

<b>Programme Title:</b>	Joint Programme on Integrated Nutrition and Food Security Strategies for Children and Vulnerable Groups in Viet Nam
<b>Country:</b>	Viet Nam

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## II. Programme summary

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**Programme title:**

Joint Programme on Integrated Nutrition and Food Security Strategies for Children and Vulnerable Groups in Viet Nam

**Sectorial area of intervention and policy objectives**

Food security and nutrition

Integrated approaches for alleviating child hunger and undernutrition.

Promote sustainable and resilient livelihoods for vulnerable households, esp. in the context of adaptation to climate change

Strengthen capacities to generate information through assessment, monitoring and evaluation.

**Joint programme summary:**

Despite the Viet Nam achieving a significant reduction in both under-five mortality and infant mortality, with both rates being halved between 1990 and 2006, malnutrition among children under five remains a public health priority. The most recent statistics show a slow but steady decline in malnutrition rates but it remains a burden in the country and may account for 45 per cent of total under-five deaths. 26.7 per cent of under-fives are stunted, 16.2 per cent are underweight and 6.7 per cent are wasted (2012 NNS).

Childhood stunting remains one of the fundamental challenges for improved human development in Viet Nam. Almost 2.1 million children under age five in Viet Nam are considered too short for their age, or stunted. The 2011 National Nutrition Survey revealed significant disparities in the nutritional status of children in relation to the socio-economic conditions of the households they live in and among provinces and ethnic groups. The stunting prevalence is above 40 per cent in Lao Cai province in the North Eastern Region and 30 per cent in Ninh Thuan province in the South Central Coastal Region, compared to less than eight per cent in Ho Chi Minh City in the South Eastern Region of Viet Nam. Over 50 per cent of children

from H'Mong ethnic minority group predominantly found in Lao Cai and 40 per cent of children from Rag Lei ethnic minority group found in Ninh Thuan are also stunted compared to 23 per cent in Kinh (the ethnic majority) children.

Resolution No. 63/NQ-CP of December 23, 2009, on national food security clearly states the Government's on-going commitment to improve the nutrition situation in the country. This objective is further reflected in the National Nutrition Strategy 2011 - 2020 and Action Plans which recognise the need to focus on reducing stunting and intensify interventions which address stunting before birth and during the first two years of a child's life. However, there remain critical gaps in terms of capacity and effective utilisation of existing health systems, community networks and models to bring evidence-based interventions to scale in areas most affected by under-nutrition.

The UN Joint Programme (JP) will target the most disadvantaged ethnic minorities, those living in poverty and seek to reduce vulnerability. It will focus on supporting Lao Cai province in the North Eastern and Ninh Thuan province in the South Central Coastal Viet Nam for generation of evidence that will facilitate national policy changes and scale up of sustainable and integrated nutrition and food security models. Both Lao Cai and Ninh Thuan are provinces with high poverty rates; at around 20 per cent compared to national average of 10 per cent and also provinces with a high percentage of ethnic minorities; accounting for 64 per cent of the total population in Lao Cai province and around 25 per cent in Ninh Thuan province. The need for substantial health and social sector engagement and collaboration with local authorities will be essential for the success and sustainability of action, especially at the community level. The UN has existing working agreements with the local authorities in these targeted vulnerable areas that will facilitate timely implementation of the JP after the inception phase.

The overall objective of the JP is to support development and implementation of integrated nutrition and food security strategies to meet the equitable targets set in the National Nutrition Strategy and National Food Security Strategy.

36 million women of reproductive age and 7.1 million boys and girls under five in Viet Nam will benefit from the proposed policies, plans and standards generated from modelling and evidence generation in the two provinces of Lao Cai and Ninh Thuan.

The programme will more broadly support capacity development of local institutions, organisations and policy makers responsible for management and implementation of nutrition and food security programmes. The programme priorities have been determined by the National Strategies for Nutrition and Food Security and will be further guided by the multi-sectoral strategies from the Scaling-Up Nutrition (SUN) Movement as Viet Nam joined this global initiative in 2014. The JP will be implemented as part of the UN One Plan and coordinated within the framework of the UN JP Groups on Health and Climate Change and Environment /UN Disaster Risk Management Team. The JP will also build on lessons learnt and recommendations from the former MDG-F supported JP on Integrated Nutrition and Food Security Strategies in Viet Nam.

**Duration:**

Saturday, November 1, 2014 to Saturday, December 31, 2016

**UN Lead Agency:**

Food and Agriculture Organization (FAO)

**UN Participating Organizations:**

United Nations Children's Fund (UNICEF)

World Health Organization (WHO)

#### Local Partners:

- Maternal and Child Health Department, Ministry of Health
- Crop Production Department, Ministry of Agriculture and Rural Development
- Lao Cai and Ninh Thuan Provincial Peoples Committees
- Provincial Departments of Planning and Investment
- Provincial Health Departments and Reproductive Health Centres
- Department of Agriculture and Rural Development
- Provincial Centre for Rural Water Supply and Sanitation
- Mass Organisations, including the Farmers' Union, Women's Union and Trade Union
- National and local media agencies
- Private Sector, including UNILEVER, local seeds supplier companies, private hospitals and clinics, local pharmaceutical companies, representatives from UNICEF's Corporate Advisory Board and UNICEF Next Generation of Young Leaders.
- Global Initiatives and Non-Governmental Organisations

### III. Programme budget

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**Total amount requested from the SDG-F:**  
1 500 000.00

**Total contribution through matching funds:**  
1 830 000.00

Aggregate amount requested and broken down by Agency:

<b>Name of Agency:</b> Food and Agriculture Organization (FAO)	<b>Amount:</b> 750 000.00
<b>Name of Agency:</b> United Nations Children's Fund (UNICEF)	<b>Amount:</b> 650 000.00
<b>Name of Agency:</b> World Health Organization (WHO)	<b>Amount:</b> 100 000.00

Aggregate matching funds amounts and broken down by source:

#### Short explanation of strategy:

The matching funds for the implementation of the JP will be divided between Government Target Programmes for nutrition and food security and UN agencies regular and trust funds from other donors.

<b>Name of source:</b> Ministry of Health (MoH)	<b>Amount:</b> 800 000.00
<b>Name of source:</b> Ministry of Agriculture and Rural Development (MARD)	<b>Amount:</b> 200 000.00
<b>Name of source:</b> FAO	<b>Amount:</b> 80 000.00
<b>Name of source:</b> UNICEF	<b>Amount:</b> 650 000.00
<b>Name of source:</b> WHO	<b>Amount:</b> 100 000.00

Aggregate amount requested and broken down by UNDG Harmonized Budget Category

	SDG-F Budget	Matching Funds
<b>Staff and other personnel costs</b>	315 000.00	

<b>Supplies, Commodities, Materials</b>	37 500.00	
<b>Equipment, Vehicles and Furniture including Depreciation</b>	0.00	
<b>Contractual services</b>	525 500.00	
<b>Travel</b>	70 000.00	
<b>Transfers and Grants Counterparts</b>	390 000.00	
<b>General Operating and Other Direct Costs</b>	57 000.00	
<b>Total Programme Costs</b>	1 395 000.00	
<b>Indirect support costs (not to exceed 7%)</b>	105 000.00	
<b>Grand TOTAL</b>	1 500 000.00	1 830 000.00

## IV. Programme description

### Background and rationale:

In the past decade, Viet Nam has achieved an impressive rate of socio-economic development paralleled by broad improvements in the health sector. Viet Nam has already achieved the targets for both under-five mortality and infant mortality, with both these rates being halved between 1990 and 2006. The infant mortality rate was reduced from 44.4 per 1,000 live births in 1990 to 14 in 2011 (MICS 2011). The under-five mortality rate has also been reduced considerably, from 58 per 1,000 live births in 1990 to 16 in 2011 (MICS 2011). The prevalence of children under five who are stunted fell from 35.2 per cent in 2006 to 26.7 per cent in 2012 (2012 NNS).

Despite the achievements made, disparities are beginning to widen, mainly related to ethnicity, place of residence, household income and maternal education. For example, child mortality rates for ethnic minorities have increased between 2006 and 2011 and they remain 3.5 times higher than for the Kinh majority. Full immunization rates are 22 per cent lower for children in the poorest quintile, than for children in the richest quintile, and this gap has increased.

The Government has identified several priorities within the overall health plan as well as the national target programmes on reproductive health care and nutrition improvement of Vietnamese people. These all identify inequity as an issue, with interventions targeted towards hard to reach populations, areas of high neonatal deaths and high rates of stunting.

