



An alliance driven by the vision of a world
without malnutrition.

The Global Alliance for Improved Nutrition
2011-2012 Annual Report



gain[®]
Global Alliance for
Improved Nutrition

**10 years of innovation
& partnership:**
better nutrition for
667 million people



An alliance driven by the vision of a world without malnutrition.

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Key Milestones: 2011–2012

- 🍃 **30+** countries benefitting from GAIN support
- 🍃 **53%** of beneficiaries in Africa
- 🍃 **46%** of beneficiaries in Asia
- 🍃 **667 million** people reached with more nutritious foods
- 🍃 Including **321 million** women and children
- 🍃 **US\$ 0.22** cost per target individual reached across GAIN projects



At a Glance: Driving Impact at Scale

The Global Alliance for Improved Nutrition (GAIN) is driven by the vision of a world without malnutrition – a world in which every child receives the nutritious diet essential for full physical and mental development. GAIN’s goal is to reach one billion people by 2015 with nutritious foods.

We understand that nutritious diets underpin strong and healthy people, communities, and economies; to this end, GAIN spearheads public-private partnerships that increase people’s access to missing nutrients. GAIN’s projects have involved more than 600 companies and civil-society organizations in more than 30 countries, and have reached an estimated 667 million people—nearly half of whom are women and children—with nutritionally enhanced food. A Swiss Foundation headquartered in Geneva, GAIN has been granted International Organization status by the Swiss government.

In less than a decade since its birth in 2002 at a Special Session of the UN General Assembly on Children, GAIN has successfully scaled its operations by working in partnership with governments and international agencies.

Worldwide Presence

Since 2005, GAIN has transformed its operations worldwide. GAIN now delivers programs through ten country offices in the developing world and four representative offices in other partner countries.



Headquarters

Geneva, Switzerland

Country Offices and Representatives

Kabul, Afghanistan

Dhaka, Bangladesh

Shanghai, China

Addis Ababa, Ethiopia

Accra, Ghana

New Delhi, India

Jakarta, Indonesia

Nairobi, Kenya

Abuja, Nigeria

Johannesburg, South Africa

Representative Offices

Amsterdam, Netherlands

Singapore, Republic of Singapore

London, United Kingdom

Washington D.C., USA

Funders: Many organizations and individuals across the globe participate in GAIN-supported activities and programs. This is made possible by funding from our principal donors including Bill & Melinda Gates Foundation (BMGF), Children's Investment Fund Foundation (CIFF), Department for International Development (DFID UK), Dubai Cares, Dutch Ministry of Foreign Affairs, Irish Aid, Goldsmith Foundation, Khalifa Bin Zayed Al Nahyan Foundation (KBZF), United States Agency for International Development (USAID), and Wellcome Trust.



Loading wheat flour onto a truck in Luxor, Egypt.

Joint Letter: Chairman of Board and Executive Director

Nutrition on the Rise

GAIN turned ten years old this year.

When GAIN was founded in 2002, nutrition seemed marooned in the doldrums of development. Not only did spending on other sectors eclipse the small amount invested in nutrition, the world knew very little about nutrition's critical role in human development. Since then, the global community has paid increasing attention to nutrition; nevertheless, malnutrition has only declined by ten percent in the past two decades, or about half a percentage point each year. To put that number in perspective, tuberculosis-related deaths have been reduced by 40 percent since 1990, and malaria-related deaths by 25 percent since 2000. The consequences of underinvestment have been devastating: today, 180 million children suffer from stunting (low height for age).

Nevertheless, we are optimistic – nutrition is gaining ground. While we remain shocked by the sheer number of our two billion fellow citizens who remain undernourished, our ability to tackle this problem has never been better.

We can trace the progress. New scientific research – largely driven by the 2008 *Lancet* Nutrition Series – proves that poor maternal and infant nutrition irreversibly damages not only the lifelong mental and physical capacities of individuals, but also the growth of communities and the economic performance of entire countries. Poor nutrition can cut economic growth by several percentage points. Armed with this information, many governments and donor agencies now agree that improving nutrition – particularly during the thousand-day period from conception to a child's second birthday – is the pressing development issue of our time. To reach the Millennium Development Goals (MDGs), we must address and alleviate malnutrition.

We have also come to recognize the need to tap into markets, a need previously overshadowed by focus on public sector delivery. Since an estimated 70 percent of the poor purchase some portion of their food in markets (according to the Food and Agriculture Organization), what people sell and buy in the marketplace is a critical determinant of nutritional status.

We feel global momentum growing. Hundreds of organizations are rethinking how to better integrate nutrition into their work. The Scaling Up Nutrition (SUN) movement, led by the UN Secretary General, has convinced more

than 30 countries to commit to new actions that combat malnutrition.

Looking back over a short ten years, we have learned a lot. We know that programs can work but that they take time to scale-up and show consistent impact. We know that we can attract matching investment – on average for every GAIN dollar spent we attract another US\$ 3.50 from the private sector and governments. We know that it is critical to build clear partnership frameworks but not to rely on a single model, adapting to local and national circumstances. None of this is easy. But today, as GAIN enters its second decade, there are new and exciting opportunities for GAIN to improve nutrition across the globe.

Highlights of 2012: GAIN in Action

GAIN continues to make impressive progress towards our overarching goal of reaching one billion men, women, and children with nutrition interventions. By mid-2012, GAIN's programs reached an estimated 667 million people, including 321 million women of reproductive age, children under five, and adolescent girls. Our programs fill in the nutrient gaps in people's diets: programs fortifying staple foods and condiments with essential nutrients reach large scale populations. Others provide complementary foods and supplements to improve mothers' and their children's nutrition during the thousand-days.

Our Maternal Infant Young Child Nutrition (MIYCN) Program, which aims to break the cycle of malnutrition in the thousand-days from conception to a child's second birthday, offers complementary feeding choices to poor mothers – choices most of us take for granted. Over the last year we have launched new MIYCN projects in Afghanistan, Bangladesh, Kenya, India and Indonesia.

Our Large Scale Food Fortification Program, which adds key micronutrients to widely consumed staples and condiments, continued to expand in 2012 with new flour and oil fortification projects launched in Kenya and Afghanistan and oil fortification taken to scale in Bangladesh.

During the year we also initiated an Agriculture and Nutrition Program, which began work on the Marketplace for Nutritious Foods in Kenya, Mozambique and Tanzania with funding from the US Government. The "Marketplace" aims to improve the nutritional quality, affordability, and variety of food in the diets of the malnourished. It does this by investing in local small and medium-sized enterprises (SMEs)

with innovative ideas that, once realized, will improve the way food is grown, stored, processed, and consumed. These local investments not only will improve the nutritional quality of food, but they will also create jobs and improve livelihoods in poor communities.

As the world becomes increasingly focused on how to feed a population of nine billion by 2050, it is essential we leverage the tens of billions of dollars now invested in agriculture to produce not just more food, but more nutritious food. This will be a priority for GAIN over the next decade.

During the year, we opened new offices in Bangladesh, Ethiopia, Ghana, Indonesia and Singapore in an effort to decentralize delivery. We were delighted to receive our first ever core funding support, a three-year Partnership Agreement from the UK Department for International Development. Our multi-stakeholder partnership in The Netherlands — the Amsterdam Initiative against Malnutrition (AIM) — grew and now includes twelve companies and twenty other non-governmental organizations and civil-society partners.

Crystallizing nutrition as a growing priority across institutions is critical. Global lobbying and advocacy as well as scientific and evaluative research are fundamental to achieving universal recognition: lobbying and advocacy will ensure local and global policies are conducive to GAIN's interventions, the success of which will be guaranteed by rigorous scientific research.

The Next Decade – Charting the Way

At the Olympic Hunger Event convened by the Prime Minister of the UK, held alongside London 2012, GAIN worked with the UK government to convene the private sector at an event which brought governments, civil society and business together to commit to long-term investment in tackling hunger. Prime Minister Cameron eloquently framed the challenge, “We won’t solve [malnutrition] by just the private sector improving crops and improving markets, we won’t do it just through government programs; it is both these things and others besides. It is a shared responsibility.”

Looking to the next decade, GAIN will continue to be guided by our twin focus of shaping global strategy as well as delivering practical and innovative models and solutions that improve nutrition for poor people. In doing this we invite you to consider five challenges that must be met – set out opposite – to set nutrition at the heart of development’s efforts.

We would like to thank all those with whom we have worked in 2012, especially our funders and partners. We invite anyone else interested in the fight against malnutrition to join us in making the next decade one in which good nutrition becomes part of every child’s diet. Together, we will remove malnutrition, hunger and stunting from the world.

Our target is set: establish a world in which every mother and child has access to adequate nutrition and social protection for basic health needs.

Marc Van Ameringen, Executive Director
Jay Naidoo, Chair, Board of Directors



Nutrition on the Rise – Five Challenges

1 Building innovative partnerships for delivery.

There will never be enough government spending to fix malnutrition; it is only if we can reshape food systems to deliver a more diverse, nutritious and affordable diet that we will eliminate malnutrition. To this end, we will harness skills, resources, and leadership from every part of the nutrition value chain – from smallholder farmers to large multinationals, to governments and civil society. GAIN will continue to make a better case for nutrition, working with any and all sectors of society and stakeholders that can contribute solutions.

