*, meets the growing demand for regional and country level strategies as well as evidence on existing policy, available investment options, and the impacts policies are having on nutrition outcomes specific populations. This flagship will build on its involvement with the SUN movement, the Africa Union's CAADP investment planning process and the Global Nutrition Report. In the case of CAADP, researchers in this flagship have been supporting their efforts to mainstream nutrition in agricultural development (see recent [A4NH blog](#) post). Researchers in this flagship have developed a ToC as well as frameworks and tools for creating and sustaining an enabling environment (Gillespie, Haddad, Mannar, Menon, & Nisbett, 2013; Gillespie, Menon, & Kennedy, 2015).

Accepting new challenges and approaches

As mentioned above, the flagship on **Food Systems for Healthier Diets** responds to global trends and demands. It also builds on some of the accomplishments on value chains for enhanced nutrition in Phase I (Gelli et al., 2015), but is taking a different approach in order to overcome some of the challenges faced by that flagship in Phase I, such as convening multiple centers with relatively small bilateral projects into a single flagship. Recognizing that analyzing and engaging in food systems is outside the traditional expertise of CGIAR, Wageningen University and Research Centre (Wageningen UR) was invited to lead. A flagship on Food Systems for Healthier Diets can also provide better support to the AFS-CRPs in Phase II. During Phase I, there was a small amount of research on human health risks associated with agricultural production in A4NH. Starting in the Extension Phase, A4NH began to explore with a few public health research institutes and donors the interest in partnering in a new flagship on Improving **Human Health**. We conducted [a series of regional consultations with public health partners](#), which culminated in a consultation in London in June 2015.

Main types of research

The research flagships in A4NH engage in two main types of research. The first is looking at what works – what are specific agriculture solutions and innovations (technology, institutional, policy or combinations) for improving nutrition and health. This often involves more discovery type research on potential solutions and then testing them for proof-of-concept. Generally, the majority of partnerships are with researchers but there is involvement of implementers (either program or value chain depending on the type of research). The second group of research looks at how to deliver – focusing on understanding and improving impact pathways. This generally comes when there is sufficient confidence in potential solutions and then the research is all about looking at the feasibility, sustainability and scalability of delivery. This tends to come later in the research cycle. While, there is a general progression from discovery through to delivery at scale research, the nature of A4NH research is more complex than a classic research for development product pipeline for vaccines or plant varieties. There are often iterations between different research types and different flagships (for example Biofortification or Food Safety) span the range of these main research types (with new solutions being able to be slotted into impact pathways for delivery at scale). The impact pathway / delivery research, there is a shift in partnerships, and while all partner types are involved the role of implementing partners and policy enablers is larger than that of research partners. Also the research partnerships will be with different researchers, more on operational than technical research.

Target countries within regions

A4NH remains focused on research that targets vulnerable populations in Africa south of the Sahara and Asia. During the Extension Phase and in planning for Phase II, a list of focus countries has emerged where A4NH expects to achieve research outcomes at scale which is based on the stage of research,

strength of partnerships, and A4NH resource capacity. In Table 1, for each flagship we have listed focus or target countries in Africa and South Asia (and Vietnam in Southeast Asia). In target countries, there are natural partnerships with national research and development partners and government (implementation, regulation, investment and policy) that are required. In general, we have a diagnostic phase to identify the required partners and their roles and capacities.

In Phase II, CGIAR is planning to coordinate its research activities across CRPs and Centers within countries more efficiently and effectively. We will work closely with other CRPs in the development of country coordination platforms of different intensity. The evolving CGIAR country priority list fits well with A4NH's current and planned activities. Geographical partnerships exist at three levels: global, regional, and national. At the global level, the emphasis will be on how global public goods can influence broader inter-governmental and investor outcomes at scale. There will also be an emphasis on research into partnerships for learning new approaches, cross-sectoral metrics, and methods for sharing evidence and advocacy.

At the regional level, approaches for identifying and working with partners will differ across the major regions in which A4NH works. In Africa south of the Sahara, at the continental and regional level, the program will align with the African Union's (AU) Comprehensive African Agriculture Development Program (CAADP) process and work in close collaboration with the AU's New Partnership for Africa's Development (NEPAD) and the regional economic communities (RECs). CAADP provides an effective framework for interaction at the continental and regional scale, particularly around Pillar 3 (Food Security and Hunger) and Pillar 4 (Research and Extension). In individual countries, A4NH will rely on linking with partnerships largely coordinated by others and on testing promising research options with partners in hope of learning lessons for broader application. Research in support of nutritionally sensitive value chains will link with value chains supported by other CRPs in specific focal countries for biofortified foods and with other partners such as the Global Alliance for Improved Nutrition (GAIN). Research on agricultural-associated diseases will engage in partnerships in key regions devoted to specific activities. Research support to integrated programs will link to partnerships driven by partner development implementers. For the policy impact pathway, A4NH will rely on linkages to broader policy support processes, particularly IFPRI's Country Strategy Support Programs (CSSP) in specific countries. For South Asia, the program will focus initially on Bangladesh and specific states in India and look for opportunities to engage other countries. In Bangladesh, A4NH will build on the strong existing partnerships of CGIAR centers. The critical partner in almost all partnerships in Bangladesh is BRAC. For India, there are already key partnerships for better understanding how agricultural investments and improved economic growth enhance nutrition and health outcomes among the poor. Research on agricultural-associated diseases will build on work to support state governments and civil society in poor states in the east of the country such as Assam and Nagaland.

