



NiPN

National Information
Platforms for Nutrition



Nutrition Policy Landscape Analysis

in Lao People's Democratic Republic



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National Institute for Economic Research

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ACRONYMS

CDR	Centre for Development Policy Research
CSPR	Centre for Socio-Economic Science and Policy Research
CU5	Children under Five Years
DAFO	District Agriculture and Forestry Office
DESO	District Education and Sports Office
DFID	United Kingdom Department for International Development
DHO	District Health Office
DLSWO	District Labor and Social Welfare Office
DLWUO	District Lao Women's Union Office
DPIO	District Planning and Investment Office
EU	European Union
FAO	Food and Agriculture Organization
GSF	Global Support Facility
HR	Human Resources
ILO	International Labour Organization
Lao PDR	Lao People's Democratic Republic
LDC	Least Developed Country
LFNC	Lao Front for National Construction
LSIS I	Lao Social Indicator Survey I
LSIS II	Lao Social Indicator Survey II
LTPHI	Lao Tropical and Public Health Institute
LWU	Lao Women's Union
MNCH	Maternal Neonatal and Child Health
LYU	Lao Youth Union
MAF	Ministry of Agriculture and Forestry
MOF	Ministry of Finance
MOH	Ministry of Health
MOLSW	Ministry of Labour and Social Welfare
MPI	Ministry of Planning and Investment
NAFRI	National Agriculture and Forestry Research Institute
NIER	National Institute for Economic Research
NIPN	National Information Platforms for Nutrition

NC	Nutrition Centre
NNC	National Nutrition Committee
NNC S	National Nutrition Committee Secretariat
NNP	National Nutrition Policy
NNSPA	National Nutrition Strategy and Plan of Action
NPAN	National Plan of Action on Nutrition
NSEDP	National Socio-Economic Development Plan
NUOL	National University of Laos
PAFO	Provincial Department of Agriculture and Forestry
PESS	Provincial Department of Education and Sports
PHO	Provincial Department of Health
PLSWO	Provincial Department of Labor and Social Welfare
PLWU	Provincial Lao Women's Union
PNC	Provincial Nutrition Committee
PNC S	Provincial Nutrition Committee Secretariat
PPI	Provincial Department of Planning and Investment
RMNCH	Reproductive, Maternal, New born and Child Health
SDGs	Sustainable Development Goals
SUN	Scaling Up Nutrition Movement
UNICEF	United Nations Children's Fund
UNFPA	United Nations Population Fund
VAD	Vitamin A Deficient
WASH	Water, Sanitation and Hygiene
WB	World Bank
WHO	World Health Organization

EXECUTIVE SUMMARY

Lao PDR has a multi-sectoral nutrition strategy which was developed in collaboration with all relevant ministries and concerned organisations to address the malnutrition situation in the country. Although the country has made progress towards reaching its nutrition targets, challenges remain in translating multi-sectoral strategy into action.

The Nutrition Policy Landscape Analysis aimed at assessing the nutrition policies in the various sectors who are members of the National Nutrition Committee (NNC) and to provide evidence-based recommendations to accelerate progress towards achieving the goal of optimal nutrition for the people of Lao PDR. The policy landscape analysis was carried out by the Policy Analysis Unit of the National Information Platforms for Nutrition (NIPN)¹ in five ministries and two mass organizations.

The first ever National Nutrition Policy (NNP) was developed in 2008. This laid the foundation for subsequent actions in nutrition in the country as well as shaped the policy environment for the integration and implementation of nutrition interventions. Subsequently, Lao PDR joined the Scaling Up Nutrition Movement (SUN) in 2011 and has remained active at the global stage. The NNC was established in 2013 as a multi-sectoral platform for coordinating nutrition actions across different sectors and line ministries. The committee is chaired by the Deputy Prime Minister.

The National Constitution cites good nutrition as a fundamental human right in articles 6, 13 and 25. This constitutional provision inspires national policies and strategy by ensuring that the right to food and nutrition is always protected in the country. The formulation of policy is a detailed and lengthy process, involving multiple consultations between sectors and with partners. National and international development partners provide technical and financial support as well as facilitate policy dialogue and implementation in the country. The operationalisation of approved sectoral policies is conducted through the development of sectoral strategic and annual action plans and budgets.

The National Nutrition Strategy to 2025 serves as the reference document for multi-sectoral nutrition programming and service delivery in the country. It is aligned with the National Vision to 2030 and aspirations of the 8th National Socio-Economic Development Plan (NSEDPlan). Sectoral policies and strategies are expected to align their contribution to nutrition outcomes contained in the National Nutrition Strategy to 2025 and Plan of Action 2016-2020 (NNSPA).

The key national and sectoral policies and strategies have prioritized nutrition. The extent and coverage however vary from one sector to the other. The Ministry of Health (MOH) present the largest percentage

¹ In Laos, NIPN has two analytical units: data and policy analysis units. The first one is led by the Centre for Policy Development Research (CDR), the MPI and the second one is led by the Centre for Socio-Economic Science and Policy Research (CSPR) and the National Institute of Economic Research (NIER).

of references to nutrition interventions in their sectoral policies and strategies. The national policies/ strategies (Ministry of Planning and Investment (MPI), Ministry of Education and Sports (MOES), Ministry of Agriculture and Forestry (MAF) and Ministry of Labour and Social Welfare (MOLSW) made less references to the 22 priority interventions compared to MOH or had specific strategies to implement them.

The existence of a national multisectoral nutrition policy and/or strategy is a key requirement for scaling up nutrition. Lao PDR had its first ever multi-sectoral National Nutrition Policy approved in December 2008. This laid the foundation for the development of the first National Nutrition Strategy and Plan of Action 2011-2015 and subsequently the second National Nutrition Strategy and Plan of Action 2016-2020. The two NNSPA provide the overarching framework for nutrition programming in Lao PDR.

Lao PDR has a strong NNSPA as well as a nutrition governance mechanism that places nutrition at the centre stage. There is high stakeholder interest and investment in the country that support the integration and implementation of nutrition interventions. However, for the country to achieve rapid results in nutrition, there is the need to;

- ✓ Expand efforts to increase public financing of nutrition interventions in the country by ensuring that annual costed plans of sectoral nutrition interventions are reflected in the annual budgets of the sectors.
- ✓ Increase efforts for human resource development to better implement and coordinate nutrition interventions at the pre-service and in-service levels.
- ✓ Strengthen the monitoring and coordination of nutrition actions by applying a strong capacity building on the multisectoral approach of nutrition in the five-line ministries as well as the sub-national level.
- ✓ Make nutrition interventions available to the wider population through increased geographic coverage of services and provision of requisite tools/materials to implement them.

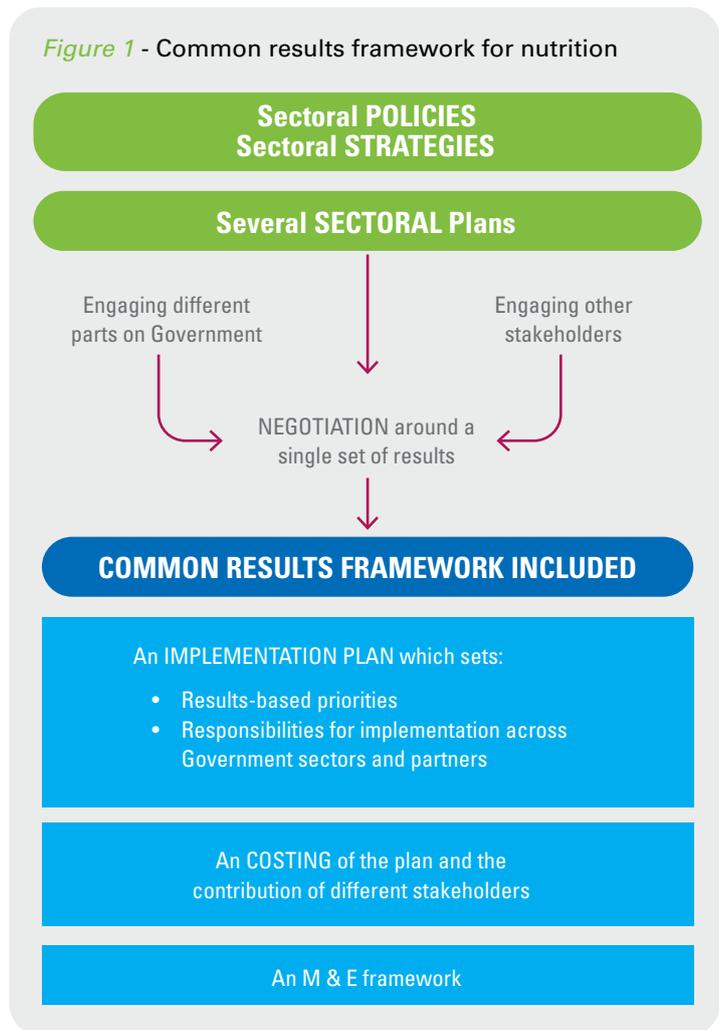


1. INTRODUCTION

Globally, there has been high political commitment to scale up nutrition in the past few years.² Many countries are putting in place the necessary legal, policy and financial frameworks to accelerate interventions that improve human nutrition. To do this effectively, each country needs evidence of what works best to improve human nutrition in their specific context. The UNICEF (1990) conceptual framework shows that the causes of malnutrition are multi-dimensional and identifies the need for actions in many sectors to address the determinants of malnutrition. As part of the Scaling Up Nutrition movement (SUN), national multi-sectoral platforms are being established in different countries to align and coordinate nutrition actions across sectors such as health, agriculture, food security, water, sanitation, social protection, education, industry among others. A multi-sectoral platform usually establishes a national common results framework for nutrition. This is based on the country's existing national and sectoral policy/strategies as well as monitoring framework. In some cases, they include costed action plans to guide the implementation process (Figure 1). These national policies/strategies provide the overarching framework for implementation of nutrition interventions and programmes that are aimed at improving the nutritional status of the population.

