

SMART

2015 YEAR IN REVIEW



VALID NUTRITION EVIDENCE MAKE

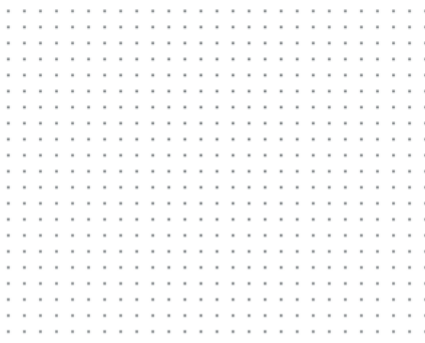
SMART Methodology: Advancing technical response capacity of nutrition partners

SMART Methodology is the reference and standard tool amongst organisations and governments collecting nutrition assessment data, both during emergencies and in developing contexts.

We recognize that the availability of high quality nutrition data is essential in understanding the extent of nutritional needs of a given population. Over the past 10 years, SMART has supported the availability of timely and credible nutrition and mortality data, presented in accessible ways at national and subnational levels. Representative and accurate data from SMART is used in national nutrition and health programming to address needs and guide the response of governments and other actors. Hence, valid nutrition data and evidence make the difference.

Action Against Hunger Canada has been the inter-agency project convener for the SMART Methodology (Standardized Monitoring and Assessment of Relief and Transitions) since 2009.

This annual review presents the actions SMART has taken in 2015 to provide decision-makers with the ability to collect reliable and accurate nutrition and mortality data.



DATA AND THE DIFFERENCE



VOJTA VANCURA (BURKINA FASO)

SMART STRATEGY 2015-2017

SMART supports key nutrition stakeholders by enhancing response capacity in emergencies, development settings and displaced populations, and in high-risk contexts with an absence of reliable data. SMART also provides support by ensuring coordination and dissemination of information around the methodology and advancing technical capacity to conduct SMART surveys.

This three year strategy for SMART, which extends from 2015 to 2017, aims to improve the quality of technical and response capacity of nutrition stakeholders, with a particular focus on Africa, the Middle East and South Asia. It also contributes to Action Against Hunger's International Strategic Plan (ISP) 2016-2020 and the plan's overarching goals that focus on improved program quality and impact through provision of timely and quality nutrition situation analysis and monitoring.

As a member of the Strategic Advisory Group of the Global Nutrition Cluster (GNC) since 2015, and the GNC itself since 2009, SMART actively coordinates with humanitarian organisations at global, regional and national levels.

SMART's strategic plan centres on four core pillars of engagement, as shown in the chart below.



TECHNICAL COORDINATION

SMART engages global nutrition assessment stakeholders

Through continued interaction with the SMART Technical Advisory Group (TAG) and Centers for Disease Control and Prevention (CDC) as well as with the Global Nutrition Cluster (GNC) and SMART Assessment Working Group (AWG) members, SMART ensures that all stakeholders are informed of improvements and developments to the methodology, lessons learned and good practices are shared, and continue to be the technical point of contact for various stakeholders, a function that requires strong coordination.

2015	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
GLOBAL						
REGIONAL						
NATIONAL						

