Result	Activities
	IYCF programming??
Result 1  To consolidate, reinforce and promote the existing nutrition components of iCCM (e.g. nutrition counselling, screening and referral of acute malnutrition cases).	Develop and/or strengthen technical guidance to optimise the implementation of nutrition components of iCCM interventions through documentation of best practice
	Research projects to collect evidence of the impact of integrating nutrition activities into iCCM are implemented
	Integrating preventive and curative aspects of nutriiton into iCCM programming (including IYCF)
	Map out the number of countries in which acute malnutrition (MAM and/or SAM) is part of national or subnational ICCM programmes
	Identify opportunities for integrating acute malnutrition into existing ICCM programmes at scale
Result 2 To generate and promote	Identify funding needs and sources to support the integration of acute malnutrition into existing ICCM programmes at scale
evidence on the effectiveness, cost-	Identify evidence-base necessary at a global level
of treating acute malnutrition through	Jointly identify evidence needs with national health authorities and other stakeholders

iCCM	Develop reseach projects to generate the necessary evidence to address evidence gaps
	Strengthen coordination between nutrition and iCCM programmes to have common advocacy messages and to influence decission making process

Specific Activity	Countries
<ol> <li>Document if advising on continued feeding is being done</li> <li>Document if advising on feeding the sick child is effective at changing behaviour</li> <li>Expand advising to IYCF counselling</li> </ol>	DRC
1) Technical recomendations on task shifting activities 2) CHWs examples 3) Lessons learned from other iCCM intervention that did not work (learning for nutrition acitivities) 4) Document the obstacles to effective advising	DRC ( 1, 2, 3)
??	DRC
1) Examine IYCF practices and associated behaviors, provider counseling and care seeking practices for child health and nutrition, within the context of cultural beliefs and perceptions 2) ascertain the role of key influential members of the community on nutrition and child health practices 3) Examine feasibility of integrating preventive and curative aspects of nutrition into the iCCM program	DRC
Through a methology based on desk reviews and key informants interviews document document iCCM in relation to nutrition, field examples and list of countries in which AM treatment and iCCM are integrated	Global
1)Develop a proposal together with all stakeholders and partners from Mali 2) Present this proposal to key donors 3) Obtain funds to develop the scaling up	Mali
1) Contact partnrs and stake holders to understand and document the current situation and interstes in SL 2) Explore the donors interest in Sierra Leone to introduce malnutrition treatment in iCCM programs 3) Create a working group with agencies working in SL	Sierra Leone
Explore the potential of Power of Nutrition to support scalign up in Mali     Identify additional sources such as UNITLIFE	Mali
work with countries that have expressed interest in applying for Global funds to support iCCM+Nut activities	Mali and others
Continue to develop and prioritise research questions that the subgroup thinks need to be answered.	Global
Develop a list of priorities to generate evidence for iCCM and Nutrition in Kenya	Kenya

Implement different research projects through a consortium approach to better generate evidence in the different populations and contexts of Kenya	Kenya
Formative resarch on nutrition integration into iCCM (IYCF, refer and treatment for child illness, malnutrition)	DRC
Develop the simplified algorithm and low-literacy tools as part of iCCM. Implement research on feasibility and acceptability of treatment by low-literate iCCM providers (phase 1).  Develop RUTF supply chain eco-system. Implement research on impact and cost-efficiency (phase 2)	South Sudan
Continioulsy influence international forum by presenting resuts of programs integrating iCCM and nutrition activitites	US & others
Develop key advocacy documents and products that will influence decission making processes	
Include iCCM and nutrition topics in key global documents and strategies by participating in key reviews and technical advisory groups	Global

Lead Partners (&Contributors)	Time Frame
MCSP - PATH and JSI can contribute	2017
MCSP - PATH and JSI can contribute	2017
MCSP - PATH and JSI can contribute	2017
PATH and JSI - Maternal and Child Survival Program- MCSP)	April- December 2016
ACF (CMAM Forum)	7/1/2016
ACF	7/1/2016
ACF & UNICEF	
ACF & UNICEF	6/1/2016
ACF and Mali MoH	
All	12/1/2015
ACF & Save the Children	7/1/2016

ACF, Save the Children, UNICEF, WFP	1/1/2017
PATH, JSI (through MCSP)	estimated July/August 2016
IRC	Phase 1 - now until 12/17 Phase 2 - late 2017 - 2018
ALL	

Outputs & Success Criteria	Progress (to May 2016)	Next Steps
Conduct formative research used to design program in DRC, develop protocol, and tools and implement formative work	Protocol and tools developed	USAID review and IRB approval
create a list of countries in which AM treatment and iCCM are integrated	Tor created and announce in relevant website	Select and contract external consultant
Get proposal funded	Consultation in Mali done	Present proposal to donors
Document the list of research questions	completed	List the evidence gaps completed
Develop a research protocol	initial contacts done	stakeholder meeting in Nairobi in may&June

Implementation starts at field level		
data collection begins		
Phase 1 currently funded. Results of phase 1 study plus finalization of tools and treatment algorithm.  Secure phase 2 funding.		
	presented at GNR	presnet at Core group of Nutrition