Undernutrition is the single largest contributor to the global burden of diseases, accounting for 10 percent of fatalities in the general population and 35 percent among children under 5 (CU5)³. In addition

Figure 1 - Common results framework for nutrition



² Development Initiatives, 2017. Global Nutrition Report 2017: Nourishing the SDGs. Bristol, UK: Development Initiatives.

³ Black RE, Victora CG, Walker SP et al. Maternal and child undernutrition and overweight in low-income and middle-income countries. Lancet. 2013; 382: 427-451

to its pronounced effects on morbidity and mortality, undernutrition affects the cognitive development of children. This affects educational outcomes of children, work capacity and earnings in future as well as gross domestic product (GDP) of the country⁴.

According to the Global Nutrition Report (2017), about 155 million CU5 are stunted globally. Maternal undernutrition, which has greater bearing on birth and child survival outcomes, remains poor, it is estimated that 40% of pregnant women are anaemic⁵.

The main contributing factors to undernutrition in South East Asia are poverty, traditional diets that lack sufficient nutrients, poor infant feeding practices, inadequate clean water and sanitation and limited agricultural productivity⁶.

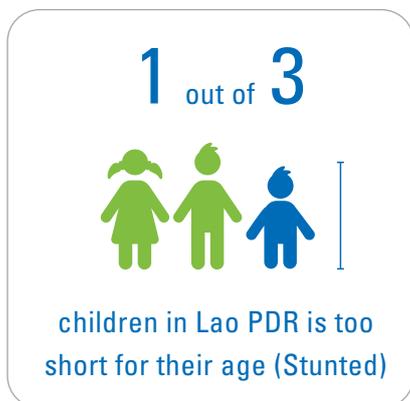
1.1 COUNTRY CONTEXT

In recent years, the Government of Lao PDR (GoL) has intensified efforts to address the nutrition situation which then led to gradual improvement of nutrition outcomes. In fact, findings from the Lao Social Indicator Survey (LSIS I and II), show that stunting among CU5 declined from 44.2%⁷ in 2011 to 33%⁸ in 2017 whilst underweight reduced from 27% to 22% during the same period. On average, stunting in Lao PDR has declined by approximately 1.5% per annum, and underweight by approximately

1% per annum, over the last six years. Despite the decline over the years, wide disparities exist among the provinces, socio-economic groups and gender. 11 out of 18 provinces recorded stunting prevalence above 30% which is considered as “serious” according WHO classifications (Graph 1).

Micronutrient deficiency among the population remains a challenge. 44.1% CU5 years are anaemic (LSIS II, 2017) and 30% of pre-school children are suffering from Vitamin A Deficiency (VAD)⁹. 39.8% of women in reproductive age are anaemic and about 25% of households do not consume adequately iodized salt (LSIS II, 2017). Thiamine deficiency is

reportedly high among pregnant and lactating women because of high consumption of rice and diets low in Vitamin B1. Thiamine deficiency in Laos has been associated with intra uterine growth retardation and infant mortality¹⁰.



⁴ Victora CG, Lessa Horta BL, de Mola CL, et al. Association between breastfeeding and intelligence, educational attainment, and income at 30 years of age: a prospective birth cohort study from Brazil. *Lancet Glob Health* 2015; 3: e199–205.

⁵ Regional Report on Nutrition Security in ASEAN, UNICEF, WHO, 2016

⁶ Pamela Victor; Child nutrition issues in Southeast Asia, February 2018

⁷ Finding from LSIS I

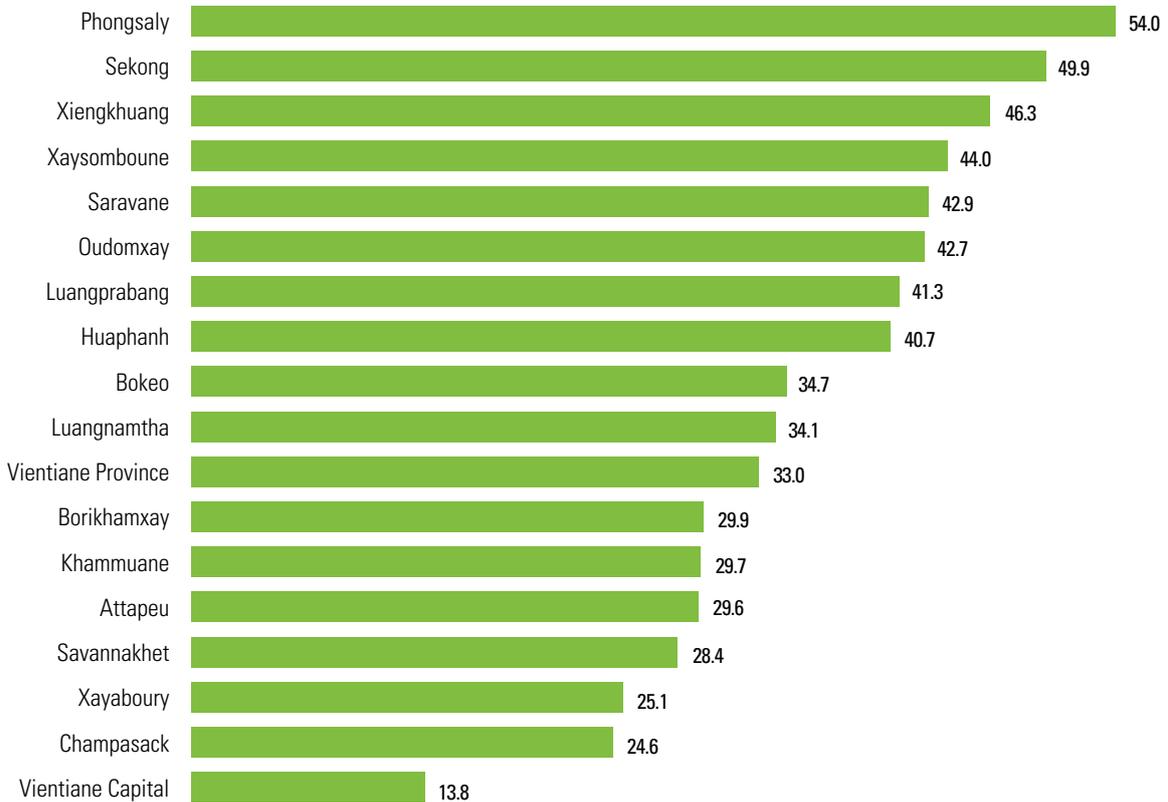
⁸ Finding from LSIS II

⁹ NNSPA, 2016-2020

¹⁰ Save the Children, 2014

A recent Multiple Overlapping Deprivation Analysis (MODA) showed that 51.5% of CU5 lack access to good nutrition. The intensity increases with geographic location, sex, household wealth quintile among other socio demographic factors (CDR and UNICEF, 2019).

Graph 1 – Prevalence of stunting among children under 5 years in Loa PDR, 2017



Source: LSIS, 2017

1.2 NATIONAL INFORMATION PLATFORM FOR NUTRITION (NIPN)

The National Information Platforms for Nutrition (NIPN) is an international initiative of the European Commission with support from the United Kingdom Department for International Development (DFID) and the Bill and Melinda Gates Foundation. This initiative is an integral part of the Government's nutrition programme, which is implemented jointly by the EU Delegation, UNICEF and Government of Lao PDR in the context of their "Partnership for Improved Nutrition in Lao PDR" in support of the National Nutrition Strategy and Plan of Action (NNSPA, 2016-2020).