Despite Viet Nam having achieved a significant reduction in malnutrition among children under five, under-nutrition remains a public health priority. The most recent statistics show a slow but steady decline in malnutrition rates that remains a burden in the country and may account for 45 per cent of total under-five deaths. 26.7 per cent under-fives are stunted, 16.2 per cent are underweight and 6.7 per cent are wasted (2012 NNS). More than 5 per cent of births are low birth weight, and require special attention to ensure appropriate feeding practices. Strong regional disparities in nutritional status persist and vulnerable groups are facing additional challenges of volatile food prices, the impact of the financial crisis and climate related hazards. Almost one in three children (2.1 million) under age five in Viet Nam are considered too short for their age and childhood stunting remains one of the fundamental challenges for improved human development in the country.

Breastfeeding is very important for child survival and development. The 2013-14 MICS preliminary data shows that the percentage of infant under six months of age who are exclusively breastfed has increased by 40 per cent from 17.4 per cent to 24.3 per cent. However, challenges remain to achieve the national target of 60 per cent in 2020. There was a drop to 26.5 per cent of new-borns breastfed within one hour of birth compared with 39.7 per cent from the previous MICS findings. Early suckling is associated with successful establishment and maintenance of breastfeeding throughout infancy. In addition, several studies indicate that initiation of breastfeeding within the first hour of birth could prevent up to 22 per cent of neonatal deaths. However, there was no change in the percentage of new-borns with weight below 2,500 grams (5.7 per cent). Nonetheless, birth weight disparities continue to exist in Mountainous and ethnic minority areas (7.2 per cent in Central Highland and 6.6 per cent in the North Central and Central Coastal regions).

The 2011 National Nutrition Survey guiding the formulation of the nutrition strategy revealed significant disparities in the nutritional status of children in relation to the socio-economic conditions of the households they live in and among provinces and ethnic groups. The level of stunting is approximately three times higher amongst children from the poorest households compared to the wealthiest households. The stunting prevalence was above 40 per cent in Lao Cai province in the North Eastern Region and 30 per cent in Ninh Thuan province in the South Central Coastal Region, compared to less than eight per cent in Ho Chi Minh City in the South Eastern Region of Viet Nam. Over 50 per cent of children from H'Mong ethnic minority group predominantly found in Lao Cai and 40 per cent of children from Rag Lei ethnic minority group found in Ninh Thuan were also stunted compared to 23 per cent in Kinh (the ethnic majority) children. For stunted children, the dietary intake did not meet the daily recommended intake of most nutrients required for optimal growth.

The Government is committed to scaling up nutrition investments. There are high levels of cohesion within the Government as well as among the UN, other donors and implementing partners regarding the importance of tackling the problem of under-nutrition. Under-nutrition has serious consequences not only to child health, but also the long term impact of country's social and economic development.

It reduces a child's chance of survival, while also hindering optimal growth, health, cognitive ability and productive performance later in life. Under-nutrition is a major contributing factor to child mortality, disease and disability. For example, a severely stunted child faces a four times higher risk of dying, and a severely wasted child is at a nine times higher risk. Specific nutritional deficiencies such as vitamin A, iron or zinc deficiency also increase risk of death. Under-nutrition can cause various diseases such as blindness due to vitamin A deficiency and neural tube defects due to folic acid deficiency.

As stunted children enter adulthood with a greater propensity for developing obesity and other chronic diseases, the possibility of a burgeoning epidemic of poor health opens up, especially in transitional countries experiencing increasing urbanization and shifts in diet and lifestyle. This epidemiological transition could create new economic and social challenges in a middle-income country where stunting is prevalent, especially among poorer and vulnerable population groups.

Mother's nutrition and health status are important determinants of stunting. An undernourished mother is more likely to give birth to a stunted child, perpetuating a vicious cycle of under-nutrition; gender poverty; lack of education and further disempowerment. The economic costs of under-nutrition include direct costs such as the increase burden on the health care system, and indirect costs of lost productivity.

In tackling child under-nutrition, there has been a shift from efforts to reduce underweight prevalence (inadequate weight for age) to prevention of stunting (inadequate length/height for age). Resolution No. 63/NQ-CP of December 23, 2009, on national food security clearly states the Government's on-going

commitment to improve the nutrition situation in the country using food based approaches; raising the average daily calorie consumption to 2,600-2,700 kilocalorie/person and reducing the malnutrition rate among under-five children to below 5 by 2020. This objective is further reflected in the latest National Nutrition Strategy 2011 - 2020 and Action Plans which recognise the need to focus on reducing stunting and intensify interventions which address stunting before birth, in the crucial 1000 days during pregnancy, and during the first two years of a child's life.

The Ministry of Agriculture and Rural Development and the Ministry of Health jointly promote production of healthy, diversified diets, including high-quality, nutrient-rich foods by generating local food sources to ensure food security. They support the development of early warning surveillance system to identify risks of food and nutrition insecurity, as well as food price variability; increasing production of locally available foods and other income-generating activities especially for women's groups. However, there remain critical gaps in terms of capacity and effective utilisation of existing health systems, community networks and models to bring evidence-based interventions to scale in areas mostly affected by under nutrition.

Strategy: The National Target Programmes for Child Health, Nutrition, Immunisation, HIV / AIDS, Maternal Health, Rural Water Supply and Sanitation and others have recently been incorporated into an overall five year Health Plan, coordinated by the MoH's Department of Planning and Finance. This forms part of the Government's 2011-2020 strategy, with a vision to 2030 on health. Nutrition and food security issues have been incorporated into this process and liaise with line Ministries and with the UN JP Groups to strengthen inter-sectoral collaboration.

The proposed JP on integrated nutrition and food security strategies, which builds on the previous JP supported by MDG-F, will be implemented at national level and in two provinces selected based on their high rates of poverty, nutrition indicators and vulnerability as ethnic minority populations and existing working agreements with the provincial authorities. Ninh Thuan province was part of the previous JP and is a key priority province within the JP Group on Health, while Lao Cai is a new province selected because it has the highest stunting rate among all the provinces in the country.

# Key Indicators; National; Lao Cai; Ninh Thuan

1 Poverty rate; 12.9%; 36.6%; 17.7%

2 Nutrition indicators: Stunting rate (under 5); 26.7%; 37.3%; 27.5%

Underweight (under 5); 16.2%; 22.1%; 20%

3 No. children under 5; 7,115,606; 71,277; girls: 34,161; boys: 37,116; 55, 048; girls: 26,304; boys; 28,744

4 No. children under 2; 2,924,514; 30,389; 19,872

5 Ethnic minorities; 14.3%; 65.4%; 23.5%

Primary beneficiaries will be children under five years of age and women of reproductive age at national level through the participation in and impact of policy change and enforcement of universal legislation and schemes. The programme will further target capacity development and strengthen accountability of local institutions, organisations and policy makers responsible for management and implementation of nutrition and food security programmes.

This proposed JP will be implemented as part of the One UN Plan and coordinated within the framework of the UN Joint Programming Groups on Health and Climate Change and Environment /UN Disaster Risk Management Team. The programme priorities have been determined by the National Strategies for Nutrition and Food Security and will be further guided by the multi-sectoral strategies Viet Nam has committed to with the recent membership of the Scaling-Up Nutrition (SUN) Movement in 2014.

The SUN Movement implements both specific nutrition interventions and nutrition-sensitive approaches

based on national determined goals. These goals include direct and underlying causes of under-nutrition and - taken together - aim to meet the global targets established by the 2012 World Health Assembly. They include: increased access to affordable nutritious food, clean water, sanitation, healthcare and social protection; optimal growth of children, demonstrated as reduced levels of stunting and wasting; Improved micro-nutrient status, especially in women and children, demonstrated as reduced levels of micronutrient deficiency; and increased adoption of practices that contribute to good nutrition (such as exclusive breastfeeding in the first six months of life).

The strategy is to ensure rapid scaling up of specific nutrition interventions of proven effectiveness; and implementation of sectoral strategies that are nutrition-sensitive (i.e. responsive to the nutritional needs of individuals, households and societies). In addition, SUN countries affected by recurrent crises, especially those precipitated by climate change, invest in the nutritional resilience of communities by combining specific nutrition interventions and nutrition-sensitive strategies.

SUN stakeholders will work together to pursue the following four strategic objectives: 1) Create an enabling political environment, with strong in-country leadership, and a shared space (multi-stakeholder platforms) where stakeholders align their activities and take joint responsibility for scaling up nutrition; 2) Establish best practice for scaling up proven interventions, including the adoption of effective laws and policies; 3) Align actions around high quality and well-costed country plans, with an agreed results framework and mutual accountability; and 4) Increase resources, directed towards coherent, aligned approaches.

Lessons Learnt: The JP will also build on the experience and recommendations from the final evaluation of the previous MDG-F supported JP on Integrated Nutrition and Food Security Strategies in Viet Nam.

The recommendations to the Government were to: conduct an impact assessment to measure outcomes of the interventions and disseminate results to policy makers; prioritize the most vulnerable provinces/districts as data on needs are becoming available, with targeted programmes; help in translate National/Provincial consensus in resources necessary to implement plans and policies mechanisms to support nutrition programmes like the national health insurance system, social marketing); ensure broad participation and consensus in the finalization of national guidelines/policies/mechanisms; sustain synergies among international and national players, and specifically review and agree on best approaches for UN Agencies to work as ONE-UN, learning from the MDG-Experience.

