



# The Gambia Stakeholder and Nutrition Action Mapping

FY 2017 NATIONAL RESULTS

## NaNA

National Nutrition Agency  
Office of the Vice President  
and Ministry of Women's Affairs



# REACH

ACCELERATING THE SCALE-UP OF FOOD AND NUTRITION ACTIONS



## Disclaimer for the Stakeholder & Nutrition Action Mapping

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The Gambia Stakeholder & Action Mapping intends to help improve nutrition coordination and scale-up discussions by providing an indicative overview of **who the stakeholders in nutrition are, where they are working, and estimated coverage of beneficiaries** for selected Core Nutrition Actions.

Both the **geographical and beneficiary coverage are estimated** based only on the information provided and obtained at the regional level. The coverage is therefore **not to be considered as exhaustive or exact**. Moreover, **it is voluntary to report**, and not necessarily all stakeholders have been identified or have chosen to contribute.

The mapping has only collected data on **selected Core Nutrition Actions**. Organizations, both included in this mapping and not, may be working on other actions that are important for improving nutrition outcomes, however data on these actions has not been captured in this mapping.

The Core Nutrition Actions were selected through consultations with the National Nutrition Agency (NaNA) and Nutrition Stakeholders in The Gambia.

# Agenda

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## 1. Overview of Mapping

## 2. Results

- Who does What
- Geographic and Population Coverage
- Action coverage

## 3. Summary

## 4. Annex

# Overview

# Introduction to the Stakeholder & Action Mapping

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## Objectives of Stakeholder & Action Mapping

- To decide on the prioritized **Core Nutrition Actions** (CNAs) in The Gambia
- To gain a better overview of **who is doing what and where** in nutrition in Gambia
- To be better able to **identify gaps in coverage** of target population and geographic areas of the CNAs

Ultimately to **help inform & improve planning** of core nutrition actions, to **scale up and eliminate malnutrition**

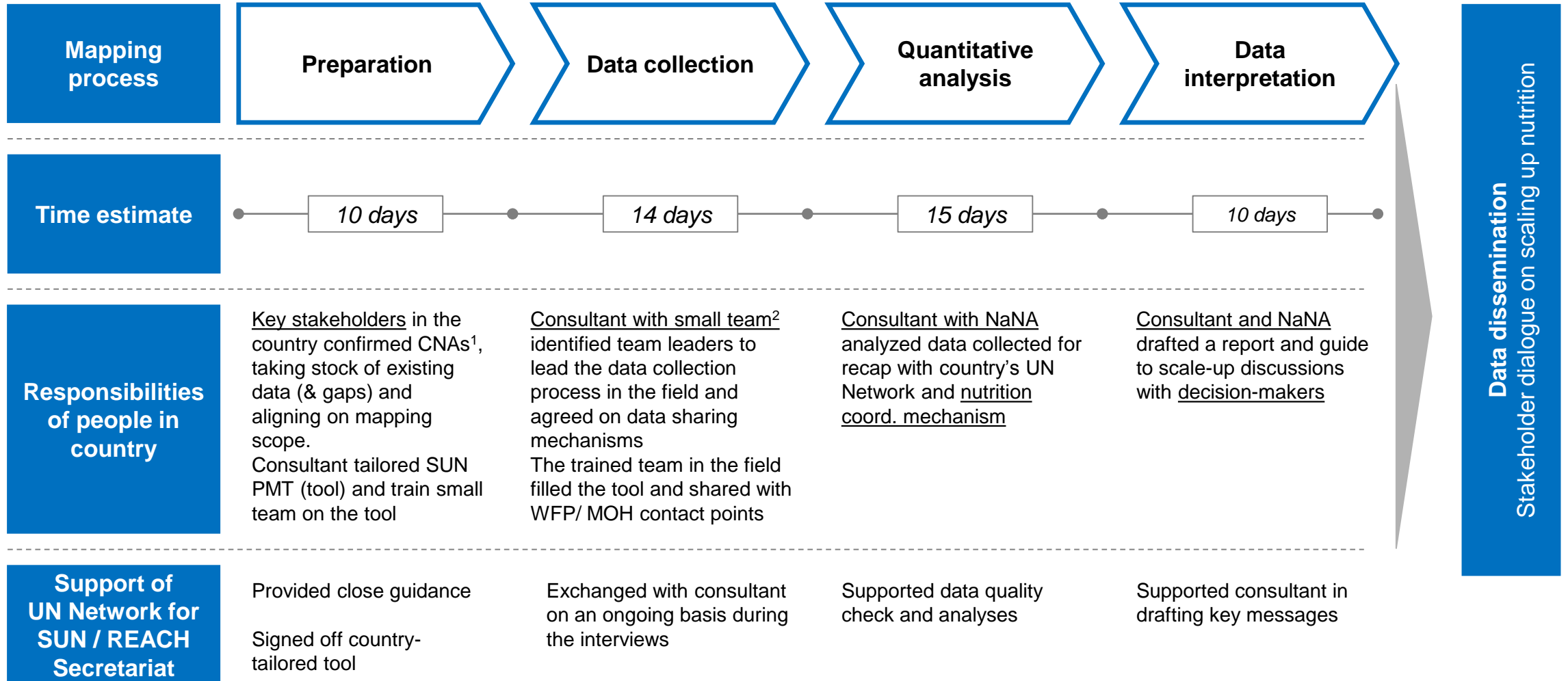
## Background for Stakeholder & Action Mapping

- The UN Network in the Gambia is supporting the National SUN Platform to strengthen the scaling up of nutrition efforts
- Through this platform, the UN Network support the Government to undertake a Stakeholder and Nutrition Action Mapping exercise to better understand the coverage of core nutrition actions at the national and regional levels
- The UN Network used the support of the UN Network for SUN / REACH Secretariat who provided the tool and connected the country team with a consultant to guide the process and train the country team