2 Increasing investments in nutrition by identifying new financing mechanisms, reforming markets, and building political will to create an effective enabling environment.

In 2012, the Government of The Netherlands led the way by setting up a challenge fund of € 50 million to co-fund food security and nutrition initiatives led by Dutch companies and organizations. We are working actively with our donors to ramp up their investment in nutrition. We will also ensure that practices, taxes and tariffs are regulated to help, not hinder good nutrition. GAIN will use its Business Alliance as a learning and knowledge platform to support new delivery and partnership models in areas like research and development. The benefits of such models have been experienced in other health sectors, such as the vaccine sector.

3 Scaling-up solutions.

Finding solutions that can rapidly and sustainably reach hundreds of millions is our challenge. GAIN will continue to implement evidence-based nutrition interventions at scale – with a particular emphasis on the thousand-days from conception to a child's second birthday – and to integrate nutrition goals into wider national efforts. We will also work with our partners to identify ways to improve dietary diversity and choice for the poorest, who often cannot be reached through pure market channels.

4 Expanding horizons and repositioning nutrition in global development efforts.

The world faces an unprecedented challenge: climate change and diminishing resources exacerbated by rapid population growth. Addressing this problem will require smarter policy decisions vis-a-vis how we approach and finance development's priorities, and how we leverage markets to work better for the poor. As the newest iteration of the Millennium Development Goals is shaped, we cannot isolate nutrition because it is inextricably linked to health, livelihoods, and food security. Nonetheless, nutrition is extremely important. The World Health Organization (WHO) has pointed out, "stunting, a nutrition indicator, is important for understanding not only outcomes, but also determinants of maternal and child health." Furthermore, levels of stunting strongly correlate with development. In other words, stunting statistics are a good measure of success for development in general. Evidence also shows that diets lacking in nutrition contribute to obesity and the slew of attendant health problems, such as diabetes, heart disease, and cancer.

The emerging campaign to eliminate stunting is very significant: by prioritizing this goal, the development community signals that it understands the importance of nutrition. GAIN is campaigning for nutrition goals, including zero stunting, to be included in the new global development targets. We will continue to push for further commitments at the 2012 and 2013 G8 and G20 summits, and work hard to ensure that nutrition-related problems – like rising food prices and the threat of climate change – remain front and center on the global agenda.

5 Listening to and partnering with the poor themselves.

The poorest and those at the margins of society are the least able to redress their health problems. GAIN is looking for ways to collaborate with the poor and organizations that represent them. The goal is to create leaders among the poor, and hold governments and businesses accountable for helping the poor become food secure.

Key Progress Against Targets: An Update at June 2012

Who We Benefit: Reach and Coverage

Target: Reach one billion people including 500 million women and children with more nutritious foods.

GAIN's Achievements: Over the past year, GAIN's programs have undergone extraordinary growth. Between June 2011 and June 2012, GAIN increased the scale of its programs by **about 140 million** people and now reaches a total estimated **667 million worldwide**. Included in this increase are more than **70 million** women and children, which brings GAIN's total coverage to **321 million** such women and children worldwide. Fifty-three percent of these individuals are in Africa, forty-six percent in Asia and one percent in Latin America.

Affordability and Sustainability

Target: Establish nutrition projects that cost less than US\$ 0.50 per person covered.

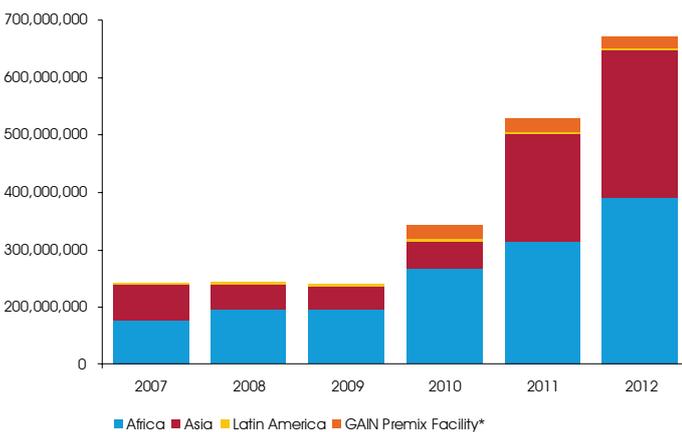
GAIN's Achievements: Projects currently cost GAIN a cumulative investment of **US \$0.22** per person.

Public Health Impact

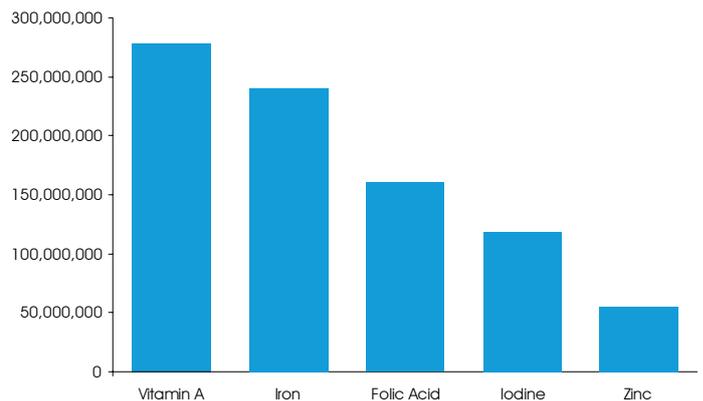
Targets:

- 1) Reduce the prevalence of stunting in children by five to ten percent.
- 2) Reduce the prevalence of micronutrient deficiencies in children as well as in women of childbearing age by 20 to 30 percent.

GAIN Overall Program Reach, 2007 to 2012



Reached by Type of Fortificant 2012



*Refers to premix reach outside of GAIN programs

Public Health Impact - Continued

GAIN's Achievements:

Côte d'Ivoire and India provide some examples of health impact this year. In Côte d'Ivoire, GAIN commissioned a survey in urban and rural areas to evaluate the three-year-old national fortification program, which found that oil and wheat flour fortification was associated with higher vitamin A and hemoglobin levels in preschool children.¹

In Rajasthan, India, GAIN co-funded a study that assessed the health impacts of the Supplemental Nutrition Program's new projects on children aged 6 months to 6 years. The 'enhanced' program package, delivered through the Indian Integrated Child Development Services (ICDS), included local production of supplemental food, home fortification with a micronutrient powder and improved program monitoring.

The study showed the project improved growth in children generally, and reduced stunting in children 12 to 18 months. These results show the potentially large impact investments in well-designed public programs with integrated nutrition interventions can have on young children with severe malnutrition.²

Cost-Effectiveness in Reducing Death and Illness Caused by Malnutrition

Target: GAIN aims to launch programs that cost below US\$ 25 per Disability-Adjusted Life Year (DALY) saved. DALY is the global standard used to compare different possible health-related investments.

GAIN's Achievements: The current estimated cost to GAIN per DALY saved in food fortification programs is **US\$ 16-24**, which is under GAIN's organizational target of US\$ 25. GAIN is developing a new model to calculate cost per DALY saved for projects that target mothers, infants and children.

Leveraging Additional Investments in Nutrition

Targets:

- 1) Two to one ratio of public sector to GAIN funds invested in projects.
- 2) Five to one ratio of private sector to GAIN funds invested in projects.

GAIN's Achievements: GAIN partners with business and the public sector to multiply the amount invested in the fight against malnutrition. At present, for every US\$ 1 GAIN invests in its nutrition projects, the private sector is investing an additional **US\$ 3.50** and the public sector an additional **US\$ 1**.

Keeping Overhead Costs Low

Target: Keep overhead as a percentage of total program expenditures at 15 percent or less.

GAIN's Achievements: This year GAIN's expenditure on overhead was **12.6 percent**, which is below the organizational benchmark.

¹ Centre Suisse de Recherches Scientifiques en Côte d'Ivoire, Institut National de Santé Publique, GAIN (2012). Final Report: Impact Assessment of the Oil and Wheat Flour Fortification Program in Côte d'Ivoire.

² Avula R, Frongillo EA, Arabi M, Sharma S, Schultink W (2011). Enhancements to nutrition program in Indian integrated child development services increased growth and energy intake of children. *Journal of Nutrition*. 2011 141(4):680-4.

Highlighting Areas of Work

GAIN takes an integrated approach to addressing malnutrition, building replicable models for sustainable, scalable, and effective interventions. Projects fall under one of three themes: (i) maternal, infant and young child nutrition; (ii) large-scale food fortification; and (iii) agriculture and nutrition. GAIN's solutions, which add missing nutrients to people's diets, are delivered through both market-based and public distribution channels.

GAIN intends to reach one billion people with more nutritious foods and thereby reduce micronutrient deficiencies by up to 30 percent and stunting by up to ten percent. GAIN's efforts are focused in countries with critical problems that, once addressed, will significantly improve the global malnutrition trend line, such as Afghanistan, Bangladesh, Ethiopia, Ghana, India, Indonesia, Kenya and Nigeria.