The recommendation for the UN Resident Coordinator's office was to ensure future JPs utilize a joint planning mechanism wherein the output is a joint work plan and not a consolidation of individual agency initiatives. The aim should be the one to a "joint" work plan that include matched priorities, unified direction, complementing initiatives, harmonized targets and pooled resources.

The recommendations to UN agencies were to support government in Devising/Reviewing/Setting up a monitoring/tracking/documentation system to capture outcomes/results/ of interventions at each level (national, local) including enforcement of national laws and policies, that will help identify gaps that need to be addressed to propose scaling up mechanism; help in translate National/Provincial consensus in resources necessary to implement plans and policies (identify new funding mechanisms to support nutrition programmes like the national health insurance system, social marketing); continue building on combining expertise of participating UN Agencies to deliver high quality programming - each UN agency shall amplify, complement and augment each other's specialization leading to more holistic and integrated programmes for implementation and replication; work towards consolidating a common vision and message, this will lead to a stronger voice and influence; Heads of Agencies shall jointly engage national, regional and local stakeholders in advocating for policies, programmes and budgets, promoting evidence-



based interventions, and raising awareness on key issues and solutions.

The proposed JP will continue to make contribution to promoting nutrition and food security for women and children and vulnerable groups in Viet Nam by supporting the enforcement of the policy framework and monitoring system which had been formulated and approved in the previous JP funded by MDG-F, developing the capacity, frameworks, and networks on food security and nutrition. As with all its programmes, at the core of its interventions will be sustainability, gender equality and women's empowerment and public-private partnership initiatives.

By the end of the JP, the results are integrated in the existing framework and agenda of the Government for both nutrition and food security, contributing to the formulation of the next Socio Economic Development Plan of the country from 2015 onwards.

### **Mainstreaming of gender and women's empowerment:**

Gender equality and women's empowerment are prerequisites for achieving the MDGs and are fundamental to Viet Nam's continued social and economic development. A review of the implementation of the past 10 years on the advancement of Vietnamese women has showed Viet Nam has impressively promoted gender equality. Nevertheless, challenges remain in relation to the capacity of Government institutions and mass organizations to implement, monitor and evaluate these policy commitments. This includes traditional practices which persist within the household which continues to nurture stigma, discrimination and the culture of son preference. This, along with new research and statistics require a renewed approach to addressing gender equality and women's empowerment in the new socio-economic context that Viet Nam faces as a middle-income country.

There is a strong relationship between gender-based discrimination and the different channels through which households and individuals access food—through own-production, access to waged employment, or social protection. The JP recognises while equality of treatment between women and men and food security are mutually supportive, gender equality remains an elusive goal and a transformation of traditional gender roles is urgently needed.

The JP will build on improved information about the range of inequalities and specific constraints facing women and identify the specific measures that it needs to take to be gender responsive.

Nutrition programmes target women because of their reproductive role in the family and community. This can lead to further burdening women with unpaid care work and perpetuate gender stereotypes about child-care being women's responsibilities. The JP programme will ensure measures to promote the role of men and engage men in the interventions also in caring for the family nutrition and sharing including community-based health education activities and training on homestead food production. Specific IEC materials on role of men in improving women's and children's nutrition and health will be developed and the key messages on role of men will be delivered through mass media and community meetings. Men support groups will be organized in each village as a forum for men to discuss and exchange experiences in supporting their families. The ratio between male and female among health promoters, who will run IEC initiatives, will be made balanced. For the health facility-based initiatives such as training for health staff on breastfeeding counselling, the gender balance between male and female will be made. The indicators on gender are included in monitoring and evaluation framework of the programme including ratio of male and female participants attending programme initiatives.

UN Women continues to be a leader on gender issues within the One UN context and as such will participate fully in the JP ensuring that all key initiatives are gender-sensitive, and key concerns of women

are addressed. The goal of UN Women's presence in Viet Nam is to support national partners to implement their commitments and priorities for advancing gender equality and women's empowerment. UN Women is programmatically and financially linked to the One Plan and One Plan Fund. UN Women has been chairing the Gender Thematic Working Group which is responsible for overseeing mainstreaming in all the other thematic working groups through the United Nations Country Team (UNCT) Gender Mainstreaming Strategy (2012-2016).

In addition to these programming areas, UN Women co-chairs the Gender Joint Programme Group (Gender JPG) which focuses on joint programming of UN agencies and gender mainstreaming within the UN system. This group is co-chaired by the Vice Minister of Ministry of Labour Invalids and Social affairs (MOLISA). The aim of the Gender JPG is to support the implementation of gender-specific and gender mainstreaming One Plan Outputs, including joint development of an Annual Work Plan (AWP) and a Common Action Plan, with particular emphasis on maximizing synergies, coordinating and where possible jointly undertaking implementation, monitoring and evaluation activities.

The gender dimension will be integrated in to the JP in a number of ways. UN Women's technical cooperation primary task will be to create awareness among stakeholders of the rationale for integration of gender equity issues in the programme and the benefits of integrating this dimension. The specialist agency will also help ensure locally appropriate targeting and participatory processes to engage primary and key stakeholders throughout the programme. The JP includes a gender strategy to ensure rural women are a key target group, because they play a key role in local and traditional food production as well as in consumption and production choices made at household level.

Gender equity in all programme activities will be promoted. For that purpose, gender experts will be involved in all the steps of the programme cycle. An essential programme design criterion for national and local projects will be the extent to which a project meets priorities expressed by women and the extent to which women are involved in its design, implementation, and evaluation. The interests of women will be properly represented in the respective steering committees. Preference will be given to female candidates in the recruitment of project staff, consultants and/or vendors given equal qualifications and experience.

UN Women will also ensure, as with all One UN initiatives, a gender dimension is integrated in all aspects of design, implementation and management of the new JP including: the use of specific, measurable outcomes, outputs, activities and indicators related to gender equality and women's empowerment; age and sex-disaggregated data and gender statistics for the programme development and implementation; the programme is rated with the Gender Marker; and the proportion of core and non-core funds are clearly indicated for gender equality and/or the empowerment women.

### **Sustainability:**

The JP will consider holistic approaches, including socio, gender, economic and environment. Based on the analysis of these elements which may affect the technical support from the programme, participatory planning process will be conducted.

More specifically, the sustainability of the JP will be ensured at three levels. Firstly, the design of the programme is fully integrated in to the Government's strategies on both nutrition and food security and remains a key priority. As such, the JP will assist the Government in the implementation and sustainable realization of the country's poverty reduction programme and further operationalize the action plans for these national strategies. Secondly, relevant national and provincial agencies from health, agriculture and related social sectors will be fully engaged in the JP. This is expected to enhance commitment and ownership from the central Government level down to the village level. Thirdly, the JP will strengthen the capacity of local technical staff and personnel working in nutrition and food security providing support for

targeted women and children in the long term when the JP completes.

The JP will use results and information from previous and current programme and projects in disaster risk reduction, climate change adaptation in designing phase, implementation and management. The information includes community-based disaster risk management training for women and other vulnerable groups on disaster prevention, preparedness, mitigation and response activities.

Climate related hazards have taken place with unprecedented severity and scale in the North Eastern Region where Lao Cai, province is located. This has caused devastating flash flooding and forest fires resulting in loss of human lives, property and degradation of the ecological environment. Child-centred and community based climate and disaster risk mapping has also been conducted by the UN Disaster Risk Management Team led by UNDP and UNICEF. Central coastal area also suffers from drought and consequential water shortages which have a detrimental impact on health and livelihoods.

The UN led by FAO is supporting a number of projects on climate change and food security in the targeted areas including Climate Smart Agriculture. This FAO initiative supports sustainable agricultural production models which increase; productivity, resilience (adaptation) and reduce/remove greenhouse gases (mitigation) while enhancing the achievement of national food security. The UN's Disaster Risk Management Team supported by FAO, UNICEF and WHO provide a forum to provide information exchange and advocate on climate change and food security.

Solutions on disaster risk reduction, new innovations, climate change adaptation and emergency mitigation are shared and promoted.

### **Public-private partnerships:**

Viet Nam is rapidly emerging as a new MIC economy, whereby enterprises are the principal source of growth and wealth creation, and play a critical role in poverty reduction. Micro-, small- and medium-sized enterprises are one of the main factors of job creation for vulnerable groups, but at the same time many are still characterized by insufficient work and environmental practices. In the implementation of the One Plan 2012- 2016, the Government and the UN are fully committed to an inclusive partnership approach as a means to ensure active and meaningful involvement and participation of the private sector. The UN supports in particular the micro and small enterprises in creating a business environment conducive to business growth, by providing a level playing field. It supports business and professional associations in providing services, entering into dialogue with the Government, and strengthening the application of economically, socially and environmentally sustainable enterprise-level practices.