# The mapping process uses the Scaling Up Nutrition Planning & Monitoring Tool (SUN PMT) to answer key questions

Qualitative view	Quantitative view	Guidance for scaling up nutrition	Continuous monitoring
<b>Overview of nutrition actions</b> <i>Who does what where?</i>	<b>Coverage</b> <i>What % of the target group is covered?</i>	<b>Guidance for a stakeholder dialogue</b> <i>How &amp; where to scale up nutrition?</i>	<b>Implementation monitoring</b> <i>Are targets achieved over time?</i>
<hr/> <ul style="list-style-type: none"><li>1 Who are the key stakeholders? What are their roles?</li><li>2 Which stakeholders are doing what where?</li></ul>	<hr/> <ul style="list-style-type: none"><li>3 What % of the target group is covered nationally; via which delivery mechanisms?</li><li>4 What % of target groups are covered per action?</li><li>5 What % of the target group is covered per region?</li><li>6 For each region, who is reaching what % of the target group?</li></ul>	<hr/> <ul style="list-style-type: none"><li>7 What are the stunting levels (e.g. prevalence)? What is the action intensity per region?</li><li>8 Which regions are not adequately addressed?</li><li>9 Are children receiving the nutrition actions they may need?</li><li>10 Where are there action gaps in addressing key nutrition problems?</li></ul>	<hr/> <ul style="list-style-type: none"><li>11 Is the target group coverage improving over time?</li><li>12 Are targets achieved as defined in the national plan?</li></ul>

# Key phases of the mapping process



1. CNA = Core Nutrition Actions

2. The small team typically refers to the NaNA (6), MOH (1), GBOs (1) and WFP (1) staff.

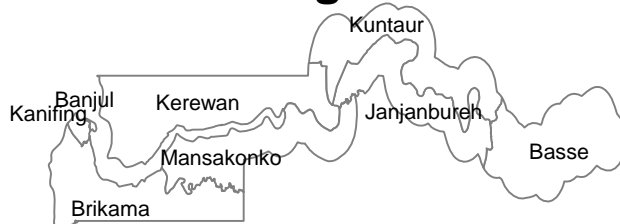
## Core Nutrition Actions and their definitions used for the mapping

	Core Nutrition Action	Numerator	Denominator		Core Nutrition Action	Numerator	Denominator
Mgmt. of SAM	Treatment of SAM	Number of children 6-59 months with severe acute malnutrition (SAM) who received treatment	Total number of estimated SAM cases	WASH	Promote use of latrines	Number of communities declared open defecation free (ODF)**	Total number of communities
	IYCF	Implementation of BFCI	Communities reached with Baby Friendly Community Initiative (BFCI)		NCD	Promote nutrition education in primary schools	Number of primary schools providing nutrition education
Micronutrient Supplementation	Provide FeFo to pregnant women	Number of "newly registered" pregnant women who received iron/folic acid	Total number of "newly registered" pregnant women	Food & Nutrition Security	Provide material and technology for small ruminant and poultry	Number of communities reached with technology for small ruminant and poultry	Total number of communities
	Provide VAS among post partum women	Number of post partum women who received vitamin A supplementation (VAS)	Total number post partum women		Provide material and technology for small scale horticulture/ crop diversification	Number of communities reached with technology for small scale horticulture/ crop diversification	Total number of communities
	Provide VAS to children	Number of children 6-59 months who received VAS during the last round	Total number of children 6-59 months		Provide material and technology for artisanal fisheries	Number of communities reached with technology for artisanal fisheries	Total number of communities
Disease Prevention & Management	Provide de-worming to children	Number of children 12-59 who received deworming tablets in the last round	Total number of children 12-59 months		Child Care	Conduct nutrition surveillance bi-annually	Number of children 6-59 months reached during the most recent surveillance round
	Provide IPT for malaria to pregnant women	Number of pregnant women who received intermittent preventive treatment (IPT) (at least two doses) for malaria	Total number of pregnant women	Social Protection		Provide BSFP to children 6 -23 months	Number of vulnerable children 6-23 months who received blanket supplementary feeding program (BSFP)
	Provide ITNs to pregnant women	Number of pregnant women who received insecticide-treated bed nets (ITN)	Total number of pregnant women				
	Provide ITNs to neonates	Number of infants 0-1 month who received ITN	Total number of infants 0-1 month				



# What can the Stakeholder & Action Mapping help you with?

## For Regions



- See what partners are working with food & nutrition in your region
- Get info on what actions are being conducted, and where
- How many people are being reached by different actions, what needs to be scaled up

## For Ministries



- Get a better overview of who the partners are and what they do
- Identify potential gaps in geographic coverage
- Identify potential gaps in action coverage
- Help planning & scale up of nutrition actions

## For UN and NGOs



- Enhance coordination though better info on what organizations are working in the same regions and/or on the same actions
- Identify what regions need further support
- See what actions need to be scaled up, and where

