

## SDG Fund Joint Programme Final Narrative Report

### Report Formatting Instructions:

- Number all sections and paragraphs as indicated below.
- Format the entire document using the following font: 12point \_ Gill Sans MT.

<b>Participating UN Organization(s)</b>	<b>Targeted SDGs</b>
<i>(Indicate lead agency)</i> FAO (lead agency), UNICEF, WHO, UN WOMEN	Please indicate relevant SDGs, indicators and targets SDG 1, 2, 3, 5, 6, 13

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<b>Joint Programme Title</b>	<b>Joint Programme Number</b>
Integrated Nutrition and Food Security Strategies for Children and Vulnerable Groups in Viet Nam	UNJ/VIE/055/UNJ

<b>Joint Programme Budget</b>	<b>Joint Programme [Location]</b>
<p><b>SDG Fund Contribution: 1,500,000 US\$ (through FAO 665,400 US\$; UNICEF 650,000 US\$; WHO 100,000 US\$; UN WOMEN 85,600 US\$)</b></p> <p><b>Matching Funds Contribution 1: Vietnam Government 1,000,000 US\$</b></p> <p><b>Matching Funds Contribution 2: FAO 80,000 US\$</b></p> <p><b>Matching Funds Contribution 3: UNICEF 630,000 US\$</b></p> <p><b>Matching Funds Contribution 4: WHO 100,000 US\$</b></p> <p><b>Matching Funds Contribution 5: UN WOMEN 20,000 US\$</b></p> <p><b>Other:</b></p> <p><b>TOTAL: 3,300,000 US\$</b></p>	<p><b>Country: Viet Nam</b></p> <p><b>Region(s): Lao Cai Province and Ninh Thuan Province</b></p> <p><b>District(s) : Bac Ha and Si Ma Cai Districts under Lao Cai Province; Bac Ai and Thuan Bac districts under Ninh Thuan Province</b></p>

Final Joint Programme Evaluation	
Final Evaluation Completed	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Evaluation Report Attached	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Date of delivery of final report	Yes 10 August 2017 No

Joint Programme Timeline
<b>Start date : 7 August 2015</b> <i>(Actual start date of the programme)</i>
<b>Actual end date: 30 June 2017</b> <i>(including any approved no-cost extension)</i>

## Participating national and local partners, private sector and CSOs organisations

### I. PURPOSE

1. Give an overview of the **socio-economical context and the development problems** addressed by the programme.

Nutrition status of certain population is closely linked with the socio-economical context of that particular population. Thus, to improve nutrition status of a population, the programme needs to improve the socio-economic environment of the population.

Decreasing childhood stunting remains as a challenge for Viet Nam. Despite considerable progress in addressing malnutrition, national nutrition surveillance data show that in 2015, 24.6% of Vietnamese children under the age of 5 had stunted growth and 14.1% were underweight. Child malnourishment not only impacts the life possibilities of individuals, but its presence impacts national pride. As Viet Nam continues on its development path, the height of the childhood and people becomes symbolic of progress made. "Nutrition indicators, particularly the rate of stunting, should be considered a socioeconomic development indicator for the nation, as well as each locality."<sup>1</sup>

To improve child nutrition and increase the food security of vulnerable populations in Viet Nam, the United Nations designed the Joint Programme on Integrated Nutrition and Food Security Strategies for Children and Vulnerable Groups in Viet Nam (Phase II), hereafter referred to as the Joint Programme (JP). The JP is supported in part by the Sustainable Development Goals Fund (hereafter SDGF) and builds on the evolution of joint programming that has occurred between UN entities, but particularly on the experience and recommendations from the final evaluation of the previous MDG-F supported joint programmes on Integrated Nutrition and Food Security strategies in Viet Nam (Phase I). One clear lesson learned from Phase I was the value of the UN-team working jointly and building on the value-added of each UN entity.

The JP started in earnest on September 2015 under the framework of the One Plan 2012-2016, with the Vietnamese government's decision number 1275/QĐ-TT on 7 August 2015 endorsing a program on integrated nutrition and food security strategies for children and vulnerable groups in Viet Nam. In decision number 3943/QĐ - BYT (22 September 2015), the Minister of Health (MOH) approved the JP document and its two- year detail work plan.

The overall objective of the JP is to support development and implementation of integrated nutrition and food security strategies, policies, and data to meet the equitable targets set in

<sup>1</sup> Prime Minister, Socialist Republic of Viet Nam. February 2012. *National Nutrition Strategy for 2011-2020, With a Vision Toward 2030*. Medical Publishing House: Hanoi, Viet Nam. P. 5.

the 2011-2020 National Nutrition Strategy and 2010-2020 National Food Security Strategy. Specifically, one principle of the 2011-2020 National Nutrition Strategy is that “Nutrition activities should involve multiple sectors...” and “Priority should be given to poor, disadvantaged areas and ethnic minority groups, and for mothers and small children.” The JP specifically focuses on advocacy and implementation of the policies which were globally recommended as nutrition-specific and nutrition-sensitive policies and standards, development of institutional capacity and systems, and generating evidence about effectiveness and progress.

The JP focused on three levels of activities. Nationally, it aimed to support improvements in the food security and nutrition policy framework. Using two heterogeneous provinces with high levels of stunting (Lao Cai, a mountainous province in the northeast and Ninh Thuan, a coastal province in south central Viet Nam) the JP piloted activities aimed to ultimately improve the nutritional status of participating communities. The activities can be characterized broadly under the rubrics of agriculture and health. The results of the pilots are to increase knowledge around best practices in reducing food insecurity and child malnutrition.

2. List **joint programme outcomes and related outputs** as per the final approved version of the joint programme document or last agreed revision.