Generally, NIPN aims to contribute to improved nutrition situation in Lao PDR by strengthening capacities to monitor progress towards malnutrition reduction and implementation of more cost- effective and evidence-based policies. NIPN has the following expected outcomes:

1. Improved capacity within national institutions to operate and maintain a functional NIPN by maximizing the analysis and interpretation of existing information and data on nutrition,
2. Strengthened capacity to track progress in meeting national objectives to prevent under- nutrition and monitor nutrition investments, and
3. Strengthened capacity of government staff to make better use of evidence and data to design and implement nutrition-related policies and programmes.¹¹

Comprehensive analysis from NIPN shall contribute to the annual progress report on the implementation of the NNSPA (2016-2020), the 8th NSEDP, Sustainable Development Goals (SDGs) and monitoring of indicators for SUN. Knowledge products shall feed into nutrition-related policy dialogue and progress monitoring such as the Annual National Nutrition Forums, the Annual Round Table Meeting and Sectoral Review Meetings.

The Policy Analysis Unit of NIPN is based at the National Institute for Economic Research (NIER) -a government “think tank” agency for policy and research works. It leads in generating evidence through analysis of policies to influence decisions of government and nutrition stakeholders in the country.

¹¹ Presentation power point: Launching of the National Information Platform for Nutrition (NIPN) in Lao PDR. October 5, 2018.

2. NUTRITION POLICY MAPPING IN LAO PDR

The existence of a national multi-sectoral nutrition policy and/or strategy is a key requirement for scaling up nutrition. This gives the political and technical guidance for essential nutrition actions to address the multiple causalities of malnutrition. It creates the enabling environment and provides the basis for all related actions.

Lao PDR joined the SUN Network in 2011 and established the National Nutrition Committee in 2013

Lao PDR had its first ever multi-sectoral National Nutrition Policy approved in December 2008. This laid the foundation for the development of the 1st NNSPA (2011-2015). Following the successful implementation of the 1st NNSPA and lessons learnt, the 2nd NNSPA (2016-2025) was developed. The 2nd NNSPA provides the overarching framework for nutrition programming in Lao PDR. This strategic document was developed through broad multi stakeholder consultation and it is backed by an annual costed plan. It incorporates the best evidence and practices for improving human nutrition in all sectors and to maximise nutrition outcomes. It harnesses the collective efforts of key relevant sectors such as health, agriculture, food security, social protection, education, water, sanitation and hygiene. It forms the basis for implementing food security and nutrition interventions and is aligned with the 8th NSEDP and global best practices.

Implementation of the NNSPA is overseen by the National Nutrition Committee (NNC), which comprises of seven line ministries and is chaired by the Deputy Prime Minister. The function of the NNC and its secretariat is to manage, coordinate and ensure collaboration among key sectors partnership for improved nutrition. This is expected to enhance the efficiency and effectiveness and increase the level of commitment and support of all stakeholders.

The policies and relevant strategies of the various sectors are expected to reflect and contribute to the NNSPA and the nutrition agenda in Lao PDR. The extent to which sectoral policies contribute to the NNSPA is not well documented. A nutrition policy mapping was therefore undertaken to assess how nutrition was reflected in sectoral policies and/or strategies; explore implementation of these policies

The NNSPA adapts the vision of the 8th National Socio-Economic Development Plan (NSEDP) "A prosperous country, with a healthy population, free from food insecurity, malnutrition and poverty"

at the national and sub-national levels; as well as identify gaps for policy dialogue and revision in Lao PDR. Findings are expected to inform the next National Plan of Action on Nutrition (NPAN) (2021-2025), the 9th NSEDP as well as sectoral policies and strategies. The analysis focused on four domains of interest: national policy frameworks, nutrition governance, nutrition policy implementation and gaps.

2.1 OVERALL OBJECTIVE OF NUTRITION POLICY LANDSCAPE ANALYSIS

To assess the extent that sectoral policies and strategies have integrated key nutrition interventions captured in the NNSPA, and identify gaps and opportunities to strengthen the nutrition policy framework in Lao PDR. Specifically, the nutrition policy mapping sought to:

1. Map out nutrition interventions in the sectoral policies and strategies,
2. Explore opportunities for making sectoral policies more nutrition sensitive,
3. Identify gaps in sectoral policies and strategies as well as opportunities for strengthening the policy framework.

2.2 DATA COLLECTION

The assessment was conducted from May to October 2019. Mixed methods of data collection were used. The assessment focused on ministries/sectors identified in the NNSPA (2016-2020). These include:



Health



Education



Agriculture



Water, Sanitation and Hygiene



Labour and Social Welfare

A. DESK REVIEW OF SECTORAL POLICIES AND STRATEGIES

Data was obtained through a desk review of several documents (policies, strategies, manuals, evaluations and midterm reviews) from five line ministries. These include the MPI, MOH, MAF, MOES, MOLSW, as well as the two mass organizations unions; LWU and LYU. In total, 34 documents were reviewed. Annex 2 presents a summary of all documents reviewed.

The team performed a lexicological analysis that allowed for a quantitative measurement of the references to nutrition in sectoral policy documents and strategies.

The lexicological analysis grouped words and themes that relate to nutrition directly or indirectly into six components. These include:

	Nutrition: words like – chronic and sub-nutrition, hunger, diet, vitamin, micronutrient, stunting, wasting, anaemia, weight under and over, health care, water, sanitation, mortality and type of intervention to fight malnutrition.
	Poverty: words like – poor, economic vulnerability, social protection.
	Agriculture: words like – food, lunch, food production, livestock, fishery, forestry, research.
	Infrastructure: words like – malnutrition intervention, industry, development, creating jobs, market.
	Human resources (HR): words like – education, labour, employment, LWU, LYU, HR capacity.
	Finance: words like – finance and budget.

Key processes of the lexicological analysis include:

1. Identification of documents by sectors,
2. In each sector, documents were divided into three categories: policies and laws as a first category, then strategy documents and finally technical documents (including midterm reviews, manuals, guidelines and studies),
3. Identification of the key words and themes for analysis (nutrition, poverty, human resource, finance, etc),
4. Identification of the themes in the documents (introduction, main documents, conclusion),
5. Quantitative method to represent the themes and concepts analysed for comparative study in the different documents within the sectors,
6. Comparative analysis.

B. KEY INFORMANT INTERVIEWS ON SECTORAL POLICIES AND STRATEGIES

To understand the policy making process and the use of evidence, key representatives of identified ministries and departments, staff in management positions as well as technical staff from MOH, MOES, MAF and MOLSW were interviewed. The selected ministries contributed to the development of the current NNSPA and have mandate for the implementation of some priority interventions. Also, representatives of two Unions (LWU and LYU) and from the Lao Tropical and Public Health Institute and the Institute of Social Science at the NUOL were also part of the consultation process.

The interviews focused on the following thematic areas: leadership, human resources, data management, budget and finance as well as the coordination and monitoring of nutrition in their sectors. It gave a fair appreciation of policy development processes and implementation of action plans as well as the use of data for planning and programming in nutrition. In total, 12 key informant interviews (representing 30 government staffs) were conducted in Vientiane Capital in August 2019.

C. FOCUS GROUP DISCUSSIONS AT THE SUB-NATIONAL LEVEL

Focus group discussions were held with representatives of key sectoral ministries and departments at the sub-national level. The main objective was to document the operationalization of sectoral policies and strategies at the sub-national, key challenges and gaps as well as opportunities for enhanced service delivery, coordination and accountability. The translation of policies and strategies to implementation was discussed. Data collected at this level allowed for the documentation of lessons learnt (strengths and weaknesses) and for existing opportunities for enhanced implementation of the NNSPA (2016-2020). The focus group discussions were held in:

- ✓ Bokeo Province (in the province) and in Tonpheung District.
- ✓ Savannakhet Province (in the province) and in Outhoumphone District.

3. NUTRITION POLICY LANDSCAPE ANALYSIS

3.1 NUTRITION AS A FUNDAMENTAL HUMAN RIGHT IN LAO PDR

According to the Food and Agriculture Organization (FAO), 23 countries recognize the right of food and nutrition explicitly in their country laws and legislations. There are 32 countries whose constitutions do not make explicit reference to 'food' or 'nutrition' but guarantee other human rights in which the right to food and nutrition is implicit. Thus, the absence of direct recognition of the right to food in a state constitution does not mean that the right to food and nutrition is totally unprotected in the country.