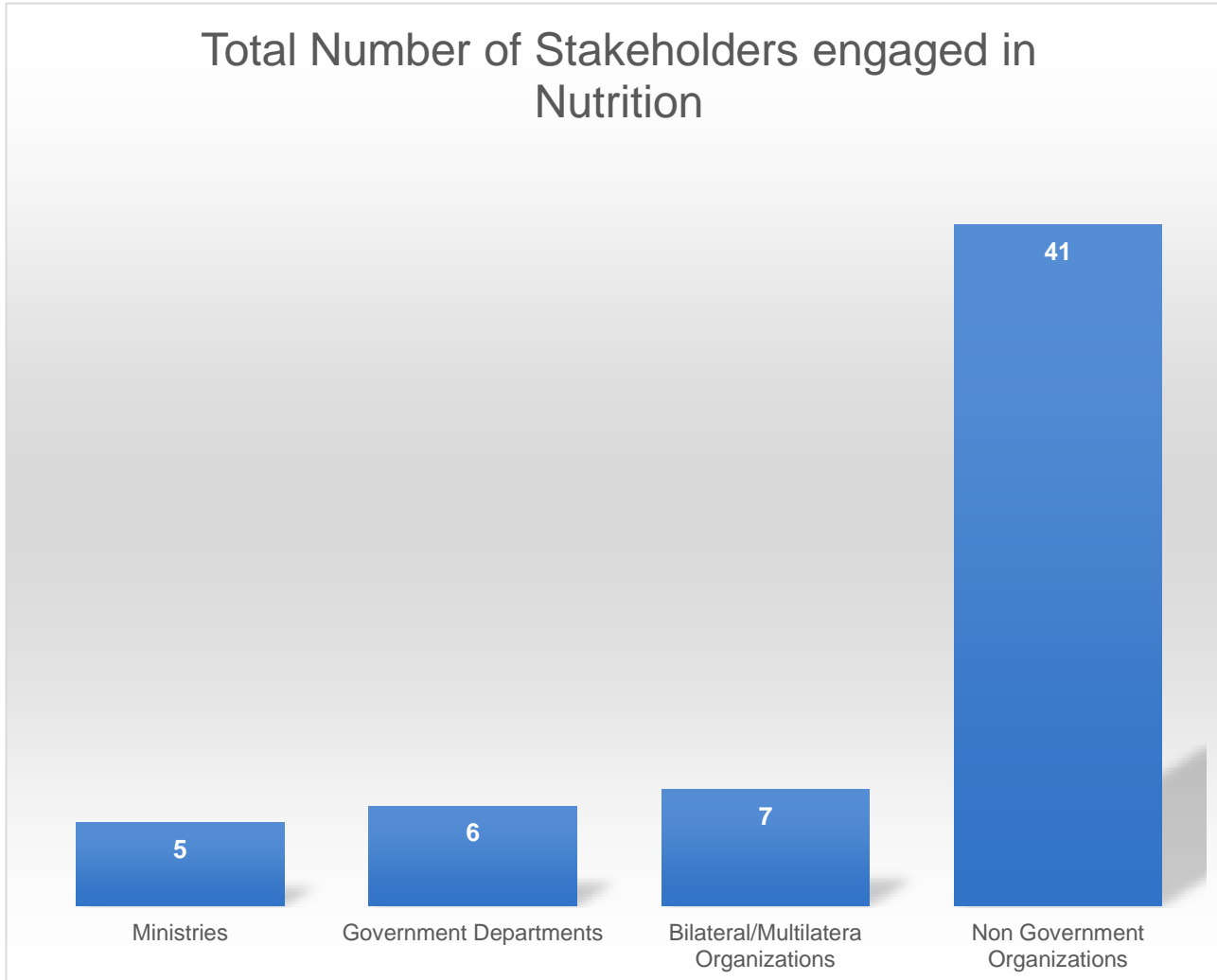
## For Donors



- Identify what regions need further support
- See what actions need more funds to scale up
- Help identify what organizations can cover different actions and regions

**Who does what**

## How many stakeholders engaged in Nutrition



## Summary

- ✓ A total of 59 stakeholders engaged in nutrition
- ✓ Implementation is mainly among the NGOs and the Government departments.
- ✓ Mix of stakeholders noted across the 2 groups of catalysts and donors

## Who are the key stakeholders? What are their roles? (1 of 3)

	Core Nutrition Action	Responsible Ministry	Catalyst	Field implementer	Funder
MANAGEMENT OF	Treatment of SAM	MoHSW	NaNA, African Muslim Agency, RHD	RHD, African Muslim Agency, Federation, MoHSW, NaNA,	African Muslim Agency, CF, World Bank, UNICEF
IYCF	Implement BFCI	MoHSW	NaNA, RHD	RHD, NaNA, MoHSW	World Bank, UNICEF
MICRONUTRIENT SUPPLEMENTATION	Provide FeFo to pregnant women	MoHSW	NaNA, RHD, MoHSW	RHD, MoHSW, NaNA	UNFPA, World Bank, MoHSW, WHO, UNICEF, UNDP
	Provide VAS among post partum women	MoHSW	NaNA, RHD, MoHSW	RHD, MoHSW, NaNA	UNICEF, MoHSW, WHO, UNDP
	Provide VAS to children aged 6-59 months	MoHSW	NaNA, RHD, Federation, SOS	RHD, Federation, MoHSW, SOS, NaNA	CF, SOS CLINIC BAKOTEH, UNICEF, MoHSW, WHO, UNDP, CRS, NMCP, CMS
DISEASE PREVENTION/MANAGEMENT	Provide de-worming to children 12-59	MoHSW, MoBSE	NaNA, RHD, Federation, SAFMU, SOS	RHD, Federation, MoHSW, NaNA, SOS	CF, MoBSE/SAFMU, SOS CLINIC BAKOTEH, UNICEF, EU, JSDF, Deworm The World, CRS, NMCP, CMS
	Provide IPT for malaria to pregnant women	MoHSW	NaNA, RHD, NMCP, CRS	RHD, MoHSW, NaNA, NMCP	Global Fund, MoHSW
	Provide ITNs to pregnant women	MoHSW	RHD, NMCP, CRS, TARUD, Federation, HePDO	RHD, TARUD, Federation, MoHSW, ADWAC, GADO, HePDO, NaNA	TARUD, CF, NMCP, HEPDO, Global Fund, MBG, MoHSW
	Provide ITNs to neonates	MoHSW	RHD, NMCP, CRS, Federation, ADWAC, GADO, HePDO, SOS	RHD, Federation, GADO, ADWAC, HePDO, SOS, NaNA, MoHSW, NMCP	CF, NMCP, HEPDO, SOS CLINIC BAKOTEH, Global Fund, CRS, NMCP, CMS

