Innovation.
Scale.
Impact.
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In 2013, nutrition continued to garner global attention as a vital and overlooked component of human development. The Scaling Up Nutrition (SUN) movement has seen over 40 countries join. For the first time, nutrition was featured in the G8 Program of Events, hosted by the UK, resulting in the Nutrition for Growth Compact, with pledges in excess of $20 billion in investment backed by multiple governments, donors and organizations. The prospects are good that the global framework that will replace the Millennium Development Goals after 2015 will embed nutrition security.

The consensus on the priority goal of improving nutrition in the first 1,000 days of life has been critical to this progress—demonstrating the links between malnutrition, child survival and the debilitating and lifelong effects of stunting. The Lancet Series on Maternal and Child Nutrition of 2008 and 2013 have made governments and decision-makers much more aware of the importance of nutrition to education, productivity and health outcomes. This, in turn, has underlined the challenge of integrating nutrition into these development sectors.

GAIN made progress in 2013, as we continued to increase our role within this expanding global nutrition movement. In this year alone, our programs helped an estimated 811 million people improve their health through better nutrition, moving us closer to our target of reaching 1 billion by 2015.

While we celebrate these achievements, the new landscape creates a host of challenges and opportunities, taking nutrition into uncharted waters. Most of the new investments in tackling malnutrition in the next decade require building nutrition effectively into the work of other sectors where nutrition has not been a priority, such as agriculture; water and sanitation; and education. An exciting aspect of the Nutrition for Growth Compact is the idea that many new players from civil society and business are ready to work with governments to deliver these solutions.

Our programs helped an estimated 811 million people improve their health through better nutrition.

The theme of this annual report focuses on how GAIN intends to build its work in this new setting around three goals that we believe are critical to tackling malnutrition: innovation, scale and impact. The importance of quickly identifying what interventions and delivery models will help those most in need is a great challenge. Keeping a focus on scale and looking to deliver change and measurable impacts that will benefit hundreds of millions of mothers and children is a standard we need to set and maintain.

Looking ahead, we see strong momentum in the nutrition environment. To sustain this means that, more than ever, nutrition interventions will need to:

• Demonstrate large-scale impact, commensurate with the number of people who are malnourished;
• Be innovative in finding solutions, and continue to focus on many of the critical questions and evidence gaps that remain;
• Continue to build multi-sector, multi-stakeholder partnerships that will bring more players into our efforts to combat malnutrition;
• Bring a variety of locally relevant solutions to the table. These include using our models, technology and experience to support delivery of a greater quantity, quality and variety of nutrition solutions to people in need;
Focus on reaching the poorest and most marginalized more consistently, and work with those communities to design solutions that are specific to their nutritional, social and environmental needs.

GAIN is on track to reach over a billion people with improved nutrition by 2015 and, consequently, make a real impact, especially in reducing global micronutrient deficiency. The task is to steadily increase the quality of our reach, while ensuring we are delivering consistent impact.

Our targeted programs are reaching millions of children, but to really make a difference we know that we need to take each of our successful program models to a much larger scale. Sharing our evidence base and filling evidence gaps, so that other actors, donors and policy makers can make good choices, is a key objective, now and for the future.

We will continue to improve and expand delivery models, as well as tailor solutions to a changing landscape—from ensuring the availability of fortified staple and complementary foods, to providing multinutrient supplements and improving diets.

We want to make sure governments deliver key nutrition interventions to the most needy. We want also to harness the investment and skills of the private sector and to ensure that those suffering from malnutrition have access to high-quality, affordable, nutritious foods. We also want to make sure that we support and reach those who are the most marginalised and often excluded, and who often have the highest levels of malnutrition.

GAIN could not have undertaken its work without the generous financial support of our donors, which is reflected in this report. The Bill & Melinda Gates Foundation remains our greatest supporter, along with USAID, DFID, Irish Aid, the Khalifa Bin Zayed Al Nahyan Foundation, and Dubai Cares. In 2013, we were delighted to receive major new funding from the Government of the Netherlands, the Children’s Investment Fund Foundation, and the French Agency for Development. On behalf of everyone at GAIN, we thank these supporters.

Since we began 11 years ago, GAIN has demonstrated that, with a unified effort, we can have a real and positive impact on the health and welfare of millions of people, based on scalable service models that deliver results affordably and sustainably.

We invite you to join us in this endeavour.

Marc Van Ameringen  
Executive Director

Jay Naidoo  
Chairman
About the Global Alliance for Improved Nutrition (GAIN)

Each year, malnutrition not only threatens billions of people’s health, but it also kills 3.1 million children under age 5 and leaves some 165 million stunted. The global impact is incalculable, thwarting communities and entire economies. GAIN was founded in 2002 to reverse this human suffering by helping vulnerable populations access a wide variety of affordable, nutritious foods. First among our priorities are adolescent girls; women; and children in their first 1,000 days of life, when poor nutrition causes lifelong problems.

We support innovative, multi-stakeholder partnerships that deliver nutrition to as many people as possible. By helping to introduce new and improved models of delivery to meet local needs, our partnerships leverage the resources of governments, civil society, business and humanitarian agencies interested in reversing malnutrition.

Motivated by the key themes of Innovation, Scale and Impact, GAIN is organized across six global initiatives: Large-Scale Food Fortification; Multinutrient Supplements; Nutritious Foods for Children and Mothers; Agriculture and Nutrition; Nutrition in the Workplace, Supply Chains and Communities; and our newest initiative, Nutrition in Emergencies.

GAIN-supported programs in 2013 reached an estimated 811 million people across almost 40 countries, at a cost of only US$ 0.27 per target individual. Our near-term goal is to provide a sustainable source of affordable, nutritious food for 1 billion people by 2015. In our programs, we aim to reduce micronutrient deficiencies and stunting by up to 30 percent and 10 percent, respectively.

As a Swiss-based not-for-profit with international organisation status, GAIN’s worldwide presence includes country offices in Abuja, Accra, Addis Ababa, Dhaka, Kabul, Jakarta, Maputo, Nairobi and New Delhi. Our head office is in Geneva; we also have representative offices in Amsterdam, London, Singapore and Washington, D.C.