Lao PDR is a signatory to the Convention of the Rights of the Child (CRC) and other international instruments and frameworks. This has translated into the national constitution and various decrees issued thereafter. The National Constitution cites good nutrition as a fundamental human right¹². In article 6, it refers indirectly to nutrition that: "The state protects the freedom and democratic rights of the people which cannot be violated by anyone. All state organisations and government officials must disseminate and create awareness of all policies, regulations and laws among the people and, together with the people, organise their implementation in order to guarantee the legitimate and interests of the people"

In addition, article 13 states that: "The national economy of the Lao PDR relies on a stable multi-sectoral economy which is encouraged [by the government; such economy shall] expand manufacturing capacity, broaden production, businesses and services, transform the natural economy into a trading and manufacturing economy, and modernise; [while] combining with regional and global economies to stabilise and develop the national economy continuously and to improve the material and spiritual living conditions of the multi-ethnic people"

Article 25 also refers to nutrition indirectly when stating: "The state attends to improving and expanding public health services to take care of the people's health"

This constitutional provision inspires national policies and strategy by ensuring that the right to food and nutrition is always protected in the country.

¹² Decree on the Amended Constitution of the Lao People's Democratic Republic, 28 May 2003. Lao version was revised in 2015.

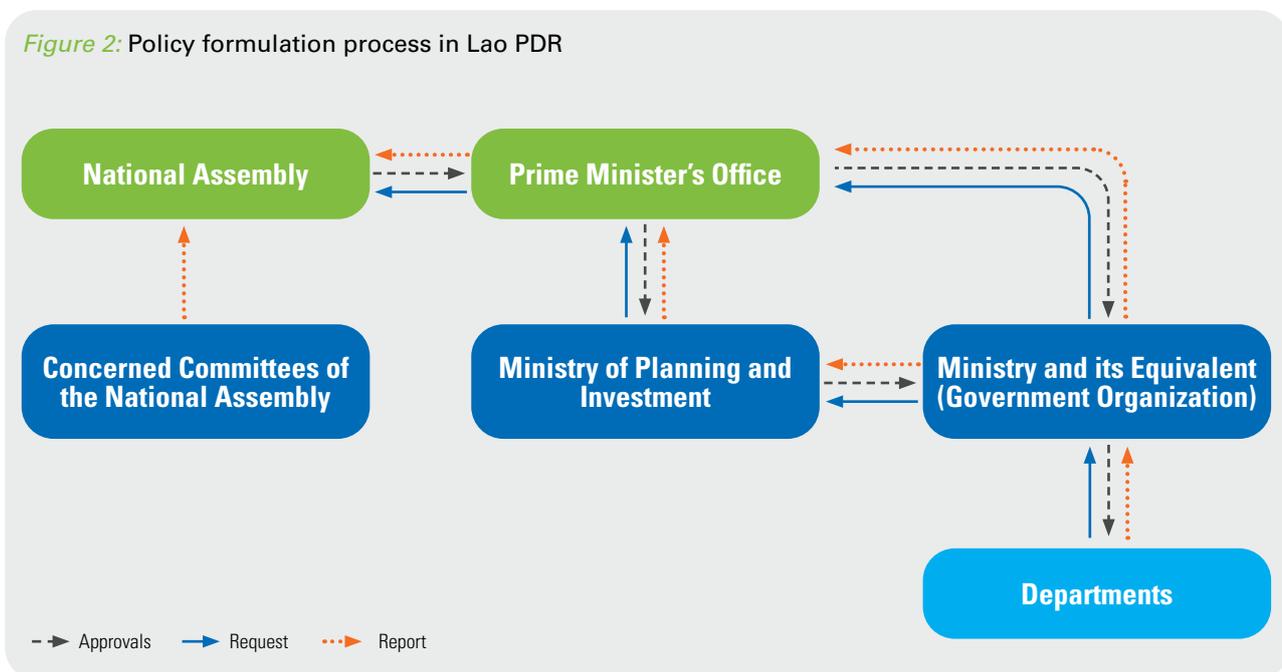
3.2 POLICY PLANNING AND IMPLEMENTATION PROCESS IN LAO PDR

The sectoral policy cycles in Lao PDR largely follow an iterative process from policy formulation through implementation, monitoring and policy review. At the national level, policy direction is decided by line ministries and departments in alignment with the NSEDP and global frameworks such as the SDGs, World Health Assembly Targets etc.

The formulation of policy is a detailed and lengthy process, involving multiple consultations between sectors and with partners. National and international development partners provide technical and financial support as well as facilitate policy dialogue and implementation in the country. Technical subject papers are produced jointly by the department responsible for policy and planning of the ministries together with the relevant technical departments. Based on the various intra- and inter-sectoral reviews, the line ministry formulates a final policy document. The policy package, according to the ministry mandate, is forwarded to the MPI and MOF to assess the degree of compliance with the existing national development and financial frameworks. Based on these assessments, the policy is submitted to the Prime Minister's Office Cabinet Secretariat for review. The approval of the Cabinet signifies that the government's position should be formally presented for consideration to the National Assembly.

The process of the request, consideration and approval mechanism is summarized in the diagram below:

Figure 2: Policy formulation process in Lao PDR



The operationalization of approved sectoral policies is conducted through the development of sectoral strategic and annual action plans and budgets. In some cases, dedicated programmes and projects are designed with logical frameworks that are ratified by central and provincial leadership.

Since 2013, each ministry that is part of the NNC has a nutrition focal point who oversees the implementation of priority nutrition interventions in the NNSPA (2016-2020).

Annex A presents key policies and strategies summaries from five key sectors: Health, Education, Agriculture, Social Welfare, and Water Sanitation and Hygiene (WASH).

3.3 EVOLUTION OF NUTRITION POLICIES IN LAO PDR

The 1st national nutrition policy (NNP) was approved in December 2008 with decree number 248/PM. This formed the basis for the development of subsequent nutrition related policies and strategies in the country. The NNP inspired the preparation of the national food safety policy in 2009 that aimed at promoting the consumption of safe, nutritious and healthy diets. The national food security strategy was developed in 2010 with the objective of strengthening systems for household food security as an entry point for improving the nutritional wellbeing of the population. The 1st NNSPA (2011-2015) was the first attempt at harnessing the contributions and expertise of non-health sectors in addressing nutrition deprivations in the country.

Figure 3: Evolution of nutrition policies in Lao PDR



A total of 34 documents were reviewed during the process. 13 documents were authored before 2013 whilst the remaining were authored after 2013 as shown in Table 1 below. It could be inferred that several policies and strategies were prepared after 2016. The increasing number of manuals, guidelines and research studies documents in nutrition after 2016 can be considered as a will to ‘operationalize’ sectoral polices and strategies with nutrition objectives.

Table 1 – Chronology of Documents in Lao PDR (laws, policies, strategies and reviews)

	Before 2013	2013	2014	2015	2016	2017	2018	2019	2020
National Policies/ Strategies (Planning)		6th and 7th National Socio-Economic Development Plan							
		National Growth and Poverty Eradication Strategy							
Health	National Food Strategy	Law on Food	Health System Review		National Strategy & Action Plan for Integrated Services on Reproductive, Maternal, New-born and Child Health 2016-2025				
		7th Five-Year Health Sector Development Plan			Directions and Functions of the 8th Five-Year Health Sector Development Plan (2016–2020)				
		Health Sector Reform Strategy and Framework 2013-2025							
	National Food Safety Policy							Monitoring Guidelines for the Social-Cultural Sector Committee	
Water, Hygiene and Sanitation	Law on Hygiene, Disease Health				National Code of Marketing Breast Milk substitutes				
	Strategy on Environmental Health and Water Supply								
	Law on Water supply								
Nutrition	National Nutrition Policy 2008				National Nutrition Strategy 2025 and Plan of Action 2016-2020				
		National Strategy & Plan of Action (2011-2015)							
Agriculture		Agriculture Development Strategy to 2025 and vision to 2030							
		Strategic Framework for Sustainable Development Strategy (2016-2030)							
Education		National Strategy & Plan of Action on Inclusive Education (2011-2015)							
	Inclusive Education Policy			School Lunch Policy					
	National School Health Policy								
Social Welfare	Law on Children Rights		Decree on Persons with Disabilities		Law on Traffic		Contingency Plan	National Social Protection Strategy (2019-2030)	
	UN Convention on the Rights of Persons with Disabilities						Ending Violence Against Children	Law on Persons with Disabilities	