The organization's team runs the gamut of technical expertise, hailing from a diverse range of sectors including nutrition, business, agriculture, policy, finance, monitoring, and evaluation. GAIN's experts have and continue to use their technical and programmatic acumen and field experience to improve the nutrition of the malnourished.

School children in Bangladesh benefit from school nutrition program.



© Photo Copyright GAIN

Maternal, Infant and Young Child Nutrition

Preventing Malnutrition during the Thousand-Day Window of Opportunity

One third of child deaths each year are attributable to malnutrition according to The *Lancet*. Malnutrition causes stunting (low height for age) in one in three children in developing countries, a condition which considerably hampers a child’s future health, well-being and employment opportunities. The *Lancet* reports that sub-optimal feeding and care practices impede the mental development of more than 200 million children around the world.

During the thousand-day window of opportunity – from conception to a child’s second birthday – mothers and their infants are extremely vulnerable to malnutrition, which can cause permanent damage to the health and development of infants.

1

Maternal, Infant And Young Child Nutrition



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GAIN works to improve Maternal, Infant and Young Child Nutrition (MIYCN) in ten countries and devotes much of its energy to developing models that deliver access to high quality, affordable specially formulated complementary foods and complementary food supplements for infants, young children and pregnant and lactating women. These culturally appropriate foods and supplements complement optimal infant and young child feeding practices as well as maternal nutrition.

GAIN is helping to address anemia in children in Bangladesh by supporting its partners in Bangladesh to develop, market and deliver small, but affordable, packets of micronutrient powders. These can be added to children’s everyday meals a few times a week, without changing the taste of the food. A single one gram Pusthikona-branded sachet contains a child’s recommended daily intake of 15 essential vitamins and minerals, and is easily mixed into the food prepared for them.

Stimulating Production of Locally Produced Infant Foods in Ghana to Fight Child Malnutrition.

In central Ghana, GAIN has been helping Yedent – a local company that produces maize-based cereal for children aged six months to two years – expand its production capacity and align its practices with international guidelines. With GAIN's assistance, Yedent has improved packaging, labeling, and quality assurance and control. The food will be marketed in early 2013.

At the same time, GAIN has been helping PATH develop and launch a campaign through Ghana's district health services to raise awareness about proper infant feeding practices. GAIN also has begun to explore the benefits of integrating agriculture into nutrition projects by improving the value chain to increase maize's nutritional quality.

Multinutrient Supplements

Supporting Interventions to Fill Nutrient Gaps in the Diets of Young Children and Other Vulnerable Groups

As part of the MIYCN Program, GAIN's Multinutrient Supplements Initiative aims to reach 50 million children and others with special needs. Products come in the form of multinutrient powders with essential vitamins and minerals (and in some cases essential fats) as well as a range of nutrient-dense spreads known as lipid-based-nutrient supplements. These products are added to home prepared meals to fill dietary nutrient gaps. Since 2009, multinutrient powders and lipid-based nutrient supplements have covered 930,000 children aged 6 to 23 months, due primarily to sales and distribution of locally manufactured multinutrient powders in Bangladesh. Highlights in 2011-2012 include:

- **The development and passage of national multinutrient powder and lipid-based nutrient supplement standards in Kenya**, which will significantly improve the access of vulnerable populations to these products by promoting high quality local production. Given Kenya's important regional position, both policy developments and locally produced supplements will extend into neighboring countries.
- **The distribution of 22 million single serving one gram packets of Pushtikona and MoniMix-branded multinutrient powders in Bangladesh to low-income families.** Sachets have reached 577,000 infants aged 6 to 23 months through community health workers, doctors and pharmacies, and through sales to international and non-governmental organization programs targeting the poor.

Nutritious Foods for Children and Mothers

Delivering Fortified Complementary Foods to Infants, Young Children and Pregnant and Lactating Women

Another part of the MICYN Program is the Nutritious Foods for Mothers and Children Initiative. This initiative aims to reach a total 20 million children under two and pregnant and lactating women with specially formulated foods such as fortified cereal based porridges.

By 2011-2012, this initiative had covered **4.8 million** infants, young children and pregnant and lactating women with nutritious foods.

Highlights include:

- **Reaching over 6,300 children aged 6 to 35 months and pregnant and lactating women with fortified supplementary foods in rural parts of Rajasthan State, India.** The foods are produced by self-help groups of women living below the poverty line then are procured and distributed by the government. GAIN plans to scale up this innovative project model, which simultaneously improves incomes and nutrition, by replicating it in other states.
- **The launch of the International Advisory Group on Infant Feeding Behaviour Change Communication and Demand Creation**, which will increase our understanding of infant and young child feeding practices, as well as build the evidence base for innovative approaches to improving these practices.

Large Scale Food Fortification

Increasing Access to Adequately Fortified Staples and Condiments

People require micronutrients not only to live, but also to work productively. As a result of insufficient vitamin and mineral (micronutrient) intakes in the population, countries may lose two to three percent of their Gross Domestic Product. Food fortification, which adds essential micronutrients to foods, is an important strategy in the fight against malnutrition globally. It has been regularly ranked by the Copenhagen Consensus, a group of top global economists, as among the best investments to address the world's most pressing challenges. Like all our initiatives, food fortification empowers people and economies by improving health and productivity.

2

Large Scale Food Fortification



On 9 September 2012, Mr. Mohammed Al-Bastaki, Deputy Director General of Khalifa Bin Zayed Al Nahyan Foundation (KBZF), His Excellency Jumah Al-Kabi, Counsellor of the United Arab Emirates Embassy, Dr. Suraya Dalil, Afghanistan's Minister of Public Health, Marc Van Ameringen, Executive Director of GAIN and Louis Imbleau, WFP Afghanistan Country Director launched a partnership to reach approximately 15 million Afghans with nutritionally fortified wheat flour, vegetable oil and ghee.

Over the last 50 years, fortification has been an important public health tool in industrialized countries and has led to the virtual eradication of a number of conditions such as pellagra, goiter, rickets and beriberi. Moreover it is cost-effective – universal salt iodization (USI) costs as little as US\$ 0.05 per child per year according to the World Bank - and has been consistently recognized for its high return on investment.

The key objective of GAIN's Large Scale Food Fortification Initiative is to sustainably reach one billion people with staples and condiments that contain vitamins and minerals essential to well-being and good health, and thus mitigate micronutrient deficiencies in target countries. This initiative supports the fortification of staple foods and condiments in 24 countries through broad coalitions of governments, businesses, international organizations and civil society partners including National Fortification Alliances. Fortified products include fish and soy sauce, maize meal, rice, salt, sugar, vegetable oil and wheat flour.

By June 2012, the initiative had reached a total of 667 million people increasing its scale by more than 140 million since June 2011. This increase is due to several accomplishments: the launch of fortified vegetable oil production in Bangladesh and Kenya; the increase of vegetable oil production in Indonesia; as well as successes in the Universal Salt Iodization projects in India and Ethiopia, among others. Highlights include:

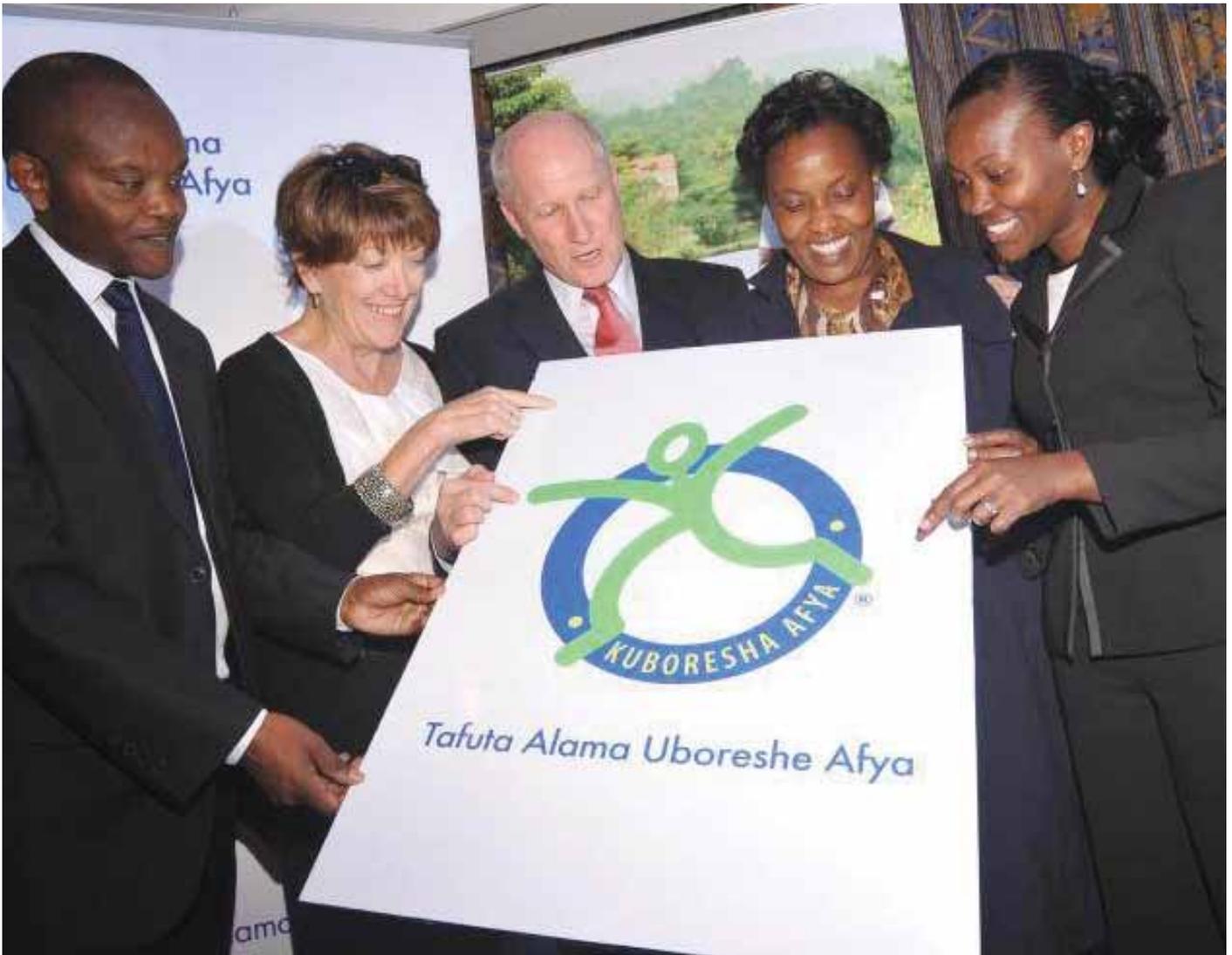
- **The passage of mandatory laws for staple food fortification (maize flour, wheat flour and vegetable oil) in Kenya, Tanzania and Uganda**, which will increase consumption of adequately fortified foods through government monitoring and regulation. GAIN successfully united a broad base of key stakeholders to draft legislation and strengthen commitment to fortification.
- **Reaching 45 million people in Bangladesh with vitamin A fortified vegetable oil**, following the production and marketing of 232,000 metric tons by 13 vegetable oil refineries. This should help to alleviate the widespread vitamin A deficiency from which—according to the WHO—one fifth of pre school children in Bangladesh suffer. Vitamin A deficiency can cause early-childhood blindness and exacerbate infections.