East Africa Regional SMART Assessment Working Group Meeting
NAIROBI, KENYA

TAG Meeting
LONDON, UK

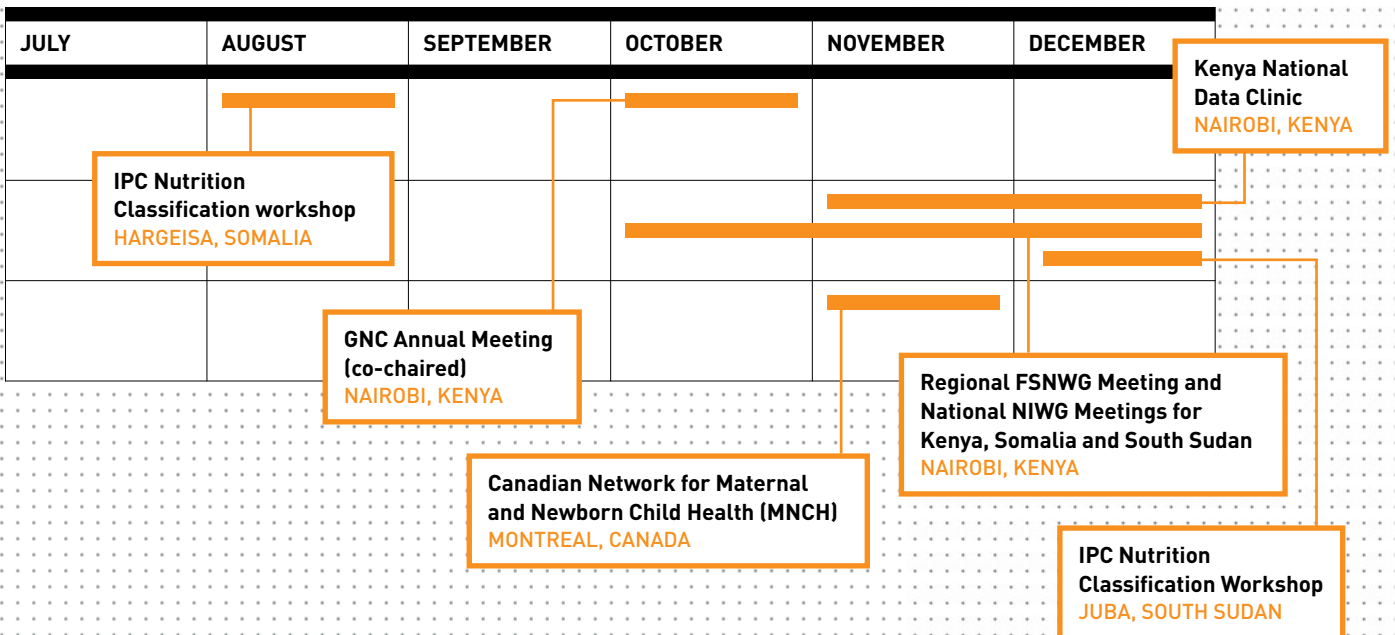
SMART Global AWG Meeting
LONDON, UK

GNC Working Meeting
GENEVA, SWITZERLAND

South Sudan NIWG Information Session
JUBA, SOUTH SUDAN



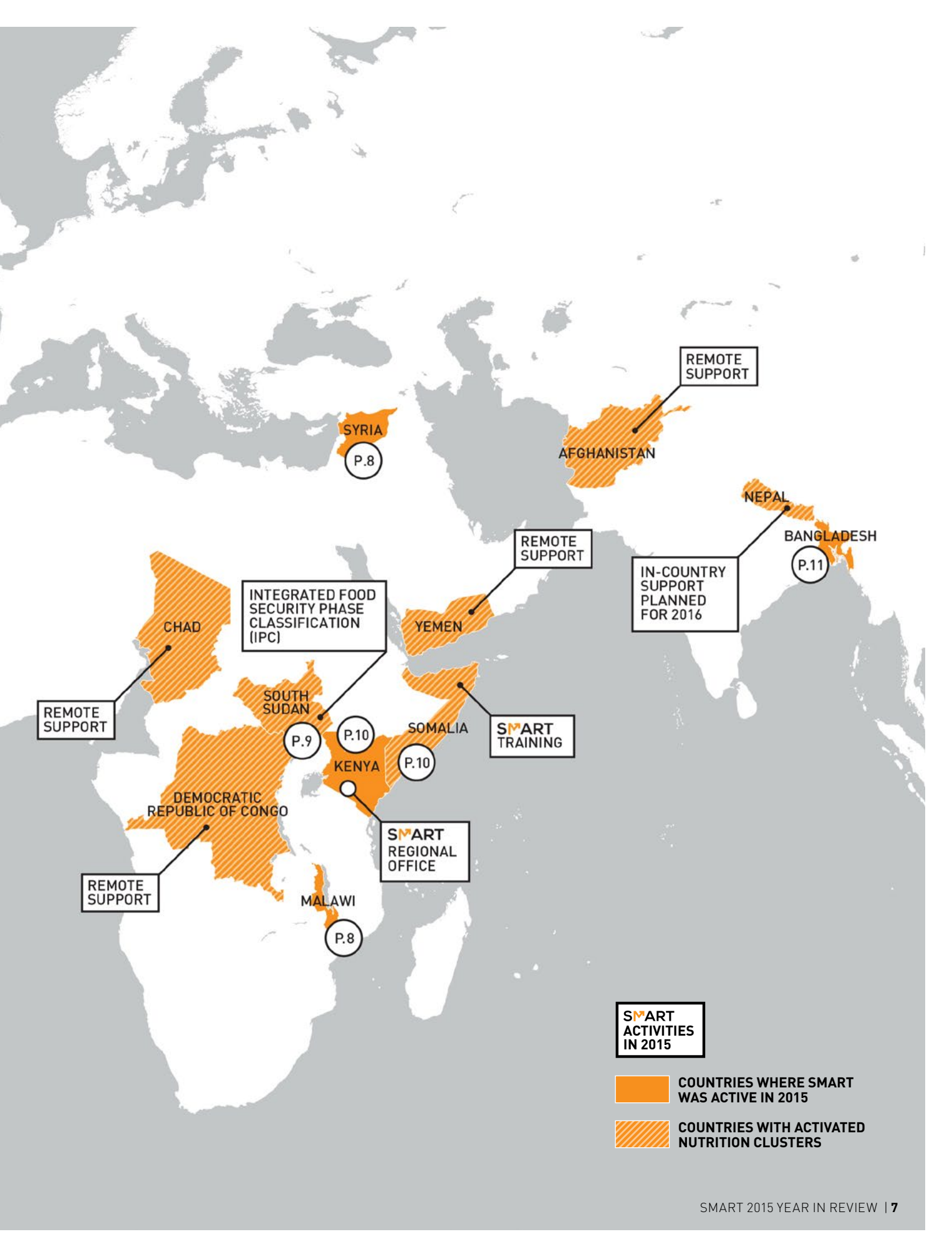
NICHOLE SOBECKI (PAKISTAN)



SMART IN 2015

SMART provides global technical support for nutrition stakeholders and shares technical improvements and developments to the methodology





REMOTE SUPPORT

REMOTE SUPPORT

INTEGRATED FOOD SECURITY PHASE CLASSIFICATION (IPC)