In Latin America and the Caribbean, the A4NH research focus will be on food systems and bio-fortification. A4NH will work with a focal point from EMBRAPA who will assist in coordinating the partners in the region. The country focus will be on poorer countries in Central America. In all three regions, a strong emphasis is placed on creating country ownership and capacity through the impact pathways. While Africa south of the Sahara and South Asia will remain the program's focal regions, A4NH will look to share experiences and lessons in other regions. For example, given its dynamic value chains, Southeast Asia is a critical region for better understanding food safety research and capacity issues in rapidly evolving value chains and diseases associated with agricultural intensification.

Table 1. Countries with planned A4NH research activities, by flagship

	Biofortification	Food Safety	Food Systems for Healthier Diets	Improving Human Health	Integrated Programs to Improve Nutrition	Supporting Country Outcomes through Research on Enabling Environments
Bangladesh	X	X	X		X	X
Ethiopia	X	X	X		X	X
India	X	x	X	X	X	X
Zambia	X	X	X		X	X
Kenya		X	X	X		X
Nigeria	X	X	X			X
Senegal		X	X		X	X
Tanzania		X	X		X	X
Vietnam	X	X	X	X		
Burkina Faso		X	X		X	
Ghana		X	X			X
Malawi		X	X			X
Nepal			X		X	X
Pakistan	X		X			X
Benin			X	X		
Indonesia	X		X			
Mozambique		X				
Uganda	X	X				
Bolivia	X					
Brazil	X					
China	X					
Colombia	X					
DRC	X					
El Salvador	X					
Gambia		X				
Guatemala	X					
Haiti	X					
Honduras	X					
Mali					X	
Myanmar	X					
Nicaragua	X					
Panama	X					
Philippines	X					
Rwanda	X					

THEORIES OF CHANGE: PATHWAYS AND PROCESSES FOR IMPACT

The flagship descriptions reflect the diversity of work within A4NH and the different ways that A4NH research and related activities—[capacity building](#) and [gender](#)—are expected to contribute directly to the outcome through our involvement in the delivery process. This occurs in more mature areas of research where technologies and innovations have been developed and where there are key research questions related to delivery and scaling up. For example, with biofortification and biocontrol, we are engaged in delivering outputs to the next users alongside our partners, guided by ToCs that inform delivery and provide a basis for learning lessons. In other cases, we support development implementers with knowledge, technologies and capacity that increase the effectiveness of their programming. Since we are not directly involved in implementation, we rely on partnerships with key program implementers to increase the likelihood that impacts will occur. Lastly, we support governments and donors with knowledge and capacity to create better enabling environments. In these cases, estimates of impact are based on potential changes that would come from better informed, targeted, and implemented policies.

How A4NH activities will achieve impact is reflected in the impact pathways and ToCs, which have been developed for the major areas of the program. Once developed, ToCs can be assessed in terms of the strength of the evidence supporting key assumptions and the likelihood, based on current evidence, of outcomes occurring. This analysis has been conducted for HarvestPlus and for Food Safety and is in process for Integrated Programs. This assessment has important implications for partnerships. Where there are important evidence gaps, these need to be filled and in some cases the expertise to fill them may lie outside A4NH. In this case, the CRP could either commit to building the capacity internally or it could partner with others to do the research needed. In the case of HarvestPlus, it was recognized early in the “discovery” phase of the program that evidence on nutritional efficacy of biofortified crops would be important. The CGIAR did not have the expertise in this area so HarvestPlus formed strategic partnerships with others, in particular with universities. Another example is the formation of the Food Systems for Healthier Diets flagship. Expertise in food systems is crucial in this area but is not available in the CGIAR. This led to the identification of Wageningen UR for a leadership role in Phase II.

ToCs are also important for identification of non-research partners. In a general sense, by describing the capacity and behavior of specific actors—be they policy makers, ministry staff, NGO staff, consumers, farmers, traders, etc—that will need to happen for the research to have impact, the impact pathways identify who will be influenced by the research. In some cases, these actors, or their representatives, will need to be involved in the research process in order to increase the likelihood that these anticipated impact happen. At the delivery phase, ToCs can identify specific partners whose actions are needed to ensure that particular links in the causal chain happen as expected. An example of this is that in the ToC for orange maize in Zambia, the analysis suggests that poor farmers, especially women farmers, may have difficulty accessing seed since they do not generally use hybrids (Johnson, Guedenet and Saltzman, 2015). Identifying partners who can ensure that women farmers have access to orange maize seed will be important in achieving the expected outcomes.