- **Strengthening a GAIN-established financially-viable procurement and distribution system for potassium iodate (KIO₃)**, the fortificant used to iodize salt, in Ghana. This system is ensuring that many salt producers in Ghana receive quality KIO₃ in the right quantity and at a good price. This is helping to protect millions of children against iodine deficiency – the leading cause of mental retardation and brain damage in children – a deficiency that can easily be prevented by adding iodine to salt.
- **Supporting the development of a tool to track and improve the production and monitoring of adequately iodized salt throughout India** by centralizing data collection to increase the speed, accuracy, and relevance of program monitoring, reporting, and decision-making. This will contribute towards efforts ensuring infants avoid the physical and mental disabilities caused by iodine deficiency.

The Initiative launched projects in Afghanistan, Brazil, India and Nigeria that will transform the well-being of 396 million individuals by adding essential vitamins and minerals to widely consumed foods, such as ghee, rice, vegetable oil, and wheat flour.

Innovative Community Driven School Nutrition Model to be Scaled Up across Bangladesh.

In July 2012, GAIN launched a pilot school nutrition program in partnership with Dubai Cares and championed by the Government of Bangladesh's Ministry of Primary and Mass Education. The effort will improve the nutrition and school attendance of more than 17,000 children aged 5 to 11 years old, who come from vulnerable families in one urban area of Dhaka and two rural areas of Mymensing District. GAIN is taking an integrated approach by: ensuring school meals include fortified oil, iodized salt and other foods; creating links with community groups to guarantee local ownership – in this case Mother's Clubs; and promoting proper water, sanitation, hygiene and regular deworming. The pilot is meant to be a replicable and scalable program for the government to apply nationwide.



© Photo Copyright PSI Kenya

Food fortification logo in Kenya differentiates regular staple foods (maize meal, wheat flour, edible oils) from nutritionally fortified staples. GAIN is providing financial support and technical expertise to Kenya to produce fortified foods, monitor their quality, create demand and develop technical guidelines for fortification.

Improving the Nutritional Quality of Agricultural Products along the Value Chain

Agriculture is critical to reducing hunger, and to improving health and nutrition. Most of the extreme poor depend on agriculture for their livelihoods and their sustenance. Consequently, it is possible to leverage agriculture to improve health, nutrition, and even local economies, and thus more quickly meet Millennium Development Goals.

Historically, agricultural development has largely focused on increasing and maximizing production of key commodities, while little attention has been paid to the nutritional quality of agricultural products. Opportunities exist across the entire agricultural value chain to improve nutrition and ensure quality agricultural products are accessible to vulnerable populations.

GAIN's newest initiative – Agriculture and Nutrition – identifies ways to improve the nutritional quality of food through innovative, market-based solutions. The program aims to modify the agricultural supply chain while also increasing the access of vulnerable populations to affordable nutritious foods. This initiative must build the missing evidence-base to support the efficacy of linking agriculture and nutrition.

Enhancing Nutritional Density of Rice in Bangladesh

Milled rice comprises between 70 and 80 percent of diets in Bangladesh. Such widespread dependency on a single food leads directly to high rates of severe malnutrition. Currently, GAIN is investigating opportunities across the entire value chain to improve the nutritional density of rice. GAIN's research into the opportunities and impact better fertilizers (i.e. inputs) and nutrient sensitive post-harvest processing (i.e. post-harvest handling) have on rice's nutritional quality illustrate the initiative's whole-chain approach to improving nutrition. Improving the nutritional value of Bangladesh's staple food could significantly improve the quality of the Bangladeshi diet.

3

Agriculture and Nutrition

Establishing the Marketplace for Nutritious Foods

The agriculture and food production system has a profound effect on the availability and delivery of dietary nutrients; however, the potential for improving nutrition through agriculture remains largely untapped. There is an urgent need to promote nutrition-specific and nutrition-sensitive solutions by investing in local and regional innovations across the agricultural value chain.

The Marketplace is designed for small and medium enterprises (SMEs) with innovative ideas that link agriculture to nutrition. It provides a space for these SMEs to share practices, receive technical assistance, and secure investments – all of which are essential to the growth and development of these businesses. By helping to create local self-sufficient businesses that deliver affordable nutritious foods, GAIN aims to provide a sustainable, long-term solution to malnutrition. GAIN will produce expertise spanning across areas including: agricultural inputs; post-harvest nutritious commodity management; nutritious product development including effective processing, packaging and marketing; quality control and nutritional content assurance; and policy setting.

Understanding the Food Consumption Profiles of Infants in Kenyan Farming Communities.

According to the International Fund for Agricultural Development (IFAD), nearly eighty percent of Kenya's population lives in rural areas and the vast majority of these communities rely on agriculture for their livelihoods. However, the country continues to depend heavily on food aid, which is distributed to approximately two to four million Kenyans each year. Given the accelerating growth of Kenya's population, it is essential to find a sustainable solution to malnutrition in these rural regions.

Knowledge of complementary feeding practices and dietary habits will underpin any kind of intervention. Thus, USAID and GAIN are working together on a Focused Ethnographic Study to collect data on complementary foods being fed to children aged 6 to 24 months in rural Kenya. By calculating the gap between current consumption and biological requirements in Kenya, GAIN and USAID will identify interventions across the value chain that can enrich the diets of children in hard to reach rural areas.



Campaigning for Change

GAIN’s vision is a world without malnutrition. To this end, our program shapes global development priorities, improves policies to make food systems more nutrition-friendly, and develops innovative partnership-pathways to improve nutrition.

Global Priorities: Nutrition on the Rise on the World Stage

In 2012, both the nutrition movement and GAIN garnered more attention on the world stage: over thirty countries committed to national nutrition initiatives as part of the Scaling Up Nutrition (SUN) movement. UN Secretary-General Ban Ki-moon nominated Jay Naidoo, Chair of GAIN’s Board of Directors, as a member of the SUN Lead Group which oversees this work. GAIN was also appointed co-chair of the SUN Business Network, a forum for businesses — especially small and medium sized companies in countries with high levels of malnutrition. The success of the SUN movement demonstrates that the world is beginning to understand

that adequate nutrition in the thousand-day window profoundly determines a human being’s lifelong physical and cognitive development. It represents a big step forward in linking and addressing nutrition, poverty and human development.

GAIN also led the private sector input into the **Olympic Hunger Event** hosted by British Prime Minister David Cameron at the 2012 Olympics. At this event, companies made a commitment to develop programs that make affordable and nutritious foods available to poor families.

To gain widespread and long-term recognition, the nutrition campaign must engage the public. In the United States, GAIN launched **Future Fortified**, which is building an advocacy community dedicated to raising awareness and engineering public and political will to improve nutrition. **Future Fortified** has already built a community of more than 30,000 supporters.