SMART REGIONAL OFFICE

SMART TRAINING

REMOTE SUPPORT

IN-COUNTRY SUPPORT PLANNED FOR 2016

REMOTE SUPPORT

SYRIA
P.8

AFGHANISTAN

NEPAL

BANGLADESH
P.11

CHAD

YEMEN

SOUTH SUDAN
P.9

SOMALIA
P.10

KENYA
P.10

DEMOCRATIC REPUBLIC OF CONGO

MALAWI
P.8

SMART ACTIVITIES IN 2015

- COUNTRIES WHERE SMART WAS ACTIVE IN 2015
- COUNTRIES WITH ACTIVATED NUTRITION CLUSTERS

EMERGENCY SURV

Emergency Survey Support (ESS) can be deployed to rapid-onset emergencies, protracted crises, or areas lacking up-to-date nutrition information

Emergency Survey Support (ESS) is a means to provide remote or on-ground technical expertise for the coordination and implementation of nutrition surveys. This enables the production of standardized and high quality nutrition data during humanitarian crises or in high-risk nutrition situations with an absence of data. At the same time, it builds local capacities to conduct SMART surveys.

While many organisations have significantly committed to building their internal capacities for conducting nutrition surveys and support in data validation, the SMART Global Project bridges the gaps that still exist for this high level of technical expertise needed to guarantee response capacity in emergency contexts. With increasing numbers of natural disasters and protracted crises in various regions globally, ESS remains a flexible survey support function to address urgent and emerging field challenges.

MALAWI

Providing support to flood-affected areas

The Government of Malawi declared an emergency in early 2015 as heavy rains triggered severe flooding in 15 of the country's 28 districts. Over one month, the floods displaced more than 300,000 people, with the destruction of agriculture having a broader impact on an estimated 1.15 million people nationwide.¹ Experts presumed that the floods increased vulnerability of the affected population; however, the most recent average national Global Acute Malnutrition (GAM) prevalence was based on several reports

dating from 2010 to 2013. Although the lead technical partner responsible for supporting nutrition surveys had not been previously trained in SMART, updated nutrition information was required to determine the prevalence of GAM post-flooding, and to guide the planning of any necessary nutrition-related interventions.

In light of the emergency and technical gaps identified in country, SMART, in collaboration with UNICEF Malawi, agreed to develop the capacity of technical partners in order to conduct SMART surveys in flood-affected areas. In April, 15 participants representing seven organisations attended a SMART training in Blantyre, Malawi. SMART provided additional technical support for the survey protocol and questionnaire development, as well as remote support for anthropometric data analysis based on survey results.

SYRIA

SMART surveys in conflict zones

The ongoing conflict in Syria, which began in March 2011, has aggravated pre-existing nutritional concerns following diminished food and water security, sanitation, and health care services. The completion

of a successful SMART survey in one governorate of Syria in 2014 indicated that, with proper training and logistics, high quality SMART surveys are feasible inside conflict zones.

Following the 2015 Syria strategic response plan, focusing on better understanding and monitoring of the nutrition situation, local nutrition stakeholders requested that SMART provides technical support for the planning, training and data quality assessment of nutrition surveys. SMART provided this support to the local organisations leading the surveys, building on previously existing capacity in SMART. This included Field Supervisor training to 20 participants representing five organisations. SMART facilitated an additional Training of Trainers (ToT) for eight individuals who were responsible for coordination and field supervision of the two surveys. This one-day training allowed SMART to provide further guidance regarding how to facilitate an enumerator training inside Syria prior to the start of data collection.

SMART also provided remote support to the project coordinator and survey managers throughout data collection phase of both surveys. Once in the field, continuous direct supervision of survey teams during data collection was not always possible due to security risks. However, mobile sharing of images allowed for constant communication between enumerators and survey managers to verify potential cases of malnutrition in the field. Results from both governorate surveys showed low GAM prevalence according to WHO classification; further follow-up surveys will continue to monitor the nutrition situation and Infant and Young Child Feeding (IYCF) inside Syria.

1. IFRC (2015). EMERGENCY APPEAL OPERATIONS UPDATE MALAWI: FLOODS

KEY SUPPORT

SOUTH SUDAN

Up-to-date nutrition information in crisis

Conflict in South Sudan continues to cause deep suffering and humanitarian needs for civilians in large parts of the country.² The Integrated Food Security Phase Classification (IPC) is a set of standardized tools that aims to provide a “common currency” for classifying the severity and magnitude of food insecurity.³ This process requires consensus of the various stakeholders from sectors including agriculture, food security, water and sanitation, as well as health and nutrition. SMART has supported the IPC process in South Sudan since 2014 by engaging with stakeholders at the Nutrition Information Working Group (NIWG) to ensure good quality nutrition information is available and utilized in IPC analyses.

Given the nature of the ongoing crisis in South Sudan and the importance of having validated nutrition data for both surveillance and programmatic purposes, SMART provided technical guidance to the IPC workshop in Juba, South Sudan, in December 2015. Unlike other ESS deployments, this was unique in nature due to the scope of activity, which was primarily technical support to the IPC process. The workshop included more than 30 participants from various organisations, including government ministries, UN agencies (WFP, FAO, UNICEF, WHO) and NGOs (WVI & Action Against Hunger). Experts reviewed nutrition data from the Food Security and Nutrition Monitoring System (FSNMS) and SMART surveys and used them in the IPC analysis to classify the overall nutrition situation by state, as well as to develop key nutrition messages for the country.