Different types of partnerships are important within this overall impact pathway / theory of change approach. Depending on their roles, partners are classified into four broad categories: **enablers**, **development implementers**, **value chain partners**, and **research partners**. Some partners can be classified into different roles at the same time. **Enablers** include policy and decisionmakers, as well as investors involved in creating enabling environments at national, regional, international, and global levels. **Development implementers** include government departments and ministries, the United Nations, and other global initiatives, NGOs, civil society organizations, and farmers’ groups that all play

critical roles in development programming. **Value chain partners** (actors and representatives) include private-sector companies, public-private initiatives, associations, and groups that focus on the quality and safety of foods in value chains. **Research partners** include both advanced and developing-country research institutes and academic institutions at the national and international level that are involved in ANH.

Within the categories mentioned above, the research program already has diverse relations with a multitude of organizations ranging from pure transactional relationships to full partnerships. The table and charts presented in this section result from an initial baseline assessment of the nature and status of A4NH partnerships. The matrix presented in Table 2 gives an overview of the various types of partners that are included in the research program. Though the status of the partners is dynamic and the table should be considered as an approximation of the current A4HN partners, it does show that the research program is very well embedded in research partnerships and that more effort will be needed to strengthen partnerships with, for example, the private sector.

PARTNERSHIPS NEEDED TO ACCELERATE OUTCOMES AND ENGAGE ACROSS SECTORS

The A4NH partnership challenge flows from the goals, objectives, impact pathways and research scope. The motivation behind the A4NH program is that there is great urgency in drastically reducing undernutrition and health problems in low and middle income countries and that agriculture can do much more in contributing to better nutrition and health. The program is committed to working so that its research can have greater impact through supporting key development actors and building the capacity of research and development institutions and actors in low-income countries. A4NH also recognizes that it and other partners will need to work in new ways to forge performing partnerships between the agriculture, nutrition, and health sectors in a way that has not been done previously.

The leaders of A4NH are committed to a partnership process that incorporates strategic thinking, systematic processes with partners, innovative behaviors and resources, and implementation of best partnership performance practices. There will be different types of partnerships for different purposes. Though research plays an essential and catalytic role in the achievement of nutrition and health development outcome and impacts, it must partner with and support others effectively for progress to be achieved.

Strategic partnerships

Partnerships for impact: To achieve improved nutrition and health in low-income countries, different partners in those countries must have the capacity to lead, adapt, and drive the change. Just as the A4NH partnership strategy is based on contributions to the ToCs and impact pathways described above. The role of partners in these processes will depend on what value they can add to achieving impact. The value addition and comparative advantage of partners will also determine the nature of the various A4NH partnerships.

Cross-sectoral partnerships: A unique partnership feature of A4NH is the need to forge new cross-sectoral partnerships. Better partnerships among ANH sectors are critical, and since these sectors do not need to work on every issue together, strategic analysis is required to determine where the sectors need to align along the impact pathways and more specifically, which actions necessitate collaboration. When more joint actions are required, it will be important to understand the value added by each sector as

well as the sectors' respective roles and responsibilities. There is little doubt that agriculture, nutrition, and health sectors can improve their partnership performance to reduce undernutrition and improve health.

In Phase I (2012- 2016) we are most advanced in considering delivery at scale in biofortification. Thus there has been considerable work in identifying both large scaling out partners (such as World Vision and WFP) and within country partnerships for scaling out (for example with private sector and government in Rwanda for high-iron beans). In Phase II, scaling out partnerships will continue to expand in biofortification and become more prominent in food safety. In food safety, the focus is on informal markets and so the scaling-out partners with private sector are through associations of traders and market agents. Partnerships with public-private partnerships (and thus private partners) in which there is a clear opportunity for poor people to participate in formal markets will also be explored. A good example is for aflatoxin control. The technology scale-up by private sector firms for Aflasafe will be a priority. In Phase I, pilot production and business models have been developed for aflasafe production as well as for value chain expansion (for example with Doreo Partners for value chain scaling out in Nigeria). Experience has shown that these scaling out efforts need considerable enabling. In the case of aflatoxin control, PACA and the RECs (for example East African Community) have been crucial at enabling across countries in Africa.