**Outcomes and related outputs**

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

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

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

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

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

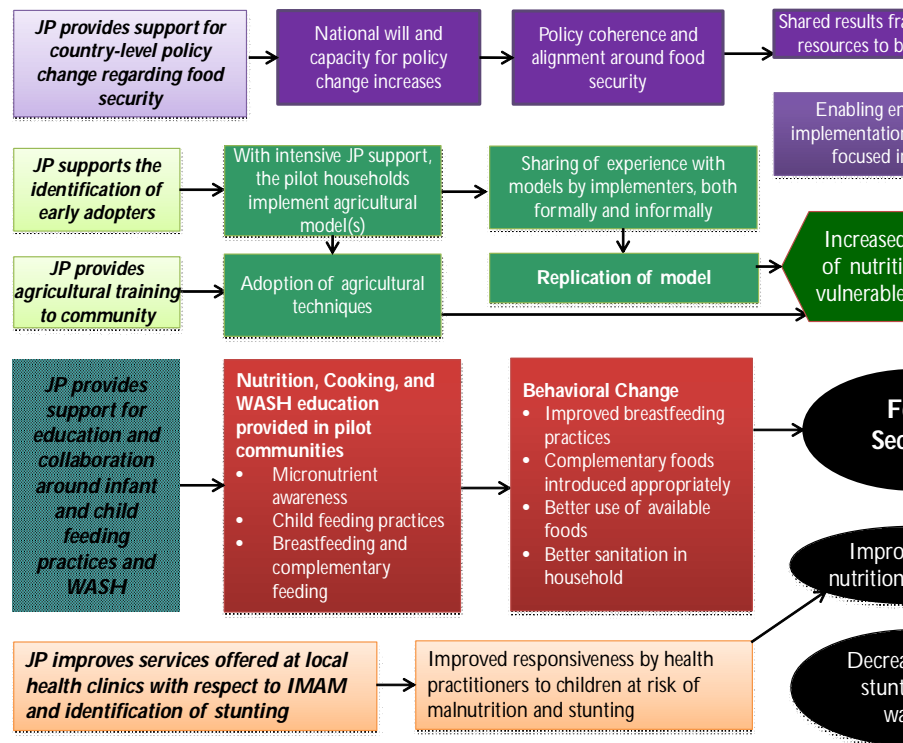
Output 3.1 National Nutrition and Food Security Information Systems generating disaggregated data to guide evidence-based and risk informed programming to promote equity and resilience

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

3. Explain the **overall contribution** of the joint programme to **National Nutrition Strategies, National Nutrition Action Plans and priorities**

The JP’s overall objective is to support development and implementation of integrated nutrition and food security strategies to meet the equitable targets set in the 2011-2020 National Nutrition Strategy and 2010-2020 National Food Security Strategy. Overall, the

evaluation team found that JP was successful in anticipating the country needs and providing support that was highly relevant to the government.



**Figure: JP Theory of Change**

To ultimately improve nutritional status of vulnerable persons, the program took three approaches.

1. Impact the policy environment and policy infrastructure around food security.
2. Improve the health status of the population through the sharing of information about nutrition, child feeding practices, and sanitation.
3. Increase the food supply available to households and communities that are food insecure or at risk of food insecurity.

The three approaches combined top-down with bottom-up strategies. Considering top-down, developing the policy environment at the national level was to impact the policy environment at the regional level and thus the commune and village levels. For the bottom-up strategy, communes in two regions were identified as exemplar places to target and for demonstrating the approaches of linkage direct nutrition interventions with sensitive nutrition intervention via promoting agricultural activities for improvement of household food supply and nutrition. Since the national nutrition strategy 2011-2020 (NNS) already existed at the time before the starting of the programme, The JP contributed significantly to the NNS and the Nutrition action plan in several dimensions.

Firstly, it enhances the NNS implementation of the government agencies to achieve its goals in areas of nutrition policy and new strategy development, under which several major policy documents were formulated, approved by central government or the MOH, and put into effective. The below list described achievement in this area:

- Development of Decree No. 85/2015/ND-CP (1st Oct. 2015) detailing out a number of articles the Labor Code in terms of policies for female employees.
- Formulation and approval of the National Decree 09/2016/ND-CP on mandatory food fortification in Jan.2016 under which, salt for human consumption and salt for food processing must be iodized salt; all vegetal cooking oils must be fortified with vitamin A, and all wheat flour produced and used in the country must be fortified with Iron and zinc. This is a major milestone that help to open fully a door for future promising achievement of Viet Nam in their fighting with micro-nutrient deficiencies
- Formulation and approval of the MOH for a national guideline on diagnosis and treatment of children with severe acute malnutrition in end 2016
- Formulation and approve of an internal practical guide on social marketing of nutrition products
- Costing study for next 5-year nutrition plan of action is ongoing to provide evidence for a new round of government investment for nutrition period 2017-2020
- Formulation of new period national plan of action for nutrition 2017-2020

Secondly, The JP brought up a big support for the process of monitoring and a midterm review the implementation of national plan of action for nutrition in previous 5 year (2011-2015) that draw out gaps and the lessons for learnt. Basing on results of the midterms review, a new national plan of action for the period 2016-2010 was successfully formulated, and was approved by Minister of Health for an official launching in early 2018.

Thirdly, under this JP, a model of integration strategy on nutrition and food security for purpose of reduction child stunning was jointly developed and demonstrated at grass-root levels at 7 selected communes (in four project districts). The programme evaluation report denoted many positive impacts from those model development activities. The fact that after the programme ending, the model developed in Lao Cai provinces was accepted by the Provincial People Committees to be replicated in to 22 communes more using local Government budget. That is an evidence of its success in terms of the impacts and sustainability of the intervention bring back from the JP.

Further than that, the JP have provided so far, a main base for partnership development between UN agencies (UNICEF, WHO, FAO, UN Women) with the NIN and related Government agencies, INGOs to jointly advance the SUN initiative since the day when Viet Nam was accepted by SUN as the 60<sup>th</sup> country member of its global network (Jan.2014). In 31 Jan.2018, a national ceremony for SUN launching was successfully conducted at central Government level together with the launch of a Special Directive of the Pre-Minister on strengthening nutrition programme in Viet Nam. Thus, it is worth to state that the JP contributed significantly in initiating the SUN movement in Viet Nam that create a unique opportunity and atmosphere for nutrition programme getting further commitment and financial investment of the governments at national and provincial levels.

4. Describe and assess how the programme development partners have jointly contributed to achieve development results

The JP operationalizes many aspects of the UN's support to Viet Nam, as specified in the One Plan 2012-2016. Its focus on improving food security of vulnerable sub-populations is an operationalization of the One Plan's emphasis on decreasing inequality and improving the well-being of minority groups. Further, the One Plan stresses mitigating the impact of climate change through diversification. The JP's spreading of various agricultural models so farmers can diversify operationalizes this aspect of the One Plan. Clearly, the JP's emphasis on increasing food security among the vulnerable concurs with the emphasis of the One Plan to decrease poverty, especially multidimensional poverty.

The JP continued 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.