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Setting Food Nutrition Standards: Scientific and Policy Guidance

During the year, GAIN managed global policy networks, including the Home Fortification Technical Advisory Group (HFTAG) and the Maternal, Infant and Young Child Nutrition (MIYCN) Working Group—leading the way to better nutrition policy and standards. The HFTAG provided inputs for the World Health Organization-led evidence review of multiple micronutrient powders, which produced normative guidance on how to formulate and dose these products. The MIYCN Working Group supported re-issuing of guidance on how to appropriately market complementary food, and contributed to World Health Assembly resolutions that called for normative guidance on appropriate practices for promoting complementary foods. In November 2012, GAIN also initiated the International Advisory Group for Infant Feeding Behaviour Change Communication and Demand Creation.

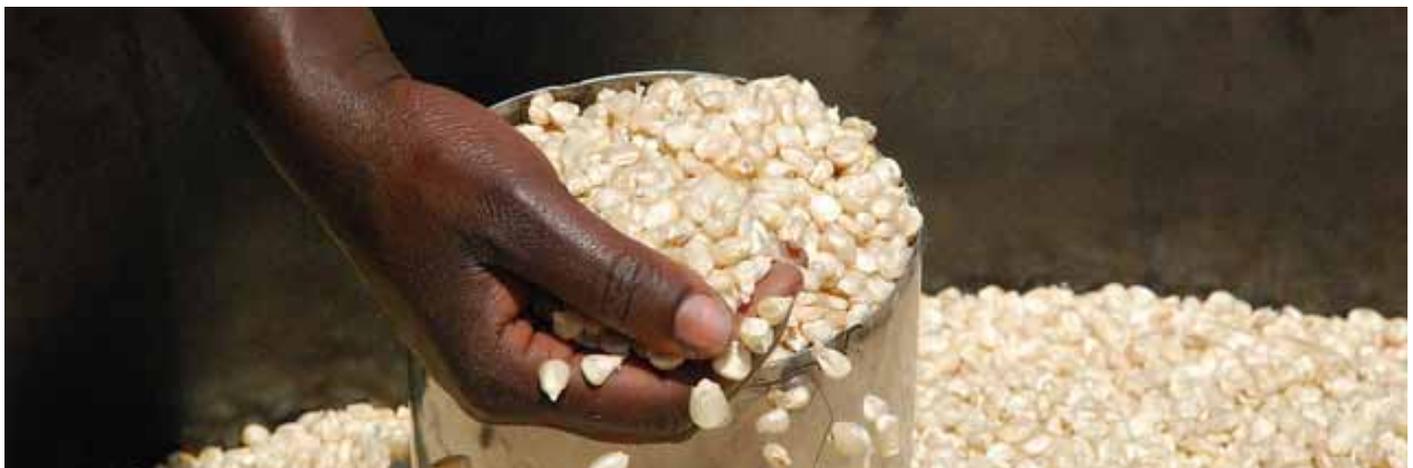
GAIN continued to provide technical support to help update the 1991 Codex Alimentarius guidelines on fortified complementary food, which is in the final stages of the revision process. GAIN also supported the second *Lancet* Series on Child Development in Developing Countries, and the publication of the third MIYCN Special Supplement in the journal of *Maternal and Child Nutrition*. GAIN's technical specialists regularly contribute to academic and scientific journals – a list of publications is included in the Annex at the end of the report.

The bulk of our advisory support is to national governments via more than 20 National Food

How Malnourished Children Benefit from More Affordable Premix for Emergencies....

The micronutrient premix used to produce blends distributed in emergency relief operations is regularly sourced through the GAIN Premix Facility (GPF). In late 2011, the GPF began a forecasting exercise that pooled volumes of premix sourced in the production of Supercereal. Supercereal is a blended fortified porridge produced with oil, sugar and milk, and is used to treat malnutrition in infants six months to two years of age. GAIN's efforts led to a first consolidated tender, which has reduced the usual GPF price of this premix by approximately 20 percent. A similar demand pooling exercise was conducted in June 2012, leading to further price reductions by approximately four percent. By helping to slash the price of premix, GAIN makes it easier and more affordable to provide high grade nutrients to children suffering from malnutrition in emergencies.

Fortification Alliances. GAIN also supported nutrition policy work, in relation for example to the Ethiopian Government's National Stunting Reduction Strategy, to the Indonesian Government Working Group on Maternal, Infant and Young Child Nutrition, and to new regulations for the marketing of breastmilk substitutes in South Africa. In addition, we contributed to World Health Organization-led nutrition landscaping projects assessing strengths and barriers to scaling-up MIYCN programs.



Intervening to Improve Market Efficiencies for the Most Vulnerable

The GAIN Premix Facility (GPF) expanded its operation for the procurement of quality premix, which is a blend of high quality and affordable vitamins and minerals essential to good health and used to fortify food around the globe. The GPF, a centralized procurement platform, doubled its reach in the past year, helping fortify the food of 139 million people. It also reduced the price of the

premix it uses to treat child malnutrition in emergencies by approximately 20 percent. East African regional premix distribution networks were set up in Kenya and Tanzania with our partners Phillips Healthcare Services Ltd., Phillips Pharmaceuticals Ltd. and Helen Keller International. The networks enable local producers of wheat flour, maize flour and vegetable oil to quickly forecast demand and to pre-position and procure adequate supplies of vitamin and mineral premix—within a maximum of three days.



© Photo Copyright Juliana Thomas/Clinton Global Initiative

At the 2012 Clinton Global Initiative Annual Meeting “Designing for Impact”, Jay Naidoo, Chair of GAIN’s Board of Directors, participated in the panel: “The Early Years: An Irresistible Investment Opportunity.” From left to right: Geeta Rao Gupta, Deputy Executive Director of UNICEF, Bill Goodwyn, CEO of Discovery Education, Discovery Communications Inc., Carolyn Miles, President and CEO of Save the Children, Jay Naidoo and Joyce Banda, President of the Republic of Malawi.

Innovative Partnerships: Making Food Markets Work Better for the Poor

GAIN is working with private partners, governments and community organizations to address problems in local value chains. We understand that successful market-based solutions to malnutrition incorporate multiple sectors of society, from governments to civil society to NGOs. For example, with the help of GAIN, the multinational Ajinomoto is partnering with Yedent, a Ghanaian food producer, to deliver high-quality, affordable, and nutritious foods to low-income households.

GAIN has also worked with 600 companies worldwide to promote private-sector investments that aim to improve the poor's access to a diverse, affordable, nutritious diet. Small and medium sized enterprises (SMEs) possess the unique, yet untapped, potential to make a profit, improve local economies, and help deliver nutritious foods. However, SMEs in developing countries face obstacles, such as securing investments, accessing markets, and hiring skilled employees. Often, global food trading and manufacturing companies already dominate the market and thus undercut SMEs' efforts.

Many of GAIN's programs help SMEs overcome these obstacles and stake out a share in the market. During 2011 we strengthened the **GAIN Business Alliance**, a group of global and national business committed to tackling malnutrition. We welcomed Amway, GlaxoSmithKline, Hershey's, and Indofood as new members. In addition Rabobank Foundation, Rijk Zwaan, Spar International and Dadtco joined the GAIN-supported **Amsterdam Initiative against Malnutrition (AIM)**. AIM is a Dutch-led public-private partnership that aims to deliver nutritious foods to 100 million poor consumers. It is viewed as a model which can be replicated in other countries.

To support the growing community of businesses that aim to make a profit by improving nutrition, GAIN developed an online Nutrition Zone on the website Business Fights Poverty (<http://www.businessfightspoverty.org/page/nutrition-zone>). **Nutrition Zone** is a forum for businesses to share their experiences and best practices in delivering nutritious products to malnourished populations.



© Photo Copyright GAIN



GAIN's Executive Director Marc Van Ameringen in front of Downing Street. At the Olympic Hunger Event held alongside London 2012, GAIN worked with the UK government to convene the private sector at an event which brought governments, civil society and business together to commit to long-term investment in tackling hunger.



© Photo Copyright UK Foreign and Commonwealth Office

Brazilian former soccer player Edson Arantes do Nascimento, better known as 'Pelé', Brazil's Vice President Michel Miguel Elias Temer, Britain's Prime Minister David Cameron and British double Olympic Champion Mohamed Farah in front of Downing Street during Olympic Hunger event in August 2012.



© Photo Copyright Herbalife

In partnership with Herbalife, Future Fortified was featured as the official charitable partner of the 2012 Herbalife World Football Challenge, an exhibition soccer tournament that brought together the world's premier soccer clubs to compete in major sports venues across the US and Canada.

Future Fortified Featured as the Official Charitable Partner of the 2012 Herbalife World Football Challenge.

In addition to engaging champions online, Future Fortified has worked with key influencers, such as children's book author Dallas Clayton, to disseminate knowledge about good nutrition to audiences across the United States. The campaign seeks specifically to raise awareness about the importance of nutrition during the thousand-day window. By working with a number of private sector partners, the campaign has engaged both employees and consumers. In

partnership with Herbalife, Future Fortified was featured as the official charitable partner of the 2012 Herbalife World Football Challenge, an exhibition tournament that brought together the world's premier soccer clubs to compete in major sports venues across the US and Canada. This partnership included both in-stadium and online activities such as pre-game announcements and a Twitter campaign.

Monitoring, Evaluation, Learning and Research

GAIN's investments in monitoring, evaluation, learning, and research (MELR) are fundamental to its success. Our MELR not only supports our decisions to scale-up projects, it also influences key stakeholders to invest more in the fight against malnutrition.