Also in Phase I, major progress was made in cross-sectoral partnerships for agriculture-nutrition, particularly for the program and policy impact pathways. A number of partnership platforms – POSHAN, Transform Nutrition, LANSA and LANEA have been developed as well as engagement with major international partnership processes such as SUN and CAADP. In addition, there are significant agriculture-nutrition partnerships for implementing and evaluating agriculture-nutrition interventions with NGOs (HKI, Concern, BRAC, PRADAN) and governments. However, agriculture-health and agriculture-nutrition-health cross-sectoral partnerships have been slower to develop. To improve this, we have worked on strengthening partnerships with public health research for Phase II as a platform to enhance these lagging cross-sectoral efforts. At global level, the London School of Hygiene and Tropical Medicine LSHTM (and linked to the broader LCIRAH platform it is involved with) will convene public health researchers and other partners to work with A4NH. This broader partnership platform with public health should enable missing cross-sectoral collaborations to develop. We also have similar partnerships at regional level, convened by IITA in West and Central Africa (Ecohealth Platform), ILRI in East and Southern Africa (One Health partnerships), in South Asia by PHFI with ILRI and in Southeast Asia with Chiang Mai University, the Hanoi School of Public Health and ILRI.

While agriculture-nutrition partnerships have been strong, they do need to be strengthened to respond better to the country-led and cross-sectoral development approach to improving nutrition, particularly by improving the nutrition sensitivity of agriculture and other large development sectors. From A4NH, we will expand our support to countries and engage with key partners, such as ATONU, the EVIDENT networks and African nutrition organizations and link these 2 on-going country engagement strategies such as RESAKSS, Country strategy support and the Future Agriculture Consortium led by IDS and its think tanks in different African countries.

Another partnership gap in Phase I was in the area of food systems and value chains. There is considerable interest across the CGIAR and among partners but it has been challenging to coordinate, particularly in thinking about how value chain interventions can translate into food systems that deliver better nutrition and health outcomes. For Phase II, Wageningen UR, which has a tremendous breadth of value chain and food systems research will lead this aspect of A4NH research. This should allow for

facilitation of partnerships across CGIAR Centers (as most work with Wageningen UR on specific commodities) as well as with private sector partners (Wageningen UR coordinates or participates in a number of public-private partnerships).

The private sector is increasingly an important, and in some cases, main player in agricultural production, health delivery and food systems.² The private sector is increasingly interested in being seen to promote healthier foods but many also have many unhealthy foods that are contributing to obesity and NCDs. Currently, the main linkages between the private sector and A4NH are through partnerships with business schools (McGill and Indian Institute of Management – Bangalore). The logic is that business schools engage in systematic analysis and support of private companies that can be relevant to improving different business outcomes. These include the so-called triple bottom line of profit, planet and people. Most companies have profit as a priority. Many are improving their “sustainability” plans for planet outcomes but people outcomes such as improved nutrition and health are often weak. In our partnership with business schools we are using a shared “convergent” innovation approach of getting companies to consider both wealth and health.

Table 2. Overview of partnerships in A4NH

PARTNER TYPE:	GEOGRAPHIC LEVEL:									TOTAL
		NARS	University	Research Institute	Government Organization	NGO	Development Agency	Farmers' Organization	Private Sector	
Enabler	International	0	0	0	0	0	2	0	0	3
	Regional	0	0	0	1	0	0	0	0	
	National	0	0	0	0	0	0	0	0	
Development Implementer	International	0	0	0	2	8	3	0	3	58
	Regional	0	0	1	1	3	0	0	0	
	National	2	0	0	22	9	1	3	0	
Value Chain	International	0	0	0	0	0	0	0	0	11
	Regional	0	0	0	0	0	0	0	0	
	National	1	0	0	2	1	1	5	1	
Research	International	0	11	18*	2	0	1	0	1	126
	Regional	1	0	5	0	1	0	0	0	
	National	17	43	16	4	4	0	0	2	
TOTAL		21	54	40	34	26	8	8	7	198

**Note: 11 of these 18 international research institutes are CGIAR centers; Current as of 2013, will be updated at end of 2015*