3.4 NUTRITION POLICY MAPPING

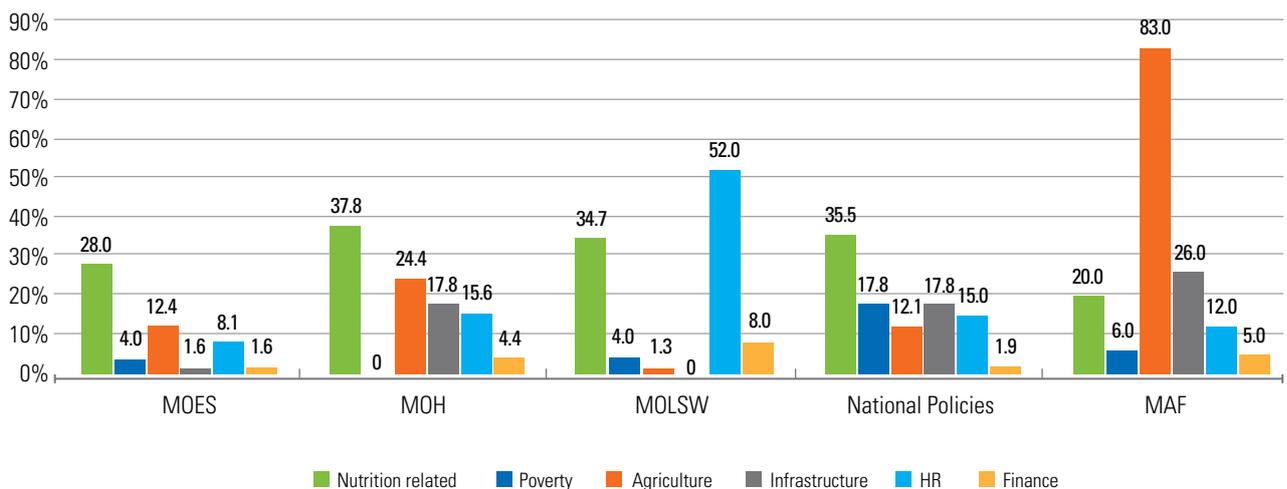
The NNSPA (2016-2020) serves as the reference document for multisectoral nutrition programming and service delivery in Lao PDR. The 8th NSEDP and NNSPA (2016-2020) share a common vision: “A prosperous country, with a healthy population, free from food insecurity, malnutrition and poverty”. The NNSPA (2016-2020) places emphasis on multi-sectoral collaboration among key sectors and synergy in programme implementation to address the multiple causes of malnutrition in the country. Sectoral policies and strategies are expected to align their contribution to nutrition outcomes contained in the NNSPA (2016-2020). To better understand the extent, the key sectors of health, education, agriculture and WASH prioritize nutrition, a lexicological analysis was conducted on 32 sectoral documents (see table 1).

LEXICOLOGICAL ANALYSIS

The lexicological analysis showed that the frequency and use of the terms related to nutrition varies from one sectoral document to another. The lexicological analysis focused on policy documents (including laws, strategic plans and frameworks) of each sector that contributes to the implementation of the NPAN (2016-2020).

The results of the analysis of the policy documents and laws were calculated as a percentage of the total number of pages in the report. Graphs 2, 3 and 4 show the lexicology analysis on policy documents, including laws. The bar graphs present the average distribution by the six sectors. The detailed calculation is presented in Graph 2.

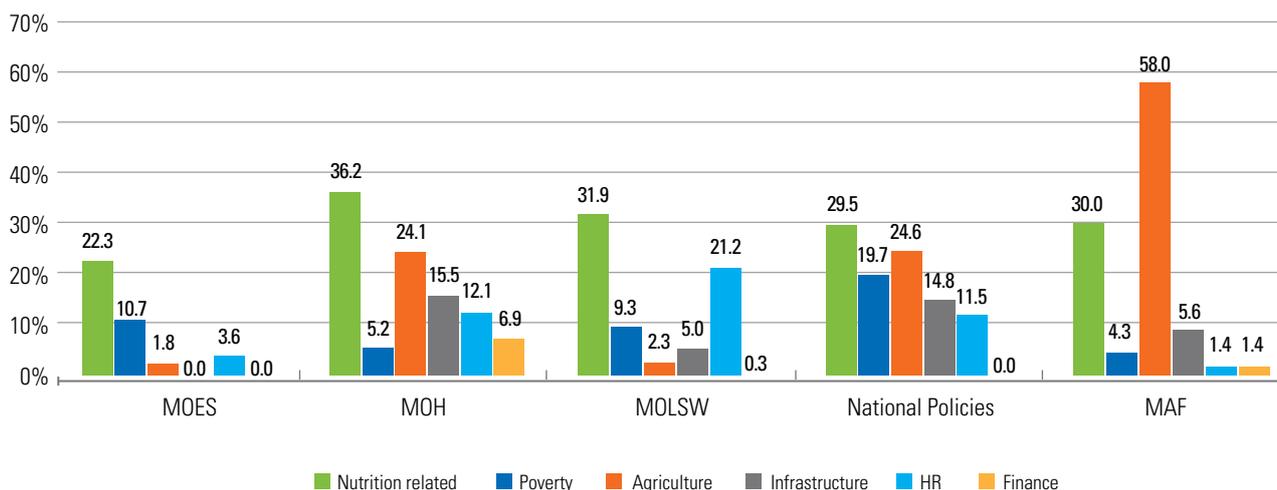
Graph 2 - Policy documents analysis



As could be seen from the graph above, there is predominance of concepts/themes related to the work of each sector in their policy documents. Example, agriculture is more referred in MAF, nutrition in MOH and Human resource in MOLSW. Finance is the least referred concept/theme in the analysis.

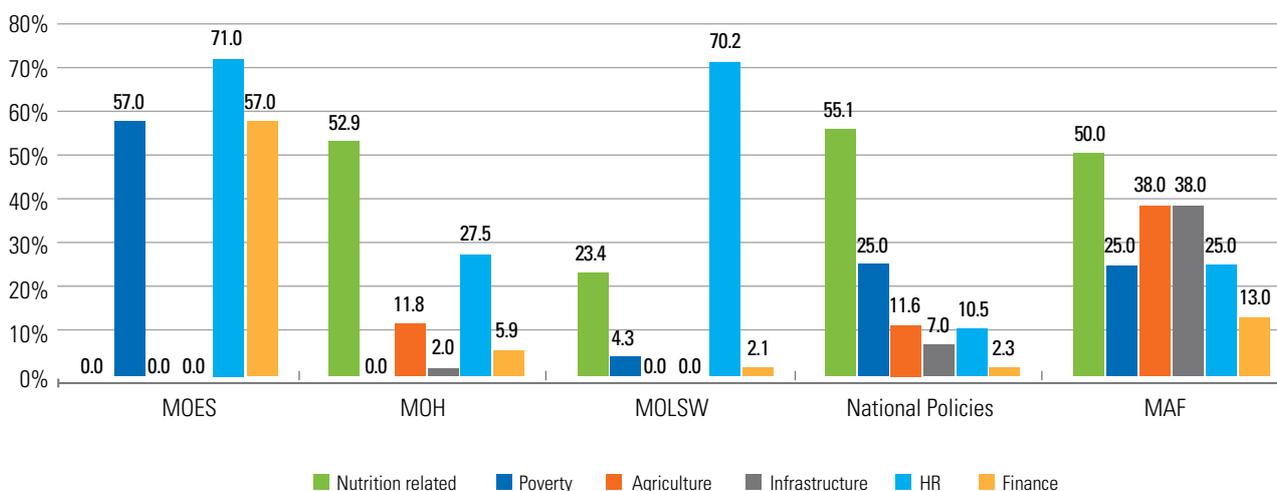
Similar analysis was performed on the national strategies for the selected sectors. The national strategies guide programmes implementation and service delivery across all levels. They are usually prepared in 5-year cycles in sync with the NSEDPs. Graph 3 presents a similar pattern as in the sectoral policy analysis above. There was concentration of concepts and themes based on the mandate of each ministry/sector.

Graph 3 - Strategic documents analysis



The lexicological analysis also took into consideration the midterm reviews of the national strategies of each of the sectors which were recently conducted (Graph 4). There was significant increase in references to nutrition related themes as well human resource in the midterm reviews of the sectors. These were mainly seen as areas that required improvement in various sectors/ministries.

Graph 4 - Midterm reviews analysis



From the lexicological analysis, the sectoral policies and strategies did not provide a consistent level of prioritisation for nutrition, although more recent policy documents in the health and social protection sectors prioritised nutrition to a much greater degree. MOES made few references to nutrition with focus on school lunch and school gardens. The focus on school lunch and school gardens was mainly a strategy to enhance school enrolment, attendance and retention.

MOLSW used nutrition as an entry point for some of its social protection interventions (food for work, food vouchers and food credits, etc.). MAF mentioned nutrition a few times in its strategic documents. These relate more to nutrition sensitive agriculture.

In summary, the lexicological analysis carried out on the sectoral policies and strategies showed that the frequency of use of nutrition themes depends on the mandate and orientation of sectors/ministries.

The lexicology analysis on education, agriculture, water, sanitation and hygiene hardly mention "nutrition" as a concept. This absence of the term "nutrition" does not mean that no action is being taken in these areas or that they do not contribute to the nutrition framework. On the contrary, many of the actions in these sectors are essential for the long-term prevention of malnutrition. National policy and strategic documents of (MPI) and MOH have the largest incidence of nutrition reference. In the midterm review documents, the nutrition concept is more referred than the other concepts. The lexicological analysis suggests that this "nutrition" is not explicit and that the concept of nutrition needs to be emphasized in all sectoral policies and strategies as a concept.