We are grateful to donors worldwide who have made our work possible, including the Bill & Melinda Gates Foundation, Children’s Investment Fund Foundation (CIFF), United Kingdom Department for International Development (DFID), the Government of the Netherlands, United States Agency for International Development (USAID), Irish Aid, the Khalifa Bin Zayed Al Nahyan Foundation, the French Agency for Development (AFD), and Dubai Cares.

The strategies we apply

1. Introduce new models of delivery and improve delivery mechanisms to better meet local needs

2. Test new models that are market-based in their approach, innovative, sustainable and scalable

3. Catalyse results-based partnerships among those positioned to create impact—governments, civil society, businesses and humanitarian agencies
**About Nutrition**

The international development agenda is embracing the issue of nutrition as never before, and this momentum has the potential to improve the lives of millions of people.

According to José Graziano da Silva, Director-General of the UN Food and Agriculture Organization (FAO), today, over half of the world’s population is affected by some form of malnutrition, be it hunger, micronutrient deficiencies or excessive consumption.

Currently, one person in every eight does not eat enough food to lead an active life. Many suffer from undernutrition, where the body lacks basic dietary needs for energy, protein and/or micronutrients. This condition is the underlying cause of 45 percent of total child deaths, and hinders physical and cognitive development—the ability to grow, learn and fight diseases.

It is crucial that women are well-nourished as they enter pregnancy—undernourished mothers give birth to undernourished children. Good nutrition is also crucial for the first 1,000 days of life, from conception to the age of 2. If a child does not receive adequate nutrition before the age of 2, her earnings over a lifetime will diminish by as much as 10 percent.

The world’s 165 million stunted children have compromised physical capability and cognitive development, and consequently will be less productive than they would have been otherwise. Collectively, undernutrition can reduce a nation’s economic advancement by at least 8 percent.

Over 840 million people still suffer from hunger today.

Stunting is slowly decreasing globally, but it affected at least 165 million children younger than 5 years in 2011.
Influence of *The Lancet* Series

An initial series of papers published in 2008 on maternal and child undernutrition in *The Lancet* identified the need to focus on the crucial period from conception to a child’s second birthday—the 1,000 days in which good nutrition is most crucial.

A new set of reports published in 2013 re-evaluated the problems of maternal and child undernutrition, while also examining the growing problems of being overweight and obesity for women and children in low- and middle-income countries.

The first *Lancet* series on nutrition stimulated a new institutional response to undernutrition across the globe, helping to create the Scaling Up Nutrition (SUN) movement, the 1,000 Days campaign, and the Nutrition for Growth initiative. The second *Lancet* series called for a nutrition architecture that would be responsive to changing global trends, including increased urbanization, rising rates of obesity and noncommunicable diseases, increasing wealth, and changing dietary patterns.

Such a framework would necessitate integrating nutrition into other program areas, such as agriculture, sanitation and education, which would enable us to embed a nutrition focus in families and communities and ensure sustainability.
Innovation in the New Nutrition Landscape

GAIN’s response to the evolving nutrition landscape has been to bring an innovative approach to new areas, both geographic and demographic, and to be a catalyst for change. We work with diverse partners in nearly 40 countries, including national governments, civil society, academia, international bodies such as the UN, donors, foundations, and local and international businesses. Our pioneering multi-stakeholder partnership model, “Collective Impact,” has been recognized by the Stanford Social Innovation Review as a model of collaboration that achieves large-scale progress in the face of the urgent and complex problems of our time. That same review recognized GAIN as a “backbone organization” for the nutrition sector, playing multiple roles necessary to achieve impact.

The Amsterdam Initiative against Malnutrition

The Amsterdam Initiative against Malnutrition (AIM) is a delivery mechanism that brings over 20 stakeholders together to improve food and nutrition security, including, as founding partners, the Dutch Ministry of Foreign Affairs, Unilever, AkzoNobel, DSM, Wageningen University, the International Cocoa Organization and GAIN. The initiative is among the first of its kind to use a multi-sector partnership approach to tackle malnutrition. Collaboration allows development and testing of models that can be replicated and taken to scale.

Launched in May 2009 during the GAIN Business Alliance Global Forum, AIM is focused on five countries: Kenya, Tanzania, South Africa, Ethiopia and Bangladesh. Local partners take the lead in all projects. In 2013, AIM was awarded a grant of $14.3 million from the Dutch government toward its initial $28.8 million program.

AIM partners invest in creating systemic change and address barriers to market entry for nutritious products including a focus on five key factors:

- Limited demand
- Affordability
- Limited quality control
- Branding requirements for viable businesses targeting the poorest consumers through multi-sector partnerships
- Consumer behaviour and willingness to buy nutritious food

The initiative consists of interventions, such as exploring processing techniques to improve the nutritional value of dried vegetables; incentivizing the dairy sector to fortify milk products; and innovating the retail distribution of multinutrient powders (MNPs).
and positively exercise their influence on consumer choice and behaviour. Obesity and undernutrition threaten to create a global health catastrophe. The Access to Nutrition Index is an urgent call to action for food and beverage manufacturers to integrate improved nutrition into their business strategies. Following the launch of the Index, GAIN created the Access to Nutrition Foundation, an independent, nonprofit organization headquartered in Amsterdam, which will house ATNI and produce future versions of the Index. GAIN is transferring the operations of ATNI to this new organization, which is being funded by the Bill & Melinda Gates Foundation and the Wellcome Trust. Additional information can be found at www.accesstonutrition.org.

Innovation.

GAIN has agreed to a Memorandum of Understanding with the Dalits, one of India’s largest and most excluded social groups. Formerly known as “untouchables,” the group accounts for approximately 200 million people, almost 17 percent of the Indian population. Being from a scheduled caste or a “backward” tribe substantially increases the probability of a child being stunted.