The JP will fully promote and integrate the private sector in all aspects of the programming cycle, including planning and implementation of specific interventions, monitoring and evaluation. The private sector is also an independent, resourceful and strong voice of the civil society that can be utilized for policy and advocacy, technical expertise and in establishing sustainable funding mechanisms. This process is already under way and the views of private sector participants were collected during the JP formulation process and the potential to create public-private networks discussed. The JP will specifically promote entrepreneurial, literacy activities for disadvantaged women promoting greater empowerment and participation. It will seek to accelerate the elimination of obstacles to expansion of their opportunities for self-employment and in the labor market.

The UN agencies will establish local public private partnerships models between the Departments of Health and local pharmaceutical companies in the area of social marketing of nutrition products. These will include iron folic acid tablets for pregnant women as well as other local companies producing low cost

sanitation products. The partnerships will leverage private sector marketing strategies and supply chains while the local health authorities will provide technical support and introduce the products to the public sector supply chains like health facility pharmacies and community health networks. Similar partnerships will be established between the Departments for Rural Development and Agriculture and the local seed supply companies. These partnerships will include not only medium-large size companies but local small and micro businesses targeting women.

The modelling of new approaches will include assisting in the application of the National Hospital Quality Criteria for public and private hospitals with focus on the new standard on Baby Friendly Hospitals and Clinical Nutrition Services.

While promoting public-private partnership models, potential conflict of interest will also be carefully assessed through the existing screening systems and procedures of the UN. This includes the approach of not engaging companies not who are not compliant with the International Code on Marketing of Breast milk Substitutes, subsequent World Health Assembly Resolutions as well as other key corporate social responsibility standards.

UNICEF Viet Nam has also established a Corporate Advisory Board that will be utilized to better deliver results for women and children and vulnerable groups and the UNICEF Next Generation of young leaders and entrepreneurs will add value in terms of identifying and implementing new creative ideas to overcome bottlenecks for improving nutrition and food security.

These corporate resources will also be used to promote Women's Empowerment Principles (WEPs). The WEP are a set of seven principles for business offering guidance on how to empower women in the workplace, marketplace and community. WEPs aim to empower women to participate fully in the economic life across all sectors and throughout all levels of economic activity as they are essential to build strong economies; establish more stable and just societies; achieve internationally-agreed goals for development, sustainability and human rights; improve quality of life for women, men, families and communities; and propel businesses' operations and goals. Child Rights and Business Principles (CRBP) will also be promoted offering guidance to businesses on children's rights in the workplace and beyond.

### **Civil society participation:**

In the JP, as with other one UN initiatives, a holistic approach to community participation is identified from the beginning to enhance the design and development of the intervention. Participatory Rural Appraisal (PRA) is an exercise in communication and transfer of knowledge and ensures a high level of participation of civil society, particularly women, in decision making processes, design, implementation, monitoring and evaluation. Regardless of whether it is carried out as part of project identification or appraisal or as part of country economic and sector work, the learning-by-doing and teamwork spirit of PRA requires transparent procedures. For that reason, a series of open meetings (an initial open meeting, final meeting, and follow-up meeting) generally frame the sequence of PRA activities. A typical PRA activity involves a team of people working for two to three weeks on workshop discussions, analyses, and fieldwork.

PRA approach was applied in the previous JP and proved to be a useful method of interaction throughout the whole JP implementation and M & E process. PRA supports the direct participation of communities, with rural people themselves becoming the main investigators and analysts. Rural communities, particularly women, set the priorities; determine needs; select and train community workers; collect, document, and analyse data; and plan and implement solutions based on their findings. Actions stemming from this research tend to serve the local community. Outsiders are there to facilitate the process but do not direct it. PRA uses group animation and exercises to facilitate information sharing, analysis and action among

stakeholders.

The approach facilitated greater sharing of results of analysis, joint decisions and planning efforts among the community members through open and public presentation during meetings. The new JP will apply similar principles in consultations with an emphasis on disadvantaged women from grass root level up to central level for all activities under the three planned outcomes. Planning meetings and regular joint monitoring missions will be conducted to adjust request and needs from different stakeholders. For field interventions, the Farmer's Union, Local NGOs and the Women's Union will be consulted throughout the programme cycle. This has already been initiated during the JP formulation process with full participation and involvement of key stakeholders reflecting a more formal commitment.

#### **Justification of the Joint Programme modality:**

The One UN programme in Viet Nam draws on the collective global assets of the UN system to provide technical expertise, exchange of knowledge and capacity development, based on international best practice, and will support innovative approaches to the nutrition and food security issues and implementation of global normative standards. Through its joint programme modality it facilitates a multi-sectoral approach and support Government to coordinate its response to complex issues such as climate change, social protection, sustainable development, a multi-dimensional approach to and gender equity, poverty reduction, HIV and governance all of which require a cross-agency approach.

The network created in the implementation process of the JP funded by MDG-F in the previous phase facilitated an effective "working collaboratively" model. The previous JP reported some very encouraging results as highlighted in the final evaluation report, including policy change on maternity leave and marketing of breast milk substitutes to protect recommended infant and young child feeding practices; improvement in the nutrition situation analysis with the nutrition surveillance and surveys as well as improved monitoring systems; formulation of the multi-sectoral national nutrition strategy with clear role for various sectors and stakeholders including Agriculture; best practice in conducting joint monitoring missions among UN agencies and Government Ministries.

The final evaluation report on the JP-MDG-F noted that the modality had clearly shown the value added of working as "One UN", reflecting the different expertise and contributions that each agencies can contribute in a more coordinated, systematic and cost effective way to achieve outcomes (e.g. passage of legislations, integration of food security and nutrition). The JP - MDG-F provided a useful model to show case the benefits of working together to tackle common issues, challenges and constraints including those related to coordination, implementation and donors management.

The proposed JP will continue to build on the structure and best practices from the previous JP. The comparative advantages of the different UN agencies and their extensive experience in the country working both at national and local levels add value to Government efforts to reduce hunger and levels of malnutrition.

The One UN structure brings comparative advantages of individual UN agencies together to achieve a higher impact. At global level, FAO, UNICEF and WHO jointly conduct situational analysis of food security and nutrition, develop integrated strategies and track progress. The latest example is the collaboration ahead of international high level meeting the Second International Conference on Nutrition (ICN2). Other example includes the support for implementation of the UNICEF and WHO global strategy on infant young child feeding. The UN agencies are also coordinating and participating in the multi-sectoral partnership platform (Nutrition Cluster and Partnership Group) co-chaired by the National Institute of Nutrition and UNICEF.

FAO, as a Specialized Technical Agency in the UN system with a role in food security, can leverage its advantage as a neutral body to support the member country in technical and service areas. The agency has a close working relationship with the government of Viet Nam and a long track record of implementing agricultural development and trade promotion projects in Viet Nam since 1978. FAO's agenda in the country is striving for a food secure future, focusing on nutrition as it is the key to achieving the long term goal of food security and good health throughout the country.

UNICEF has partnered with the Government, NGOs, faith-based organizations and private sector in Viet Nam for over forty years supporting child rights interventions. As Viet Nam's economy grows each year, the role of the private sector becomes increasingly important in the work of ensuring the survival and protection of all children in Viet Nam. During 2012-2016 UNICEF focuses on the overarching theme of "equity". In this context, UNICEF continues its support traditional development issues - education, health, nutrition, water and sanitation, child protection and social services - but with a stronger focus on disparity and inequities to reach all children and their families.

WHO is a specialized technical agency in the UN system providing support to the Ministry of Health in implementing global health recommendations, including the world health assembly resolutions. WHO responds to requests from the host country to support policy-making for sustainable health development, taking a holistic health-system approach. This includes providing guidance, building local relationships to implement technical cooperation, making standards and agreements, and ensuring that public health measures are coordinated and in place during crises.

UN Women's presence in Viet Nam is to support other UN agencies and national partners to implement their commitments and priorities for advancing gender equality and women's empowerment. It provides critical support in the following areas: building capacity on gender equality and women's empowerment; raising woman's awareness of CEDAW and building government capacity to concretely implement the Convention; empowering female migrant workers through gender sensitive migration policies and programmes; gender mainstreaming in legislation review; advocate for gender responsive HIV policy and programmes; engaging men and boys in ending violence against women and building capacity of grass root women to respond to climate change through Disaster Risk Management (DRM) and Disaster Risk Reduction (DRR).