2. OCHA (2015). GLOBAL HUMANITARIAN OVERVIEW 2016

3. IPC (2016). WWW.IPCINFO.ORG



Action Against Hunger SET officer on his way to a sampled village in South Sudan.

RAPID SMART

NUTRITION SURVEILLANCE IN EMERGENCY CONTEXTS: SOUTH SUDAN CASE STUDY, FIELD EXCHANGE 50TH EDITION AUGUST 2015

Reliable nutrition data are critical to assess and respond to a crisis, but are often lacking due to resource and population access constraints. Monitoring change over time is particularly challenging.

SMART, Action Against Hunger, CDC and UNICEF launched nutrition surveillance activities in South Sudan in mid-2014 due to a deteriorating crisis there. Action Against Hunger launched the Surveillance and Evaluation Team (SET), funded by UNICEF and with technical support from CDC and SMART, to monitor the nutrition status of the population, provide the foundation for a nutrition monitoring system, and provide technical support to nutrition partners. Rapid SMART was the survey method used for surveillance in various counties given the high levels of insecurity. Challenges in undertaking these Rapid SMART surveys included lack of accurate population data, difficulties in access and logistics to remote areas, and lack of in-agency technical survey capacity. The implementation of the SET model in South Sudan convincingly demonstrated that high quality, representative anthropometry data can be obtained even in the midst of an ongoing conflict using the Rapid SMART method.

SMART LEARNING

SMART has a proven track record for providing high-quality technical capacity building

SMART IN ACTION

SOUTH SUDAN

OBJECTIVE To contribute to strengthening the NIWG through capacity building and technical support to partners with existing programs and the need to conduct nutrition surveys.

- Juba, South Sudan
- May 2015
- 21 participants representing 16 organisations

SOMALIA

OBJECTIVE To enhance the capacity of relevant Somalia delegation field staff in conducting nutrition surveys and provide assistance to partners undertaking surveys in their respective operational areas.

- September 2015
- In partnership with ICRC
- 13 participants from ICRC Somalia Delegation field staff (Departments of Health, Detention and Economic Security)

CAPACITY BUILDING IN 2015

GLOBAL REACH OF SMART LEARNING

152

TOTAL PARTICIPANTS IN 2015

SMART PARTICIPANTS BY GENDER

61% MALE

39% FEMALE

SMART PARTICIPANTS BY REGION

76 EAST AND SOUTHERN AFRICA

37 ASIA AND THE MIDDLE EAST

20 WEST AND CENTRAL AFRICA

19 SOUTH AND CENTRAL AMERICA

KENYA

Master Trainer Course

Master Trainers are a sustainable cohort of technical professionals that co-facilitate trainings and build capacity in SMART Participants in the 2015 East Africa Regional SMART Assessment Working Group Meeting noted the need to strengthen technical expertise in the region.

Hence, Action Against Hunger facilitated its fourth SMART Master Training in March 2015. Facilitators held the training in Nairobi in March to increase the pool of SMART master trainers in the region. Led by SMART East Africa Regional office with support from Action Against Hunger's Training Centre, nine participants representing eight organisations from across East Africa attended the training. By focusing on adult learning and participatory methods, the Master Training provided participants with the skills and tools to design and implement interactive training programs and reinforced their SMART skills.

Survey Manager Training

Survey Managers are responsible for planning and managing a survey from start to finish while ensuring diligent supervision of team members in the field.

OBJECTIVE To support WVI in meeting the capacity gaps highlighted in the East African region and break their dependency on consultancies to provide timely, representative, high quality nutritional assessments.

- Nairobi, Kenya
- February 2015
- In partnership with World Vision International (WVI)
- 18 participants from eight countries



SENEGAL

A partnership between SMART and SENS

Recurring shocks, including food price rises, droughts and influxes of displaced persons, often affect the Sahel region of West and Central Africa. With the ongoing refugee crisis due to conflict in the Central African Republic, Nigeria, Chad and Cameroon, UNHCR, in partnership with SMART, planned a training in French for these regions. A synergy exists between Standardized Expanded Nutrition Survey (SENS) and SMART. UNHCR developed SENS Guidelines for nutrition assessments for use in refugee settings; sampling, analysis and field procedures for anthropometry in SENS are undertaken using the SMART methodology. SMART recommends the use of SENS tools for the inclusion of additional variables in SMART surveys.

Funded by UNHCR and co-facilitated by SMART, 19 participants representing seven organisations attended the inter-agency regional training held in Dakar, Senegal, in August. The Regional Office of UNICEF for West and Central Africa assisted in the organisation of the training and the provision of anthropometry material.

SMART PARTICIPANTS BY SECTOR

94

NGO

23

UN AGENCY

22

GOVERNMENT

6

ACADEMIA

4

OTHER

2

DONOR

1

CONSULTANT

BANGLADESH

OBJECTIVE To improve the level of technical capacity to carry out nutrition surveys and enhance the quality of anthropometric data collected in Bangladesh through capacity-building of nutrition cluster partners responsible for SMART Methodology assessments.