With support from GAIN, in 2012 the National Confederation of Dalit Organizations (NACDOR) implemented a bottom-up participatory process, reaching out to more than 200,000 Dalit men, women and children across 200 villages from 20 districts in five states. The process culminated in the development of a National Agenda for Action on Dalit Nutrition, which was adopted at a national event—NACDOR Three—in New Delhi in December 2012. GAIN is now working closely with NACDOR to develop a comprehensive program to address malnutrition in the Dalit community.

In March 2013, in partnership with the Bill & Melinda Gates Foundation and the Wellcome Trust, GAIN launched the Access to Nutrition Index (ATNI), a new global initiative that evaluates food and beverage manufacturers on their policies, practices and performance related to obesity and undernutrition.

Developing the Index involved an extensive, multi-stakeholder process that included governments, international organizations, civil society, academia and investors at every stage. It was guided by advice from an independent, multi-stakeholder advisory panel and a group of experts on nutrition.

The first edition of the Access to Nutrition Index concluded that the world’s largest food and beverage manufacturers must do much more to increase access to nutritious products.
Momentum behind the Scaling Up Nutrition (SUN) movement continues to grow. Today, 43 countries, along with the Indian state of Maharashtra, have committed to develop a comprehensive and country-owned multi-stakeholder approach to scaling up nutrition, with a focus on women and children.

GAIN plays an integral role in the SUN movement. Our Chairman, Jay Naidoo, sits on the SUN Lead Group, as does GAIN Board member Vinita Bali. At the program level, GAIN convenes the SUN Business Network, the principal channel for business engagement in SUN, alongside co-convenor the UN World Food Programme (WFP). The business network is one of four global networks that support SUN countries, along with donor, civil society and UN agency networks.

Companies that join the network commit to tracking their targets to improve maternal and child nutrition on an annual basis.

Commitments to the SUN Business Network to date include:

- Nutriset will increase the reach of its ready-to-use therapeutic foods to 9 million vulnerable children each year by 2018;
- DSM is working to reach 50 million pregnant and lactating women, as well as children and adults, with its micronutrient powder, multivitamin tablets and other products by 2020; and
- Unilever will reach 500,000 mothers in developing countries with its “hand-washing-with-soap” behaviour-change program.

Future plans for the SUN Business Network include engaging businesses at the country level and supporting the development of local partnerships with governments and other stakeholders, focused on delivering country objectives to scale up nutrition. Updates on the network’s membership and work can be found at www.sunbusinessnetwork.org.
Areas of Work

Active in almost 50 countries fortifying staple foods, condiments and complementary foods with vitamins and minerals.
GAIN has achieved substantial growth. By the end of June 2013, GAIN had reached an estimated 811 million people, which represents an increase of approximately 144 million people (22%) compared with the 667 million reported in 2012. Included in this coverage are women and children, whose number increased by 48 million to 369 million (15%). Forty-eight percent of these individuals are in Africa, 52 percent are in Asia.

### Reach and Coverage

**Target**

Reach 1 billion people with more nutritious foods, including 500 million women and children.

### Affordability and Sustainability

**Target**

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

GAIN’s Achievements

Current projects have a cumulative investment by GAIN of US$ 0.27 per person.

### Public Health Impact

**Target**

Reduce the prevalence of stunting in children by 5% to 10%. Reduce the prevalence of micronutrient deficiencies in children, as well as in women of child-bearing age, by 20% to 30%.

GAIN’s Achievements

GAIN’s projects have shown impact potential of up to 40 percent, and programs are framed to provide a contribution to daily consumption of key vitamins and minerals of around 30 percent.

GAIN targets have been set and continue to be measured through our performance measurement framework. Measurements include the reach of GAIN’s programs; our impact on vitamin and mineral deficiencies; and public- and private-sector commitment to GAIN’s programs. The targets also encourage efficient program delivery by setting benchmarks for cost-effectiveness and maximum overhead.
Cost-Effectiveness in Reducing Death and Illness Caused by Malnutrition

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 ranges from US$ 24, which is under our target, to $36, which is above-target. As our projects scale up, we expect these figures to fall under the benchmark.

Leverage Additional Investments in Nutrition


GAIN’s and Partners’ Achievements

GAIN partners with business and the public sector to multiply the amount invested in the fight against malnutrition. Currently, for every US$ 1 GAIN invests in its nutrition projects, the private sector is investing an additional US$ 4 and the public sector an additional US$ 1.

Keep Overhead Costs Low

Keep overhead as a percentage of total program expenditures at 15% or lower.

GAIN’s Achievements

GAIN’s expenditure on overhead in 2013 was 12.2 percent.
Tackling nutrition challenges requires a range of interventions. Micronutrient fortification of staples and condiments that are eaten by everyone is an affordable and powerful tool in the global effort to improve nutrition. Large-Scale Food Fortification, our first initiative, is the largest contributor to our reach due to our ongoing national-level support of fortification of highly consumed foods like grains, oils and salt. Spending as little as 10 extra cents per person, per year, can significantly improve the nutritional value of food, in turn impacting health.
In Indonesia, vitamin A deficiency affects nearly half of pregnant women and preschool-age children. With our support, Indonesia’s Foundation for Food Fortification piloted fortification of cooking palm oil with vitamin A in 2011. A GAIN-supported study measured vitamin A concentrations in oil throughout the distribution chain, and surveys assessed its effect on the vitamin A status of children and women in West Java.

Fortified oil contributed to bringing vitamin A intake closer to recommended nutrient intakes (RNI), providing 34 percent of daily need for children aged 12 to 23 months; 55 percent to 77 percent among older children; and 42 percent and 50 percent for lactating and non-lactating women, respectively. All beneficiaries’ vitamin A status improved from 2011 to 2012, as did the vitamin A content of breast milk of lactating mothers. Deficiency fell from 5 percent to 18 percent to 0.5 percent to 6 percent.

Additionally, the quality assurance/quality control facility for local production of fortified foods in West Africa will include a quality credit facility financed by the French Agency for Development (AFD).