Over the last year GAIN has developed a learning agenda, which includes key themes and questions to explore that are crucial to scaling up the impact on malnutrition. These include how to: create sustainable business models; make quality control and assurance of food more effective; build momentum to improve nutrition for the billions of rice consumers; create more effective nutrition interventions for mothers; and link agriculture to nutrition. This agenda guides GAIN's work and investment in evaluation and learning.

Routine program reports on production, distribution and quality control inform GAIN's estimates of our programs' reach and coverage. Surveys of food consumption and of compliance with standards inform assessment of our programs' impact on the nutrition of target groups. Over the year, GAIN supported 15 large-scale micronutrient surveys in countries with active projects. Impact evaluations or studies were completed for food fortification programs in Côte d'Ivoire, Ghana, Mali and Uzbekistan, and within MIYCN programs in Bangladesh and India (see also, Public Health Impact, page 9).

Our MELR demonstrated that the products and programs deliver nutritional impact. It also identified key elements in the delivery chain that can influence the scale and scope of outcomes.

Additional studies include:

- Quality and compliance studies in South Africa's³ and Uzbekistan's⁴ flour fortification programs and Côte d'Ivoire's flour and oil fortification program⁵, which underscored the critical role of continual production monitoring with routine quality checks in enforcing regulations and legislation that ensure sustained quality production.
- Focused ethnographic studies in Afghanistan, Ghana⁶, Kenya, and South Africa⁷, which

demonstrated the commercial feasibility of specific nutrition interventions in each of these countries.

- A national micronutrient and food consumption survey in Vietnam, which demonstrated that mass fortification of staples (such as flour, oil and rice) can improve the micronutrient intakes of women, infants and pre-school children⁸.
- Studies in Russia⁹, Bangladesh and Pakistan, which demonstrated the important contribution made to people's overall intake of iodine by processed industrial foods and bread fortified with iodized salt¹⁰.
- Validation studies of a portable kit that rapidly quantifies micronutrient levels in palm oil. Further tests will take place in the upcoming year to validate that it works in other foods, such as flour. The tool will improve quality control and strengthen compliance with fortification¹¹.
- Special studies of cost-effective business models and intervention delivery systems conducted in GAIN's programs in Bangladesh¹² and India¹³ and started in Ghana and Egypt.
- Agriculture and Nutrition research to identify opportunities to improve the quality and micronutrient content of foods, such as by improving the growing and processing practices of rice.

³ Sunley, N. and R. Yusufali, Investigation into Compliance Levels for Fortified Staple Foods in South Africa, in GAIN internal report, 2012.

⁴ Mestor Associates, Uzbekistan flour fortification project, end-of-project evaluation - Evaluating the coverage of the national flour fortification programme and the impact on the iron and folate status of women of reproductive age in Uzbekistan, 2009.

⁵ Clewes, C. et al., Impact assessment of the GAIN-funded oil and wheat flour fortification program in Côte d'Ivoire, (draft report), Centre Suisse de Recherches Scientifiques, 2012.

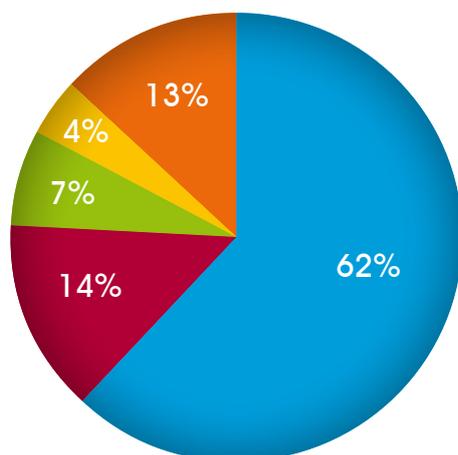
⁶ Pelto, G.H. and M. Armar-Klimesu, Balancing nurturance, cost and time: complementary feeding in Accra, Ghana. *Maternal & Child Nutrition*, 7 Supplement 3: p. 66-81, 2011.

⁷ Pelto, G. et al., The Focused Ethnographic Study 'Assessing the behavioral and local market environment for improving the diets of infants and young children 6 to 23 months old' and its use in three countries, Draft Report, 2012.

⁸ Lailou, A., et al., An assessment of the impact of fortification of staples and condiments on micronutrient intake in young vietnamese children. *Nutrients*. 4(9): p. 1151-70, 2012.

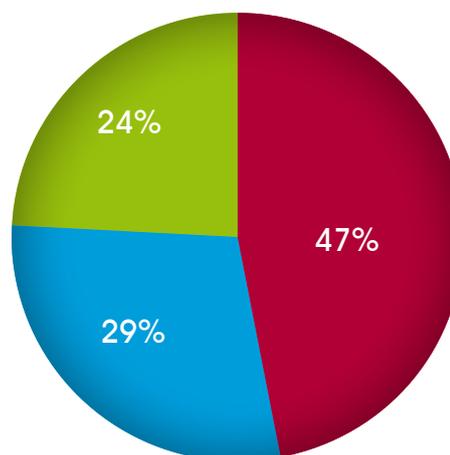
Financial Report

Program Expenditure



	Large Scale Food Fortification	62%
	Multinutrient Supplements	14%
	Nutritious Foods for Children and Mothers	7%
	Agriculture and Nutrition	4%
	Overhead	13%

Initiative Expenditure by Region



	Asia	47%
	Africa	29%
	Rest of the World	24%

Total funds received from donors during the year amounted to US\$ 33.2 million (2010-11, US\$ 13.8 million). Donor income recognized during the year amounted to US\$ 43.2 million (2010-11, US\$ 39.1 million). Total expenditure during the year was US\$ 40.9 million (2010-11, US\$ 37.3 million).

GAIN is a non-profit foundation of public interest governed by Swiss law. The consolidated financial statements are prepared in accordance with GAIN's statutes and the provisions of the Swiss Code of Obligations. The consolidated entities are comprised of GAIN and GAIN NoSCA LLC. The figures shown are extracted from the statutory accounts which were approved by the Directors on 27 November 2012. Deloitte gave an unqualified opinion on the full statutory Financial Statements. These extracts may not contain sufficient information to allow a full understanding of the financial affairs of the charity. For further information the full statutory accounts should be consulted, together with the auditors' report. Copies of these may be obtained from the website www.gainhealth.org.

⁹ Kostyuchenko, M.N., et al., The use of iodized salt for the enrichment of bakery products, SSI State Scientific Research Institute of Agricultural baking industry, All-Russia Research Institute of Meat Industry of the VM Agricultural Gorbatova, FBV VPO Moscow State University, Technology and Management named KG Razumovsky: Moscow, 2012.

¹⁰ Spohrer-R et al., Processed foods as an integral part of USI programs: A review of global experiences and analyses of Bangladesh and Pakistan. *Food and Nutrition Bulletin* Supplement, December 2012.

¹¹ Frey-S, Guinot & Rohner. Validation of a device for the rapid assessment of vitamin A content in fortified vegetable oil. Asian Congress of Nutrition, July 2011, Singapore.

¹² Bamezai, A., Evaluation of the effectiveness of a market-based approach to delivering a multiple micronutrient powder in Bangladesh. Baseline survey report, International Food Policy Research Institute, 2011.

¹³ Avula, R., et al., Enhancements to nutrition program in Indian integrated child development services increased growth and energy intake of children. *Journal of Nutrition*, 141(4): p. 680-4, 2011.

Financial Report

CONSOLIDATED BALANCE SHEET AS AT 30 JUNE 2012

	2012 US\$ 000's	2011 US\$ 000's
Current Assets		
Cash and deposits	46,781	58,896
Accrued income	2,332	4,208
Debtors	2,334	2,612
Deferred expenditure	10,067	7,793
Total current assets	61,514	73,509
Fixed Assets, net	603	735
TOTAL ASSETS	62,117	74,244
Liabilities		
Creditors	3,728	5,878
Deferred income	33,871	45,699
Total Liabilities	37,599	51,577
Long-term Liabilities	320	1,295
Capital and Reserves		
Foundation capital	36	36
Surplus	24,162	21,336
Total Capital and Reserves	24,198	21,372
TOTAL	62,117	74,244

Financial Report

CONSOLIDATED INCOME STATEMENT FOR THE YEAR ENDED 30 JUNE 2012

	2012 US\$ 000's	2011 US\$ 000's
Income		
Donor income	43,213	39,087
Other income	232	410
Bank interest	305	419
TOTAL INCOME	43,750	39,916
Operating Expenditure		
Staff Related Expenses	14,739	13,151
Sub-Awards*	9,506	8,001
Consultants	8,665	8,795
Operational Costs**	4,241	2,725
Travel	3,331	4,129
Depreciation	442	513
TOTAL EXPENDITURE	40,924	37,314
Operating Surplus	2,826	2,602
Surplus, brought forward	21,336	18,734
SURPLUS, END OF YEAR	24,162	21,336

* Sub-Award expense after adjustments relating to the financial accounting methodology for grants.

Total project grant disbursements before the adjustments was US\$ 13,051,829 (2011 US\$ 12,489,806).