### **Regions of intervention:**

The JP will focus on supporting Lao Cai province in the North Eastern and Ninh Thuan province in the South Central Coastal Viet Nam for generation of evidence that would facilitate national policy changes and scale up of sustainable and integrated nutrition and food security. If there are interventions at the national level it should be mentioned under "regions of intervention" The UN has already existing working agreements with the local authorities in these provinces that would facilitate timely implementation of the JP after the inception phase. Both Lao Cai and Ninh Thuan are provinces with high poverty rates (36.6 and 17.7 per cent) compared to national average of 10 per cent and high percentage of ethnic minorities accounting for 64 per cent of the total population in Lao Cai province and around 24 per cent in Ninh Thuan province. These provinces also have notably poor nutrition and food security indicators based on the National Nutrition Surveillance System.

Although underweight and stunting have declined steadily in Lao Cai since 1999, both remain well- above national average estimates. Stunting prevalence is the highest in the country, affecting two out of every five children under five based on the findings of the National Nutrition Survey. In addition, over one-quarter of children under five are underweight. Wasting is of the medium public health concerns. In Lao Cai, two-thirds of mothers initiate breastfeeding within an hour of birth. While rates of exclusive breastfeeding under 4 and 6 months of age are high in the province compared to national averages, there

is still considerable room for improvement as 70 per cent of infants under 6 months old are not exclusively breastfed. In addition, only one-third of children are breastfed until they are 24 months old. Among children 6-23 months old, nearly 40 per cent do not achieve minimum diet diversity, and only half consume a minimum acceptable diet.

In line national trends, Ninh Thuan has seen a steady decline in the prevalence of underweight children under five since 1999. However, nearly one in four children is still underweight. Declines in stunting were slower during that time, and it is estimated that three out of every ten children are stunted. Both underweight and stunting rates increase markedly at 12 months of age. In addition, wasting is of medium public health concern. A relatively high proportion of mothers in Ninh Thuan are chronically malnourished, particularly in the prime child-bearing years (15-34). Over one-fourth of women this age have chronic energy deficiency and prevalence of short stature across all age groups is well above national estimates. Only 46.8 per cent of pregnant women and 13.4 per cent of lactating women used iron supplements in the last 6 months. While 44 per cent of pregnant women started using iron supplements in the first trimester of pregnancy, 17 per cent did not use iron supplements at all.

In Ninh Thuan, 64 per cent of new-borns are breastfed within an hour of birth. While rates of exclusive breastfeeding under 4 and 6 months are above national average rates, they are still relatively low at 29 per cent and 18 per cent, respectively. In addition, continued breastfeeding until 24 months is only 20 per cent. Although a large majority of children aged six-23 months consume iron-rich food, one-third do not achieve minimum dietary diversity, and nearly half do not consume a minimum acceptable diet.

Provincial Action Plans have been developed to address these findings, and the JP will support the introduction and scale up of recommended interventions to address the needs of women and children. The results of JP in Ninh Thuan and Lao Cai will be scaled up to other provinces and nationwide, ensuring replication and sustainability including transferring Joint Program based results to local authorities' ownership in project's provinces and integrating the results of interventions to the government's system.

### **Targeted groups:**

The primary target groups (beneficiaries):

Some 36 million women of reproductive age and 7.1 million boys and girls under five in Viet Nam will benefit from the proposed policies, plans and standards generated from modelling and evidence generation in the two provinces of Lao Cai (children under 5 - girls: 34,161 and boys:37,116) and Ninh Thuan (children under 5 - girls: 26,304 and boys: 28,744).

Secondary target groups:

National level:

- Government agencies in charge of state management of nutrition and food security, including (i) Ministry of Health, Department of Maternal and Child Health, Medical Service Administration, Legislation Department, Viet Nam Food Safety Administration, and (ii) Ministry of Agriculture and Rural Development, Department of Crop production.

Technical institutions:

- Rural Development Centre (RUDEC)
- Health Education Centre of MOH
- National Institute of Nutrition (NIN)
- Department of Cooperatives and Rural Development (DCRD)
- Research Institute for Aquaculture No. 1 (RIA1)

- Northern Mountainous Agriculture and Forestry Science Institute (NOMAFSI)
- Viet Nam Academy of Agricultural Sciences

Provincial level:

- Peoples Committees
- Departments of Planning and Investment
- Departments of Health and Reproductive Health Centres
- Department of Agriculture and Rural Development
- Public and private health facilities
- Agriculture extension services
- Provincial Centre for Rural Water Supply and Sanitation
- Professional Social Political Mass Organisations
- Private sector partners

**Design, multisectorial strategy, results and implementation plan:**

Both UN and Government partners who participated in the MDG-F have indicated that when a multi-sectoral approach was properly incorporated in the JP design, it not only contributed to improving coordination and effectiveness of the UN System, but also to intersectoral dialogue and coordination among national institutions. However, to ensure that JPs fully benefit from this advantage, some fundamental criteria must be applied: 1) A results-based approach must be used in planning; 2) The most vulnerable regions and populations, particularly women must be targeted; and 3) Strong leadership and sound coordination arrangements must exist; and 4) Provisions must be made for joint communications.

This programme has been jointly prepared by the participating UN agencies and Government stakeholders and implementing partners. It is to be implemented by these same partners, each bringing their unique comparative advantage to the programme. As noted, an important and unique strength of the JP is the number and diversity of UN agencies, Government stakeholders, public or private institutions involved in addressing the food insecurity and malnutrition in Viet Nam.

Through food security and nutritional situational analysis and review of existing strategies as well as national programmes and services delivery, UN support the identification of bottlenecks for equitable access for women and other vulnerable populations and utilization of services and information. To overcome these barriers and further provide support for corrective actions innovative approaches will be modelled and evidences generated to guide policy change. Institutional capacity development, advocacy and communication will be required to support policy enforcement and quality implementation.

The UN Team will support the Government through a comprehensive strategy complementary to currently on-going efforts which includes policy and technical assistance for enforcement of the implementation of policies and programmes, infant and young child feeding promotion, mass media and community-based activities, implementing national code for marketing of breast milk substitutes and complementary foods and expanding the Baby Friendly Hospital Initiative; small scale farmers livelihood and food production activities linked to measurable nutrition and dietary diversification goals. Based on lessons learned from implementing the previous JP on nutrition and food security, the JP will also focus on a number of tried and tested interventions ensuring a gender dimension and an emphasis on coverage, quality of delivery, impact and outcomes.

The overall objective of the JP is to support development and implementation of integrated nutrition and food security strategies to meet the equitable targets set in the National Nutrition Strategy and National Food Security Strategy.

The JP will specifically focus on policy and advocacy for globally recommended nutrition specific and



nutrition sensitive policies and standards, development of institutional capacity and systems and evidence generation.

Key expected outcomes:

Outcome 1: Development and coordinated enforcement of globally recommended maternal, infant and young child nutrition, agriculture and food security policies and standards

Outcome 2: Development of institutional and local capacities and systems for innovative and sustainable expansion of stunting reduction and household food security interventions to enhance community resilience, particularly rural women in selected provinces

Outcome 3: Generation of evidence for policy and advocacy and climate and disaster risk informed programming.

To contribute to the expected outcomes, the JP will focus on the following specific outputs:

Output 1.1 Evidence-based stunting reduction and food security approaches scaled up to the national level and adopted in line with the 2011-2020 National Nutrition Strategy, 2011-2020 National Rural Clean Water and Sanitation Strategy and 2010-2020 National Food Security Strategy

Output 1.2 Policy gaps addressed through the development of a set of maternal, infant and young child nutrition, water, sanitation, agriculture and food security policies, plans, guidelines and globally recommended standards

Output 2.1 Innovative and integrated approaches for stunting reduction and household food security modelled in selected provinces for potential nationwide replication.

Output 2.2 Improved maternal, infant and young child nutrition and household food security practiced through integrated behaviour change communication in selected provinces

Output 3.1 National Nutrition and Food Security Information Systems generating disaggregated data to guide evidence-based and risk informed programming to promote equity and resilience.

Output 3.2 Nutrition and food security interventions monitored, evaluated and documented

The expected results with detailed activities are further outlined in Annex 1: Results Matrix.

The proposed JP will be implemented and coordinated as a part of the Joint Programming Group on Health in close collaboration with the Joint Programming group on Climate Change and Environment. The activities will be part of the One UN Plan Output 2.2.4 improving sexual reproductive maternal child health and nutrition and 1.3.2 vulnerable and disadvantaged groups can better withstand disaster.

### **Coordination and governance arrangements:**

National Steering Committee

This programme will be implemented by participating UN Agencies in cooperation with participating national partners. A National Steering Committee (NSC) for SDG-F to be established to provide oversight and strategic guidance to the SDG- F JPs in Viet Nam. The NSC consists of:

- Senior Representative(s) of the Government (Co-chair);
- UN Resident Coordinator (Co-chair);
- Representative from the Spanish Embassy

Other UN agencies, donors, Government representatives and members of civil society involved in projects financed or to be financed from the JP will be invited to participate in NSC meetings as observers or to provide information as needed. The NSC will meet semi-annually, and all decisions will be made by consensus. The main function is to

exercise oversight and be responsible for providing necessary arrangements for assurance of the successful implementation of the JP.