## Who are the key stakeholders? What are their roles? (2 of 3)

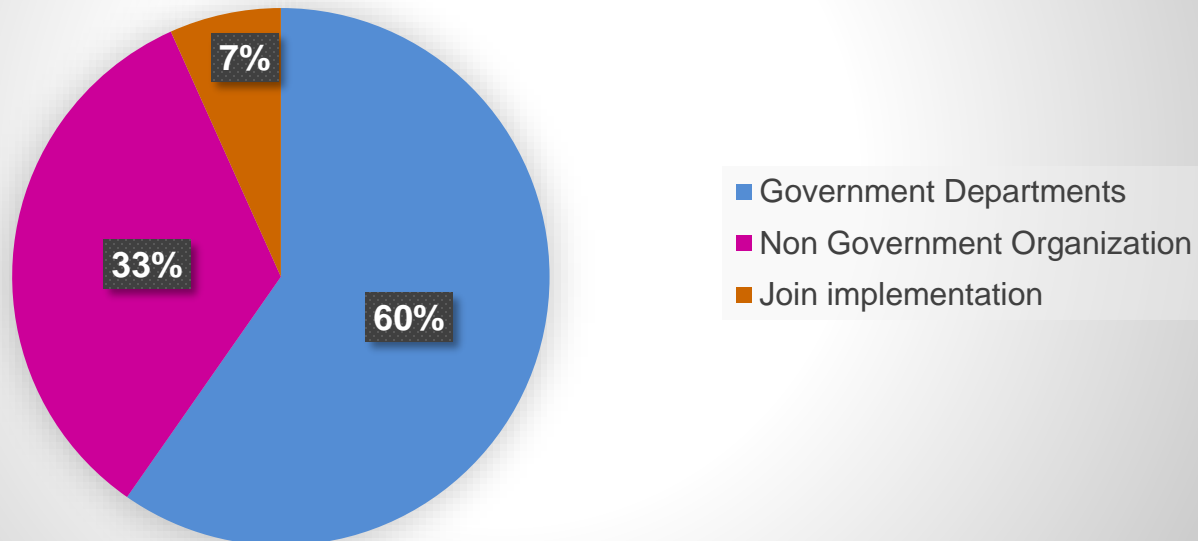
	Core Nutrition Action	Responsible Ministry	Catalyst	Field implementer	Funder
<b>WASH</b>	Promote use of latrines	MoWRE, MoHSW, MoLGL, MoBSE	MoHSW, UNICEF, HEPDO, GAFNA, DHPE, African Muslim Agency, TARUD, RHD, MoA, MoWRE, ADWAC	NDMA, ADWAC, RHD, GAFNA, DCD, DWR, DHPE, HEPDO, Village Development Committee (VDC), TARUD, 4H, NDMA, NaNA, MoHSW	HEPDO, RHD, GAFNA, African Muslim Agency, TARUD, ADB, UNICEF, UNHCR, MBG, SOLDAGRO Belgium
<b>NCD</b>	Promote nutrition education in lower basic ( primary schools)	MoBSE, MoA, MoHSW	MoA, WFP, FAO, NaNA, MoBSE, SAFMU	NaNA, MoBSE, 4H, MoA, SMC, CM, SAFMU	FAO, 4H, MoBSE/SAFMU, WFP, EU, FASDEP, MoA, Norwegian, JSDF, UNICEF, GLF
<b>FOOD AND NUTRITION SECURITY</b>	Provide material and technology for small ruminant and poultry	MoHSW, MoA, MoWRE	FAO, EU, UP	ADWAC, DoA, WASDA, GAFNA,, MoHSW, MoA, FFHC, NaNA, United Purpose	DoA, WASDA, GAFNA, FFHC, FAO, UNHCR, NeMA, WAAPP, IFAD, FASDEP, MoA, ADB, SOLDAGRO Belgium, AFDB, World Bank, CLIP
	Provide material and technology for small scale horticulture/ crop diversification	MoHSW, MoA, MoLGL	MoHSW, EU, UP	UP, DoA, ADWAC, GRCS, WASDA, GAFNA, MDFT, Cashew farmers association and Processors, KETA, Aseck, Antan, TARUD, MMAP, AFET, MoA, 4H, VDC, FIOH, Project Aid Gambia, FORUT, RDO, MoHSW, NaNA, FSF, NAWFA, NEA, DoF	GRCS, WASDA, DoA, GAFNA, IRD, KETA, MEHDA, TARUD, MMAP, AFET, NAWFA, 4H, HF, FIOH, PAG, FORUT, RDO, FSF Spanish Red Cross, EC/Big lottery Fund, ADB, UNHCR, USDA, Association of country women of the world, Eastern Mennoinite Association, United Purpose Methodist Mission, Church World Service, EU, United Methodist Committee on Relief (UMCOR), Humanity First UK, SIDA, Project Aid Germany, IFAD, World Bank, Abundance Funds (US), Stiftung Sabablou , Allianza Por Solidaridad LUSH UK/Individuals
	Provide material and technology for artisanal fisheries	MoA, MoHSW	FAO, DoF, IFAD, GAFNA, Bakau Community, FASDEP	DoL, DoA, DoF, MoWRE, NaNA, MoA	FAO, DoF, DoA, GAFNA, GAMFIDA, MoA, IFAD, UNHCR, ADB

## Who are the key stakeholders? What are their roles? (3 of 3)

	Core Nutrition Action	Responsible Ministry	Catalyst	Field implementer	Funder
SOCIAL PROTECTION	Provide blanket supplementary feeding to children 6 -23 months	MoBSE	WFP	RHD	WFP
CHILD CARE	Conduct nutrition surveillance bi annually	MoHSW	NaNA, UNICEF, RHD, Federation,	RHD, Federation, NaNA, VSG	CF, UNICEF, WHO, Government of The Gambia

# How is the implementation distributed among the stakeholders

## Proportion of total action implemented by stakeholders category



## Summary

### **Government institutions**

- ✓ There are relatively few government institutions (6), however they implement 60% of all the actions
- ✓ Implementation by department: NaNA 40%; RHD 41%, Joint RHD & NaNA 5%, other departments (DoF, DoA, DoL and NMCP) 14%

### **Non-Government Institutions**

- ✓ Most non-government institutions are mainly supporting the provision of material and technology for small scale horticulture / crop diversification and promoting the use of latrines

### **Actions jointly implemented by Government and Non-Government organizations:**

- ✓ Distribution of ITNs
- ✓ Material and technology for small scale horticulture and crop diversification
- ✓ Nutrition Education in lower basic schools and nutrition surveillance

## **Geographic and Population Coverage**



## How many regions implement nutrition sensitive and specific interventions

Regions implementing Identified Actions















### - Nutrition Sensitive;

The NCD and WASH interventions are implemented across all the regions.