NUTRITION POLICY MAPPING BASED ON THE PRIORITY NUTRITION INTERVENTIONS

NPAN (2016-2020) is a 5-year plan that provides specific guidance for the implementation of NNS to 2025. It provides details of interventions to be implemented, principal stakeholders, implementation timeframe, budget required and monitoring framework. NPAN (2016-2020) advocates for a multi-sectoral approach to address nutrition issues in the country. It is consistent with global nutrition frameworks and targets such as the SDGs, World Health Assembly targets etc. NPAN has 29 priority interventions¹³ that are multi-sectoral in nature (See table 2). They are classified as priority 1 & 2 interventions (See table 3); 22 interventions are considered as priority 1 due to their significant contribution to nutrition outcomes in the country. Government and development partners are expected to prioritize the implementation of these interventions. The remaining 7 interventions are classified as priority 2 and mainly include interventions that address communicable diseases, child immunization and vector borne diseases.

The 10 health sector interventions are largely classified as priority 1 and mainly include nutrition specific interventions.

¹³ According NNSPA 2016 - 2025

Table 2: Summary of priority nutrition interventions

Priority	Sector	# of interventions
Priority 1 (22 Interventions)	Multi-Sectoral	4
	Health	10
	Agriculture	4
	Education	4
Priority 2 (7 interventions)	Cross sectoral (Health, WASH)	7

Table 3 presents a detailed list of interventions contained in NPAN (2016-2020).

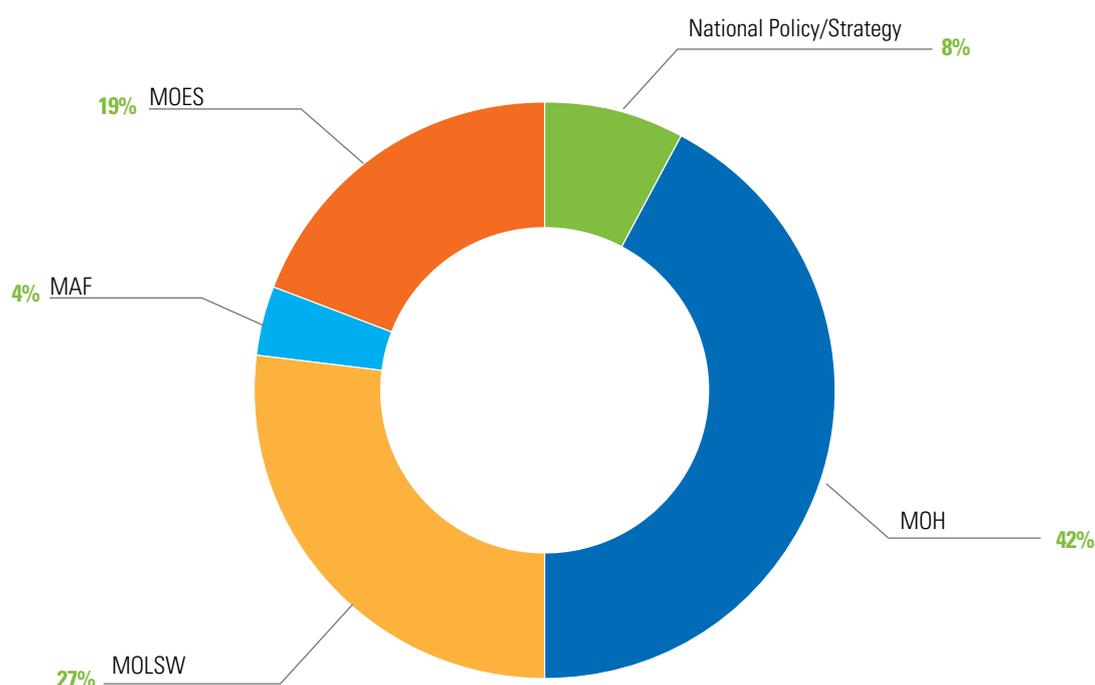
Table 3 - The priority nutrition intervention in NPAN (2016-2020)

Priority 1 interventions	
Multi-sectoral	
1	Provide system capacity building
2	Improve coordination and partnership among nutrition stakeholders
3	Improve information management (monitoring and evaluation, surveillance and research) and policy development
4	Increase communication, advocacy and investment in nutrition
Health Sector	
5	Provide micronutrient supplements – (such as iron folic acid, vitamin A, MNP, zinc, vitamin B1 etc.)
6	Deworming
7	Food fortification including salt iodisation
8	Promote Infant and Young Child Feeding (IYCF) and maternal nutrition
9	Provide food supplements for pregnancy and breastfeeding women
10	Provide food supplements for children aged 6-23 months
11	Improve food quality and safety
12	Manage acute malnutrition in health facilities and in communities
13	Provide nutrition education and communication for social behaviour change to promote good practices and healthy diet
14	Strengthen water sources and supply systems and improve sanitation in households, communities, health facilities and schools
Agriculture Sector	
15	Increase the production of nutritionally rich plant-based foods for household consumption
16	Increase the production animal-based protein (for example meat, poultry, fish and other aquatic life) for household consumption
17	Support the establishment of post-harvest facilities and apply technology to food processing, preservation and storage to ensure year-round availability of safe and nutritious food
18	Promoted agriculture-based and NTFP-based income generating activities to increase household incomes, with emphasis on women

Education Sector	
19	Provide nutritious food in schools
20	Promote and support vegetable gardens in schools
21	Integrate nutrition into curricula
22	Provide iron folic acid supplements and deworming in schools
Priority 2 interventions	
23	Promote immunizations (based on the Expanded Program on Immunization)
24	Prevent and control diarrhoea
25	Prevent malaria and dengue fever (based on the Five-Year Strategic Plan to Combat Malaria and Dengue Fever)
26	Prevent and control malnutrition associated with HIV/AIDS and tuberculosis (based on the Five-Year Plan to Combat AIDS)
27	Family Planning (FP) (based on the Five-Year Mother and Child Plan)
28	Improve access to health and nutrition services
29	Promote health impact assessments (HIAs) and adapt to climate change

A total of 26 sectoral policies and strategies were reviewed during the nutrition mapping exercises of the 22 priority interventions contained in the NPAN (2016-2020). The primary objective was to document the extent that these interventions are prioritized or captured in the plans and strategies of the key sectors; health, education, agriculture, WASH and Social sub sectors. The distribution of documents reviewed by sector is presented in figure 4 below.

Figure 4: Distribution of sectoral policies and strategies



Out of the 26 documents analysed, 88% made direct reference to the 22 priority interventions by either mentioning them or having clear strategies to address them. The remaining 12% made indirect reference to the 22 priority nutrition interventions. They had themes related to nutrition governance, human rights and child protection. These included the Law on Trafficking, the Convention on the Rights of Persons with Disabilities.

A summary of the mapping of the presence of the 22 interventions in each sector is presented in table 4. Key highlights include:



National policies and strategies: In the two national strategies analysed, the 8th NSEDP had 17 out of 22 priority interventions. Malnutrition was also introduced in the documents as “reasons of poverty” in the country.



Health sector: A total of 11 sectoral strategies and policies were reviewed. Since the NNSPA (2016-2020) was the focus of the mapping exercise, it was not taken into consideration of the health sector analysis. Out of the 10 analysed documents the Health Sector Development Plan and the National Food Safety law and RMNCH strategies made the most reference to the 22 priority nutrition interventions or had clear strategies to support them.



Social Welfare: A total of eight strategic documents were reviewed for this sector. The “Law on Trafficking” document had no reference to the 22 interventions. The rest made few references to the 22 priority nutrition interventions.