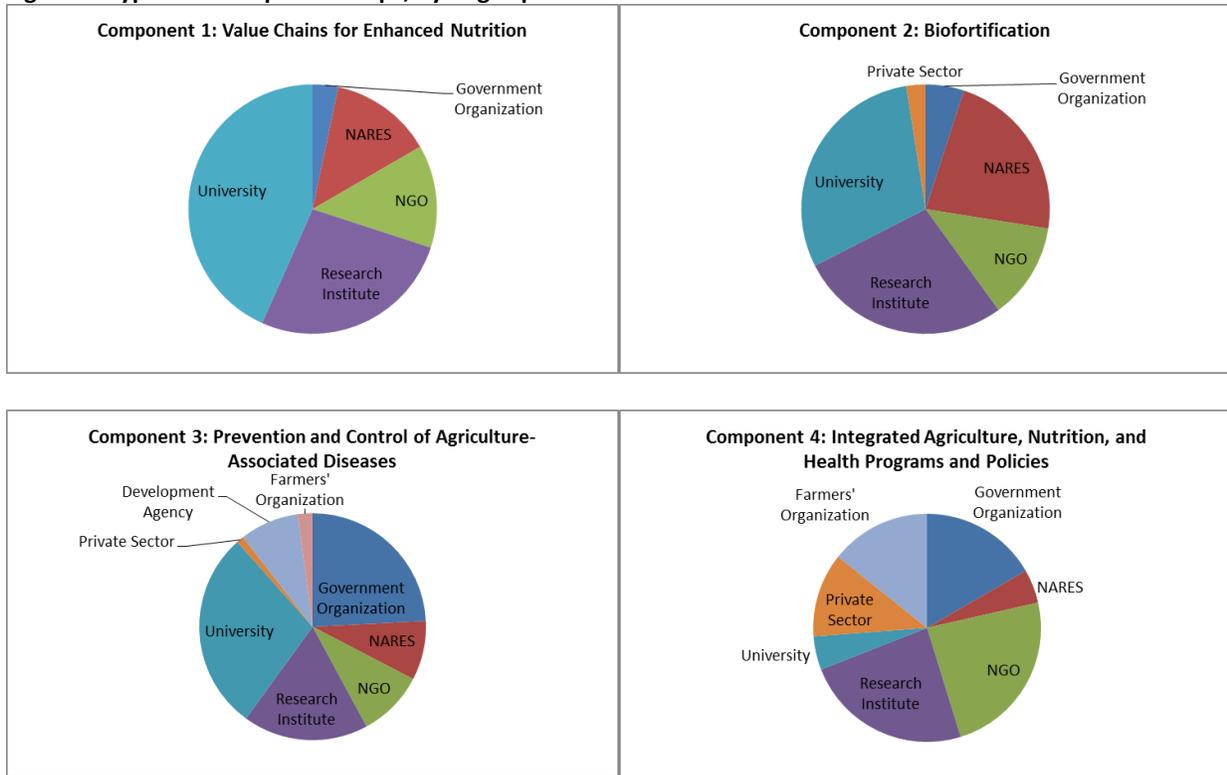
We also engage in broader public-private platforms such as GAIN and the World Economic Forum (WEF). There are a smaller number of private companies involved in other specific activities, such as the engagement of the private sector in scaling-up seed systems for bio-fortified staple crops. It is envisaged that linkages with private sector companies will be developed as the value chain impact pathways to enhance nutritional quality and food safety are further elaborated. A4NH will explore and develop

² In view of the increasing importance of private sector partnerships for CGIAR and specifically for A4NH, there would be value in reviewing the A4NH Partnership Strategy to ensure it is up to date and adequately covers private sector partnerships, including risks such as intellectual property. In the absence of Consortium Office private sector engagement strategy guidelines, A4NH may need to look for examples more widely in which case the FAO's 'Strategy for partnerships with the private sector' is a useful starting point together with the UN Standing Committee for Nutrition policy and discussions with other CRP Directors would be useful to ensure a degree of coherence among CG centers. Resources can be found at http://www.unscn.org/en/mandate/private_sector and <http://www.fao.org/docrep/018/i3444e/i3444e.pdf>.

public-private partnerships to bring together the power of research innovation with business and social innovations. With Wageningen UR as a new strategic partner, these partnerships are likely to expand in Phase II with increased emphasis on food systems research.

Figure 2 shows the current partners per flagship. While further analysis will be required, the graphs do give indications where perhaps partnerships could be further strengthened. For example the component on value chains currently does not have any private sector partnerships. Figure 3 shows the geographical spread of the partners.

Figure 2. Type of A4NH partnerships, by flagship*



*Note: Data current as of 2013, but will be updated at end of 2015.

Figure 3. Geographical spread of partners in A4NH*



*Note: Data current as of 2013, but will be updated at end of 2015.

ANNEX: PARTNERSHIP PRINCIPLES AND PRACTICE

In the recent independent evaluation of A4NH, we were asked to provide more details on the practice of partnerships including guidelines for better partnership. This annex is an initial start, based on an earlier draft prepared in 2013. This section will be improved upon to support the full proposal. There are some useful resources such as [ILRI partnership and management systems](#) that we will build on.

The **key principles** to guide partnerships in this research program will include:

- Agreement of all partners on key goals and objectives;
- Commitment to engage in an inclusive, transparent, and trustworthy manner;
- Commitment to ensure that the partnership adds value to A4NH impact pathways;
- Identification of clear, mutual benefits for each partner;
- Adherence to mutual accountability and respect;
- Acknowledgement that roles and expectations are clearly understood among all partners; and
- Practice that shows that value addition matters, not seniority and hierarchy.

We view partnerships as:

long-term, sustainable collaborative relationships with shared responsibility, mutual respect, and clear accountability in which different parties join together to achieve a common goal while contributing to each institution's mandate that would not be possible for either partner to achieve alone in a cost-effective or time-efficient way.