### - Nutrition Specific





Micronutrient Supplementation, Management of SAM/MAM and Child Health have better geographical coverage in comparison to others

## Overview of coverage of actions at the national level (1/2)

	Core Nutrition Action	# of regions covered	Target Group	% of target covered	Delivery Mechanisms
MANAGEMENT OF SAM	Treatment of SAM	5/8	Children 6-59 months		Health Facilities, Community , Health worker/Community Health Nurse
IYCF	Implement BFCI	4/8	Children 0-59 month		Community , Health worker/Community Health Nurse, Village Health Worker/CBC, Support Groups
MICRONUTRIENT SUPPLIMENTATION	Provide FeFo to pregnant women	4/8	Pregnant women		Health Facilities, Health worker/Community Health Nurse, Village Health Worker/CBC
	Provide VAS among post partum women	5/8	Post Partum Mother		Health Facilities, Health worker/Community Health Nurse, Village Health Worker/CBC, Support Groups
	Provide VAS to children aged 6-59 months	5/8	Children 6-59 months		Health Facilities, Health worker/Community Health Nurse, Village Health Worker/CBC, Support Groups, Community
DISEASE PREVENTION/ MANAGEMENT	Provide de-worming to children 12-59	5/8	Children 12-59 months		Health Facilities, Health worker/Community Health Nurse, Village Health Worker/CBC, Support Groups, Community
	Provide IPT for malaria to pregnant women	5/8	Pregnant women		Health Facilities, Health worker/Community Health Nurse
	Provide ITNs to pregnant women	4/8	Pregnant women		Health Facilities, Health worker/Community Health Nurse, NGOs, Volunteers
	Provide ITNs to neonates	5/8	Children 0-28 days		Health Facilities, Volunteers, Health worker/Community Health Nurse, NGOs
WASH	Promote use of latrines	7/8	Community		National Disaster Management, Community , Health worker/Community Health Nurse, Extension workers, Volunteers, Health Facilities, Schools, NGOs, Village Health Worker/CBC, Support Groups
NCD	Promote nutrition education in lower basic ( primary schools)	8/8	Schools		Schools, Health worker/Community Health Nurse, NGOs, Extension workers, Health Facilities
SOCIAL PROTECTION	Provide blanket supplementary feeding to children 6 -23 months	1/8	Children 0-23 months		National Disaster Management, Volunteers

% of target group reached:  ≤25%  >25% - ≤50%  >50% - ≤75%  >75%

## Overview of coverage of actions at the national level (2/2)

	Core Nutrition Action	# of regions covered	Target Group	% of target covered	Delivery Mechanisms
FOOD/ AND NUTRITION SECURITY	Provide material and technology for small ruminant and poultry	7/8	Community		Community , Extension workers, NGOs, Health Facilities, Volunteers
	Provide material and technology for small scale horticulture/ crop diversification	6/8	Community		NGOs, Extension workers, Health Facilities, Volunteers
	Provide material and technology for artisanal fisheries	7/8	Community		Extension workers, NGOs
CHILD CARE	Conduct nutrition surveillance bi annually	5/8	Children 6-59 months		Community , Health worker/Community Health Nurse, Village Health Worker/CBC, Support Groups, Health Facilities

% of target group reached:  ≤25%  >25% - ≤50%  >50% - ≤75%  >75%

## What % of the target group is covered per region? (1 of 2)

	Core Nutrition Action	Target group	The Gambia	Banjul	Kanifing	Brikama	Mansa-konko	Kerewan	Janjan-bureh	Kuntaur	Basse
<b>Mgmt. of SAM</b>	Treatment of SAM	Children 6-59 months	15%	-	5%	21%	46%	40%	-	-	13%
<b>IYCF</b>	Implementation of BFCI	Children 0-59 months	<1%	-	-	<1%	1%	1%	-	-	<1%
<b>Micronutrient Supplementation</b>	Provide FeFo	Pregnant women	31%	-	99%	-	37%	76%	-	-	11%
	Provide VAS	Post partum women	62%	-	90%	44%	96%	97%	-	-	90%
		Children 6-59 months	38%	-	80%	29%	72%	63%	-	-	16%
<b>Disease Prevention &amp; Management</b>	Provide de-worming	Children 12-59 months	56%	-	98%	33%	78%	93%	-	-	82%
	Provide IPT for malaria	Pregnant women	78%	-	99%	83%	85%	98%	-	-	90%
	Provide ITNs	Pregnant women	39%	-	97%	18%	-	99%	-	-	11%
		Children 0-28 days	23%	-	3%	14%	82%	99%	-	-	10%
<b>WASH</b>	Promote use of latrines	Communities	31%	-	5%	64%	26%	64%	6%	4%	20%
<b>NCD</b>	Promote nutrition education	Schools	28%	24%	28%	3%	96%	3%	52%	9%	76%
<b>Food &amp; Nutrition Security</b>	Provide material and technology for small ruminant and poultry	Communities	83%	-	100%	100%	101%	100%	107%	94%	12%
	Provide material and technology for small scale horticulture/ crop diversification	Communities	41%	-	-	94%	37%	76%	9%	2%	28%
	Provide material and technology for artisanal fisheries	Communities	3%	100%	84%	5%	1%	1%	2%	1%	-
<b>Child Care</b>	Conduct nutrition surveillance bi-annually	Children 6-59 months	23%	-	26%	13%	52%	51%	-	-	35%
<b>Social Protection</b>	Provide BSFP	Children 0-23 months	4%	-	-	-	-	-	-	-	25%