Under the One UN Plan, 8 Joint Programming Groups (JPGs) have been established in Viet Nam in order to coordinate and guide the UN's work in different results areas presented in the One UN Plan. The JPG relevant to the work described in this proposal is JPG Health. The JPG will ensure the necessary oversight of the programme on behalf of the UNCT and the Resident Coordinator by regularly monitoring progress at its regular meetings. The other advantage of engaging the Health JPG is that several other UN agencies are members so that inter-agency coordination, beyond the three participating agencies, can be promoted.

#### Programme Management Committee

Under guidance of the NSC, a Programme Management Committee (PMC) consisting of the representatives of the Government of Viet Nam and the participating UN organizations, FAO, UNICEF and WHO will be set up. The Government will be represented through a National Programme Director (NPD), who will also head of the PMU and chair the PMC. The NPD will be designated by MCH.

The PMC will coordinate the implementation of the project and difficulties that could hamper smooth programme implementation will be brought to the attention of the PMC, which will attempt to resolve the matter by consensus.

The chair of the PMC, also being the NPD of the Joint Programme, will exert his/her best effort to take a final decision on any emerging impasse at the PMC. The Chair of PMC, and/or his delegated representative in his/her absence, will report to NSC on issues that go beyond the PMC's mandate.

The PMC will meet every quarter and more frequently if required.

Specific responsibilities of the PMC are:

- Ensuring operational coordination
- Approving reporting procedures developed by the PMU
- Advising on the selection of the National Programme Coordinator and Programme Assistant
- Reviewing and recommending annual work plans, budgets, reports and other programme related documents for approval by the NSC
- Providing technical and substantive leadership regarding the activities envisaged in the Annual Work Plan
- Agreeing on re-allocations and budget revisions and making recommendations to the NSC as appropriate
- Addressing management and implementation challenges
- Identifying emerging lessons learned

#### Programme Management Unit

Daily project management will be ensured by a Programme Management Unit (PMU), which will consist of one representative from MOH, one from MARD and two secretarial/accounting assistants. The Programme Management Unit will be located at the Ministry of Health with multisectoral membership, including co-chairing of the Ministry of Agriculture and Rural Development. In each province, the Vice Chairman of the Provincial Peoples Committee will be asked to assign focal contact points from the Department of Health and the Department of Agriculture and Rural Development.

The Programme Management Unit (PMU) will play a crucial role in coordinating agency inputs and moving implementation forward. Furthermore, the PMU will be an effective as a bridge between the JP, participating UN agencies, suppliers and the provinces. The National Programme Director (NPD) will play a

critical role in giving advice for the intervention to on-going policy and strategy formulation process from the Government side, coordinating the collaboration between agriculture and health sector via periodic joint monitoring missions to the fields. The NPD will chair the periodic Project Management Committee (PCM) meetings and when required for urgent actions.

In Lao Cai Province there will be a technical working group under the Provincial PMU solely responsible for the JP which will be chaired by Department of Health with the membership of DARD. There will be similar arrangements in place in Ninh Thuan Province and the technical working group chaired by the Department of Planning and Investment.

Information on the JP will be promoted in consultation with UN Communication Team including communication officers from relevant UN agencies who are not officially part of the One UN Communications team, through the UN intranet, social media and UN agencies/MOH/MARD.

#### Role of Vietnamese partners and supporting staff

##### National Programme Director (NPD)

MCH, MOH will assign a senior staff member as National Programme Director (NPD). NPD will be responsible to the Government of Viet Nam, through the Ministry of Health for the overall coordination and implementation of the programme. S/he will also serve as the Chair of the Programme Management Committee (PMC). The Joint Programme Manager will advise and cooperate with the NPD on an on-going basis.

##### JP Manager

A national Joint Programme Manager (food security specialist) will be recruited on a full-time basis for the duration of the joint programme. PMC will advise on the selection of the successful candidate, who will be recruited by FAO on behalf of participating UN organizations. The JP Manager will advise the NPD on an on-going basis and assist and work with the National Programme Assistant (NPA) on all operational matters of programme implementation. Joint Programme Manager will also coordinate with participating UN organization Project Managers at HQ, Regional Office or Field Office level, whichever is relevant; assist and advise in monitoring of programme delivery; and assist and advise on modifications to the programme strategy in order to rectify any short-comings in programme delivery. HQ, Regional Office or Field Office Programme Managers/Officers, as relevant, of all participating UN organizations will conduct their communications on operational matters (e.g. TOR for national and international project staff, TOR for contracts, procurement, training, publications, etc.) with the Joint Programme Manager, including provision of detailed periodical financial reports through their financial systems for monitoring purposes. The Joint Programme Manager will participate in the PMC meetings. FAO will be responsible for day-to-day technical backstopping and direct supervision of the Joint Programme Manager.

##### National Programme Assistant (NPA)

The National Programme Assistant will be responsible for operating the programme office based at MOH premise, including petty cash account, procuring and managing supplies for the office; communication and coordination tasks, consolidating detailed financial and technical reports received from UN organizations in a single format regularly for monitoring purposes and undertaking other admin duties as instructed. NPA will work closely with UN agencies to support the planning, monitoring and reporting exercises of the Joint Programme. NPD will be responsible for day-to-day supervision of the NPA. This Joint Programme is nationally implemented, with participating UN organizations using the agency execution modality for administering recruitment, procurement and contracting actions and making direct payments to co-implementing partners in return for services delivered. As a result, the NPA will not be required to

undertake extensive financial accounting and reporting duties.

**Risk analysis:**

The main overriding potential risk envisaged in achieving the proposed UN One Plan 2012 -2016 and specifically the new JP's results, is the current global economic outlook and domestic macroeconomic instability. This may pose difficulties in realizing Viet Nam's development aspirations, and also have the potential to undermine efforts to address existing and new forms of disparity, poverty and vulnerability. The UN Country Team mitigation strategy is to continue to support and advocate with the Government of Viet Nam to maintain levels of social expenditure and scale-up efforts to reduce persistent and emerging forms of poverty, counter rising disparities, and ensure access to social services and social protection to mitigate the impacts of high inflation and slower economic progress.

In light of the current global economic uncertainty, another important risk to the UN more broadly in Viet Nam and implementation of the JP is the risk of changes in the extent and level of support for the Delivering as One Initiative at both global and country level. The UN Country Team, Government and donors will continue to advocate for strengthened, consistent and predictable institutional and financial support the initiative at a national and global level. A key mitigation strategy will be the continued very close tripartite stewardship of the One Plan 2012-2016, reviewing policy, results and resources on a regular basis, taking full account of and adapting to changing levels of available resources.

Climate related hazards also pose a potential risk. As noted, Lao Cai province is particularly susceptible to extreme temperatures causing flash flooding and forest fires affecting most vulnerable populations. These are likely to accelerate over the coming programme period. Already Viet Nam is one of the countries most affected by climate change globally. Economic and social impacts of climate related disasters and events are already very significant. The UN Country Team will continue to work closely with the Government to ensure effective adaptation to climate change and disaster risk management, including by supporting coordination across government institutions and sectors.

The JP is also structured to enhance the linkage between Agriculture and Health ministries which in turns will lead to more holistic approach for management and implementation of important priorities for the areas. It will also be critical to sustain and further promote greater synergies among all international and national partners and specifically review and agree on best approaches for UN Agencies to work as One UN based on the previous JP -MDGF experience.

Piloted models and interventions in both health and agricultural components will also be fully integrated into the development and intervention of the government-owned national targeted programmes and action plans of the national strategies on nutrition/food security.

A Risks Analysis Matrix is attached in Annex 2.

**Monitoring and evaluation (M&E):**

The Government and the UN will be responsible for joint monitoring and evaluation of the JP, in consultation with the donors, in line with overall responsibility for implementation of the One Plan 2012-2016. Results-based management is an essential component of the One Plan 2012-2016. In line with results-based management principles, an integrated approach, incorporating the lessons learnt from the previous JP regarding coordination and synergies of agencies' mandate, will be applied to planning, monitoring, reporting, review and evaluation of the JP to ensure evidence-based decision-making.

Progress towards achieving the planned outcomes will be regularly monitored according to the indicators and targets identified in the Results Matrix. A web-based platform will facilitate the monitoring of progress

through an easily accessible and user-friendly database. Potential indicators have been included in the Results Framework attached however these may be revised using participatory methodologies in order to ensure that programme stakeholders are engaged in the collection of means of verification and periodic review of progress.

In addition, the current JP is closely aligned with the One Plan 2012-2016 and as such indicators at the outcome and output level are already part of the One Plan's monitoring framework will also be used for the purpose of monitoring and evaluating the JP. It should be noted Outcome 3 of the new programme relates to evidence generation and output 3.2 with monitoring and evaluation, reflecting its integral part of the joint programme strategy.