- Dhaka, Bangladesh
- November 2015
- In partnership with Action Against Hunger Bangladesh and UNICEF and the National Nutrition Cluster
- 17 participants representing 13 organisations

GUATEMALA

SMART in Latin America and Caribbean: focus on chronic malnutrition

A learning needs analysis conducted by SMART in 2013 identified a lack of individuals with the skills to undertake nutrition surveys that collect anthropometric and mortality data in Latin America and Caribbean (LAC). Significant stunting prevalence exists in the region, with 48% of the population identified as chronically malnourished in Guatemala (UNICEF, 2014). Coupled with cyclical droughts, irregular rains and reduction of coffee harvest due to a fungal disease (rust), there is considerable concern that the worsening food security situation might affect the nutritional status of the population.

In February 2015, SMART facilitated a regional inter-agency training in Guatemala City, Guatemala, with 19 participants representing 12 organisations in attendance. The training strengthened the capacity of attendees and their respective organisations to respond to needs, specifically improving the regional technical capacity for nutrition surveys and enhancing the quality of anthropometric data collected in LAC. Later in March, Action Against Hunger implemented surveys in four affected livelihood zones of Guatemala's Eastern and Western Dry Corridor. Survey results showed very high chronic malnutrition (stunting) according to WHO classification. The development of SMART guidelines for using chronic malnutrition as the main indicator of a survey followed these surveys.



GONZALO HOHR (NIGERI)

“ I think that both the design and methodology are good. I didn't know SMART beforehand, but after this training I think I have a good understanding and could undertake a survey. ”

“ Very good methodology, exercises and flow of training provide a way to understand and place concepts well. ”

– GUATEMALA TRAINING PARTICIPANTS

SMART WEBSITE VISITS, DOWNLOADS AND USER DEMOGRAPHICS

27,349

TOTAL WEBSITE VISITS

16,755

TOTAL NUMBER OF DOWNLOADS

17,810

TOTAL UNIQUE VISITING USERS

1,782

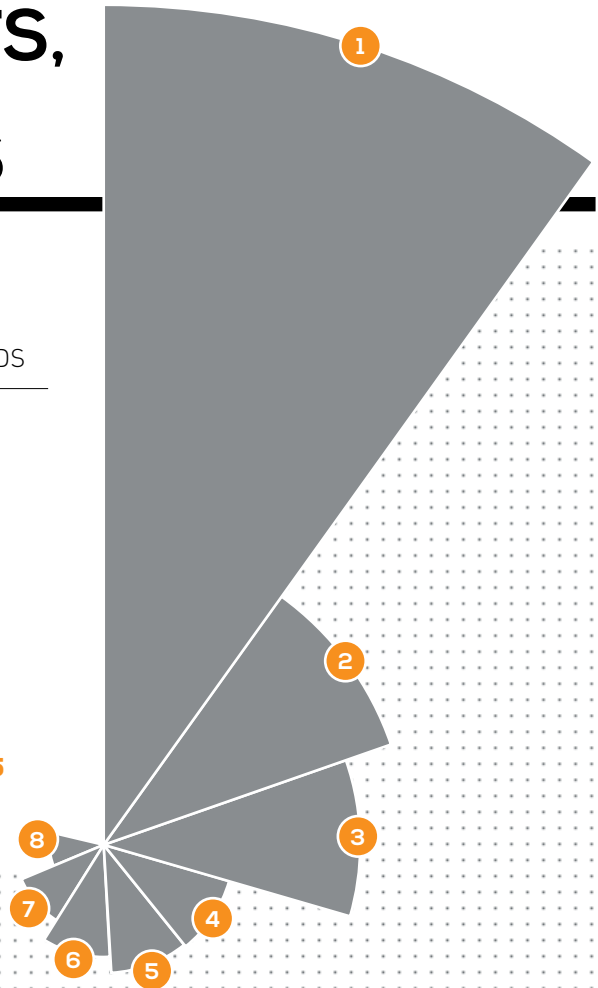
TOTAL NUMBER OF UNIQUE ORGANISATIONS

143

TOTAL COUNTRIES USING DOWNLOADS

DOWNLOADS BY SECTOR

1. INTERNATIONAL NGO **7,330**
2. ACADEMIC INSTITUTION (INC. STUDENTS) **2,664**
3. UN AGENCY **2,243**
4. GOVERNMENT (NATIONAL OR REGIONAL) **1,123**
5. CONSULTANT **1,141**
6. NATIONAL, REGIONAL OR LOCAL NGO **985**
7. RESEARCH INSTITUTION **785**
8. HUMANITARIAN NETWORK **484**



