Major objectives	Middle targets	Sub targets	Overall goals/Project purposes and indicator examples	Methods/Policies for setting indicators	Typical lessons learned	Reference projects
among mothers and children (stunting and wasting among children, anemia		of dietary diversity through improved nutrition knowledge and food access	nutrients in target households, improve the availability of crops containing essential nutrients by increasing income and improving household income, and improve knowledge of nutrients and nutritional balance. (Output) By increasing the diversity of foods consumed by the target households and improving their intake of essential nutrients, (Outcome) Thereby contributing to the improvement of the nutritional status of the target population. (Impact) (Indicator examples of overall goal) (1) Minimum Acceptabel Diet:MAD (2) Minimum Dietary Diversity :MDD (3) Dietary Diversity Score: DDS (4) Minimum Meal Frequency: MMF (5) Amount of specific nutrient intake (iron, iodine, protein, vitamin A, etc.) or amount of specific food intake (meat, fish, vegetables, fruits, etc.) (Indicator examples of project purposes) (1) Nutrition and food safety related knowledge and attitudes: KAP. (2) Volume of production of specific crop or food goup (meat, fish, vegetables, fruits, etc.) at the household level (3) Diversity of crops produced at the household level	In countries where Demographic Health Surveys (DHS) surveys* are conducted, indicators for MAD, MDD, and MFF are often available for children (these indicators for adults are not collected by DHS surveys). If this information is not available, a household survey should be conducted. *Operated by USAID since 1984. It surveys on health and population trends, family planning, gender, HIV/AIDs, and nutrition in developing countries. (1) MAD is a composite index of MDD and MMF, for children under 2 years old. In the case of children, it is an indicator of care provided to children by their families and caretakers. For survey methods and criteria, see References documents 1 and 2. In the case of adult women, there is a different standard (Minimum Dietary Diversity —women of reproductive age: MDD—W). For more information on survey methods and criteria, please refer to Reference documents 3. (3) For the survey method and criteria, please refer to Reference documents 4.	encourage self-consumption of the agricultural products produced (see Reference documents 8). While the main target group for improved nutrition is often vulnerable groups, the target group for activities aimed at increasing agricultural production tends to be farmers with a certain level of production capacity, which can make them inappropriate targets (an example is the Household Food Security (HFS) project at the Bangladesh National Nutrition Project (NNP)). Activities aimed at nutrition education and increasing agricultural production can be more effective by targeting women and also by combining women's empowerment activities (examples are Bangladesh, IFAD/WorldFish, Linking Fisheries and Nutrition: Promoting Innovative Fish Production Technologies in Ponds and Wetlands with Nutrient-Rich Small Fish Species in Bangladesh, and Bangladesh, USAID/CARE, Strengthening Household Ability to Respond to Development Opportunities (SHOUHARDO) project)	Capital Territory in Nigeria (February 2019–February 2024) Bangladesh, IFAD/WorldFish, Linking Fisheries and
		education and healthy dietary practices in schools	To improve the school environment to support nutrition improvement by the provision of nutrition education, nutritious meals, and school gardens in schools, (Output)	Underweight: Weight for age is at least two standard deviations below the median of the WHO Growth Reference. For WHO Growth Reference, please refer to the References documents 14.	education and training are essential, as well as the provision of balanced school lunches. Practical activities such as school gardens can be used to raise awareness about proper nutrition and health. They can also provide opportunities to learn about hand washing and personal health. Schools can also be useful as a venue for implementing nutrition-related activities such as hand washing, hygiene education, and deworming.	Bangladesh, WFP/UNICEF/FAO, MDG-F Programme (Protecting and Promoting Food Security and Nutrition for Families and Children in Bangladesh) (2010–2013) Ghana's Home Grown School Feeding (HGSF) Program(2013–2016)