The methodology for data collection and analysis will be therefore defined using participatory approaches and community involvement and will build on existing data sources. It will aim at strengthening the national counterpart's capacities to collect data to monitor public policies, ensuring the usefulness of the tools designed beyond the life of the JP. Joint monitoring missions will be coordinated by PMU based at the Ministry of Health with the participation of both UN participating agencies, JPG Health members when necessary and the Ministry of Health and the Ministry of Agriculture and Rural Development. In terms of baselines the programme will build upon existing sectorial and cross-sectorial comprehensive survey initiatives in Viet Nam. M&E activities will be conducted jointly by all JP partners ensuring lessons learned during the previous JP-MDGF regarding coordination and agency synergies are applied.

The existing Results based Management Working Group (an inter-agency group encompassing M&E experts from all UN Agencies in Viet Nam) will provide strategic advice, access to corporate guidance and literature and technical support as needed. The JP will access through this group's best practices on joint M&E from other thematic areas (such as lessons learned on conducting joint monitoring missions). The JP has allocated USD 30,000 for coordination, joint monitoring and evaluation purposes.

The RBM working group works in close collaboration with the One UN Communications Team so both teams will provide advice in developing the M&E system and communications and advocacy strategies for this JP. Although there is no specific working group currently able to support the implementation of the knowledge management strategy in Viet Nam, the JP will provide the opportunity to pilot the implementation of an integrated approach to M&E, Communications and Advocacy and Knowledge Management.

The JPG Health will ensure the necessary oversight of the programme on behalf of the UNCT and the Resident Coordinator by regularly monitoring progress at its regular meetings. The JPG will jointly monitor report on and review implementation of the JP outputs together with other key stakeholders. The JPG will also act as a forum for joint research, policy advocacy and policy dialogue on specific thematic areas with the Government, development partners and political, social, professional and mass organizations. Common approaches to field monitoring and site visits will be implemented where possible, according to specific quality assurance criteria and evaluation of programmes and projects will be undertaken via joint monitoring visits, joint mid-term reviews and evaluations of clusters of UN projects, and individual UN-supported project evaluations and reviews as needed.

During JPG Mid-Year Reviews in June-July and JPG Annual Reviews in December-January, JPG Health will assess the performance of UN-supported JP and lessons learned. In addition, the Annual Reviews will provide an opportunity to update - where necessary - the assumptions and risks identified in the programme design stage. Based on the feedback from the Annual Reviews the JPG Health will report on the key results achieved vis-à-vis JP outputs targets, as well as on progress towards JP outcomes. The JPG Health co-conveners will provide quality assurance of the reports to ensure compliance with the respective

guidelines, an evidence- based assessment of results performance and due application of programming principles and cross-cutting issues.

The JP Annual Progress Report will be developed based on the JPG Health Annual Reviews and according to the SDG Fund reporting requirements. The Annual Report will highlight progress towards achieving the JP outcomes, as well as how the UN is working together to 'deliver as one' with other key stakeholders in Viet Nam.

A comprehensive evaluation of the JP will be conducted to assess the relevance, efficiency, effectiveness, impact and sustainability of the UN's contribution to the key One Programme development outcomes. The evaluation will be independent, impartial and transparent, and conducted according to the UN Evaluation Group's norms and standards. The findings will be available by the end of 2017 and inform the UN' analytical work and strategic planning on nutrition and food security for the subsequent One Plan 2017-2021. The evaluation's findings and recommendations will be validated with key national and international development partners. A joint evaluation management response will be agreed by the UN Country Team and the Government.

Particular attention will be given to measuring the results of UN policy research, advice and advocacy. Considering the multiple challenges in assessing the actual results of UN support, a range of different monitoring and evaluation methods and tools will be applied, including in-depth analysis, qualitative studies, and partner/stakeholder and/or perception surveys, where feasible and relevant. Given the strong focus of the JP on vulnerable and disadvantaged groups, measuring changes in the opportunities and access to specific services of these groups will be addressed as much as possible and jointly with key national and international partners. National data and monitoring and evaluation systems will be used to the fullest extent possible.

An Integrated Monitoring Evaluation and Research Framework is attached as Annex 3.

#### **Communication and advocacy (C&A):**

The Communication and Advocacy strategy for the JP will be aligned with the One UN Communication Strategy, and more specifically support the development of a National Nutrition Communication and Advocacy Strategy, aligned to a National Food Security Strategy and based on the framework provided by the Scaling-Up Nutrition Movement contextualized to Viet Nam and ensuring a gender dimension.

The objectives of the communication for development strategy as part of the JP is to ensure at least a 30 per cent increase from baseline of pregnant women exclusively breastfeeding their child for the first six months and to adopt appropriate complimentary feeding practice for children from six months to two years of age. In order to achieve this, a range of strategies are being used such as advocacy among policy makers to continue supporting and enforcing policies and legislations that protect women to adopt recommended infant and young child practices.

Communication for development initiatives will include: interventions with mothers, fathers and immediate family members through mass media interpersonal and group counselling and outreach communication efforts to encourage and adopt appropriate feeding practices (exclusive breastfeeding, complementary feeding, consumption of iron folic acid and iodine, and hygienic practices such as hand washing with soap, use of clean water and the proper disposal of faeces). These nutrition and hygiene practices complement other essential family practices for pregnant women and children under-two years of age. In addition, social mobilization strategies will be used by engaging with Women's Union and establishing nutrition and child care support groups to ensure there is community support to improve nutrition and food security, especially in communities with high multi-dimensional child poverty.

The strategy will also contribute to: creating communication channels among the JP's stakeholders (participating UN Agencies, national counterparts, beneficiaries, civil society and local communities), reinforcing the programme's shared responsibility and mutual accountability; advancing social and public advocacy towards the achievement of development goals and promoting awareness on sustainable development and more specifically on the Post-2015 development agenda at the country level; raise the public and political profile of certain social, economic or environmental issues that might be relevant in the context of the programme and communicate results and lessons learned that could prompt scaling-up and sustainability of programme initiatives and support further knowledge management.

Initiatives will be jointly planned, implemented and monitored between UNICEF, WHO, FAO and One UN Communication together with National Institute of Nutrition, MCH department and the Centre for Health Education of the MOH and their provincial centre.

The estimated budget required for Communication and Advocacy strategy is between 5 and 10 per cent of the overall programme budget with a partial budget allocation under output 2.2. Additional funding will also be leveraged through existing Government plans under the National Nutrition Strategy 2011-2020. With the support from One UN Communication team, joint message from UN on integrating agriculture production to nutrition improvement at household level will be promoted.

#### **Knowledge management (KM):**

An essential feature of the UN's comprehensive approach to managing for development results in a middle-income Viet Nam is the production, use, analysis and retention of data and information in support of the implementation of the One Plan 2012-2016. To this end, a dedicated Knowledge Management Strategy has been developed by the UN. The strategy is predicated on undg-related guidance placing prime emphasis on the use, reliance on and support to existing national information sources and systems.

This JP will generate a knowledge and evidence base that can be used in multiple regions to help reduce gender inequity and under-nutrition among women and children. Through a focused and strategic knowledge management agenda that will generate international public goods, and through close links to policymakers and development partners, the JP expects to have a substantial impact on policies and programs to reduce under-nutrition in the region. Knowledge Management will be an integral part of the JP implementation with a focus on the following key themes: 1) knowledge generation; 2) knowledge exchange and networks; and 3) knowledge sharing, dissemination and storing; building on a shared platform of people, processes and technology.

Participatory methodologies will be utilized to allow stakeholders, particularly disadvantaged women to critically reflect upon and share their programmatic experiences. In addition, discussions and presentations led by external experts, and representatives of other multi-sectoral programs will be mobilised and shared among stakeholders via PMU coordination platform, allowed all to gain new knowledge for the evaluation and closure of the JP, handing over to the Government by the end of the JP.

Under the framework of the JP, review and share good practices and lessons learned from implementation of the JP, and to consolidate and systematize emerging good practices and lessons learned, and to discuss how this experience can serve as a knowledge base for the sustainability of replicable initiatives in the nutrition and food security sector. As noted, dissemination of good practices and JP results will be coordinated and supported by Communication Team to ensure the visibility of the UN as well as unified messages from UN to the Government and other stakeholders on nutrition and food security. Knowledge management will be done in the following steps: First, to review and share good practices and lessons learned from JP implementation. Second, to consolidate and systematize the valuable lessons learned across the thematic area, and to discuss how this experience can serve as a knowledge base for the

sustainability of replicable projects in the country.

### **Contribution to the post 2015 development Agenda:**

As an integral part of the One Plan 2012-2016 the new JP will contribute to the national and global discussion on the post 2015 development agenda and to Viet Nam's own transition from the MDGs to the SDGs. It will contribute to the creation of a new development framework, targeting disadvantaged population groups and continuing the open and participatory approach facilitated by the UN in Viet Nam. It will feed in to the extensive nationwide consultations involving Government, civil society, the private sector, academia and research institutions that have been initiated in the country.