** Operational Costs includes a foreign exchange loss of US\$ 720,798 (2011 exchange gain of US\$ 575,511).

Team

MEMBERS OF THE GAIN BOARD OF DIRECTORS

Jay Naidoo, Chair of the GAIN Board, Chair of the GAIN Partnership Council.

Gary Darmstadt, Vice Chair of the GAIN Board, Director, Family Health, Global Health Program, Bill & Melinda Gates Foundation, Seattle, USA.

Vinita Bali, Managing Director, Britannia Industries Limited, Bangalore, India.

Pierre Henchoz, Chair of the GAIN Finance and Audit Committee, Private Banker, Lausanne, Switzerland.

Richard Hurrell, Professor, Institute of Food, Nutrition, and Health, Swiss Federal Institute of Technology, Zurich, Switzerland.

Kabir Kaiser, CEO and Managing Director of Renata Ltd., Dhaka, Bangladesh.**

Olivier Kayser, Managing Director, Hystra, France.

Anna Lartey, Associate Professor, Department of Nutrition and Food Science, University of Ghana, Legon, Ghana. President-Elect (IUNS), International Union of Nutritional Sciences (IUNS). IDRC Research Chair in Nutrition for Health and Socio-Economic Development in Sub-Saharan Africa.**

Anne Scott, Executive Director of Programmes, The Children's Investment Fund Foundation – CIFF, London, UK.

Admassu Tadesse, Chair of the GAIN Board Program Committee, President and CEO, PTA Bank, Nairobi, Kenya.

Joachim von Braun, Director of the Center for Development Research (ZEF), Professor for Economic and Technological Change, University of Bonn, Germany.*

Stanley Zlotkin, Chief, Global Child Health, Hospital for Sick Children and Professor, Paediatrics, Nutritional Sciences and Public Health, University of Toronto.*

EX OFFICIO

Nicholas Alipui, GAIN Partnership Council Vice-Chair, Director, Programme Division, United Nations Children's Fund, New York, United States.

Marc Van Ameringen, Executive Director, Global Alliance for Improved Nutrition, Geneva, Switzerland.

MEMBERS, GAIN PARTNERSHIP COUNCIL

Jay Naidoo, Chair of the GAIN Partnership Council, Chair of the GAIN Board of Directors.

Nicholas Alipui, Director, Programme Division, United Nations Children's Fund, New York, United States.

Martin Bloem, Chief, Nutrition and HIV&AIDS Policy Unit, United Nations World Food Programme, Rome, Italy.+

Chunming Chen, Senior Advisor, Chinese Center for Disease Control and Director, International Life Science Institute Beijing, China.+

Faizel Ismail, Ambassador Permanent Representative to the World Trade Organization, South African Permanent Mission Geneva, Switzerland.

Lawrence Haddad, Director Institute of Development Studies, Chair of the Development Studies Association of the UK and Ireland Institute of Development Studies, University of Sussex, Brighton, United Kingdom.

Kei Kawabata, Manager of the Social Sector, Inter-American Development Bank (IADB), Washington DC, USA.+

Manoj Kumar, CEO, Naandi Foundation, India.**

Ibrahim Mayaki, Chief Executive Officer, NEPAD, Midrand, South Africa.

Alexandre Mérieux, Directeur Général Délégué, BioMérieux, Lyon, France.+

K. Srinath Reddy, President, Public Health Foundation of India, New Delhi, India.

* New Members appointed in May 2012

** New Members appointed in December 2011

+ Term completed in May 2012

** New Members since May 2012

MEMBERS, GAIN PARTNERSHIP COUNCIL CONTINUED...

Stephan Tanda, Executive Manager, DSM,
The Netherlands.**

Axton Salim, Director, Indofoods, Indonesia.**

Kathy Spahn, President and CEO, Helen Keller
International, New York, USA.

Paulus Verschuren, Special Envoy, Food and Nutrition
Security for Development, Ministry of Foreign Affairs of
The Netherlands.

Emorn Wasantwisut, Senior Advisor, Institute of
Nutrition Mahidol University, Nakhon Pathom,
Bangkok, Thailand.

Derek Yach, Senior Vice President, Global Health and
Agricultural Policy, PepsiCo Inc, New York, USA.+

Joachim von Braun, Director, Center Professor,
Economics and Technological Change, for Development
Research (ZEF Bonn), University of Bonn, Germany.+++

David Nabarro, Special Representative of the UN
Secretary General for Food Security and Nutrition,
Coordinator of the Scaling Up Nutrition (SUN)
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Gary Darmstadt, GAIN Board Vice Chair, Director,
Family Health, Global Health Program, Bill & Melinda
Gates Foundation, Seattle, USA.

Marc Van Ameringen, Executive Director, Global
Alliance for Improved Nutrition, Geneva, Switzerland.

EXECUTIVE MANAGEMENT

Marc Van Ameringen, Executive Director

John Fairhurst, Chief Operating Officer

Greg S. Garrett, Director, Large Scale Food Fortification

Steve Godfrey, Director, Investments, Partnerships
and Advocacy

Katharine Kreis, Director, Strategic Programs

Bonnie McClafferty, Director, Agriculture and Nutrition

Dominic Schofield, Director, Multinutrient Supplements

Tina van den Briel, Director, Program Delivery

Marti van Liere, Director, Nutritious Foods for Children
and Mothers



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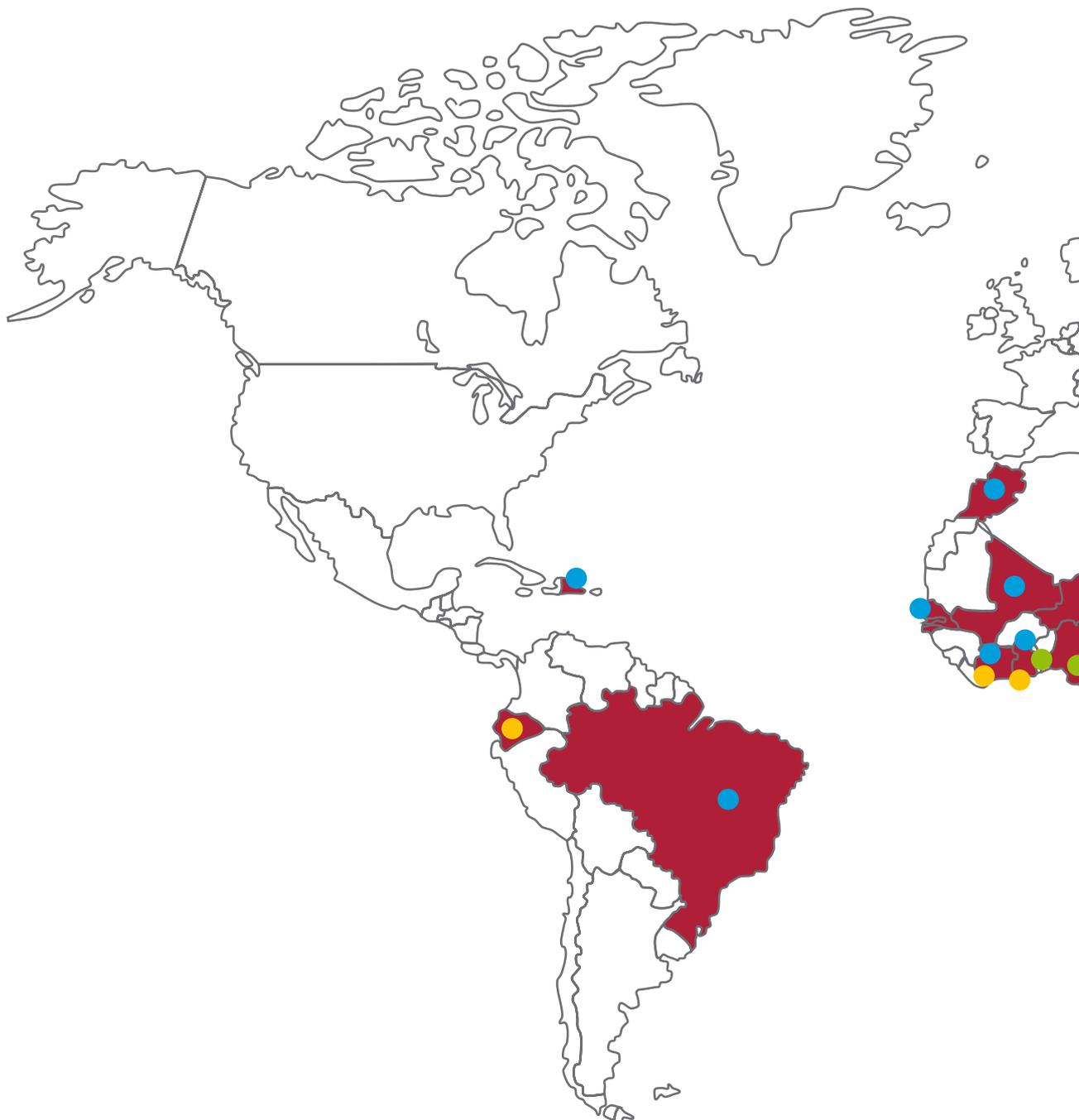
+ Term completed in May 2012