The JP was planned as a multi-sectoral approach, bringing a combination of health-oriented and agricultural-oriented interventions to different levels of society. The programme's structure of the Programme Executive Committee and Programme Management Unit brought together governmental actors from the MOH and MARD and social organizations such Women, Farmer and youth unions. Further, having a programme document that clearly specifies the role and value-added of actors and entities, including UN entities was valuable in assuring that efforts were not duplicated and the programme implementation and delivery were efficiently organized.

**II. ASSESSMENT OF JOINT PROGRAMME RESULTS**

1. What were the key outcomes of the programme? Explain any variance in achieved versus planned results.
  - a. **Impact the policy environment and policy infrastructure around nutrition and food security.**

**Policy Environment**

The JP emphasized creating a policy environment and materials that could be used for advocacy in Viet Nam that would be conducive to better nutritional practices and increasing food security. The following policies resulted during the period of the JP.

NO.	JP's Outcome	Time endorsed
	Policy and Advocacy at national level (outcome 1)	
1	Development of Decree No. 85/2015/ND-CP (1st Oct. 2015) detailing a number of articles the Labor Code in terms of policies for female employees.	October.2015

NO.	JP's Outcome	Time endorsed
	Policy and Advocacy at national level (outcome 1)	
2	The Food Pyramid Guides for pregnant, lactating women and children 3-5year-old was developed.	2015-2016
3	Reinforcement of implementing the Decree No. 100/2014/NĐ-CP (issued on 6 Nov. 2014): To Organize national workshops on dissemination and support a training programme for all provinces on enforcement this decree.	July 2015
4	Decree No 09/2016/ND-CP on Mandatory food fortification including mandatory salt iodization formulated and approved by Prime Minister on 28/1/2016, effective from 15/3/2016.	January 2016
5	Mid-term review (2011-2015) of the implementation of NNS/NPAN on strategy 2010-20120 was conducted. New national plan of action for nutrition period 2016-2020 formulated. Two National Conference on NNS/NPAN MTR was holding at NIN (18.03.2016 and 28.12.2016)	March 2016 December 2016
6	MARD issued Decision 1898/QĐ-BNN-TT dated May 23, 2016 on "Restructuring strategy for Viet Nam's rice sector up to 2020 and vision to 2030"	May. 2016
7	Restructuring Proposal on Rice sector under finalization process endorsed in June 2016 and disseminated for nation-wide application.	June 2016
8	Technical guidelines on early detection and early treatment of children with severe acute malnutrition (IMAM) were approved by MOH (Decision No. 4487 / QĐ-BYT dated 18/8/2016 of the Ministry of Health promulgating guidelines for the diagnosis and treatment of acute malnutrition in children aged 0 to 72 months)	August 2016
9	Costing study for next 5-year nutrition plan of action is ongoing to provide evidence for a new round of government investment for nutrition period 2017-2020	2016-2017

The change in the policy environment was important in two ways. First, by working with the government and supporting the government, the JP built governmental capacity and lowered barriers for future policy change, not only in the food security arena, but in the arena of other social policies. As one interviewee explained, the support of UN entities brought international expertise to the government and the UN team supported the government to meet international standards. An interviewee from MARD said "The program helped institute the Restructuring Agriculture Programme. At the central level, we built relationships, especially between the Crop Production Department and the other MARD departments, also between MARD and research institutes and policy research institutes and universities. We learned between the vertical and horizontal roles during the JP." The experience of working both vertically and horizontally on issues and resolving them by constructing policies created sustainable change in terms of the mode of operation between organizations and agencies.

Another official plainly stated "This program played an important role in changing the policy on rice in our country." This feedback supports the premise that the JP's work on policy change was important and had a lasting impact.

With respect to sustainability, the programme built organizational structures that will last. In supporting policy development, by bringing together different actors, the programme created an environment that will allow for further policy development, both in the food security arena, but also likely extending to other social support initiatives. In the training arena, local officials informed the evaluation team that the development of materials, both on the health and the agricultural side, will allow regional and local governments to continue to offer training. The creation of curriculum that can be shared and tweaked to allow for local differences contributes to the sustainability of the impact of the JP.

Further from the formulation of the nutrition related policies and put them into effect, the JP have provided so far, a main base for partnership development between UN agencies (UNICEF, WHO, FAO, UN Women) with the National Institute of Nutrition and related Government agencies, INGOs who are jointly advancing the SUN initiative in the country since the day when Viet Nam was accepted by SUN as the 60<sup>th</sup> member state to join this global network (Jan.2014). In 31 Jan.2018, a national ceremony for SUN launching was successfully conducted with participation of deputy Prime Minister on behalf of the central Government, together with the launch of a special Directive of the Pre-Minister on strengthening nutrition programme in Viet Nam. Thus, it is worth to state that the JP contributed significantly in initiating the SUN movement in Viet Nam that creates a unique opportunity and new atmosphere for nutrition programme getting further commitment, financial investment of the governments at national and provincial levels.

**b. Improve the nutrition/health status of the target population through the improvement knowledge of nutrition care, child feeding practices, and sanitation.**

Below data table are showing themselves the changes of knowledge, and practices of the targeted women and child care givers in child feeding that includes breastfeeding and complementary feeding practices (see in table 1 &2) As a result, it leads to a general change in anthropometric nutrition status of under five children in the project locations, in which there is a reduction of under weigh and child stunting clearly observed while this reduction trend is not clear for child wasting indicator. (Table 4).

It is likely premature to detect a significant impact on child stunting within a year and a haft of the program since children who are stunted at starting of the programme need time as well as good nutrition, hygiene, and medical care to catch up to their peers. Other aspect is that nutrition interventions in this model purpose first to reduce number of new-born case who newly fall in stunting during the programme intervention period.

**Assessment of JP's Impact on Child Feeding Practices**



Table1. Lao Cai Mothers' Knowledge of Appropriate Breastfeeding Practices, Baseline vs. Endline

COMMUNE:	Thao Chu Phin		Ban Pho	
	Baseline [N=58]	Endline [N=84]	Baseline [n=92]	Endline [n=111]
<b>MOTHER'S KNOWLEDGE OF WHEN BREASTFEEDING SHOULD BE INITIATED AFTER CHILDBIRTH</b>				
Within the first hour	31.0%	39.3%	33.0%	42.9%
< 24 hours	15.5%	55.9%	12.1%	52.3%
>24 hours	19.0%	0.5%	7.7%	1.0%
No response	34.5%	4.3%	47.3%	3.8%
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.1%</b>	<b>100.0%</b>
Breastfeed only and do not feed child anything else, including water	3.5%	59.7%	7.7%	70.6%
Other	22.4%	5.2%	18.7%	3.7%
No response	74.1%	35.1%	73.6%	25.7%
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

Table 2.