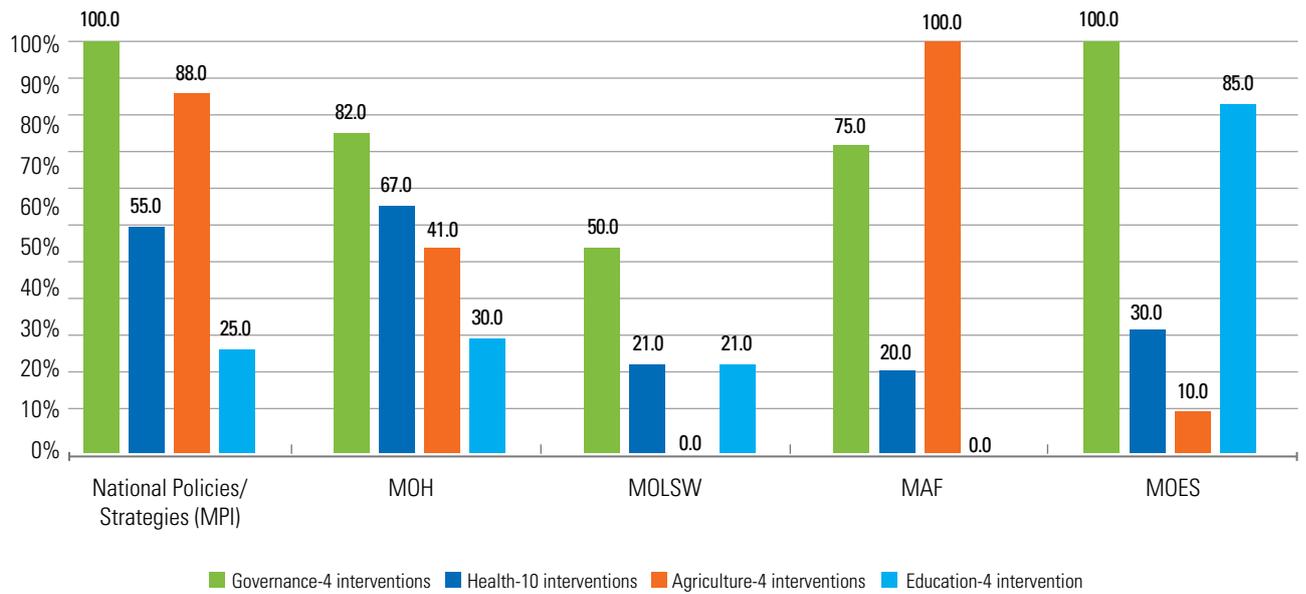
Agriculture and Forestry sector: Two strategic documents from the agriculture sub-sector were cross-analysed. The document “Agriculture Development Strategy to 2025 and Vision to 2030” references the nutrition interventions in the introduction chapter and in the chapter on development strategies facing food availability. In the two documents, nutrition is referred to as public health issue. Food availability and consumption are seen as food security issues due to the climate and the “regions agro specificities”.



Education sector: The five education-related strategic documents mention the interventions specific to its sector and multi-sectoral interventions. Capacity building for implementation of nutrition sensitive interventions are mentioned in all the documents.

Graph 5 shows the 22 nutrition interventions cross-referenced with the total number of strategic documents in each ministry. It shows how clearly the four categories of the 22 priority interventions (multi-sectoral, health agricultural and education) are captured in the sectoral documents that were reviewed. It is clear from the graph that the key national documents authored by the MOH responsible made the highest references to the 22 priority interventions.

Graph 5 – Mapping of the 22 priority nutrition interventions by sector



From Graph 5 above, there is systematic attempt by the various sectors to incorporate the 22 priority interventions in their sectoral plans and strategies. The extent of representation however varies from one sector to the other; the category of sectoral interventions dominates in the policies and strategies of the key sectors that were assessed.

Table 4 presents the summary of the mapping of 22 priority interventions of the NPAN (2016-2020).



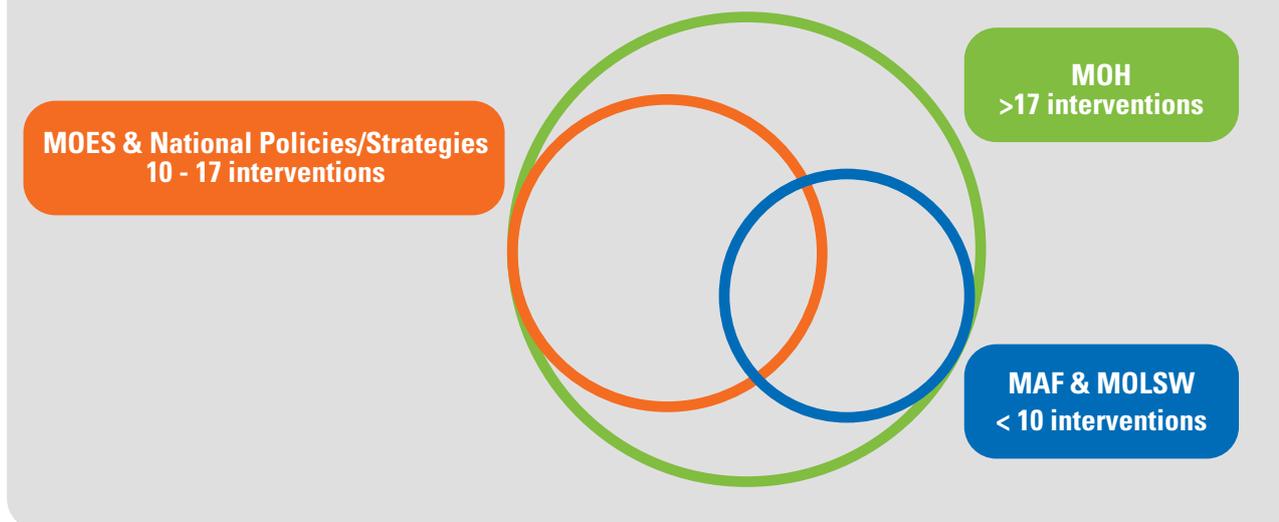
Table 4 – Mapping of 22 priority interventions in sectoral policies and strategies

Doc No.	Policies and strategic documents	2016-2020 National Plan of Action on Nutrition Interventions																						Total
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	
National Policies /and Strategies (MPI)																								
15	National Growth and Poverty Eradication Strategy (2013-2020)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	16
24	8th National Socio-Economic Development Plan (2016-2020)	X	X	X						X	X	X	X	X	X	X	X	X	X					12
MOH																								
1	National Strategy for Environmental Health and Water Supply (2004)													X										1
4	National Nutrition Policy (2008)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	16
5	Law on Water supply (2009)													X										1
6	National Food Safety Policy (2009)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	8
10	Law on Hygiene, Disease Prevention & Health Promotion (2011)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	15
11	7th 5-Year Health Sector Development Plan (2011-2015)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	20
14	Law on Food (revised) (2013)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	12
16	Health Sector Reform Strategy and Framework (2013-2025) (2016)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	16
20	Directions and Functions of The 8th Five-Year Health Sector Development Plan (2016-2020)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	15
26	National Strategy & Action Plan for Integrated Services on RMNCH 2016-2025	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	15
27	National Nutrition Strategy to 2025 and Plan of Action (2016-2020)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	22

MOLSW														
2	Law on protection of children rights and benefits (2006)	X										X	X	5
3	UN Convention on the Rights of Persons with Disabilities (2007)											X		3
19	Decree on Persons with Disabilities (2014)	X	X	X							X			7
23	Law on Trafficking (2016)													
30	Inter-Agency Contingency Plan (2018)	X	X	X	X					X				9
33	Law on Persons with Disabilities (2019)	X		X	X							X	X	5
34	National Social Protection Strategy (2019-2030)	X	X	X	X							X		6
MAF														
22	Agriculture Development Strategy to 2025 and vision to 2030	X	X	X							X	X	X	9
MOES														
7	National Policy on Inclusive of Education (2010)	X	X	X	X							X	X	7
8	National School Health Policy (2010)	X	X	X	X					X		X	X	13
13	National Strategy & Plan of Action on Inclusive Education (2011-2015)	X	X	X	X					X		X	X	14
18	School Lunch Policy (2014)	X	X	X	X							X	X	10
25	Education & Sports Sector Development Plan (ESDP) (2016-2020)	X	X	X	X					X	X	X	X	10

From figure 5 below, it could be inferred that the highest number of intervention mapping were from the documents authored by the MOH and national policies/strategies (MPI). More than 17 of the 22 priority interventions were captured in their policies and strategies. This is followed by MOES and the national policies/strategies (MPI) captured ranged between 10 and 17 of the 22 priority interventions. MAF and MOLSW had less than 10 of the 22 priority nutrition interventions captured in their sectoral policies and strategies.

