



World Health  
Organization

# Planning and costing nutrition actions: the OneHealth Tool

The **OneHealth Tool** is designed to strengthen health-system analysis, strategic planning and costing. Its primary users are health planners in low- and middle-income countries. Since the tool was first disseminated in 2012, over 25 countries in Africa, Asia and Latin America have been trained in use of the tool, and have employed it for planning in the health sector, nutrition, and maternal and child health.

The **OneHealth Tool** was designed by the UN Interagency Working Group on Costing to:

- inform sector-wide strategic health planning;
- link health targets to required investments;
- estimate health impact of investments (e.g. the expected reduction in wasting and stunting), through the Lives Saved Tool (LiST) and other epidemiological modelling tools; and
- provide health planners with an integrated framework for scenario analysis, costing, health-impact analysis, budgeting and financing of strategies for all major diseases and health-system components.

WHO provides input to the development of the **OneHealth Tool**, builds capacity to use it and provides technical support to policy-makers to inform national planning and estimates of resource needs.

## What nutrition actions are included in the **OneHealth Tool**?

The **OneHealth Tool** contains default values for:

- all of the WHO Essential Nutrition Actions, to target the 1000-days window of opportunity from conception to 2 years of age; and
- other nutrition-specific and sensitive interventions recommended by WHO and delivered through the health sector; for example, water, sanitation and health (WASH), optimal timing of cord clamping and deworming.

The LiST module estimates impact on stunting, wasting and anaemia. It also estimates the impact of nutrition interventions or practices on other illness, such as the expected reduction in diarrhoea, pneumonia and sepsis as result of increased exclusive breastfeeding rates.

## How can nutrition programme managers use the OneHealth Tool?

Managers can use the **OneHealth Tool** to:

- plan, cost and prioritize nutrition programmes;
- estimate the resource needs and health impact of:
  - evidence-based nutrition actions;
  - different scaling-up scenarios;
  - new policy recommendations and protocols;
- identify health-system bottlenecks for scaling-up nutrition actions;
- plan, within the health sector, the development of human resources and the strengthening of systems for nutrition in a holistic and integrated manner; and
- produce evidence-based assessment of costs and benefits, to argue for increased investment in nutrition, especially at country level with domestic financial resources.

## OneHealth Tool screenshots from a nutrition scale-up plan projection

Management of severe malnutrition (children), community level

Medical personnel time requirements					
Staff type	Percent treated by	Note	Minutes	Number of days/visits	Total minutes
<b>Hospitalization</b>					
Nurses	100.0		60	8	480.00
Generalists/primary care doctors	100.0		45	8	360.00
<b>Follow-up</b>					
Community health workers	0.0		10	6	0.00
Nurses	100.0		10	6	60.00
<b>Total minutes</b>					<b>900.00</b>

	2015	2016	2017	Frontier coverage from Bottleneck Analysis (2017)
<b>Nutrition</b>				
<b>Pregnant and lactating women</b>				
Daily iron and folic acid supplementation (pregnant women)	81.4	90.7	100.0	63
De-worming (pregnant women)	53.7	76.8	1	
<b>Children</b>				
Breastfeeding counselling and support	75.0	87.5	1	
Vitamin A supplementation in infants and children 6-59 months	75.8	87.9	1	
Management of moderate acute malnutrition (children)	62.5	81.3	1	
Management of severe malnutrition (children)	62.5	81.3	1	
Infant feeding counselling and support in the context of HIV	62.5	81.3	1	

Management of severe malnutrition (children), community level

Drugs and supplies								
Drug/Supply	Percent receiving this aspect of the treatment	Note	Number of units	Times per day	Days per case	Units per case	Unit cost (NAD) (2013)	Cost per average case (NAD) (2013)
<b>Drugs</b>								
Therapeutic spread, sachet 92g/CAR-150	100.0		2.9	1	56	160	3.24	\$18.40
Amoxicillin, caplet, 250 mg	100.0		0.5	3	7	11	0.14	1.49
Metendazole, chewable tablet, 500 mg	100.0		1.0	1	1	1	0.27	0.27
<b>Total cost</b>								<b>\$20.16</b>

Home	Health Services	Health Systems	Impact Modules	OneHealth Tools
Set Active	Manager	Progress	OneHealth Configuration	Programme or Channel Analysis
Projectlink			Intervention Coverages	Bottleneck Review
			Budget Mapping	Summary Outputs
			Results	Standards Outputs

Drug and supply costs (Drugs and supplies) not including drugs and supplies added in Logistics or safety stock purchases and wastage, Total, Nutrition						
	2013	2014	2015	2016	2017	Total
<b>Nutrition</b>						
<b>Pregnant and lactating women</b>						
Daily iron and folic acid supplementation (pregnant women)	2,131	2,505	2,699	3,307	3,730	14,572
De-worming (pregnant women)	739	1,124	5,628	8,247	10,976	28,713
<b>Children</b>						
Breastfeeding counselling and support	0	0	0	0	0	0
Implementation in infants and toddlers	19,255	20,804	21,322	20,790	19,214	101,385
If moderate acute malnutrition	279,131	493,219	716,710	950,812	1,200,039	3,639,911

Select number to be trained by facility, district or region or select % of total staff to be trained.