<b>PERCENT OF MOTHERS THAT RESPONDED THAT THEY BEGAN COMPLEMENTARY FEEDING AFTER THEIR CHILD REACHED 6 MONTHS OF AGE</b>					
<b>Total</b>		<b>12.2%</b>	<b>98.6%</b>	<b>10.6%</b>	<b>96.0%</b>
<b>MOTHER'S KNOWLEDGE OF FOODS NECESSARY FOR COMPLEMENTARY FEEDING</b>					
Starchy food group		67.2%	89.1%	51.7%	68.9%
Animal protein source foods		84.5%	93.2%	59.3%	83.8%
Vegetables		50.0%	98.2%	33.0%	84.3%
Dairy foods		27.6%	25.0%	23.1%	9.3%
Did not know		31.0%	30.8%	39.6%	10.0%
<b>Total</b>		<b>100.00%</b>	<b>100.00%</b>	<b>100.1</b>	<b>100.0</b>

**Table 3. Assessment of Health Outcomes**

Nutrition Status of Children &lt; 5 Years of Age in Two Ninh Thuan Communities

Nutrition status	Cong Hai		Phuoc Chinh	
	Baseline	Endline	Baseline	Endline
<b>Weight (mean±SD)</b>	9.4±7.6	11.3±4.4	7.3±1.6	11.1±3.2
<b>Height (mean±SD)</b>	72.4±11.5	86.6±39.3	68.3±8.7	91.5±58.1
<b>Underweight (n,%)</b>	150 (26.7)	113 (21.9)	18 (30.5)	57 (31.7)
<b>Stunting (n,%)</b>	165 (29.4)	128 (25.5)	23 (39.0)	77 (43.8)
<b>Wasting (n,%)</b>	83 (14.8)	39 (7.7)	8 (13.6)	19 (10.9)
<b>Overweight, obesity (n,%)</b>	3 (0.5)	16 (3.2)	0	2 (1.1)
<b>Total [N]</b>	<b>522</b>	<b>529</b>	<b>149</b>	<b>189</b>

Table 4. Anthropometric Measures of Children Younger than 5 Years of Age in Two Communes in Lao Cai

Indicator	Baseline (N=150)	Endline (N=195)	p
<b>Underweight</b>			
Total	24.2	16.6	<0.05
Ban Pho	20.7	13.6	<0.05
Thao Chu Phin	29.2	20.5	<0.05
<b>Stunting</b>			
Total	64.9	47.9	<0.01
Ban Pho	59.2	43.9	<0.01
Thao Chu Phin	73.3	53.0	<0.01
<b>Wasting</b>			
Total	2.4	3.1	>0.05
Ban Pho	2.6	0.9	>0.05
Thao Chu Phin	2.1	6.0	>0.05

- c. Increase the food supply available to households and communities that are food insecure or at risk of food insecurity.

**Assessment of Food security (Impact on food availability)**

Table 5. Sources of Cash Used for Purchasing Food in Surveyed Households

Commune	Selling crop products (%)		Selling Livestock (%)		Borrowing (%)	
	Baseline	Endline	Baseline	Endline	Baseline	Endline
<b>NINH THUAN PROVINCE</b>						
Bac Son	13.6	12.5	18.1	15.6	27.2	9.3
Cong Hai	10.5	52.2	5.2	18.1	15.7	4.5
Phuoc Thanh	41.1	35.1	5.8	10.8	29.4	10.8
Phuoc Chinh	10.0	52.2	35	13.6	30.0	9.1
<b>LAO CAI PROVINCE</b>						
Ban Pho	16.67	45.45	25.00	54.55	12.5	0.00
Nam Mon	23.08	46.15	7.69	53.85	15.38	11.54
Thao Chu Phin	16.67	57.14	25.00	71.43	16.67	4.76

At the commune level, food self-sufficiency of households increased. Rice production not only met household demand but also met the demand for other uses such as trading and feed. Per capita rice consumption in the endline survey declined from the baseline.

The reduction is positive since the reduction in per capita rice consumption was offset by an increase in the nutrition diversification in food consumption. The substitution of more nutritionally diverse foods for rice can signal improved food security in the project areas

Table 6. Household Gardening in Two Ninh Thuan Communes

		Cong Hai		Phuoc Chinh	
		Baseline	Endline	Baseline	Endline
Have garden to grow vegetables	Yes	28 (14.7)	154 (82.4)	51 (73.9)	21 (29.6)
	No	162 (85.3)	33 (17.6)	18 (26.1)	50 (70.4)
Garden type	With fence	15 (53.6)	14 (73.7)	11 (21.6)	2 (4.8)
	No fence	13 (46.4)	5 (26.3)	40 (78.4)	40 (95.2)
Poultry	Yes	105 (55.3)	73 (46.2)	49 (71.0)	8 (11.4)
	No	85 (44.7)	85 (53.8)	20 (29.0)	62 (88.6)

- Who are and how have the direct beneficiaries/rights holders been engaged in the joint programme implementation? Please disaggregate by relevant category as appropriate for your specific joint programme (e.g. gender, age, etc.)

From the beginning of the Joint programme, needs assessment have been implemented to address the expectation of direct beneficiaries. Each commune has different environment, culture, ethnic group, and language.

The JP's activities are very likely to have achieved capacity-building at the intersection of health and nutrition. Specifically, the following activities occurred:

- a) Program Launching and National Planning Workshop on 5<sup>th</sup> of October 2015, there are 90 (50M and 40F) participants from national and provincial level attended the workshop
- b) Joint program visit and provincial planning meeting in Ninh Thuan province in July 2015, there are 60 (40M&20F) participants from national and provincial level attended
- c) Joint program visit and provincial planning meeting in Lao Cai province in August 2015, there are 60 (35M&25F) participants from national and provincial level attended
- d) Review workshop in October 2015 by Ministry of Agriculture and Rural Development (MARD) on Crop Production Restructuring period 2013-2015. There are 300 (200M&100F) participants from national and provincial level participated the workshop
- e) National consultation workshop to finalize Rice Restructuring Project in October 2015 by MARD, there are 150 (100M& 50F) participants from MARD and provinces participated the workshop
- f) 01 meeting on designing and planning of activities for the Community based model developed for Lao Cai for 50 local team and represented participants (20M and 30F)
- g) 01 five day - training for capacity building for 40 commune and village health worker in Lao Cai on IYCF (25M and 15F)
- h) sensitization workshop on community based model for reduction of child stunting conducted for 40 participants (20M and 20F) from district, commune people committee and local sectors on the community based model (one for Bac Ha, other for Si Ma Cai district)
- i) Sensitization planning workshop for health and agriculture sector conducted for 40 participants (20M and 20F) from province, district, commune people committee and local sectors
- j) National launching of the result of newly national survey on micro-nutrient deficiencies (2014) conducted in Nov.2015 for 50 participants (30M and 20F) from national and provincial levels
- k) Basic training on community based IYCF promotion for 150 (80M and 70F) participants in Ninh Thuan province
- l) Training in rice production using Rice Integrated Crops Management for 450 famers (210 M and 240 F) in 3 communes in Ninh Thuan provinces
- m) Development and implementation and capacity building on crops, livestock and aquaculture production for 106 famers 34M and 72F in 4 communes in Ninh Thuan provinces
- n) Dissemination workshop on RICM for 200 famers 106M and 94F farmers in 3 communes in Ninh Thuan provinces
- o) Development and approval process for national policies regarding mandatory food fortification; national guideline on management of severe acute malnutrition; national guideline on social marketing of nutrition products have done by several MOH's departments and the institutions.
- p) Consultation workshop on improvement of implement the Decree No 100 and mechanism of 10 steps of breastfeeding at health facilities including early essential newborn care (EENC): (137 health workers: 68 male and 69 female)
- q) Adaptation of WHO tools for health facility strengthening focusing on early essential newborn care (EENC) implementation review of EENC; and conducting assessment of EENC implementation in selected provinces (Ninh Thuan, Lao Cai, Khanh Hoa, Hue); TOT on EENC/Criteria on Hospital Performance Quality Assessment (45 health workers: 25 female, 20 male)
- r) Three training courses on Rice Integrated Crops Management for 150 farmers of Phuoc Chinh commune, Bac Ai district, Ninh Thuan province (13 M and 137 F)
- s) Eight training courses on maize cultivation model for 400 farmers in 4 program communes in Ninh Thuan province (120M and 280F)

- t) Eight training courses on Green Bean cultivation model for 400 farmers in 4 program communes in Ninh Thuan province (125M and 275F)
  - u) Eight training courses on vegetable cultivation model for 400 farmers in 4 program communes in Ninh Thuan province (100M and 300F)
  - v) Four training courses on pigeon raising model for 200 farmers in 4 program communes in Ninh Thuan province (79M and 121F)
  - w) Four training courses on freshwater fish model for 200 farmers in 4 program communes in Ninh Thuan province (64M and 136F)
  - x) Four training courses on chicken raising model for 200 farmers in 4 program communes in Ninh Thuan province (69M and 131F)
  - y) Field dissemination workshop on rice, maize, green bean and vegetable model for 200 farmers in Cong Hai and Phuoc Chinh communes in Ninh Thuan province (68M and 132F)
  - z) Field dissemination workshop on pigeon, chicken, freshwater fish model for 400 farmers in 4 program communes in Ninh Thuan province (165M and 235F)
  - aa) Eighteen training courses on Soybeans cultivation model for 900 farmers in 3 program communes in Lao Cai province (523M and 377F)
  - bb) Six training courses on vegetable cultivation model for 150 farmers in 3 program communes in Lao Cai province (87M and 63F)
  - cc) Six training courses on maize cultivation model for 150 farmers in 3 program communes in Lao Cai province (90M and 60F)
  - dd) Three training courses on banana cultivation model for 150 farmers in 3 program communes in Lao Cai province (90M and 60F)
  - ee) Three training courses on chicken raising model for 150 farmers in 3 program communes in Lao Cai province (85M and 65F)
  - ff) Three training courses on livestock waste management for 150 farmers in 3 program communes in Lao Cai province (95M and 55F)
  - gg) Twelve training courses on Integrated Pest Management, livestock epidemic disease prevention, veterinary medicine management and post-harvest management for 510 farmers in 3 program communes in Lao Cai province (318M and 192F)
  - hh) Four trainings on gender equality and gender mainstreaming in nutrition and food security programme and actions for 60 female and 19 male health, agriculture and women's union officials and village collaborators in Ninh Thuan and Lao Cai province.
3. How did the joint programme and its development partners contribute to the achievement of the SDGs?

#### **SDG 1 (No poverty)**

Reduce the poverty rate and improve the livelihood of vulnerable groups in Vietnam by enhancing capacity of the population and applying effective and efficient agriculture models.

#### **SDG 2 (Zero Hunger)**

FAO has provided technical support to increase the food security of each commune. The provided agriculture model could be duplicated.

- Reducing of micro-nutrient deficiencies among women and children, reduction of and stunting and wasting in children under 5 years of age, and address the nutritional needs of girls pregnant and lactating women, particularly in the most vulnerable ethnic minorities communities along South Central Coast and Northern Mountainous regions of Vietnam
- Restructuring Proposal on Agriculture Sector in responding to climate change in Lao Cai province have been finalized for implementation

#### **SDG 3 (Good Health and Well-being)**

Improve nutrition status of children and vulnerable groups in Vietnam. Particularly improve the chronic malnutrition of children, stunting rate is very high, according to WHO categorization.

- The mechanisms for improving implementation of the Decree No 100 and 10 steps of breastfeeding at health facilities including Early Essential New-born Care (EENC) when translated into national policies and regulations to re-enforce the above decree and regulations.
- EENC Health Facility Strengthening and Annual Implementation Review and Planning guidelines of WHO was reviewed and adapted to Vietnamese’s context. The tool has been used nationwide for improving quality of EENC in the country, four provinces were selected to implement the assessment actual situation of EENC implementation in hospitals using adapted tool for EENC implementation review, including Lao Cai, Ninh Thuan, Thua Thien Hue and Khanh Hoa. The assessment provided recommendations and solutions for improving EENC implementation and breastfeeding in these provinces.
- TOT training on EENC self- assessment for Quality assessment of Hospital Performance was also conducted for 12 provinces including Da Nang, Thien Hue, Quang Tri, Thanh Hoa, Nghe An, Ha Tinh, Quang Binh, Quang Nam, Quang Ngai, Binh Dinh, Phu Yen, Khanh Hoa. One team of EENC assessment and EENC assessment provincial trainers was formed in each province after training which can help for evaluation, planning and improving EENC implementation

**SDG 5 (Gender Equality):** UN Women has been involved from the early implementation phase. They implemented gender assessment on the program interventions and communes, and conducted gender trainings to improve understanding and knowledge on gender equality in nutrition and food security of government officers in health and agriculture sectors at provincial, district and commune level. A checklist of gender mainstreaming was developed and provided to health and agriculture extension service workers so that they can provide more gender sensitive nutrition and agriculture services to community people.