Given the cross-sectoral nature of A4NH and its strong focus on impact pathways, A4NH partnerships will be diverse - not only across academic backgrounds (nutrition, health, agriculture, gender), but also along the spectrum of actors involved in the impact pathways. Additionally, it is expected that partnership relationships will change over time as agriculture, nutrition, and health become more entwined, new research areas evolve, capacity needs are identified, and the program moves forward in its implementation. Framework for Smart Partnership Identification (SPI).

Selecting the right partners at the right time will be essential to optimize the performance of A4NH partnerships. This is a dialogue process between the partners that recognizes mutual contributions, benefits and incentives. From the A4NH perspective, we describe how we see partnerships can be developed to enhance impact, taking into consideration impact pathways, geographical factors, and thematic considerations. To achieve this, an appropriate set of ingredients will be needed, namely a **well-defined vision, the right set of skills, incentives, resources, and a clear plan**. If any one of these ingredients is missing, then working in partnership will not achieve the intended objectives.

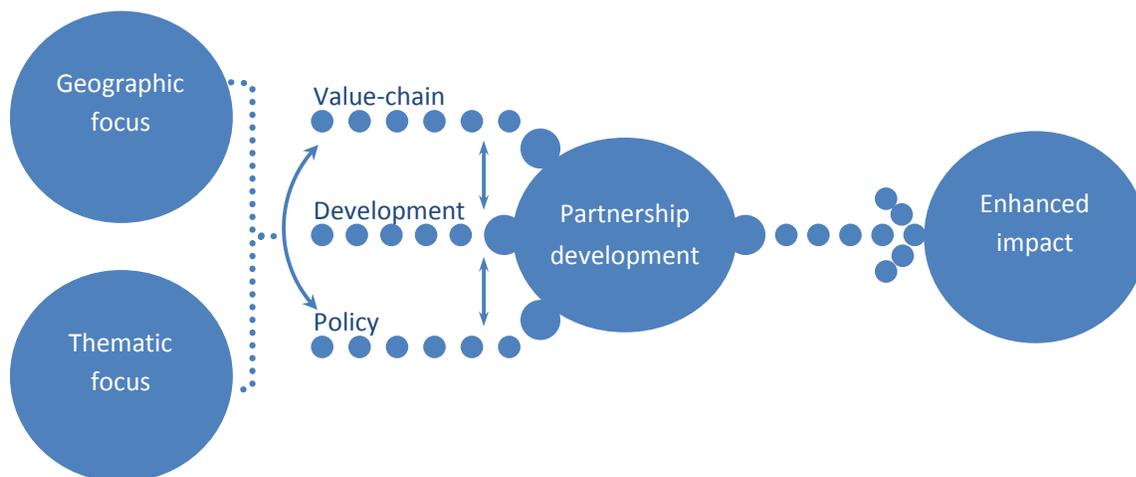
In working to accelerate progress in improving the nutrition and health of poor people, the research program is expected to enhance the contribution of agriculture research outputs that support the performance of key actions through three major impact pathways:

1. **value chains** that make more nutritious and safer foods accessible to the poor;
2. stronger and more effective **development programs** that successfully integrate agriculture, nutrition, and health; and
3. **policies** that promote a supportive and enabling cross-sector policymaking process and investment environment.

Given the program's broad geographical reach as well as research scope, partnership opportunities will be developed around appropriate themes and geographic groups (regions, countries) within the impact

pathways. It is foreseeable and desired that partnerships within the separate thematic and geographic groups will overlap so that the geographical context is integrated in the research discussion. Figure 4 shows the overall framework that will be followed in developing partnerships.

Figure 4. Framework to develop impact-enhancing partnerships



Geographic Approach

Moving forward – how to plan, develop and nurture more effective partnerships

A4NH builds on an existing base of research and partnerships. However, A4NH brings a greater commitment to research contributing to outcomes and impacts. This complements many global, national and regional efforts in agriculture, nutrition and health that are emphasizing partnership, country ownership and capacity development. This offers new opportunities to refresh current partnership thinking and practice and align these with nutrition and health outcomes and impacts. Where gaps currently exist or are anticipated, discussions can be initiated with new partners.

Beyond strategy, more careful attention to the planning, practice and evaluation of partnerships is needed. A systematic process, learning from the past and recognizing new imperatives of country ownership and leadership and the changing importance of different actors such as the private sector and civil society is required. A systematic assessment of partnerships, taking into account **leadership, management systems, people, and culture** is planned.

Clearly partnerships exist so that the partners can achieve more than they would by working alone. Given the high priority for country-owned and led partnerships in agriculture for nutrition and health, long-term and sustaining partnerships with national partners are critical. In these partnerships, it is imperative that the capacities for country teams are supported.