SMART COMMUNITY

Online Users of the SMART Learning Toolbox

International Non-Governmental Organisations

ACDI/VOCA
 Action Against Hunger/
 Action contre la Faim
 (ACF)
 Adventist Development
 and Relief Agency
 (ADRA)
 African Development
 Solutions (Adeso)
 Aga Khan Foundation
 (AKF)
 Agency for Technical
 Cooperation and
 Development (ACTED)
 Alimentación
 Alliance for International
 Medical Action (ALIMA)
 Amref Health Africa
 Asian Disaster
 Preparedness
 Center (ADPC)
 BRAC
 Canadian International
 Medical Relief
 Organization (CIMRO)
 CARE
 Caritas Internationalis
 Catholic Relief Services
 (CRS)
 Centre for Affordable
 Water and Sanitation
 Technology (CAWST)
 Clinton Health Access
 Initiative (CHAI)
 Comitato Collaborazione
 Medica (CCM)
 Concern Worldwide
 (CWW)
 Cooperative for
 Assistance and Relief
 Everywhere (CARE)
 Cooperazione e Sviluppo
 (CESVI)
 Cooperazione
 Internazionale (COOPI)
 Coordinamento delle
 Organizzazioni per
 il Servizio Volontario
 (COSV)
 Dan Church Aid (DCA)
 Danish Refugee Council
 (DRC)
 Family Health
 International 360
 (FHI 360)
 Feed the Children
 FINCA International
 Food for the Hungry
 International (FH)
 Foundation for
 International
 Development/Relief
 (FIDR)

French Institute
 for Public Health
 Surveillance (InVS)
 Global Alliance for
 Improved Nutrition
 (GAIN)
 Global Communities
 GOAL
 Gorta Self Help Africa
 Health Poverty Action
 Helen Keller
 International (HKI)
 Help – Hilfe zur
 Selbsthilfe e.v. (Help e.V.)
 HelpAge International
 ICAP at Columbia
 University
 iDE (International
 Development
 Enterprises)
 Interchurch Organization
 for Development
 Cooperation (ICCO)
 International Emergency
 and Development Aid
 (IEDA Relief)
 International Medical
 Corps (IMC)
 International Orthodox
 Christian Charities
 (IOCC)
 International Relief
 & Development (IRD)
 International Rescue
 Committee (IRC)
 INTERSOS
 Islamic Relief Worldwide
 (IRW)
 Johanniter International
 Assistance
 John Snow, Inc. and JSI
 Research & Training
 Institute, Inc. (JSI)
 Joint Aid Management
 International (JAM)
 Magna Children
 at Risk (MAGNA)
 Malaria Consortium
 Medair
 Médecins Du
 Monde (Mdm)
 Médecins Sans
 Frontières/Doctors
 Without Borders (MSF)
 Mercy Corps
 Merlin
 Micronutrient
 Initiative (MI)
 Muslim Aid
 Norwegian Church Aid
 Norwegian Refugee
 Council (NRC)
 Oxfam
 Partners in Health (PIH)
 PATH

People in Need (PIN)
 Physicians Across
 Continents (PAC)
 Plan International
 Population Services
 International (PSI)
 Proyecto CERO ONG
 Internacional
 Relief International
 Samaritan's Purse
 Save the Children
 International (SCI)
 Secours Islamique
 France
 Solidarités International
 Syrian American Medical
 Society (SAMS)
 Syrian Expatriate
 Medical Association
 (SEMA)
 Tearfund
 Terre des hommes (Tdh)
 The Hunger Project
 Valid International
 Voluntary Service
 Overseas (VSO)
 Welthungerhilfe
 World Concern
 World Relief
 World Vision
 International (WVI)
 Zerca y Lejos ONGD

National, Regional or Local Non-Governmental Organisations

Access Development
 and Relief Organization
 (ADRO)
 AFIA Santé
 Aged and Children
 Pastoralists Association
 (ACPA)
 Aide Au Développement
 Gembloux (ADG)
 Al Massar
 Apnalaya
 Asociación Nacional
 Ecumenica de
 Desarrollo (ANED)
 Association for Rural
 Development (ARD)
 Association pour
 la Promotion de la
 Femme et de l'Enfant
 (ASSOPROFEN)
 Associazione Studio
 Paziente Immuno
 Compromesso onlus
 (ASPIC)
 Avantha Foundation
 Bangladesh National
 Woman Lawyers'
 Association (BNWLA)

Catholic Church–
 Integrated Community-
 based Development
 Program (CC-ICDP)
 Center for Development
 and Disaster
 Management Support
 Service (CDDMASS)
 Center of Excellence
 for Rural Development
 (CERD)
 Centre de Sante de
 Reference (CSREF)
 Centre for Children's
 Happiness (CCH)
 Centre for Counselling,
 Nutrition and Health
 Care (COUNSENUH)
 Centre for Disability in
 Development (CDD)
 Centre pour la
 Promotion du Monde
 Rural (CEPROMOR)
 Charitable Society for
 Social Welfare (CSSW)
 Child Rights
 and You (CRY)
 Child Rights
 Connect (CRC)
 Child Rights
 Foundation (CRF)
 Chuny Thuolo
 Group (CTG)
 Community Appraisal &
 Motivation Programme
 (CAMP)
 Community Children
 Organisation (COCO)
 Community Health and
 Development (CHADO)
 CooEsperanca
 Deepak Foundation
 Development Fund (DF)
 Disaster Prevention
 and Food Security
 Programme and
 Coordination Office
 (DPFSPCO)
 Disaster Risk
 Management and
 Food Security Sector
 (DRMFSS)
 Ekjut
 Eminence Associates
 for Social Development
 (EASD)
 Fight Hunger Foundation
 First Step Cambodia
 FOCUS 1000
 Graines de Paix
 Hand in Hand India
 HANDS Pakistan
 Health for All
 Foundation (HAF)
 Health Link
 South Sudan