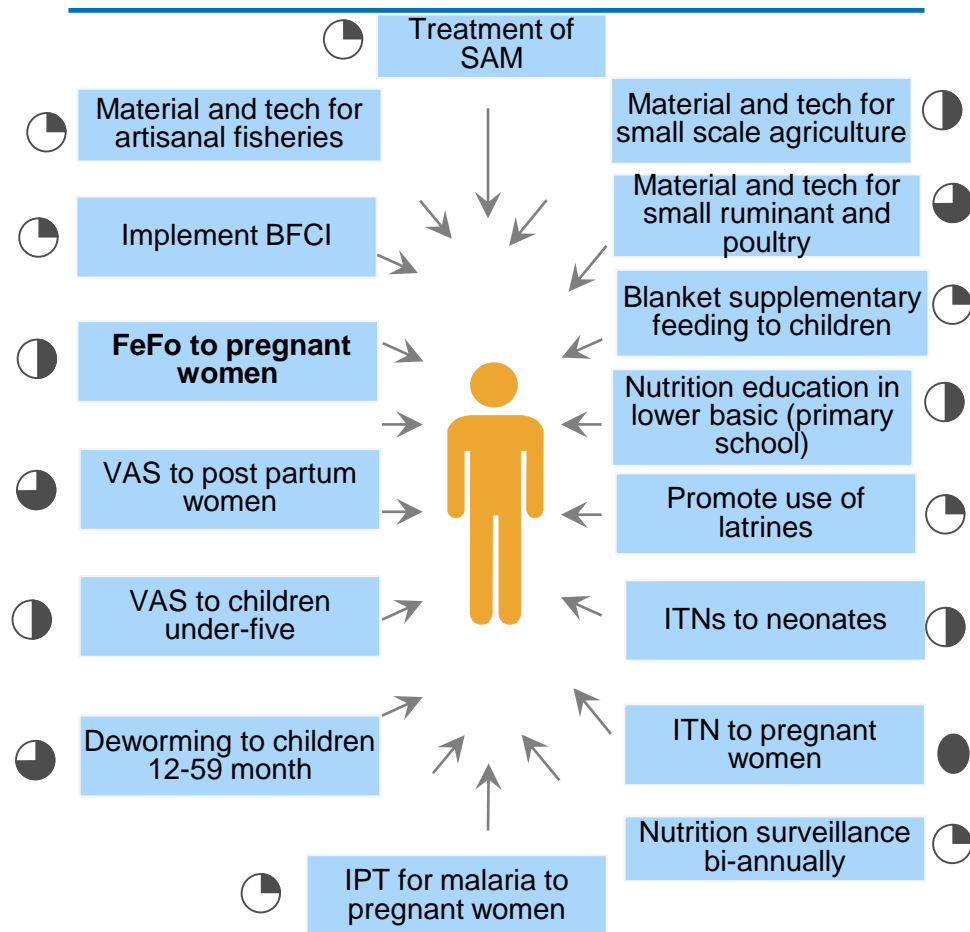
% of target group reached: ■ ≤25% ■ >25% - ≤50% ■ >50% - ≤75% ■ >75%

## Actions coverage

# Are children receiving a full package of nutrition interventions?

<Many actions are being implemented in the country, however coverage is low for most actions>

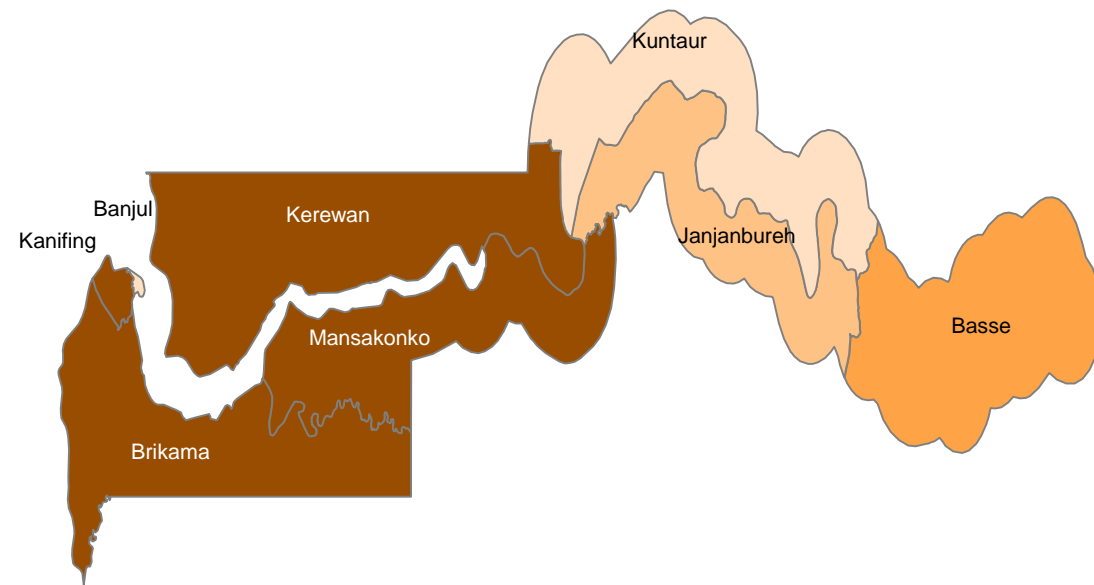
On average, a typical child in Gambia only receives ~4 interventions that they may need



% of target group covered

≤25%
  >25% - ≤50%
  >50% - ≤75%
  >75%

On average, children in Banjul & Kuntaur are likely to receive fewer nutrition actions than other regions