Success Stories

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Food-fortification programs have reached almost **800 million**
people through GAIN-supported, large-scale projects in 43 countries.

In Egypt, the fortification of baladi bread allows women to get up to 40% of the recommended daily allowance of iron and folic acid.

In a word, the future is about quality. Goals include:

1. Rolling out GAIN’s quality assurance and quality control strategy to increase “effective” reach and coverage of adequately fortified staple foods and condiments by 50 percent in target countries

2. Ensuring that industry and government monitoring agencies have the skills and technical capacity to sustainably ensure micronutrients are at the correct levels in fortified foods

3. Expanding GAIN’s proven track record of offering extended credit for premix purchases to other quality inputs, via the Quality Credit Fund

4. Increasing vitamin and mineral intake by 20 percent to 30 percent in target populations

5. Ensuring that coverage of adequately iodized salt across 15 high-burden countries continues to grow, contributing to optimal global iodine nutrition

6. Leveraging food-fortification and salt-iodization programs to improve nutrition in school meals and other institutional feeding programs

7. Measuring and modelling impact across our fortification programs

GAIN-supported school nutrition programs in India now reach approximately **1 million** children with fortified hot meals.
Undernourished mothers are likely to give birth to undernourished babies, and, if left unmanaged, the cycle can continue for generations. Our goal is to break this cycle, recognizing that good nutrition for the first 1,000 days, from conception to a child’s second birthday, can lead to lifelong improvements in health and development. In countries with the highest rates of malnutrition, multinutrient supplements can help improve nutrition for the whole family when mixed into meals just before serving.
Home fortification with multinutrient supplements is an innovative, cost-effective approach. Multinutrient supplements take various forms, including powders, spreads and pastes, and are easy to consume, but matching the right vitamin and mineral formulation to the nutrient gaps of a target population can be complex. Two other factors are also important:

1. Multiple delivery channels are essential to sustain access to micronutrients on a sufficient scale. The most promising models involve public distribution and building markets that reach the poor. We are developing a portfolio of scalable delivery models that can be replicated, based on our growing understanding of strategies that stimulate investment and improve access;

2. Infant feeding and nutrition is an issue related to both behaviour and access. Education programs that encourage behaviour change are an essential component of our work, especially for pregnant and breastfeeding women. Similarly, we are examining how to improve access to an optimal diet for mothers and children.

Home fortification is now included among the nutrition policies of Afghanistan, Kenya, Nigeria and Vietnam; it spurs institutional demand and lays the foundation for future scaling up. By the end of June 2013, GAIN had covered 1.52 million infants, young children and mothers with projects supported by our Multinutrient Supplements Initiative. This was largely driven by the expansion of our initial programs and growing uptake in Bangladesh and China.

Having piloted a number of projects and models, we were able to identify those key characteristics with the most potential to successfully guide implementation of nutrition programs. We learned that institutional demand is vital to building scale and that methodologies need to consider the context of each country.

The establishment of national multi-nutrient-supplement standards and the contribution of 20 million “MixMe” packets are enabling the scale-up of a national home-based fortification program in Kenya. The home-use packets, supplied by DSM and Herbalife, will reach children 6 to 59 months of age with micronutrient deficiencies in the Rift Valley province.

Malnutrition rates in Bangladesh are among the world’s highest. Anemia exists in 33 percent of preschool-aged children. Although it has been shown to be improving from past estimates, malnutrition remains a moderate public health concern.

GAIN provides affordable sachets of multiple micronutrient powders by partnering with Renata, a Bangladeshi pharmaceutical company, and BRAC, the largest NGO in the world, with an extensive network of 70,000 community health workers. Between August 2012 and July 2013, sales of multiple micronutrient powders in Bangladesh reached 29 million sachets (80 million since the project began), reaching more than 600,000 children. The goal is to reach another 100,000 children in 2014, and scale up to 1 million children per year over the next four years.

In fact, the success and lessons from the project laid the basis for a larger investment from the Children’s Investment Fund Foundation, which will help us expand distribution in 170 sub-districts and target another 4.2 million people over the next four years.
We are refining our program models in new locations, extending our programmatic work to Mozambique, Nigeria, Ethiopia and Vietnam. The way to achieve these goals is to continue scaling up distribution and to introduce new products to serve more people at lower costs.

Key objectives include:
1. Launch a campaign to generate awareness, political will and resources, and mobilize a constituency in support of home fortification as a strategy to improve nutrition outcomes during a 1,000-day window of opportunity.
2. Galvanize implementation of projects to increase access to and consumption of home fortification products by children and women of child-bearing age in GAIN target countries, especially in sub-Saharan Africa and East Asia.
3. Actively improve policies and reduce barriers to entry to incentivize both public- and private-sector actors to expand access to home-based fortification products.

Future Plans

20 million
“MixMe” packets were distributed in Kajiado Central, Kenya.

29 million
Sachets of multinutrient powders were sold between August 2012 and July 2013 in Bangladesh.

878 thousand
People in China were covered with multinutrient supplements.
Improving maternal and child nutrition—particularly in the child’s first 1,000 days—can prevent malnutrition and stunting, and break generational cycles of malnutrition. GAIN has reached 12.3 million children and pregnant and lactating women with affordable and nutritious foods in Côte d’Ivoire, Ghana, India, Indonesia and Kenya.

Working closely with our Multinutrient Supplement Initiative, we have empowered women to request fortified foods; improved access through public delivery channels; changed behaviour; optimized market-based approaches; and expanded our work to encompass a comprehensive nutrition-health-hygiene approach.
A growing trend in solving malnutrition is to improve access to foods through public delivery programs, as well as markets—taking a multi-sector approach to improve the availability of nutritious products. Stakeholder involvement—including academia, policy makers, NGOs and the private sector—is vital to the process.

It is also important to focus on changing infant-feeding behaviour among mothers, with a particular focus on building greater support and encouragement for breastfeeding.