Training Types	Type of staff to be trained	Health Post	Health Center	District Hospital	Provincial Hospital	Central Hospital
Infant and young child feeding counselling	Generalists/primary care doctors	200	150	40	0	10

Workshop Details

Type of training	Type of staff to be trained	Length of training (days)	Cost per person to be trained (NAD)	Trainees per workshop	Number of trainers required
Infant and young child feeding counselling	Generalists/primary care doctors	6	0	24	6
Complementary feeding counselling	Nurses	3	0	24	6
Breastfeeding counselling		5	0	24	6
Breastfeeding promotion and support for maternity staff		3	0	4	1
Sustaining a baby friendly hospital		2	0	10	2
Nutrition care and support for people living with HIV		3	0	15	2

## How does the **OneHealth Tool** help in implementing the Comprehensive Implementation Plan on Maternal, Infant and Young Child Nutrition?

The Comprehensive Implementation Plan on Maternal, Infant and Young Child Nutrition adopted by the World Health Assembly in 2012 outlines five high-priority actions:

### 1. Creating a supportive environment for the implementation of comprehensive food and nutrition policies:

The **OneHealth Tool** helps countries with integrated policy development, costing and budgeting of nutrition actions that *address the double burden of malnutrition*, which facilitates *comprehensive nutrition planning*.



### 2. Including all required effective health interventions with an impact on nutrition in national nutrition plans:

The **OneHealth Tool** includes both nutrition-specific and sensitive actions; it therefore helps countries to *integrate nutrition into existing health-care programmes and systems*, which *improves cost efficiency*.

### 3. Stimulating development policies and programmes outside the health sector that recognize and include nutrition:

The **OneHealth Tool** is flexible and *allows user-defined programmes, interventions and human resources types*; countries may therefore include non-health sector programmes to cost multisectoral plans for nutrition.

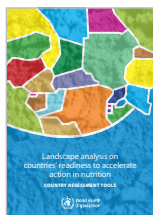
### 4. Providing sufficient human and financial resources for the implementation of nutrition interventions:

The **OneHealth Tool** makes it possible to *compare different scaling-up scenarios* in terms of resource and capacity-development needs, both human and financial. It therefore helps countries to develop and implement *effective and realistic scaling-up plans*.

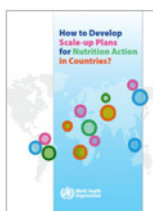
### 5. Monitoring and evaluating the implementation of policies and programmes:

The **OneHealth Tool** constitutes a transparent approach to planning and costing. It has a wealth of *programmatic data* – for example, on health worker and medical supplies needs – which facilitates monitoring and enhances accountability. Moreover, the LiST module estimates the *expected impact of the nutrition programmes*, which can be checked against actual outcomes.

## What other WHO tools are available for evidence-informed policy planning in nutrition?



**Landscape analysis country assessment** – this is a tool to assess countries' readiness to accelerate action in nutrition. A participatory, rapid assessment is conducted by multisectoral country teams, to systematically assess commitment and capacity for nutrition at different levels.



**Evidence-informed policy planning for nutrition** – this tool provides guidance on “how to” develop scaling-up plans through five proposed steps. These steps can be adapted to the country's context and situation, using global and local evidence. This tool was developed in close collaboration with the Evidence-informed policy network (EVIPNet), which includes researchers and academics in all regions.



**e-Library of Evidence for Nutrition Actions (eLENA)** – this tool is a single point of reference for the latest nutrition guidelines, recommendations, evidence and related information. It features almost 100 nutrition actions that address not only undernutrition and micronutrient deficiencies, but also obesity and diet-related noncommunicable diseases.



**Global database on the Implementation of Nutrition Action (GINA)** – this database contains more than 3500 national nutrition-related policies and actions. It provides a repository of policy commitments made in relation to nutrition, and lessons learnt from country implementations.



**Nutrition Landscape Information System (NLIS)** – this system links to all WHO nutrition databases. It provides country profiles that include key indicators (from WHO and partners) concerning nutrition outcomes and causes at the immediate, underlying and basic level, related to food, health and care.



**Global Nutrition Targets Tracking Tool** – this tool allows users to explore scenarios for the six global nutrition targets, taking into account different rates of progress and the time left to 2025.

预览已结束，完整报告链接和二维码如下：

[https://www.yunbaogao.cn/report/index/report?reportId=5\\_27685](https://www.yunbaogao.cn/report/index/report?reportId=5_27685)