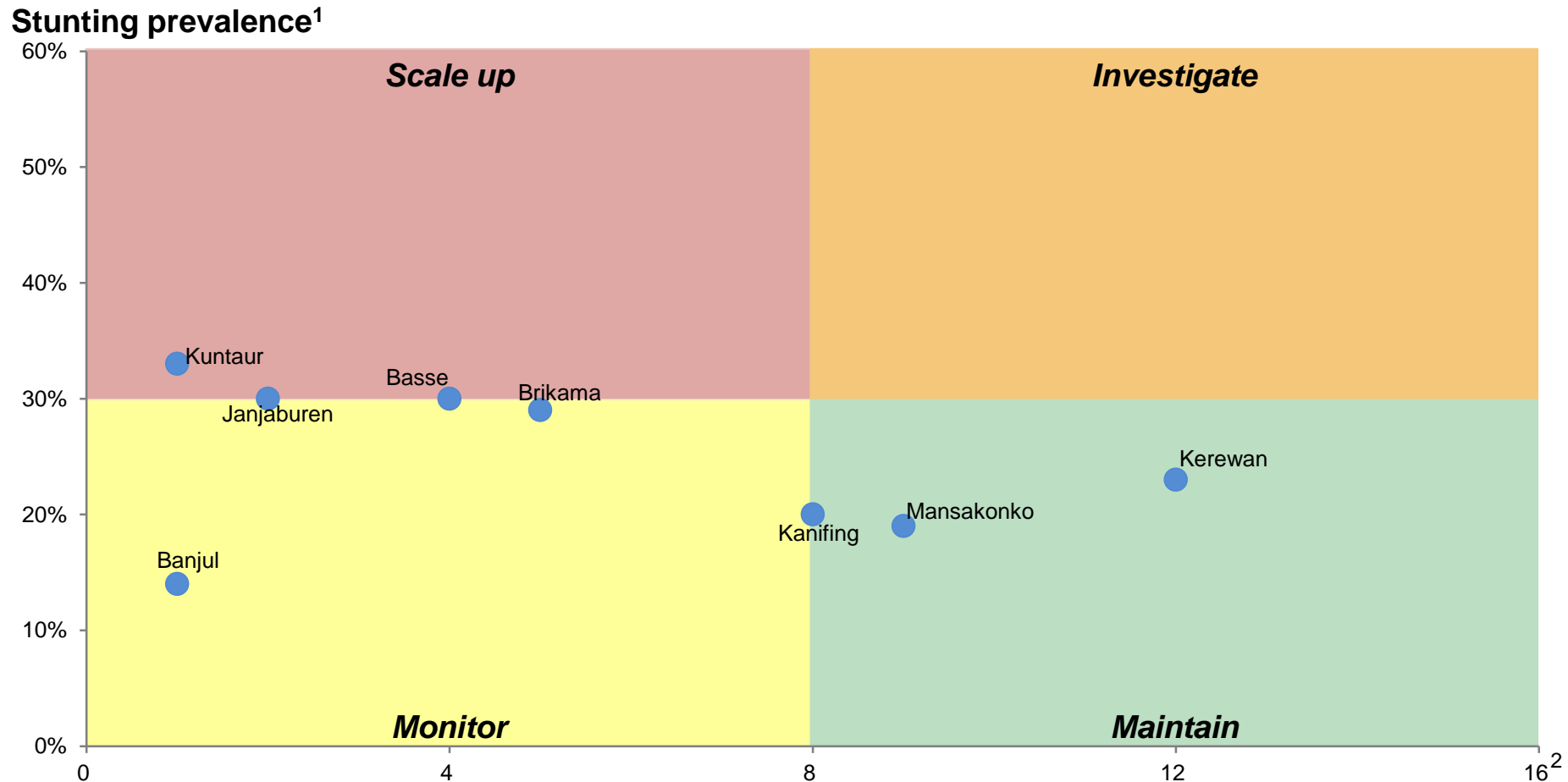


# of child-centred actions with coverage >50% of target population

≤1 actions  
 2 actions  
 3-4 actions  
 ≥5 actions

# Which regions are not addressed adequately?

On average, 6 CNAs per region reach 20% of beneficiaries, indicating scale up of CNAs is needed in most regions



<b>Scale up</b>	nutrition situation is critical with low coverage of target populations
<b>Investigate</b>	nutrition situation is critical with adequate coverage of target populations
<b>Monitor</b>	nutrition situation is not critical with low coverage of target populations
<b>Maintain</b>	nutrition situation is not critical with adequate coverage of target populations

**# of CNAs with at least 20%<sup>3</sup> of target population covered**

<sup>1</sup>Among children 0-59 months old, Gambia SMART survey 2015

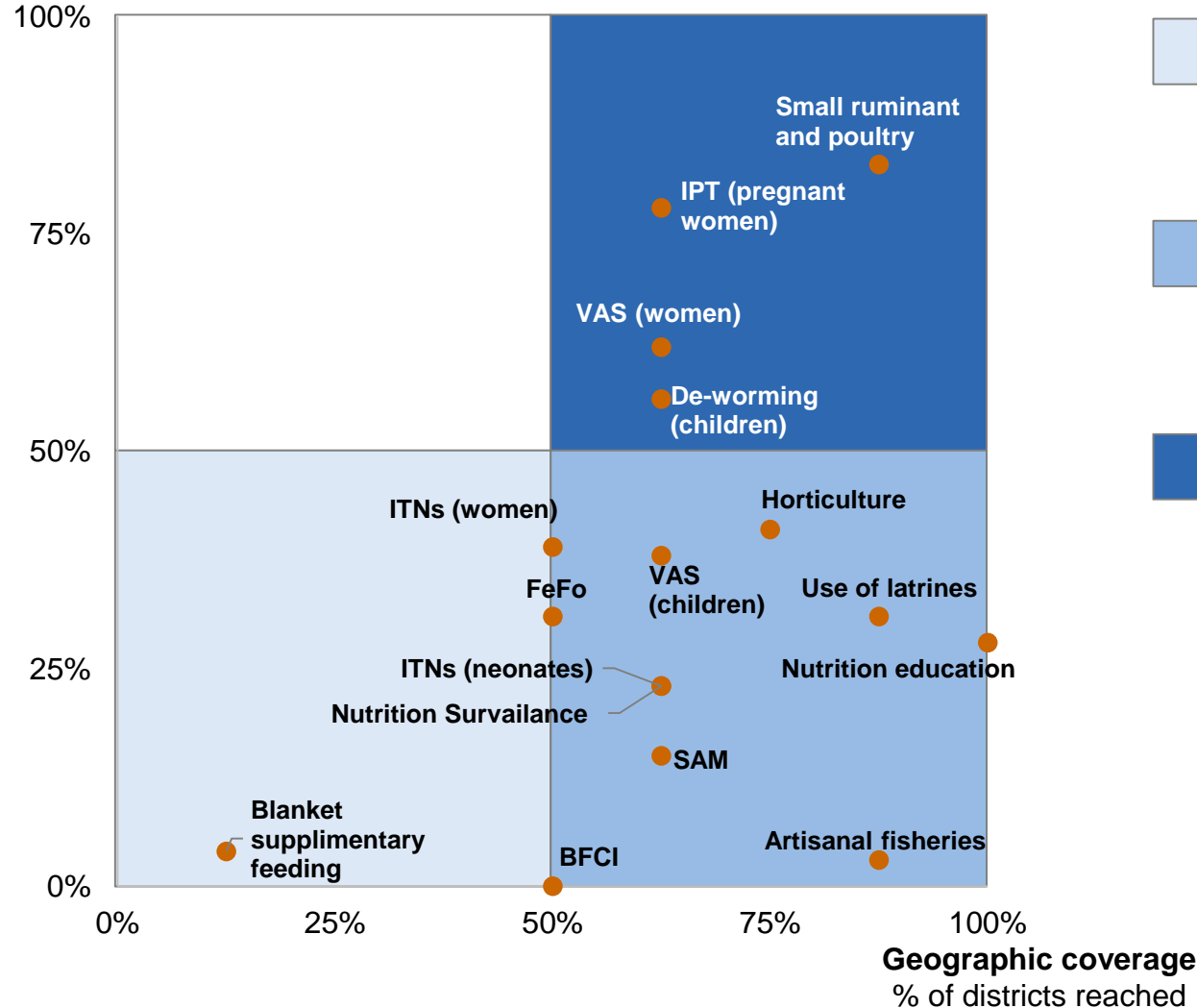
<sup>2</sup>The total number of CNAs in the matrix includes all CNAs,

<sup>3</sup>This percentage is a country-defined level based on the results of the stakeholder mapping to highlight disparities in action coverage.