** New Members since May 2012

+++ Joined GAIN Board in May 2012

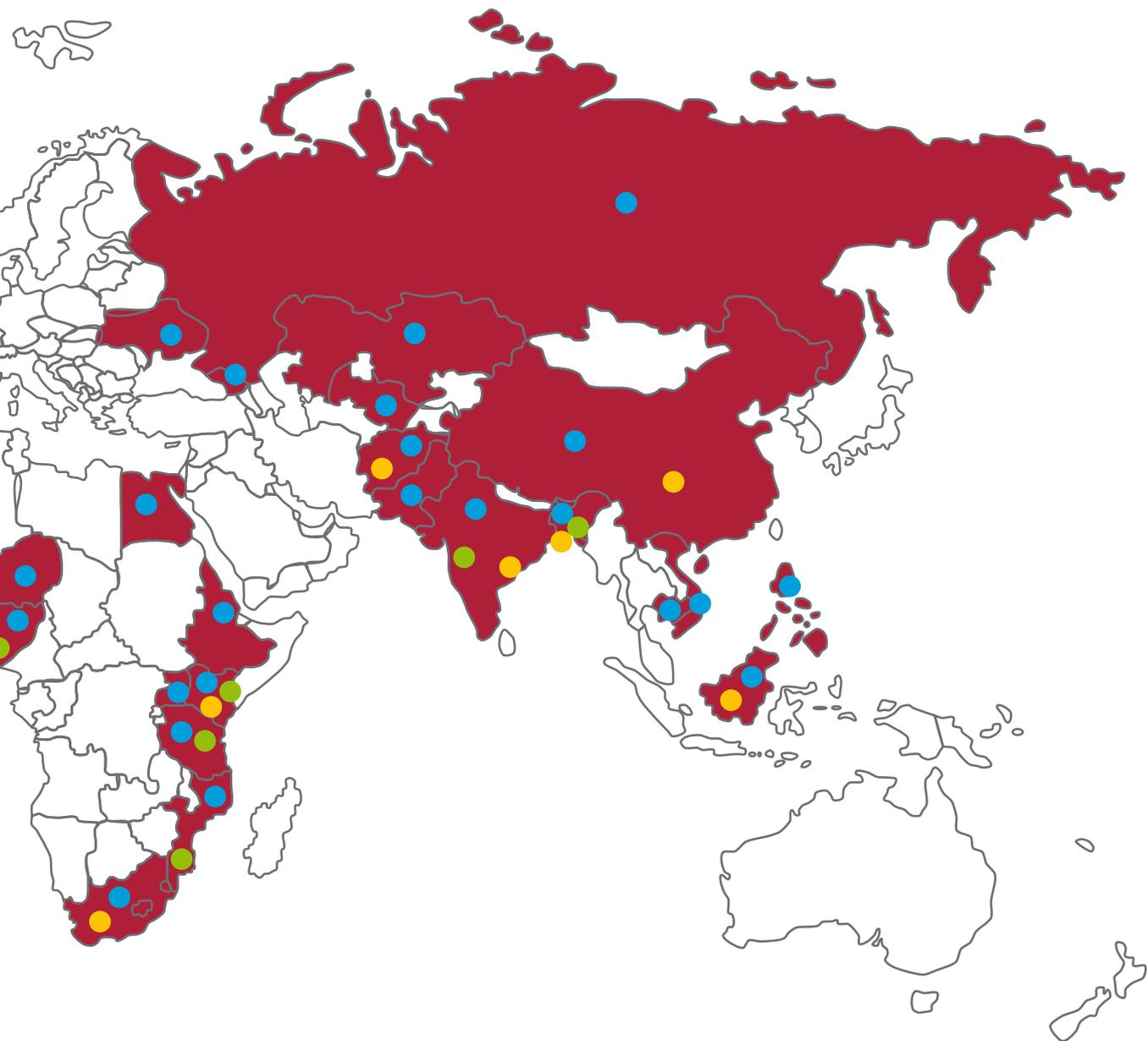
GAIN Program Map

INTERVENTIONS IN OVER 30 COUNTRIES, F AND COMPLEMENTARY FOODS



- Large Scale Food Fortification
- Agriculture and Nutrition
- Maternal, Infant and Young Child Nutrition

FORTIFYING STAPLE FOODS, CONDIMENTS, WITH VITAMINS AND MINERALS



In The Spotlight



Dr Mohibullah Wahdati, Country Manager, Afghanistan

“GAIN Afghanistan worked with partners to scale up its program with the aim to reach 50 percent of the population with wheat flour, vegetable oil and ghee fortified with key vitamins and minerals. GAIN also began to strengthen potassium iodate supply with the Ministry of Public Health so more families can purchase iodized salt more easily. We also moved ahead with a project aiming to reach children in the thousand-day period with nutrient supplements diversifying their diets. I am proud we are making a difference in people’s everyday lives here.”



Basanta Kumar Kar, Country Manager, Bangladesh

“This year, we set many milestones through our innovative models and engagement with key political leaders and decision makers. We increased access to vegetable oil fortified with vitamin A for 45 million Bangladeshis. Through empowering communities, we also began a pilot program giving more than 17,000 primary school children hot cooked school meals fortified with essential nutrients and enabled 200,000 vulnerable families to purchase and use micronutrient powders to fill in the nutrient gaps in their children’s diets.”



Dr. Rajan Sankar, Country Manager, India

“This year we launched a partnership with the Government of Andhra Pradesh that will improve access for more than two million children to a locally manufactured porridge product. Locally-driven partnership models like this that build on existing local food cultures have an enormous potential to be scaled up to make a sustainable difference in improving maternal and child malnutrition.”



Charlotte Pedersen, Representative Office Manager, Netherlands

“The Amsterdam Initiative against Malnutrition is a Dutch public private partnership with the goal of reaching 100 million people with nutritious foods through sustainable market-based solutions. This year we expanded our partnerships to include more than 20 highly committed partners in the North and the South, including leading Dutch companies. We have developed a strong program to be implemented in the coming five years.”



Larry Umunna, Country Manager, Nigeria

“One in four Nigerian children suffers from iron deficiency anemia. Micronutrient powders have proven to improve iron levels in children. Our progress this year in bringing key stakeholders together to integrate the use of micronutrient powders into national guidelines for the control of micronutrient deficiencies is exciting. It will change the way programs fighting child malnutrition are implemented.”



Adrianna Logalbo, Manager, Constituency Mobilization, USA

“Future Fortified worked with cultural influencers – such as children’s book author Dallas Clayton – to raise awareness about the global nutrition challenge across the United States. We are proud to have already built a community of over 30,000 supporters in our first year.”

Annex: Disseminating Evidence to Inform GAIN's Areas of Work

GAIN strives to make its work as evidence-based as possible. GAIN continually commissions research to strengthen existing programs and to provide sound scientific basis for new interventions.

Disseminated

During 2011-2012, ten peer-reviewed journal articles funded or authored by GAIN were published:

- Campbell-AA et al. **Relationship of household food insecurity to anaemia in children aged 6-59 months among families in rural Indonesia.** *Annals of Tropical Paediatrics: International Child Health*, November 2011, 31:321-330.
- Campbell-AA et al. **Relationship of homestead food production with night blindness among children below 5 years of age in Bangladesh.** *Public Health Nutrition*. September 2011, 14(9):1627-31. Epub 4 May 2011.
- Hieu-NT et al. **Multi-micronutrient-fortified biscuits decreased the prevalence of anaemia and improved iron status, whereas weekly iron supplementation only improved iron status in Vietnamese school children.** *British Journal of Nutrition*, January 2012, 16:1-9.
- Nichols-EK et al. **Vitamin D status and determinants of deficiency among non-pregnant Jordanian women of reproductive age.** *European Journal of Clinical Nutrition*, March 2012, 14. doi: 10.1038/ejcn.2012.25.
- Oddo-VM et al. **Predictors of maternal and child double burden of malnutrition in rural Indonesia and Bangladesh.** *American Journal of Clinical Nutrition*, April 2012, 95(4):951-8.
- Rohner-F et al. **Quantification of vitamin A in palm oil using a fast and simple portable device: method validation and comparison to high-performance liquid chromatography.** *International Journal of Vitamin and Nutrition Research*, September 2011, 81(5):335-42.
- Semba-RD et al. **Consumption of micronutrient-fortified milk and noodles is associated with lower risk of stunting in preschool-aged children in Indonesia.** *Food & Nutrition Bulletin*, December 2011, 32(4): 347-353.
- Laillou-A et al. **Micronutrient deficits are still public health issues among women and young children in Vietnam.** *PLoS One*, Epub 17 April 2012, 7(4):e34906.
- GAIN-sponsored Supplement in *Maternal & Child Nutrition*, October 2011 including:
 - (i) Huffman-SL & Schofield-D. **Consequences of malnutrition in early life and strategies to improve maternal and child diets through targeted fortified products.** *Maternal & Child Nutrition*, October 2011, 7 Supplement 3:1-4.
 - (ii) Yang-Z et al. **Fortifying complementary foods with NaFeEDTA--considerations for developing countries.** *Maternal & Child Nutrition*, October 2011, 7 Supplement 3:123-8.

GAIN Worldwide Presence

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