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	1-2. Improvemento food security at the household level		(Proposed model description) To alleviate immediate food insecurity and improve farming techniques through financial subsidies for inputs, technical support for farming techniques, and household budget		(e.g., Bangladesh, WFP/UNICEF/FAO, MDG-F Programme). Indirect impacts could include increased enrollment and attendance rates. In Bangladesh, WFP/UNICEF/FAO, MDG-F Programme, the effect of nutrition education in schools is also seen to improve the dietary habits of students' families. As an indirect impact, it may be possible to consider including the improvement of the eating habits and nutritional status of students' families. In this case, it would be more effective to include activities such as family participation in cooking classes at school and distribution of nutrition awareness materials to families.	
	*Mainly targeting acute malnutrition		(Outputs) By maintaining food security of target households, (Outcome) Thereby contributing to the improvement of essential nutrient intake and diversification of food intake of the target households. (Impacts) (Indicator examples of overall goal) (1) Food Insecurity Experience Scale: FIES (2) Dietary Diversity Score: DDS (3) (Food Consumption Score:FCS (4)Household Food Insecurity Access Scale: HFIAS) (Indicator examples of project purposes) (1) Volume of production of specific crop or food group (meat, fish, vegetables, fruits, etc.) at the household level (2) Diversity of crops produced at the household level (3) Household income	documents 4. (3) A method of indexing dietary diversity and quantity. Please refer to Reference documents 10 for survey methods. (4) A method for indexing dietary sufficiency and psychological factors; see Reference documents 10 for survey methods.		Bangladesh, IFAD/WorldFish, Linking Fisheries and Nutrition: Promoting Innovative Fish Production Technologies in Ponds and Wetlands with Nutrient-Rich Small Fish Species in Bangladesh (2010-2013) Zimbabwe, USAID, Food Security Programme, 'Gardens for Improved Nutrition Project (2010-2011)
	1-3. Promotion of appropriate feeding practices		breastfeeding and complementary foods to parents of children under 2 years old (caretakers) as part of a comprehensive child growth promotion program for target households, (Outputs) By increasing knowledge of breastfeeding and complementary feeding among parents of children under 2 years old in the target households, (Outcomes) Thereby contributing to the improvement of breastfeeding and complementary food intake and nutritional status of children under 2 years old in the target households. (Impact) (Indicator examples of overall goal) (1) Nutritional status of children under 2 years old (stunting, wasting) (Indicator examples of project purposes)	 (1) Data may be available in countries where the Demographic and Health Survey (DHS) is conducted. The process, if required for the survey, is as follows: 1. Identify the age in months of the child under two years old. 2. measure the actual height and weight of the children under 2 years old. 3. Calculate the height/age ratio and the 	improvement activities, can be effective in improving the nutritional status of target households. In this case, building trust between the target population and health workers is essential for the sustainability of the activities. (Please refer to Evaluation Report of Lusaka District Primary Health Care Project in Zambia (Phase 2))	Care Project in Zambia (Phase 2) (July 2002–July 2007) Project for Maternal and Child Health and Nutrition Improvement in Guatemala

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			(2) Minimum Meal Frequency: MMF (3) Level of knowledge of breastfeeding and complementary feeding gained through the project's educational activities	whether the knowledge to be investigated in (3) is put into practice. An example of the simplest method is to use a checklist listing the contents taught, and ask Yes/No questions about whether the students are practicing each of them.		
	1-4. Improvement of health care services		To improve the capacity of human resources for maternal and child health and nutrition services in health care facilities, (Outputs) By improving the capacity of human resources for maternal and child health care and nutrition services in medical facilities (including nutrition education and promotion of activities in the surrounding communities), the project will improve the quality of maternal and child health care and nutrition services, (Outcome) Thereby contributing to improving the nutritional intake and nutritional status of mothers and children in the target area. (Impact) (Indicator examples of overall goal) (1) Nutritional status of children under 2 years old (stunting,	the project may be necessary. For example, if the goal of the project is to increase the number of prenatal and postnatal checkups or to provide nutrition education in medical facilities, the achievement of the goal may depend on the working environment of the health workers in charge of the checkups (health center building, equipment, etc.). In this case, it is necessary to consider increasing the possibility of achieving the goal by effectively combining the improvement of facilities and equipment through financial cooperation. In addition, when improving the capacity of health workers, synergistic effects through the development of human resource development schools should be considered.		Lusaka District Primary Health Care Project in Zambia (Phase 2) (July 2002–July 2007) Project for Maternal and Child Health and Nutrition Improvement in Guatemala (June 2016–June 2020)
	1-5. Improvement of the hygienic environment	a household hygienic environment in combination with	hand washing facilities with hand washing practices and food hygiene education, (Outputs) By improving the hygienic environment for handling food, tableware, and utensils at household, (Outcome) Thereby contributing to the reduction of morbidity from infectious diseases, food poisoning and parasites of food and oral origin. (Impact) (Indicator examples of overall goal) (1) Number (or percentage) of cases of diarrhea in children	Data on diarrhea in DHS are the number of cases within the past two weeks from the time of the survey. (Indicator examples of project purposes) It is better to check the hygiene status, which is the result of the practice, rather than whether the residents are practicing hygiene behaviors (because if it is only asked whether they are practicing the hygiene behaviors, they are likely to answer "yes"). It is necessary to check hygiene behaviors by asking the participants to reproduce the use of lavatories, washbasins, and kitchens, and also to visually check (by experts if possible) the occurrence of disease—carrying organisms.	Remind people to wash their hands by providing hand-washing stations with the necessary supplies (soap and water and alcohol-based hand sanitizers) in key locations at households, schools, health care facilities, and public spaces. (WHO, 2015) The basic food hygiene practices are (1) keeping the environment in which food is handled clean, (2) separating raw and cooked food, (3) heating food sufficiently, (4) storing food at a safe temperature, and	·