Health Organization
 for Mindanao (HOM)
 Health Oriented
 Preventive Education
 (HOPE)
 Health Reform
 Foundation of Nigeria
 (HEFRON)
 Health Strategy and
 Delivery Foundation
 (HSDf)
 HealthNet Afghanistan
 Jan Sahas Social
 Development Society
 John Dau Foundation
 KISIMA Peace and
 development
 Mother and Children
 Development Aid
 (MACDA)
 Nepali Technical
 Assistance Group (NTAG)
 Nile Hope
 Philani
 PIACT Bangladesh
 Protecting Families
 Against HIV/AIDS
 (PREFA)
 Pure Heart
 Foundation (PHF)
 Rafiki Wa Maendeleo
 Trust (RWMT)
 Rajiv Gandhi Charitable
 Trust (RGCT)
 Rangpur Dinajpur
 Rural Service (DRRS)
 Rebecca Mbok
 Foundation (RMF)
 Reliance Foundation
 Reproductive and Child
 Health Alliance (RACHA)
 Rescue Initiative–
 South Sudan
 Shabelle Relief
 and Development
 Organization (SHARDO)
 Shanti Ashram
 SHBC Swaziland
 Society for Nutrition,
 Education & Health
 Action (SNEHA)
 Solutions For Humanity
 International (SFH)
 Somali Rehabilitation
 & Development Agency
 (SORDA)
 Support Health and
 Integrated Development
 Organization
 (SHIDO-Uganda)
 Système d'Alerte
 Précoce du Mali (SAP)
 THESO
 Universal Intervention
 and Development
 Organization (UNIDO)

Universal Network
 for Knowledge &
 Empowerment Agency
 (UNKEA)
 Unnayan Onneshan
 Urban Poverty (PNPM
 Perkotaan)
 WARDI Relief &
 Development Initiatives
 Women Peacemakers
 Program (WPP)

UN Organisations

Food and Agriculture
 Organization (FAO)
 Food Security and
 Nutrition Analysis
 Unit–Somalia (FSNAU)
 International
 Organization for
 Migration (IOM)
 United Nations
 Children's Fund
 (UNICEF)
 United Nations
 Development
 Programme (UNDP)
 United Nations
 Educational, Scientific
 and Cultural
 Organization (UNESCO)
 United Nations Office
 for Project Services
 (UNOPS)
 United Nations Office
 for the Coordination of
 Humanitarian Affairs
 (OCHA)
 United Nations Refugee
 Agency (UNHCR)
 United Nations Relief
 and Works Agency for
 Palestine Refugees in
 the Near East (UNRWA)
 World Bank
 World Food
 Programme (WFP)
 World Health
 Organization (WHO)

Academic Institutions

Abia State University
 Addis Ababa
 University
 Aga Khan University
 Ahfad University
 Ahfad University
 For Women
 Ahmadu Bello
 University, Zaria
 Ain Shams University
 Aksum University
 American University
 of Beirut

SMART thanks all of the organizations, agencies, partners and more who have accessed our various survey planning tools

Ateneo de Zamboanga University
 Avinashilingam University
 Bahir dar University
 Bangladesh Agricultural University
 Bangladesh University of Health Sciences
 Brac University
 Brawijaya University
 Central Philippine University (CPU)
 Central University of Orissa
 Chiang Mai University
 Columbia Global Centers
 Columbia University
 Dedan Kimathi University of Technology
 École de Santé Publique de Kinshasa
 École Nationale de la Statistique et de l'Administration Economique (ENSAE)
 Emory University
 Ghent University
 Great Lakes University of Kisumu
 Haramaya University
 Harvard University
 Hawassa University
 Institut National de la Statistique
 Institut Pasteur
 Iqra University
 Istanbul University
 Istituto Universitario di Studi Superiori di Pavia (IUSS)
 Jahangirnagar University
 Jaramogi Oginga Odinga University of Science and Technology
 Johns Hopkins School of Public Health (JHSPH)
 Jomo Kenyatta University
 Karolinska Institutet
 Kenya Methodist University
 Kenyatta University
 Kyambogo University
 Lilongwe University of Agriculture and Natural Resources (LUANAR)
 London School of Economics and Political Science (LSE)
 London School of Hygiene and Tropical Medicine (LSHTM)

Makerere University
 Massachusetts General Hospital
 Mawlana Bhashani Science and Technology University (MBSTU)
 McGill University/
 Université McGill
 PSG College of Arts and Science
 Qatar University
 Queen's University
 Raghavendra Institute of Pharmaceutical Education and Research
 St. John's University of Tanzania
 Tata Institute of Social Sciences (TISS)
 Tufts University
 Tulane University
 Udayana University
 University of Guelph
 University of Sydney
 Universidad de Barcelona
 Universidad de San Carlos de Guatemala
 Universidad Galileo
 Universidad Peruana de Ciencias Aplicadas
 Universidad Rafael Landívar
 Universitas Muhammadiyah Surakarta
 Université Abdou Moumouni
 Université Catholique d'Afrique Centrale
 Université catholique de Louvain (UCL)
 Université Cheikh Anta Diop de Dakar-Sénégal (UCAD)
 Université d'Abomey-Calavi (UAC)
 Université de Dschang
 Université de Genève
 Université de Lomé
 Université de Lubumbashi
 Université de Montpellier
 Université de Montreal (UdeM)
 Université de Ouagadougou
 Université de Yaoundé
 Université Libre de Bruxelles
 Université Lille 1
 Université Lyon 1 (UCBL)