**SDG 6 (Clean Water and Sanitation):** Align with the 2011-2002 Water and Sanitation Strategy of Viet Nam.

**SDG 13 (Climate Action):** Building resilience against the climate change by practicing climate smart agriculture methods.

4. What was the impact of the **matching funds** in programme design, management and implementation?

**A. Financial Contributions**

Four UN entities contributed to the JP’s implementation-- FAO, UNICEF, WHO, and UN Women. Each UN entity contributed resources. The JP also had national implementing partners. Lead national partners from the Ministry of Health (MOH) were the Department of Maternal and Child Health and the National Institute of Nutrition, and from the Ministry of Agriculture and Rural Development (MARD) was the Department of Crop Production. Other national partners include the Provincial Health and Agriculture Departments and provincial Peoples Committees.

**Budget Contribution from VN Government and UN Entities**

<b>Budget contribution (in Cash)</b>	
	Budget (US\$)
VN Government	1,000,000
FAO	80,000
UNICEF	630,000

UN Women	20,000
WHO	100,000
<b>Total</b>	<b>1,830,000</b>

## B. Implementation of Programme Activities by UN Entities

A document titled “Programme Document” describes the role of each UN entity in the JP. Both the UN and the Vietnamese government signed off on the document. The JP was to “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.”

### FAO

FAO was the lead UN partner in the JP. It coordinated the JP and was to conduct the following activities:

- Recruit the joint program coordinator, conduct launching and holding annual national and provincial planning workshops, baseline survey and assessment, finalization of M&E framework and conduct a Midterm Program Review and a final evaluation of the joint programme.
- **Working with MARD and DARDs for Lao Cai and Ninh Thuan,**
- Working with MARD, improve food security through restructuring the crop production;
- Support the increased availability, access and consumption of food in the mountainous regions;
- Improve and develop livelihood intervention and practices of small households;
- With the MOH and MARD, promote the use of available food in family nutrition practice;
- Demonstration and training in rice seed production using RICM, with MARD; and
- With UNICEF, develop and roll out of an online output monitoring system for the National Targeted in

### WHO

WHO had a limited though important role in the JP. Its involvement was critical in achieving the health-oriented policy change that occurred. According to the Programme Document, WHO was to limit its participation in the JP to a few activities:

- With UNICEF, support 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;
- With UNICEF, address compliance of revised Decree 21 and Decree 100 on marketing of young child nutrition products;
- Scaling-up Early Essential Newborn Care and Breastfeeding (EENC); and
- Working with the National Institute of Nutrition, develop the Food Pyramid Guides for pregnant, lactating women and under-five children;

**UNICEF:** UNICEF was very involved in both the policy and field aspects of the project. According to the Programme Document, UNICEF was to:

- Support the operationalization of Ninh Thuan and Lao Cai provincial integrated maternal, newborn, child health and nutrition plans;
- Lead the work with WHO in supporting 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; compliance of revised Decree 21 on marketing of young child nutrition products;

- Support the coordinated scale-up of Integrated Management of Acute Malnutrition (IMAM) services with transfer of the management to the National Targeted Programme for Nutrition;
- Working with MOH and NIN, develop decrees and legal documentation on: fortification of foods, including mandatory salt iodization and flour and oil fortification with micro-nutrients; legislation on the benefit package for children covered by the National Health Insurance Scheme; guidelines on social marketing of nutrition products; guidelines on social marketing of sanitation products; and guidelines on early newborn care (focusing on early breastfeeding);
- 19 Integrate modeling of contextualized community- based stunting reduction models, including breastfeeding and complementary feeding support networks, community approaches to total sanitation and hygiene, drinking water safety, community-based management of acute malnutrition and social marketing of nutrition and sanitation products with the establishment of local public- private partnership models;
- Working with MOH, roll out an integrated behavior change communication plan for stunting reduction, including promotion of iron folic acid supplementation for pregnant women, breastfeeding, complementary feeding and hand-washing with soap;
- Working with the National Institute of Nutrition (NIN), consolidate nutrition and food security profiles to guide national and provincial planning and programming;
- Support innovative application of cell phone technology to track malnutrition and link with service delivery;
- Support water quality and water system sustainability surveillance systems and community-based household sanitation coverage surveillance;
- With FAO, develop and roll out of an online output monitoring system for the National Targeted Programme for Nutrition matching with the global reporting requirements for programme performance; and
- Conduct joint supervisory monitoring trips to identify bottlenecks and corrective actions.

#### **UN Women Involved in:**

- Carry out desk review on gender in nutrition and food security policies and practices in Viet Nam and A case study on Maternal Nutrition for Pregnant and Lactating women in Ha Giang province.
- UN Women delivered four training courses on gender mainstreaming in nutrition and food security for local partners in Lao Cai and Ninh Thuan province. Two courses were offered in each province- one to government officials, and the other to village health and agriculture extension collaborators. The training helped to increase their knowledge and understanding on gender issues in nutrition and food security and how to address these gaps.
- UN Women partnered with the Viet Nam Women's Union (VWU) at the central level to develop formal training material on communication on gender mainstreaming in nutrition and FS. This training material is to be used for the whole VWU system beyond the JP. This partnership demonstrates how JP funds were used to develop materials that could be used beyond the time and direct scope of the JP, which speaks to the JP's sustainable impact.

#### **C. Organization of Activities**

One challenge that faced the UN entities pertained to harmonizing the processes and procedures that each entity has. During the evaluation field trip, one interviewee explained that to overcome the challenge, the JP created a detailed program operation document (DPO). During the final evaluation, one interviewee said that "after the DPO was approved, all together worked out the work plan. The same thing happened at the field as well. Worked together to develop the provincial work plan. Unpacked the issue going down. Minimized the overlap, and also shared the effort."