Development of a Strategic Partnership Plan

It is especially important to relatively quickly discuss and agree upon a more detailed and coherent partnership plan from a partnership perspective. This partnership plan will start with the current status and look forward to a vision of 10 years. Progress can be reviewed and adjustments to the plan made

every 2-3 years. For the first three years of the program, the partnership plan will need to be aligned with the approved A4NH proposal and use the SPI Framework described above.

A planning process, applying a systematic tool summarized in Table 3 is envisaged. The plan starts with establishing **key issues** and from these, a set of **desired outcomes** will be identified. To achieve these desired outcomes, a set of **activities** will need to be carried out. This is where current and future partners will be identified, taking into account the SPI framework outlined above. Clearly, **resources** will be needed and this also has to be mapped. Whereas the SPI framework guides an overall and ongoing process of partnership identification and development, the partnership master plan will more systematically review the individual roles of partners and how individual partner and overall partnership performance can be enhanced.

Table 3. Partnership Planning Tool

1. Key issues	Outline activity	3. Activities						4. Evidence of success
		Current partners			New partners			
		1	2	3	4	5	6	
	A	X	X					
	B		X	X	X			
	C			X		X		
	D	X	X	X	X	X	X	
	E					X	X	
2. Desired outcomes	F		X				X	
		5. Resources						

Source: Adapted from “The Partnering Initiative”

Action: A Partnership Plan will be developed by mid-2013 in discussion with partners and leading thinkers in the field of agriculture for improved nutrition and health.

Partnership building and maintenance

For all new partnerships, partnership building and maintenance along the “partnership cycle” will be followed (Table 4). Phase I will include the **scoping and building** of a partnership. It is during this phase that the roles, responsibilities and capacities of partners will be jointly assessed. Once new or renewed partnerships are identified, a partnership agreement will be developed that is based on mutually agreed objectives and principles. The **management and maintaining** phase will entail careful structuring, the mobilization of internal and external resources, and the delivery of what was planned. The monitoring and evaluation of partnerships – which is discussed further on in more detail – will be carried out in the **reviewing and revising** phase. Finally, in the **sustaining outcomes** phase of the partnership cycle, partners discuss how the partnership has progressed and whether the partnership should be sustained, evolved or completed.

Table 4. Partnership Cycle

Phase	Activities
Scoping and building	Scoping Identifying Building Planning
→ Partnership Agreement	
Managing and maintaining	Structuring Mobilizing Delivering
Reviewing and revising	Measuring Reviewing Revising
Sustaining outcomes	Scaling Moving on

Action: In discussion with partners, we can consider if we need and want to assess current partnerships according to the partnership cycle.

Agriculture for Nutrition and Health Partnership Platforms

Partnership Platforms can be developed for different purposes and at different levels (national, regional, and international) depending on partner objectives and interests. They can provide a space for a number of partners with similar interests or ambitions to exchange information, determine priorities, and plan joint actions. For research and capacity development at the international level, A4NH already partners with the Agri-Health university network. It is anticipated that other partnership platforms at the regional and national level will be identified or may arise. Most of these will be organized and managed by others, but which can have a productive partnership with A4NH.

Action: A4NH will explore the establishment of different partnership platforms based on mutual interests. The potential to develop partnership platforms in different regions and countries will be discussed during regional and national consultations as the partnership strategy is implemented. For example, a number of countries have or are developing joint zoonotic disease platforms across Ministries and Institutes of Health and Agriculture.

Partnership with the private sector

Action: The A4NH partnerships with the private sector be further developed and further opportunities for appropriate public-private partnerships to link research with business and social innovations will be actively explored. In our focus regions, the priority will be to engage small and medium size enterprises in the region.

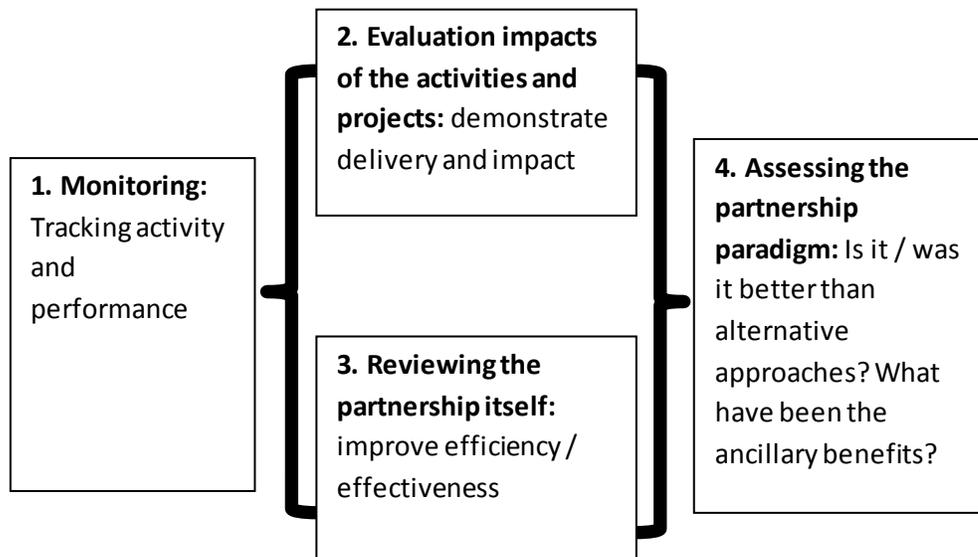
Monitoring and evaluation (M&E)