A recent GAIN study with the London School of Hygiene and Tropical Medicine showed that mothers in the East Java province of Indonesia doubt the nutritional quality of their own breast milk, and so are quick to feed their infants with formula. Mothers who do not give their babies at least some formula are perceived as poor. These discoveries are informing an advocacy behaviour-change strategy designed to instill confidence in mothers about the quality of their own breast milk, while demonstrating the downside of infant formula as a substitute.

In the Indian state Andhra Pradesh, millions of individuals now have access to fortified foods. In fact, over 6.75 million individuals have access to fortified supplementary foods, distributed by the state’s Integrated Child Development Services, the largest public facility of its kind in India; more than double the number of people were served last year.

In Uttar Pradesh, GAIN’s program mobilizes communities around nutrition and empowers women to make use of the government’s nutrition and health services.

In Côte d’Ivoire, nearly 120,000 children 6 to 24 months old have been reached with fortified complementary foods as part of a program to promote optimal infant and young-child feeding practices. GAIN is partnering with Protéin Kissée LA SA, a small, local, private enterprise, and Helen Keller International (HKI). Successes include improved nutritional formulation and code-compliant labelling and marketing of fortified products, production capacity of which will be increased with a new production line by 2014.

With GAIN and HKI support, the country adopted revised standards for fortified complementary foods (based on the Codex) and the national version of the Code of Marketing of Breast Milk Substitutes.

GAIN has developed a community-based social enterprise model in India, initially in the State of Rajasthan, to improve the availability of nutritious foods in schools and help illiterate, unemployed women improve their livelihoods. Organized through self-help groups, women have been trained to run a factory and operate the equipment that produces a food supplement. Distributed through Integrated Child Development Services, the supplement is reaching 7,000 children and 3,125 pregnant women.

The model has gained high visibility within the Indian government as a decentralized approach through which a community can take ownership for producing and distributing the food for its own children and pregnant mothers. Working with state governments, GAIN is now developing the model in other parts of India (State of Bihar), and we expect to introduce it in Ethiopia.
Across this Initiative, cumulative coverage has increased by 4.9 million (67%) since the end of 2012. Key successes are in India, Indonesia and Côte d’Ivoire.

GAIN strictly adheres to international standards and guidelines, and encourages national governments to closely regulate their food industries. Our Mother, Infant and Young Child Nutrition strategy is built on WHO and UNICEF recommendations on optimal infant-feeding practices.

1. Practice exclusive breastfeeding from birth to 6 months of age, and continue frequent, on-demand breastfeeding until 2 years of age or beyond;

2. Introduce complementary feeding as of 6 months of age in a timely and safe manner.

In addition to the work being done for mothers, infants and children, GAIN is developing a comprehensive life-cycle approach to improving the nutritional status of all women of reproductive age, but especially that of adolescent girls. This is important not only because almost 30 percent of stunting is related to the inadequate nutritional status of mothers at the time of conception and during pregnancy, but also for improving the health and nutrition of girls and women in their own right.

To have impact, empowering women and mothers to make appropriate nutrition-related decisions for themselves and their children is crucial. The best way to build programs that have impact and sticking-power is to reach out to women in their daily environment, including in the workplace, since the health system only touches people’s lives at specific times. GAIN has already taken this approach in the Indian state of Uttar Pradesh, where we work closely with women’s community self-help groups. We are also exploring new opportunities to reach women, such as in the workplace.
It is critical to increase crop yields to feed the world’s population, but equally important to improve nutrition. High-quality food and a diverse diet must go hand-in-hand. It is an unfortunate irony that many of the world’s poor, who rely on agriculture for their livelihoods, have diets that lack nutritional diversity.

This is why GAIN explores the linkages between agriculture and nutrition, identifying ways to enhance nutrition throughout the agricultural supply chain, and innovating to make nutritious foods more affordable for and accessible to vulnerable people.
Learnings

In researching various agricultural interventions that improve nutrients in food, GAIN has uncovered several findings that influence our focus:

1. The marketplace is the most effective place for making dietary changes. Even families who engage in agriculture for a living make choices based on what is available in the market;

2. Despite working on crop-yielding farms, many agricultural families are undernourished and often hungry;

3. These families, who acquire most of their food in the local market, are not receiving a diverse diet from the choices they make.

In light of these challenges, GAIN has found that it is possible and advantageous to modify the agricultural supply chain in order to increase the amount and diversity of nutrients in a range of foods. From seed choices and growing techniques to food processing, farmers can make choices and employ new technologies to make more food more nutritious.

Achievements

To mobilize the private sector in the fight against malnutrition and to ensure that the best ideas in agriculture and nutrition get to scale, GAIN has developed the Marketplace for Nutritious Foods. Through in-person meetings and online discussions, innovative business ideas can be tested and adapted, helping entrepreneurs address market failures and policy constraints.

Launched initially in Mozambique, Kenya and Tanzania, the Marketplace for Nutritious Foods has attracted submissions of more than 300 innovative business ideas to get more nutritious foods into the food system that poor people rely on. Eleven local businesses have been invited to proceed to the first stage for strategic and business planning support before they are eligible for grants and technical assistance from GAIN. Further down the line, there is potential consideration by interested investors.

Success Stories

GAIN and USAID completed a Focused Ethnographic Study on foods being consumed by children, aged 6 to 24 months, who lived in two areas in rural Kenya. It revealed that diets of locally available foods were low in iron, zinc, calcium and vitamin B12. It also showed that mothers sourced core foods for infants and young children from markets, indicating that improving access to nutritious complementary foods may be successful through the marketplace.

GAIN has also investigated opportunities in Bangladesh to improve the nutrient density of rice. Dependence on a staple food so low in nutrient density likely contributes to high rates of malnutrition. By using zinc-enriched fertilizer, modifying parboiling methods, reducing the degree of rice milling, and fortifying rice grain in the soaking process, GAIN tested the most effective approach to increasing zinc content.
Future Plans

GAIN’s Agriculture and Nutrition Program Planning Tool has been tested and trialled in three countries, and efforts will continue to refine and expand its use. The tool allows the designers and implementers of agricultural interventions to reflect on the scope of their work and demonstrate which people benefit nutritionally and by how much.