The timing of the specific activities was as indicated in the two year workplan which shows a systematic review of the JP's main activities. The time of programme implementation was almost 2 years, including the 6-month extension of the JP into 2017. However, the full government approvals and the setting up of the implementation mechanisms did not occur until December 2015. Provincial level activities did not start until February 2016 and they ended in March 2017, except for the training course on gender which occurred after March 2017. However, in some cases, preparation activities began before December 2015 under inception phase.

5. What were the programme's achievements in terms of its contribution to the targeted cross-cutting issues?

**a. Gender equality and women's empowerment**

UN WOMEN was in charge of integrating the gender equality issues to the programme and before developing gender-sensitive programmes, UN WOMEN lead the gender assessment of nutrition and food security policies and programs to identify gaps women and girls' access to nutrition and food security and provide recommendation for the policy advocacy.

UN WOMEN delivered four training courses on gender mainstreaming in nutrition and food security for local partners in Lao Cai and Ninh Thuan province. Two courses were offered in each province- one to government officials, and the other to village health and agriculture extension collaborators. Each lasted approximately 1 ½ days and sessions were offered in April and May 2017. In Lao Cai, a total of 43 people participated in the training and in Ninh Thuan, a total of 51 persons participated. The training seemed appropriate in content.

Poor and ethnic minority women and girls are direct beneficiaries of the project. At the policy level, the project support the development of decree 100 on breastfeeding and Early Essential New-born Care (EENC) which directly benefit to women and girls. At community level, women actively participated and facilitated for IEC activities and parent education on nutrition and breast feeding.

Women also played an important role in implementing seven models on crops, livestock and aquaculture production as well as field dissemination workshop for wider application. In addition, women gained their knowledge and skill on nutrition and food security through capacity building activities.

A desk review on gender issues in nutrition and food security programme and policies finalized. The desk review is to provide a preliminary understanding of gender issues in nutrition and food security policies and practices in Viet Nam and provide recommendations for policy actions. A case study on Maternity nutrition for pregnant and lactating women in Ha Giang province was also conducted which provide insights on challenges on gender stereotypes and gender inequality against women in ethnic minority areas which have resulted in lack of care for pregnant and lactating women.

**b. Public-private partnerships**

Dissemination workshop on Rice sector Restructuring organised in November 2016. Representatives from both public and private sectors actively participated and gained their knowledge for nation-wide application

**c. Sustainability of results**

The IMAM model development under the joint programme together with national guideline on diagnosis and early treatment of child severe acute malnutrition (SAM) which was now approved by the MOH as a national guideline - in fact created a major base for the IMAM intervention that applied for none emergency and especially under

emergency context. For instant, with the IMAM model developed in certain pilot communes in Ninh Thuan, it has been immediately applied and expanding to 334 communes of 28 most affected districts of 6 provinces by drought crisis 2016 to benefit for about 7640 SAM children in affected provinces.

Until the cost of IMAM intervention package was approved by government to be covered by health insurance, that services will be automatically sustained by Government funds bringing benefit to about 250,000 case load of SAM children each year in Viet Nam, and UNICEF is still in collaboration with WHO to work with central government to follow up with this goal to totally sustain IMAM service in Viet Nam.

A model of integration strategy on nutrition and food security for purpose of reduction child stunting was jointly developed and demonstrated at grass-root levels at 7 selected communes in four project districts. The programme evaluation report denoted many positive impacts from those model development activities. The fact that after the programme ending, the model developed in Lao Cai provinces was accepted by the Provincial People Committees to be replicated in to 22 communes more using local Government budget that is an evidence of its success in terms of the impacts and sustainability of the intervention bring back from the JP

Strong government ownership at both national and provincial levels through endorsement and implementation of national rice sector restructuring (nation-wide) and provincial agriculture restructuring in Ninh Thuan and Lao Cai provinces.

**d. Environmental sustainability**

The developed agriculture models environment friendly, which doesn't include pesticides and chemical fertilizers. It will not only provide additional surplus to the beneficiaries but also have positive impact on the environment and as the model replicates to other people, neighbours of the beneficiaries, they will also utilize environmental friendly agriculture methods to cultivate their products.

6. Describe the extent of the contribution of the joint programme to the following categories of results:

- Principles of the **Paris Declaration**, i.e. leadership of national and local governmental institutions, involvement of CSO and citizens, alignment and harmonization, and innovative elements in mutual accountability (justify why these elements are innovative)
- **Delivering as One**, i.e. Role of Resident Coordinator Office and synergies with other ongoing development interventions in related areas, innovative elements in harmonization of procedures and managerial practices (justify why these elements are innovative), joint United Nations formulation, planning and management
  - a. Managerial practices (financial, procurement, etc.) implemented jointly by the UN implementing agencies for SDG-F JPs  
UN agencies are working closely together to prepare for final program evaluation and program closing as well as program documentation of lesson learnt and best practices.
  - b. Joint analytical work (studies, publications, etc.) undertaken jointly by UN implementing agencies for SDG-F JPs  
A desk review on gender issues in nutrition and food security programme and policies is being finalized with inputs and comments from other UN agencies especially FAO Viet Nam and regional office

c. Joint activities undertaken jointly by UN implementing agencies for SDG-F JPs

WHO and UNICEF jointly support MOH to enforce the national Decree 09 on mandatory food fortification, scale-up Early Essential New-born Care (EENC) and the implementation of the Decree 100 on breastfeeding

UNICEF, FAO and WHO is jointly to prepare for the launching of the SUN in Viet Nam

UNICEF and FAO continue to work together on community based model on integrated nutrition and household food security for reduction of child stunting

**7. Indicate which of the planned activities were not implemented, which unplanned activities (in any) were implemented and, in each case, for what reasons and with what impact: N/A**

### III. GOOD PRACTICES AND LESSONS LEARNT

8. Describe key lessons learnt and best practices that would be relevant to the design and implementation of future joint programmes in this area

Programme design: All stake holders were deeply involved from the planning process of the programme. Such measures made the programme design, easy to implement and satisfy the needs of the beneficiaries. Every activities have been adjusted to local characteristics, climate, culture, and people's preference, making the beneficiaries to be fully participated on the programme.

The collaboration between United Nation agencies, FAO, UNICEF, WHO, and UN WOMEN, have been successfully. From the initial phase, the programme clearly identified the role of each agencies and their responsibility. Such division of work and frequent communication between agencies, made the programme much more efficient, minimizing the overlapping work between agencies.