Université Senghor d'Alexandrie
 University at Albany, State University of New York (SUNY)
 University College Dublin (UCD)
 University of Bonn
 University of Delhi
 University of Dhaka
 University of Dodoma
 University of Eastern Finland
 University of Florence
 University of Florida
 University of Groningen
 University of Heidelberg
 University of Ibadan
 University of Johannesburg
 University of Juba
 University of KwaZulu-Natal
 University of Leeds
 University of Malawi
 University of Melbourne
 University of Moratuwa
 University of Nairobi
 University of Ottawa
 University of Oviedo, Spain
 University of Pennsylvania
 University of Port Harcourt
 University of Reading
 University of Rwanda
 University of Southampton
 University of Southern Mindanao
 University of Sydney
 University of Tokyo
 University of Valencia
 University of Waterloo
 University of Westminster
 University of Zalingei
 University of Zambia
 University of Zimbabwe
 Uppsala University
 Virginia Tech
 Wageningen University
 Walden University
 Wayamba University of Sri Lanka
 Wolaita Soddo University

Research Institutions or Health Care Providers

Epicentre
 Centre for Research on the Epidemiology of Disasters (CREDE)
 Food and Nutrition Research Institute (FNRI)
 Institut National de Recherche en Santé Publique
 International Centre for Diarrhoeal Disease Research, Bangladesh (icddr,b)
 International Development Research Centre (IDRC)
 International Food Policy Research Institute (IFPRI)
 Kenya Medical Research Institute (KEMRI)
 National Institute of Nutrition (NIN)
 National Nutrition and Food Technology Research Institute (NNFTRI)
 Tata-Cornell Agriculture and Nutrition Initiative
 The Hospital for Sick Children (Sick Kids)/ Centre for Global Child Health
 Zambia Center for Applied Health Research and Development (ZCAHRD)

Humanitarian Networks

Active Learning Network for Accountability and Performance in Humanitarian Action (ALNAP)
 African Centre for Global Health and Social Transformation (ACHEST)
 CORE Group
 Emergency Nutrition Network (ENN)
 International Baby Food Action Network (IBFAN)
 International Red Cross and Red Crescent Movement (ICRC)
 Millennium Villages Project
 Scaling Up Nutrition Civil Society Network (SUN CSN)

Consultancies, Foundations or Independents

AAC Consulting
 Akouto Consulting
 Altai Consulting
 Bibliant Foundation
 Bill and Melinda Gates Foundation
 Biostat Global Consulting
 Brixton Health
 Clinton Foundation
 Colibri Consulting
 Consultant Social Group
 DVTECH
 E Hadassah consultants
 eCurious
 FAGO Health Consult
 Forcier Consulting
 Forshung Consulting
 Futures Group
 Global Fund
 Hadassah consultant
 ICF International
 IFRC consultant
 Independent
 KnowledgeOne Inc.
 Le Monde Health and Development Consultancy PLC
 mFieldwork
 Nutriset
 Primus Africa
 Public Health Foundation of India (PHFI)
 Rankstat Africa
 SECOBA Consultancy Services
 The Khana Group
 The KonTerra Group
 WAPCOS Ltd.
 World in Consulting (WiC)

Governments

Administration for Refugee and Returnee Affairs (ARRA)
 Afghan Health and Development Services (AHDS)
 Centers for Disease Control and Prevention (CDC)
 Department for International Development (DFID)
 Disaster Risk Management and Food Security Sector Ethiopia (DRMFSS)

Ethiopian Public Health Institute (EPHI)
 European Commission Humanitarian Aid and Civil Protection (ECHO)
 Famine Early Warning Systems Network (FEWS NET)
 Food Security Technical Secretariat (FSTS)
 Gesellschaft für Internationale Zusammenarbeit (GIZ)
 Ghana Health Service (GHS)
 Global Affairs Canada (GAC)
 Institut National de la Statistique et de la Démographie (INSD)
 Japan International Cooperation Agency (JICA)
 La Fundacion Internacional y para Iberoamerica de Administracion y Politicas Publicas (FIIAPP)
 Ministry of Health/Ministère de la Santé (MoH)
 National Bureau of Statistics (NBS)
 National Council for Population and Development (NCPD)
 National Disaster Management Authority (NDMA)
 Nepal Health Sector Support Programme (NHSSP)
 Office of U.S. Foreign Disaster Assistance (OFDA)
 Programme Nationale de Nutrition (PRONANUT)
 Secretaria de Seguridad Alimentaria y Nutricional (SESAN)
 State Ministry of Health (SMOH)
 Tanzania Food and Nutrition Centre (TFNC)
 United States Agency for International Development (USAID)
 West African Health Organisation (WAHO)

Acknowledgements

This review is made possible by the generous support of the American people through the United States Agency for International Development (USAID) and technical support of the Centre for Disease Control and Prevention (CDC). The contents are the responsibility of the SMART Global Project and do not necessarily reflect the views of USAID or the United States government.



Action Against Hunger Canada / Action contre la Faim Canada
720 Bathurst St, Suite 500,
Toronto, Ontario M5S 2R4, Canada
1-416-644-1016

smartmethodology.org