## **V. SDG-F - Joint Programme Management Arrangement**

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### Coordination and Oversight Mechanisms

The Fund will rely on UN Resident Coordinators (RC) to facilitate collaboration between Participating UN Organizations to ensure that the programme is on track and that promised results are being delivered. The Resident Coordinator will exercise his/her authority over the programme by being entrusted with leadership of the overall programme design, ongoing programmatic oversight of the Fund's activities by co-chairing the National Steering Committee meetings.

To ensure proper checks and balances of programme activities the RC is called upon to establish committees at two levels:

- A National Steering Committee (NSC), and
- Programme Management Committee(s) (PMC).

The NSC consists of the Resident Coordinator, a representative of the national Government in the role of Co-Chair and a representative of the AECID or in its absence from the Embassy of Spain and/or other sponsoring partner entity, according to the SDGF ToR.

The responsibilities of the PMC will include:

1. ensuring operational coordination
2. appointing a Programme Manager or equivalent thereof;
3. managing programme resources to achieve the outcomes and output defined in the programme;
4. establishing adequate reporting mechanisms in the programme;
5. integrating work plans, budgets, reports and other programme related documents; and ensures that budget overlaps or gaps are addressed;
6. providing technical and substantive leadership regarding the activities envisaged in the Annual Work Plan;
7. agreeing on re-allocations and budget revisions and make recommendations to the NSC as appropriate;
8. addressing management and implementation problems;
9. identifying emerging lessons learned; and
10. Establishing communication and public information plans.

### Fund Management Arrangements

The Joint Programme will be using a pass-through fund management modality where UNDP Multi-Partner Trust Fund Office will act as the Administrative Agent (AA) under which the funds will be channeled for the Joint Programme through the AA. Each Participating UN Organization receiving funds through the pass-through has signed a standard Memorandum of Understanding with the AA.

The Administrative Agent will:



- Establish a separate ledger account under its financial regulations and rules for the receipt and administration of the funds received from the donor(s) pursuant the Administrative Arrangement. This Joint Programme Account will be administered by the Administrative Agent in accordance with the regulations, rules, directives and procedures applicable to it, including those relating to interest;
- Make disbursements to Participating UN Organizations from the Joint Programme Account based on instructions from the Steering Committee, in line with the budget set forth in the Joint Programme Document.

The Participating UN Organizations will:

- Assume full programmatic and financial responsibility and accountability for the funds disbursed by the AA.
- Establish a separate ledger account for the receipt and administration of the funds disbursed to it by the Administrative Agent.
- Each UN organization is entitled to deduct their indirect costs on contributions received according to their own regulation and rules, taking into account the size and complexity of the programme. Each UN organization will deduct 7% as overhead costs of the total allocation received for the agency.

The Joint Programme team will consolidate narrative reports provided by the Participating United Nations Organizations and provide them to the AA no later than 31 March per the MOU Participating UN Organizations will submit financial reports no later than one year after the completion of operational activities

The MPTF Office will:

- Prepare consolidated narrative and financial progress reports, based on the narrative consolidated report prepared by the Joint Programme Team and the financial statements/ reports submitted by each of the Participating UN Organizations in accordance with the timetable established in the MoU;
- Provide those consolidated reports to each donor that has contributed to the SDGF, as well as the Steering Committee, in accordance with the timetable established in the Administrative Arrangement.
- Provide the donors, Steering Committee and Participating Organizations with:
  - Certified annual financial statement (“Source and Use of Funds” as defined by UNDG guidelines) to be provided no later than five months (31 May) after the end of the calendar year;
  - Certified final financial statement (“Source and Use of Funds”) to be provided no later than seven months (31 July) of the year following the financial closing of the Joint Programme.

Consolidated information will be available on the MPTF Office GATEWAY

(<http://mptf.undp.org/factsheet/fund/SDG00>)

**BudgetPreparation** - The Programme Coordinator will prepare an aggregated/consolidated budget, showing the budget components of each participating UN organization.

**Fund Transfer** - The initial transfer will be made based on the approved and signed Joint Programme document. The subsequent instalment will be released in accordance with Annual Work Plans approved by the NSC and always based on the SDGF ToRs and Guidance for JP Formulation. The release of funds is subject to meeting a minimum expenditure threshold of 50% of the previous fund release to the Participating UN Organizations combined. If the 50% threshold is not met for the programme as a whole, funds will not be released to any organization, regardless of the individual organization’s performance. On the other hand, the following year’s advance can be requested at any point after the combined disbursement against the current advance has exceeded 50% and the work plan requirements have been met. If the overall expenditure of the programme reaches 50 before the end of the twelve-month period, the participating UN Organizations may upon endorsement by the NSC request the MPTF Office to release

the next instalment ahead of schedule. The RC will make the request to the MPTF Office on NSC's behalf. Any fund transfer is subject to submission of an approved Annual Work Plan and Budget to the MDTF Office.

**Interest on funds** - Interest will be administered in accordance with the financial regulations and rules of each UN organization and as documented in the Standard Administrative Arrangement signed with the donor.

**Balance of Funds** - The disposition of any balance of funds remaining at the end of programme implementation will be in accordance with the agreements between the Participating UN Organizations and the implementing partners as well as donors where applicable.

## Accountability, Monitoring, Mid-Term Review and Evaluation

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Joint programmes are required to provide narrative reports on results achieved, lessons learned and the contributions made by the Joint Programme. Monitoring reports are prepared and presented to the JP SC twice a year and include updated work and monitoring plans.

JPs will produce annual monitoring reports plus a final evaluation report. Evaluations quality will be according with UNEG and OECD-DAC rules. Ongoing monitoring and results management will take place in line with UN standards and SDGF ToRs and Guidance for JPs Formulation.

All communication materials developed as part of a JP should acknowledge its several partners. The SDGF and Spanish Cooperation's logos should always be used jointly in all JP's communications.

**Audit** - The Administrative Agent and Participating UN Organizations will be audited in accordance with their own Financial Regulations and Rules and, in case of MDTFs, in accordance with the Framework for auditing multi-donor trust funds which has been agreed to by the Internal Audit Services of participating UN organizations and endorsed by the UNDG in September 2007.

### Legal Context or Basis of Relationship

The following governing cooperation or assistance agreements between the Government of the Socialist Republic of Viet Nam

and the UN participating organisations will be the legal basis for the relationships for conducting activities: For each UN Agency please indicate the title and date of the agreement between the Agency and the National Government:

Agency name	Standard Basic Assistance Agreement	Date agreement was signed
FAO	Agreement of Representation	27 January 1978
UNICEF	Basic Cooperation Agreement	6 February 1980
WHO	Basic Agreement	6 February 1980

## VI. Annexes

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**Letter signed by Resident Coordinator:**

 [Mr Bruno SDG-F\\_Submission of the JP Document on Integrated nutrition and food security\\_15](#)

[Sep2014.pdf](#)

**CN Endorsement of National Steering Committee:**

 [MPI letter Translation.docx](#)

**Commitment of matching funds:**

 [Cover Letter Vietnam SDG-F Submission on Nutrition and Food Security 16-06-2016.pdf](#)

**Results Framework:**

 [SDGF-VN- Annex 1- Results framework and budget-Sep15.docx](#)

**Budget break-down per outcomes, outputs and activities:**

 [SDGF-VN- Year1- JP Work plan and budget-Sep15.docx](#)


**Budget break-down per UN Agency \*:**

 [SDGF-VN- Budget breakdown per UN Agency -Sep15.xlsx](#)

**Integrated Monitoring and Evaluation Research Framework \*:**

 [SDGF-VN- Integrated Monitoring and Evaluation Research Framework-Sep15.docx](#)

**Performance Monitoring Framework \*:**

 [SDGF- VN- Performance Monitoring Framework-Sep15.docx](#)

**Minutes of formulation meetings and events \*:**

 [SDGF-VN- Formulation meeting minutes of -Aug4-2014.doc](#)

**Participants list of consultation meetings and events \*:**

 [SDGF- VN- Participation list of consultations and meeting-Sep15.doc](#)

**Risk analysis \*:**

 [SDGF-VN-Risk Analysis-Sep15.docx](#)

**Joint Budget Plan:**

 [Vietnam Joint Programme Work Plan and Budget.xlsx](#)

**Additional documentation:**

 [original MPI letter of endorsment \(Vietnamese\).docx](#)

**Additional documentation:**

 [Endorsment Letter Embassy of Spain.pdf](#)

**Additional documentation:**

 [original letter MoH on PMC Establishment \(Vietnamese\).pdf](#)

**Additional documentation:**

 [MOH letter-PMC Establishment translation.docx](#)