9. **Report on any new/innovative approaches which were delivered in the course of joint programme implementation**

The quantitative surveys shows that JP achieved significant improvement on mother's knowledge in breastfeeding and complementary feeding, nutrition status of children, food security of vulnerable groups. The final evaluation team found the key to this successful achievement in the design and its implementation of JP.

From the start, by having a strong, inclusive programme planning process, the programme seemed to earn respect and be a priority of national, regional, and local officials. The JP's Programme Document was well-written and clearly explained aspects of the programme and the responsibilities of participating organizations. Having a detailed programme document allowed organizations to see how their role would be implemented and the importance of their role. Additionally the JP focused on communities with high levels of child stunting, rural communities that have high levels of borrowing money to purchase food are also in high need of assistance in increasing food security, and it is likely that such communities would benefit greatly from the agricultural interventions that the JP offered.

- In nutrition areas, Translation of the 10 steps of breastfeeding support under the global BFHI on to a national standard for hospitals and health care clinics and national policies/regulations is a creative way that the JP promoted with a purpose to re-enforce and quickly scale up at country level this important child feeding practices at all health clinic system.
- Development of a national guideline for diagnosis and treatment of SAM and MAM children, making this to become an official approve MOH standard, together with carrying out a costing exercise for IMAM programme then advocating central government Health insurance system to cover all cost of the IMAM treatment is actually an special approach which were collectively implemented in Viet Nam under the JP with a leadership from UNICEF. Until when the last element is success (the advocacy part), IMAM programme will be one step scaling up to the whole country and it is strongly believe that in a close future the success will come.

10. Indicate key constraints including delays (if any) during programme implementation
- a. Internal to the joint programme
 

Slow and late delivery of gender assessment from UN WOMEN, due to difficulty in find a gender specialist to deliver the assessment.
  - b. External to the joint programme
 

Slow and complex process to get the governmental approval. Late governmental approval have shorten the actual implementation time of JP.

Main mitigation actions implemented to overcome these constraints

JP expected the slow and complex process to get the governmental approval. Thus, JP has prepared every little details to maximize the limit time that they have for the implementation before the governmental approval. Well preparation during inception phase help to accelerate program implementation after government approval.
11. Describe and assess how the monitoring and evaluation function has contributed to the:
- c. Improvement in programme management and the attainment of development results
 

The monitoring framework has been developed by JP to implement a systematic monitoring activities. Under the monitoring framework, UN agencies have conducted monitoring trips track the implementation progress and also secure the quality of implementation after monitoring.
  - d. Improvement in transparency and mutual accountability
 

With the monitoring framework, the progress of activities have been periodically monitored by responsible UN agencies, and by sharing their observations they could improve the transparency and mutual accountability of JP.
  - e. Increasing national capacities and procedures in M&E and data
 

Governmental institutes were also included in the monitoring framework along UN agencies, making both governmental institute and UN agencies responsible for monitoring the JP.
  - f. To what extent was the mid-term evaluation (if any) useful to the joint programme?
 

The mid-term evaluation has contributed on the JP by providing a subjective opinion. Particularly, it has provided some particle comments regarding limited implementation time of the JP. JP had adjusted to the mid-term evaluation and changing the plan to into more realistic manner, and not giving up any core goals of the JP.
12. Describe and assess how the communication and advocacy functions have contributed to the:
- g. Improve the sustainability of the joint programme
 

Many agencies contributed on communication and advocacy to promote the programme' goal. UNICEF and FAO particularly, provided valuable technical support and advocacy in the arena of national-level policy changes, making a permanent impact to all Vietnamese people.

On January 28, 2016 (effective March 15, 2016), the Prime Minister approved in Decree No 09/2016/ND-CP the Policy on Mandatory Food Fortification. The policy included mandatory micronutrient fortification of foods, including salt iodization and fortification of foods with iron, zinc, and Vitamin A.
  - h. Improve the opportunities for scaling up or replication of the joint programme

Through baseline survey and endline survey, JP has generated many evidence on the effect of the JP interventions. These generated evidences will be utilized for future advocacy activities and scaling up the JP into a national programme.

Communicating well results of the programme to the provincial government and donors was doing well in Lao Cai province at the ending phase. As a result, the Provincial People Committee of Lao Cai decided to replicated the model to 22 communes where are with difficult social economic condition using local government budget. Korea Government provided financial support to expand the model to three more location.

i. Providing information to beneficiaries/rights holders

Generated information regarding the health information and improvement of income will be provided to the beneficiaries. With the given information, the people can observe how much they have improve with participating on the joint programme activities. Farmer Field Schools to disseminate household food security models for wider application

13. Report on the scalability of the joint programme and/or any of its components

j. To what extent has the joint programme assessed and systematized development results with the intention to use as evidence for replication or scaling up the joint programme or any of its components?

Starting from the initial stage of the JP, generation of evidence on food security and nutrition were included as a main outcome of the JP. The generated evidence will be used for replication or scaling up the JP to National level programme.

k. Describe example, if any, of replication or scaling up that are being undertaken

The neighbouring people of beneficiaries have observed the improvement of beneficiaries, how much their livelihood has improved after their participation of joint programme activities. Thus, they ask questions on the activities and try to replicate them with guidance from the beneficiaries, generated spill-over effect.

Development and get approval of the national health sector for a national Guideline on IMAM; and building capacity for health system on implementation of IMAM services are direct results born by the JP (in nutrition field). The ongoing advocacy process initiated by UNICEF in collaboration with WHO to central government for a goal that all cost born from treatment of children under 5 with sever acute malnutrition will be covered by government health Insurance system. When this advocacy goal is made. IMAM treatment services will be one step scale up to the whole country.

l. Describe the joint programme exit strategy and asses how it has improved the sustainability of the joint programme

JP aimed to find government and private partners to sustain the join programme. It failed to find any private partners, but have found government funding from the local government of Lao Cai Province.

**IV. FINANCIAL STATUS OF THE JOINT PROGRAMME**

a. Provide a final financial status of the joint programme in the following categories:

**SDG Fund Allocation**

- a. **Total SDG Fund allocation** US\$: 1,500,000
  - 1. Total budget transferred US\$: 1,500,000
  - 2. Total budget committed US\$: 1,500,000
  - 3. Total budget disbursed US\$: 1,499,089

#### **Matching Funds Allocation**

- b. **Total matching funds** US\$: 1,830,000 (as session II)

b. Explain any outstanding balances or variances with the original budget

911 USD remaining fund belong to FAO due to partners returned after programme liquidation, money was saved through application of shared cost for travels of partners in some activities.