An important element in the planning and practice of partnerships requires agreement on how the partnership will be monitored, evaluated and evolve. The monitoring and evaluation of partnerships should not only focus on tracking the activities and performance, but should also give periodic consideration to alternative arrangements and practice (see Figure 5).

Within the CGIAR, the Consortium Office will develop an overall process of seeking partners' perspectives and evaluating CGIAR partners. As this process develops, A4NH will monitor and evaluate

more specific elements of its partnerships, given their importance to outcomes and impacts and the unique cross-sectoral nature of the partnerships needed.

Figure 5. A model for monitoring and evaluation



**Source: The Partnering Initiative, 2012*

The partnership evaluation framework will have two levels of focus. At the **individual partnership level**, the evaluation will look at the costs and benefits as well as the opportunity costs and organizational aspects of the partnership. The **partnership as a whole** will also need to be evaluated on a wide range of factors, including an analysis of the partnership itself, the partnership approach, and the impact. A whole range of partnership agreements are already in place, as a first step to ensure that the various partnerships are aligned with impact pathways for improving nutrition and health. In this regard, a review of partnerships could use a Partnering Agreement Scorecard, containing key partnership dimensions.

As mentioned, the M&E of partnerships goes beyond looking at the extent to which deliverables were achieved. Determining the value added of a partnership is not something that can easily be done in a quantitative manner and therefore will depend on a range of qualitative factors. To guide these discussions, Michael Warner and the Partnership Initiative suggest the following formula:

$$AV = (OP + AQ + AB) - (R + T) - A$$

Where:

AV = Added value of the partnership

OP = Outcomes of the partnership (extra to what would have happened anyway)

AQ = Added quality of the solution

AB = Auxiliary benefits (including social capital, etc.)

R = Resources contributed

T = Transaction costs (facilitation, brokering, etc.)

A = Net benefit of the most likely alternative

We expect that more rigorous monitoring and evaluation of partnerships will highlight a number of areas for research into partnerships about what works and does not work. For example, frameworks for understanding public-private partnerships may not be suitable for NGO or cross-sector partnerships. Likewise, the approach to partnerships in Asia might not necessarily be the right approach for Africa and vice versa. We envisage that with time, specific research topics will arise that can be discussed and followed-up by A4NH and its partners.

We propose that a regular (every 3 years) external review of partnerships be undertaken. This will provide an overview of, as well as advice on specific partnerships. In establishing this process, we will consider how baseline data can be obtained (in consultation with the Consortium Office and partners) and what indicators are needed for useful evaluation by external parties.

Action: A regular (every 3 year) external review of partnerships is proposed, aligned with Consortium and partner processes.

Diplomacy in Partnerships

Partnerships are about relationships and plans; agreements and evaluation tools are useful in managing and improving them. However, it is also important that less tangible elements of equity and diversity are acknowledged and affirmed. Together with the Coordinator of Partnerships in IFPRI, A4NH will actively work on best diplomatic practice in its partnerships.

Next steps

The challenges outlined for agriculture, nutrition and health require urgent action. As we have highlighted they must be done in partnership. This document seeks to provide a first draft of the partnership strategies, principles and practices of the CGIAR's A4NH program. It is grounded in A4NH's agreed proposal, but will live based on the quality, passion and ambition of its transformative partnerships.

Based on the agreement and adjustment to A4NH plans as a result of our pre-proposal submission, we will actively work with partners in a series of consultations in developing our Phase II proposal. Further details on A4NH can be found at www.a4nh.cgiar.org.

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RESOURCES

The Partnering Initiative

- <http://thepartneringinitiative.org/and>
- <http://thepartneringinitiative.org.s109685.gridserver.com/w/wp-content/uploads/2011/11/Partnering-Toolbook-en-20113.pdf>
- http://www.unglobalcompact.org/docs/issues_doc/un_business_partnerships/UNPSFP_Meeting2010/UNPSFP_2010_TPI_Harrison.pdf

Overseas Development Institute (ODI)

- http://www.odi.org.uk/work/projects/98-02-bpd-natural-resources-cluster/html/pub_working.html
- <http://www.odi.org.uk/work/projects/98-02-bpd-natural-resources-cluster/media/pdf/working/wp1ba.pdf>
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