Another area of focus is refining and implementing the soaking process as the most effective means of fortifying rice with zinc in Bangladesh and then, potentially, scaling up the process so it has wider reach and impact.

GAIN will also expand research to identify particular needs and solutions, and to spur interest among the agriculture industry and investors for not just more food, but also better food. This will provide a solid foundation on which GAIN partners can develop sustainable programs.

Additionally, GAIN is developing its advisory services to bring partners and thought leaders together to make nutrition non-negotiable in the political and agricultural communities. This will be particularly important as climate change impacts the availability of nutrients in the food system, potentially requiring shifts to more heat-tolerant grains.

More than 300 entrepreneurs have joined the Marketplace for Nutritious Foods in Mozambique, Kenya and Tanzania.

GAIN launched an online field tool for agriculture and nutrition programs.

80% of diets in Bangladesh are made up of rice.
Bangladesh Rice Value Chain: Concepts Evaluated for Nutritional Impact and Business Feasibility in Phase I

Reduced milling (degree of polishing) tests the contribution less polishing will make on retention of nutrients and the overall nutrient density of the rice in its raw and cooked form.

Nutrition-sensitive parboiling modifies the temperature and/or time at the parboiling stage to improve micronutrient retention in the rice. Parboiling is the process of steaming after soaking, resulting in rice that takes less time to cook. Reducing parboiling time can allow for more nutrients to be driven from the rice bran into the endosperm.

Adding zinc sulfate to the soaking water helps the grain absorb zinc directly.

Certain applications can improve the zinc content in the rice grain (and increase zinc content in cooked rice).

Reducing parboiling time can allow for more nutrients to be driven from the rice bran into the endosperm.
Widespread nutrient deficiencies can have a dramatic effect on productivity, impacting gross domestic product (GDP). Conversely, a well-nourished workforce is more productive, and leading economists rank nutrition among the top development investments. At the 2013 Nutrition for Growth Compact, many companies committed to making workplace nutrition improvements. This initiative will help businesses improve nutrition throughout their supply chains, supporting diverse diets and increasing awareness of nutritional needs of the individuals that are employed along their supply chains—both directly and indirectly—and in their communities.
The Nutrition for Growth Compact, announced on the margins of the 2013 G8 meeting in June, reflects a new commitment from business to focus on improving nutrition for their own workforces. GAIN’s Workplace Nutrition Program will work with Compact signatories, and a much wider set of interested companies, to improve health for employees through nutrition-sensitive policies such as maternity leave and breastfeeding promotion, and targeted interventions such as nutrition education, nutritious foods in kitchens and canteens, and innovative programs using voucher systems and mobile technology to build links to local markets.

Companies increasingly see the value of investment, not only because they have a duty of care to their employees, but also because improved nutrition can lead to increased productivity, reduced absenteeism, lower employer-sponsored healthcare costs, and improved employee retention, with benefits for employees, families and broader communities. Employer-led initiatives are equally important for workers along key supply chains—the productivity and sustainability of these chains depend on nutrition-secure workers.

The potential impact of these programs is huge; the cash crop supply chains of cocoa, coffee and tea alone offer the potential to improve the lives of nearly 100 million farmers and family members whose nutrition needs are often underserved by traditional markets and social safety nets.

A major achievement has been the launch of the Business Platform for Nutrition Research, applying the research capacities of the global private sector to help define, fund and disseminate new research to improve nutrition in the developing world. Also eliciting the involvement of donors, academia, civil society and national governments, the group will focus on how to efficiently promote health and resilience and reduce barriers to entry for new products and technologies that can reduce undernutrition.

In January 2014, GAIN will start a new project in Bangladesh to improve the nutritional status of female workers in garment factories. The project will build on an existing health program, and will involve the provision of more nutritious foods as well as behaviour change interventions related to feeding practices of mothers of children under 2 years old.

Chocolate produced from cocoa beans is consumed all over the world, with more than 20 million family members directly dependent on cocoa for their livelihoods. Currently, most cocoa smallholders live below the poverty line and lack access to nutritious food. In fact, most of the farmers and workers engaged in the cocoa sector have high levels of malnutrition.

This is why we have been looking into ways to improve nutrition throughout the cocoa supply chain, and have enlisted the support of many large cocoa producers, traders, processors and food companies interested in developing solutions. This will improve sustainability, as well as the health and productivity of workforces.
GAIN is identifying opportunities to support improved nutrition policies within companies, covering such issues as maternity protection, including supportive corporate HR policies and guidelines on maternity leave and workplace breastfeeding; increased access to nutritious foods through workplace canteens and cafeterias; nutrition education; and other interventions.

We are also continuing to assess corporate sustainability programs to identify potential entry points for integrating nutrition across a company’s corporate footprint—addressing the health and well-being of workers within these supply chains, initially starting with three commodity cash crops—cocoa, tea and coffee.

And we expect to work with communities where companies operate to ensure that community members have access to a range of nutritional interventions, with a focus on such sectors as agribusiness, food and beverage, extractive industries, and manufacturing. These programs will include stakeholders from government, civil society and other key constituencies.

The Business Platform for Nutrition Research—launched alongside the UN General Assembly in September 2013—included a commitment to participate from 10 global corporations.
GAIN is developing an innovative portfolio of activities and programs that address nutrition in emergencies. Building on our experience in quality assurance and control, and leveraging existing interventions, GAIN aims to improve the procurement and quality assurance of foods used in emergencies; drive private-sector research and development for emergencies; and improve market resilience and disaster preparedness by improving local production of foods.
Achievements to Date

GAIN partnered with the World Food Programme (WFP) and a local business partner in Afghanistan to establish local production of supplementary foods that are used to treat moderate acute malnutrition and improve disaster preparedness. A modular, containerized production facility was completed in 2013 and will be installed in Kabul in early 2014.

In order to improve the nutritional content of lipid-based nutrient supplements, GAIN partnered with WFP in 2013 to undertake a study on the stability of premix in LNS over a two-year storage process.