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		up to drinking water enters the mouth	management of the sanitary environment around water sources and the handling of clean drinking water (transport, use, storage, and treatment) in households in combination with the development of water supply and sanitation facilities, (Outputs) By improving the quality of water consumed in the households and ensuring it is maintained safely, (Outcome) Thereby contributing to the reduction of waterborne disease incidence from the drinking water ultimately carried to the mouths. (Impact) (Indicator examples of overall goal) (1) Number (or percentage) of cases of diarrhea in children (2) Number (or percentage) of parasites retained by children	Data on diarrhea in DHS are the number of cases within the past two weeks from the time of the survey. (Indicator examples of project purposes) It is better to check the quality of water, which is	motivations, and cost and availability of products (including spare parts and consumables).	For Guidance on drinking water quality, please refer to the References documents 13.
2.Improvement of overnutrition	2-1. Reduction of overweight and obesity among children in communities		management of the sanitary environment around water sources and the handling of clean drinking water (transport, use, storage, and treatment) in households in combination with the development of water supply and sanitation facilities, (Outputs) By improving the quality of water consumed in the households and ensuring it is maintained safely,	standard deviations above the median of the WHO Growth Reference		
	2-2. Reduction of overweight and obesity among students in schools		Output) By improving students' dietary habits (Outcome) Thereby contributing to the improvement of the nutritional status of the target students. (Impact)	(Indicator examples of overall goal) Overweight: BMI for age is greater than or equal to one standard deviation above the median of the WHO Growth Reference Obese: BMI for age is greater than or equal to two standard deviations above the median of the WHO Growth Reference For WHO Growth Reference, please refer to the reference document 12.		Malawi, GIZ, Nutrition and Access to Primary Education(2016–2022)

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2-3. Reduction of overweight and obesity in the workplace		To provide nutrition education and lunches to workers, (Output) By improving the dietary habits of workers, (Outcome)	The WHO definition of overweight and obesity for adults is as follows (www.who.int/news-room/fact-sheets/detail/obesity-and-overweight) Overweight: BMI > 25 Obese: BMI> 30.	included as a higher-level objective. The subjective health assessment is an indicator to judge the degree of physical and mental health based on	Indonesia, Workplace Nutrition in Indonesia Project, Nutrition Japan Public Private Platform(NJPPP), (2017–2020)
3. Promotion of multi-sectoral cooperation		(Proposed model description) To develop manuals for improving nutrition in target areas, strengthen the capacity of relevant ministry staff, and facilitate joint ministry nutrition improvement activities, (Outputs) By developing effective nutrition improvement approaches and building a multi-sectoral system, the project will achieve the following outputs, (Outcome) Thereby contributing to the implementation of effective multi-sectoral nutrition improvement approaches in the region. (Impact) (Indicator examples of overall goal) A new multi-sectoral nutrition improvement project is implemented in the target area based on the nutrition improvement approach developed in the project. (Indicator examples of project purposes) (1) Effective multi-sectoral approaches to nutrition improvement (where extension workers from different sectors share common goals and aim to provide nutrition services to the same target group (beneficiaries)) is developed. (2) Budget for multi-sectoral nutrition improvement activities is secured. (3) Man power for implementing multi-sectoral nutrition improvement is secured. (4) Multi-sectoral action plans are developed.		multiple sectors are achieved through the project, it is not easy to sustain the collaboration after the project. It is necessary to provide and create incentives for continuation, such as budgeting for activities through	Capital Territory in Nigeria (February 2019–February 2024)

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