# What is both the geographic and beneficiary coverage of actions?

Nationally, most CNAs have low population coverage, however many have high geographic coverage

**Population coverage**  
% of target population reached



- Low geographic and population coverage**  
*Scaling up discussion should involve how to reach more people in more places*
- High geographic coverage and low population coverage**  
*Scaling up discussion should involve how to reach more people in the places where the action is already taking place*
- High geographic coverage and high population coverage**  
*How can the remaining population be reached? What lessons can be learned from actions with high coverages?*



# Summary

# Key Messages and questions

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## 1. Wide range of available stakeholders

- Wide range of stakeholders available across the actions, but few targeting social protection (only WFP involved) in comparison to the rest of the actions
- Mechanisms to reach non-traditional stakeholders should be built upon to improved financing, implementation and coordination of nutrition actions

## 2. Delivery Mechanisms and integration

- Most actions use similar delivery mechanisms, mainly through the health sector, stakeholders may need to explore, test and expand on how and what delivery mechanisms are being used

## 3. Coordination and Reporting

- Regions need to be strengthened to support availability of information on actions taking place in their areas in order to support better coordination among actors
- Data gaps are noted across regions and different actions, however mostly unavailable from Banjul, Janjabureh and Kuntaur. Are there unique challenges in these areas that need to be further explored?

## 4. Scaling Up Nutrition actions

- Overall population in Banjul and Kuntar is more likely to receive fewer nutrition action.
- Even in regions where the CNAs are taking place yet coverage remains low. Further analysis may be needed to understand barriers to reaching larger population.

## 5. Learning and Integration

- In many regions three CNAs (vitamin A among women, IPT and Small ruminant and poultry) have both high geographic coverage and population coverage compared to other actions – are there best practices that can be learned from and used in reaching beneficiaries with other actions?

# Annex

## List of stakeholders and stakeholder abbreviations (1 of 3)

Full Name	Short Name	Organization type
Abundance Funds (US)	Abundance Funds (US)	NGO
Africa Development Bank	ADB	Bilateral/Multilateral organization
Africa Muslims Agency	AMA	NGO
AGENCY FOR THE DEVELOPMENT OF WOMEN AND CHILDREN	ADWAC	NGO
Allianza Por Solidaridad LUSH UK	Allianza Por Solidaridad LUSH UK	NGO
Association of Country women of the World	Association of Country women of the World	NGO
Association of Farmers Educators and Traders	AFET	NGO
Campaign for development and solidarity	FORUT	NGO
Catholic Relief Services	CRS	NGO
Child Fund	CF	NGO
Church World Service	CWS	NGO
Department of Agriculture (PSU FTS HTS)	DoA	Government
Department of Fisheries	DoF	Government
Department of livestock (DLS)	DLS	Government
Eastern Mennoinite Association	Eastern Mennoinite Association	NGO
EC/Lottery Fund	EC/Lottery Fund	NGO
European Union	EU	Bilateral/Multilateral organization
Abundance Funds (US)	Abundance Funds (US)	NGO
Africa Development Bank	ADB	Bilateral/Multilateral organization

## List of stakeholders and stakeholder abbreviations (2 of 3)

Full Name	Short Name	Organization type
Food and Agriculture Organization	FAO	UN agency
Freedmon From Hunger Campaign	FFHC	NGO
Fresh Start Foundation	FSF	NGO
Future In our Hands	FIOH	NGO
Gambia 4H	4H	NGO
Gambia Food And Nutrition Association	GAFNA	NGO
Gambia Red Cross Society	GRCS	NGO
Health Promotion and Development Organization	HEPDO	NGO
Humanity First UK	Humanity First UK	NGO
IFAD	IFAD	UN agency
International relief and development	IRD	NGO
Kombo East Tesito Association	KETA	NGO
Mennonite Educational & Horticultural Development Associates	MEHDA	NGO
Methodist Mission Agriculture Program	MMAP	NGO
Ministry of Agriculture	MoA	Government
Ministry of Basic and Secondary Education	MoBSE	Government
Ministry of Education Directorate (SAFMU)	SAFMU	Government
Ministry of Health and Social Welfare	MoHSW	Government
Ministry of Local Government and Land	MoLGL	Government
Ministry of Water Resorce and Environment	MoWRE	Government
National Disaster Management Agency	NDMA	Government
National Malari Control Program	NMCP	Government

## List of stakeholders and stakeholder abbreviations (3 of 3)

Full Name	Short Name	Organization type
Project Aid -Germany	Project Aid -Germany	NGO
Regional Agriculture Directorate	RAD	Government
Reproductive Health Department	RHD	Government
Rural Development Organisation	RDO	NGO
SIDA	SIDA	NGO
SOS village	SOS	NGO
Spanish Red Cross	Spanish Red Cross	NGO
Stiftung Sabablou	Stiftung Sabablou	NGO
Trust agency for Rural Development	TARUD	NGO
UNHCR	UNHCR	UN agency
United Methodist Committee on Relief	UMCOR	NGO
United Nation Childrens Fund	UNICEF	UN agency
United Purpose (Concern Universal)	UP	NGO
United Purpose (Concern Universal)	UP	NGO
USDA	USDA	Bilateral/Multilateral organization
Womens Health Productivity & the environment	BAFROW	NGO
World Bank	World Bank	Bilateral/Multilateral organization
World Food Program	WFP	UN agency
World Health Organization	WHO	UN agency
Wuli and Sandu Developemnt Agency	WASDA	NGO