GAIN commissioned an assessment of the most common quality issues in producing locally ready-to-use therapeutic foods. This has provided us with a number of recommendations for improving the quality and costs of ready-to-use therapeutic foods in 2014.

Hunger and malnutrition are rampant among refugees and displaced populations, representing currently around 40 million people worldwide, many of whom—infants, children, adolescents, adults and the elderly—suffer from one or more of the multiple forms of malnutrition.
Financial Statements 2012-2013
Summary of audited accounts

Consolidated Balance Sheet as of 30 June 2013
(with restated 2012 comparative figures)

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>As restated</th>
</tr>
</thead>
<tbody>
<tr>
<td>US$</td>
<td>US$</td>
<td></td>
</tr>
<tr>
<td>Current Assets</td>
<td>65,316,167</td>
<td>59,507,436</td>
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<tr>
<td>Non-Current Assets</td>
<td>2,410,668</td>
<td>602,712</td>
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<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td><strong>67,726,835</strong></td>
<td><strong>60,110,148</strong></td>
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<td>Current Liabilities</td>
<td>54,638,607</td>
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<td>Long-Term Liabilities</td>
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<td>Restricted Funds</td>
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<td>Capital of the Foundation</td>
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<td>199,597</td>
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<tr>
<td><strong>TOTAL LIABILITIES, FUNDS &amp; CAPITAL</strong></td>
<td><strong>67,726,835</strong></td>
<td><strong>60,110,148</strong></td>
</tr>
</tbody>
</table>

These financial statements were approved by the Board on December 4, 2013.

Consolidated Statement of Operations
for the year ended 30 June 2013
(with restated 2012 comparative figures)

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>As restated</th>
</tr>
</thead>
<tbody>
<tr>
<td>US$</td>
<td>US$</td>
<td></td>
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<tr>
<td><strong>INCOME</strong></td>
<td>42,758,025</td>
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<tr>
<td><strong>DIRECT &amp; ADMINISTRATIVE EXPENSES</strong></td>
<td>45,722,665</td>
<td>40,923,733</td>
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<td><strong>INTERMEDIATE NET (deficit)</strong></td>
<td>(2,964,640)</td>
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<td><strong>Net financial income</strong></td>
<td>270,628</td>
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<td><strong>Other income</strong></td>
<td>255,933</td>
<td>231,667</td>
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<tr>
<td><strong>NET OPERATING (deficit)</strong></td>
<td>(2,438,079)</td>
<td>(4,807,012)</td>
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<tr>
<td><strong>Net Surplus for the year prior to allocations</strong></td>
<td>(61,921)</td>
<td>(4,807,012)</td>
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<tr>
<td><strong>Allocations to restricted and unrestricted funds</strong></td>
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<td>[ ]</td>
</tr>
<tr>
<td><strong>Net Surplus for the year after allocation</strong></td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
</tbody>
</table>

For full SWISS GAAP [FER] disclosures, please see the audited financial statements.

Footnote:
In the fiscal year 2012-2013, GAIN adopted a new accounting framework to improve the transparency of its financial statements. GAIN selected Swiss GAAP FER, and specifically Swiss GAAP FER 21 (Accounting for charitable, social nonprofit organizations), as the most appropriate for a growing nonprofit to implement and corresponded to the charitable status of the organization. Use of Swiss GAAP FER improves the transparency of the allocation of the resources that GAIN spends on behalf of donors.
Program Expenditure (%)

- Nutritious Foods for Children & Mothers: 1%
- Agriculture & Nutrition: 8%
- Multinutrient Supplements: 9%
- Monitoring, Learning & Research: 9%
- Overhead: 13%
- Investment, Partnerships & Advocacy: 22%
- Large-Scale Food Fortification: 38%

Program Expenditure by Region (%)

- Africa: 36%
- Asia: 44%
- Rest of the World: 20%

Program Expenditure by Country (top 10 countries) (%)

- Tanzania: 4%
- Egypt: 5%
- Mozambique: 5%
- Indonesia: 6%
- Nigeria: 8%
- Ivory Coast: 8%
- Afghanistan: 10%
- Kenya: 14%
- India: 17%
- Bangladesh: 23%
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, USA  

Vinita Bali  
Managing Director, Britannia Industries Limited, India  

Ashok Kumar Bharti  
Head of the National Confederation of Dalit Organisations. Appointed May 2013  

Pierre Henchoz  
Private Banker, Switzerland  

Richard Hurrell  
Professor Emeritus, Institute of Food Science and Nutrition, Swiss Federal Institute of Technology, Switzerland  

Kaiser Kabir  
CEO and Managing Director of Renata, Bangladesh  

Anna Larley  
Associate Professor, Nutrition and Food Science, University of Ghana  

Anne Scott  
Executive Director of Programs, Children Investment Fund Foundation, United Kingdom  

Admassu Tadesse  
President and Chief Executive Officer, PTA Bank, Kenya  

Joachim von Braun  
Director, Center for Development Research and Professor, Economics and Technological Change, University of Bonn, Germany  

Stanley Zlotkin  
Chief, Global Child Health, Hospital for Sick Children, Canada  

Nicholas Aliupui  
Chair of the GAIN Partnership Council; Chair of the GAIN Board of Directors  

H.E. Mohamed Haji Al Khoori  
Executive Director of Khalifa Bin Zayed Al Nahyan Foundation, UAE. Appointed December 2012  

Martin Bloem  
Chief, Nutrition and HIV & AIDS Policy Unit, World Food Programme, Italy  

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, United Kingdom  

Pierre van Hedel  
CEO, Rabobank Foundation, The Netherlands. Appointed December 2012  

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, Thailand  

Ex Officio Members

Nicholas Aliupui  
GAIN Partnership Council Vice-Chair; Director, Programme Division, United Nations Children’s Fund, USA  

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

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

Manoj Kumar  
CEO, Naandi Foundation, India  

Ibrahim Mayaki  
Chief Executive Officer, NEPAD, South Africa  

David Naborro  
Special Representative of the UN Secretary General for Food Security and Nutrition and Coordinator of the High Level Task Force for the Global Food Security Crisis  

Stephan Tanda  
Managing Board, Royal DSM, The Netherlands  

Axton Salim  
Director, Indofood, Indonesia  

Kathy Spahn  
President and CEO, Helen Keller International, USA  

Board members shall serve a three-year term, or such other term as decided by the Board, renewable upon a Board decision, up to a maximum of nine years, provided the individual appointed as representative by a key donor organization or donor country government remains employed by such organization or government.
Senior Management

Operations Committee

Marc Van Ameringen
Executive Director

John Fairhurst
Chief Operating Officer

Dougal Freeman
Chief Financial Officer

Steve Godfrey
Chief Investment Officer

Jana Jauffret
Director, Organisational Development and Governance

Executive Management Committee

Consists of the Executive Director, Operations Committee, and:

Matt Freeman
Director, Workplace, Supply Chain and Community Nutrition

Greg S. Garrett
Director, Large-Scale Food Fortification

Katharine Kreis
Director, Strategic Programs

Marti van Liere
Director, Nutritious Foods for Children and Mothers

Nicki Lyons
Director, Communications, Policy and Advocacy

Bonnie McClafferty
Director, Agriculture and Nutrition

Lynnette Neufeld
Director, Monitoring, Learning and Research

Dominic Schofield
Director, Multinutrient Supplements

Karen Ziffer
Director, US Office

Country Managers

Alem Abay
Country Manager, Ethiopia

Stefan Engels
Country Manager, Mozambique, and Representative, South Africa

Adan Kabelo
Country Manager, Kenya

Basa Kalo
Country Manager, Bangladesh

Ravi Menon
Country Manager, Indonesia

Emmanuel T. Quaye
Country Manager, Ghana

Rajan Sankar
Country Manager, India, and Senior Advisor, South Asia

Manohar Shenoy
Country Manager, Afghanistan

Larry Umunna
Country Manager, Nigeria
Donors and Partners

“We have seen great progress in countries’ commitment to food fortification over the past decade, and through partnerships with local food industries, hundreds of millions of consumers are being reached daily with more nutritious foods. GAIN has been a core partner in this effort, helping to scale up food fortification in a number of countries.”

Bill & Melinda Gates Foundation

“CIFF aspires to find sustainable solutions to undernutrition in order to save children’s lives and have a lasting impact across generations. GAIN is an important partner in that endeavour.”

“Our cooperation with GAIN comprises a highly innovative combination of complementary in-country programs, continued support to the GAIN Pre-mix Facility, catalytic support to SUN business networks, and further incubation and development of bankable proposals under the Amsterdam Initiative against Malnutrition. AIM has shown in the last couple of years that it is possible to leverage business, NGO and academic resources for large-scale interventions to improve nutrition for the poorest people, especially women and young children.”

Government of the Netherlands

“Tariq Al Gurg, Chief Executive Officer, Dubai Cares

“Our partnership with GAIN has delivered much success in bringing nutritious meals to thousands of underprivileged school children, resulting in increased health and educational outcomes. The learnings from our program with GAIN have complemented our work in School Health and Nutrition, further impacting many more children.”

Dubai Cares
Donors and Partners (continued)

“GAIN is the driving innovative force combining the best of public health and the power of business, to deliver better nutrition outcomes at scale.”
Charles Slaughter, Board Member,
Horace W Goldsmith Foundation

“Irish Aid is delighted to support GAIN. We believe that the private sector has an important role to play in scaling up nutrition globally, through skills, investment, knowledge and developing markets. Working together with governments and civil society partners, we are making progress on addressing undernutrition, and we are investing in future generations of strong and healthy citizens.”

“On behalf of the American people, the United States Agency for International Development continues to support collaboration with GAIN to improve nutrition through our leadership of Feed the Future, the U.S. government’s global hunger and food security initiative. As one of the initial supporters of GAIN, USAID collaboration supports improved nutrition, agriculture-sector growth, and private-sector engagement, which advances Feed the Future’s goals to reduce poverty and undernutrition in the countries where we work.”
Contact

Geneva, Switzerland
Rue de Vermont 37–39
CH-1202 Geneva, Switzerland
T +41 22 749 1850
F +41 22 749 1851
E info@gainhealth.org

Amsterdam, Netherlands
Spaklerweg 14
1096 BA
Amsterdam, Netherlands

Singapore, Republic of Singapore
354 Tanglin Road #03-13/14
Singapore 247672
Republic of Singapore
T +65 647 229 10

London, United Kingdom
3rd Floor
28-30 Worship Street
London EC2A 2AH, United Kingdom
T +44 20 70 42 13 90

Washington, D.C., USA
1776 Massachusetts Avenue, NW
Suite 700
Washington, D.C. 20036 USA
T +1 202 559 8520
F +1 202 559 8515

Kabul, Afghanistan
302, Street 6, (Navoi Street), Lane 3
Police District 10
Qala-e-Fatehullah Khan
Kabul, Afghanistan
T +93 20 22 00 773

Jakarta, Indonesia
Menara Palma 12th Floor
Jl.HR. Rasuna Said Kav.6 Blok X-2
12950 Jakarta, Indonesia
T +62 21 2939 1111

Addis Ababa, Ethiopia
Bole Sub City
Kebele 03-05
House no’162
TK International Building
1st floor
Addis Ababa, Ethiopia
T +251 910 099 821

Tema, Ghana
P.O. Box CS 8571
Tema, Ghana

Nairobi, Kenya
GAIN co/International Livestock
Research Institute (ILRI)
Old Naivasha Road
Nairobi, Kenya
T +254 020 422 3035/37

Maputo, Mozambique
Rua dos Desportistas, #649
12th floor
Maputo, Mozambique
T +27 76 142 3439

Abuja, Nigeria
2nd Floor, Abia House
Plot 979, First Avenue
Off Ahmadu Bello Way
Central Business District
Abuja, Nigeria
T +234 9 8766535