Figure 5 – Nutrition interventions by the ministries



All the key sectors have sectoral strategic plans that drive implementation of policies and programmes at the national and sub-national levels. Most are in sync with the NSDEP in terms of broader objectives and time frame of implementation. The alignment of these sectoral strategies is essential for nutrition programming and service delivery in Lao PDR. The following national and sectoral strategies were reviewed:

- ✓ The 8th National Socio-Economic Development Plans (NSDEP), 2016-2020
- ✓ The Directions and Functions of the 8th Five-Year Health Sector Development Plan (8th HSDP) (2016–2020)
- ✓ The Agriculture Development Strategy (ADS), 2016-2020
- ✓ The Education & Sports Sector Development Plan (ESDP), 2016-2020 National Social Protection Strategy (NSPS), 2019-2030

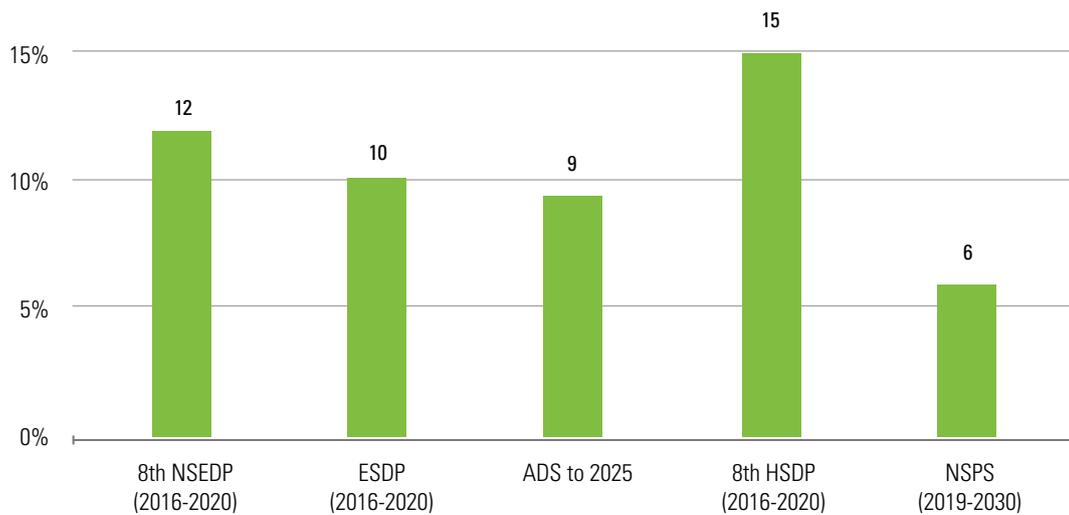
The 8th NSDEP (2016-2020) covers all the 12 priority nutrition interventions as part of a national strategy to improve the nutrition situation of the population, ensure household food and nutrition security. This is supposed to translate into the sectoral strategies and plans during the period of implementation.

The 8th HSDP (2016-2020) has 15 of the 22 priority nutrition indicators incorporated in it. MOH is the main sector that provides both policy and technical guidance for the development and implementation of nutrition interventions in the country. They are responsible for direct implementation of 10 of the 22 priority 1 interventions of the NPAN (2016-2020).

The ADS (2016-2020) covers 9 of the 22 priority 1 interventions. MAF is responsible for the implementation of 4 priority 1 interventions of the NPAN (2016-2020). Whilst the NSPS (2016-2020) had the least number of 6-10 interventions. MOLSW is also responsible for the implementation of social protection and related interventions in the country.

The ESDP (2016-2020) covers 10 interventions incorporated in the education sector strategy. MOES is responsible for the implementation of 4 of the priority 1 interventions of the NPAN (2016-2020).

Graph 6: Mapping of 22 priority interventions in national and sectoral strategies



In summary, key national and sectoral policies and strategies have prioritized nutrition. The extent and coverage however vary from one sector to the other. The MOH present the largest percentage of references to nutrition interventions in their sectoral policies and strategies. The National strategy (MPI), MOES, MAF and MOLSW made less references to the 22 priority interventions or had specific strategies to implement them.



4. NUTRITION POLICY IMPLEMENTATION

Lao PDR has a strong nutrition policy framework and a multisectoral nutrition coordination mechanism in place. However, this is not enough to achieve the requisite results in nutrition unless the policies and strategies are translated into actual implementation and backed by the required resources –financial, human resources, supplies etc. A strong nutrition governance mechanism with strong vertical and horizontal linkages is essential for the successful implementation of policies and strategies. To assess the operationalization of nutrition policies in the country, key informant and focus group interviews were conducted at both national and sub-national levels. The discussions were concentrated on issues closely related to the administration and implementation of nutrition policies.

4.1 ROLES IN NUTRITION POLICY IMPLEMENTATION

In Lao PDR, policy planning and budgeting were decentralised in 2013 and 2014 after the Sam Sang Policy¹⁴ where each district is responsible for the formulation and approval of its two-year medium- term development plan, according to the allocated budget¹⁵. Each district presents their implementation plan to the province for approval. The province approves the district plans, which are collated and result in the provincial bi-annual plan. The provincial implementation plan and budget funds are then sent directly to MPI and, after approval, sent to MOF and the National Assembly. After the provincial MOF approval, a copy is sent to the central level for the monitoring budget.

- ✓ National level: Sectoral policies and strategies are mostly led and prepared at the national level through broad stakeholder consultations. In some cases, sub- national staff are involved in the process. Annual budgeting and allocation of funds follows the government laid out processes where sectoral budgets are aggregated from the sub-national level into the budget of the line ministries.
- ✓ Sub-national level: Implementation of sectoral policies and strategies occurs at the provincial, district and community levels.

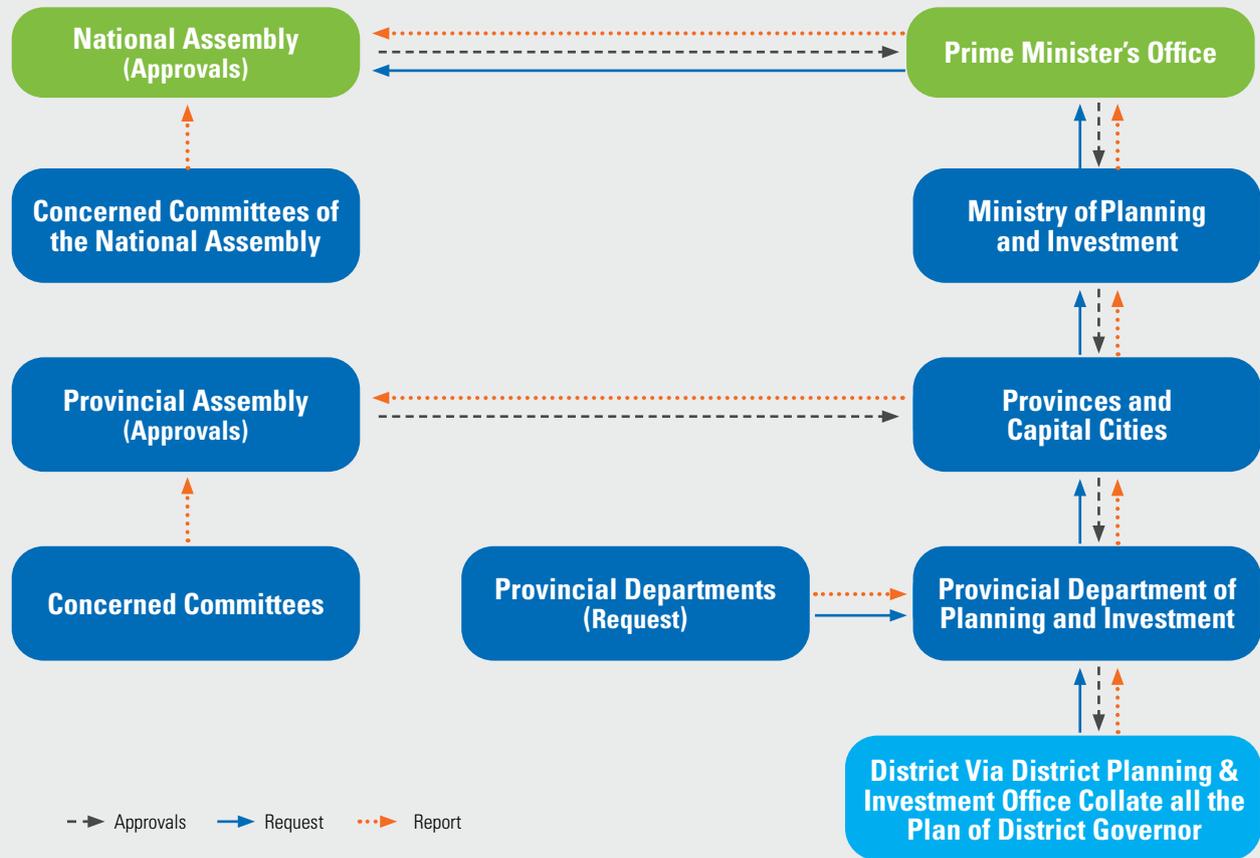
The disbursement of approved budgets also follows a reverse flow from the central to sub-national level of the policy formulation process.

¹⁴ Resolution of Politburo on Formulation of Provinces as Strategic Units, Districts as Comprehensively Strong Units and Villages as Development Units, 2012

¹⁵ National Governance and Public Administration Reform (NGPAR) programme – Strengthening Capacity and Service Delivery of Local Administrations (SCSD) 2012-2016; State Budget Law (revised in 2015)

The process of the request, approval and reporting at district, provincial, and national is summarized in figure 6 below:

Figure 6: Policy implementation process in Lao PDR



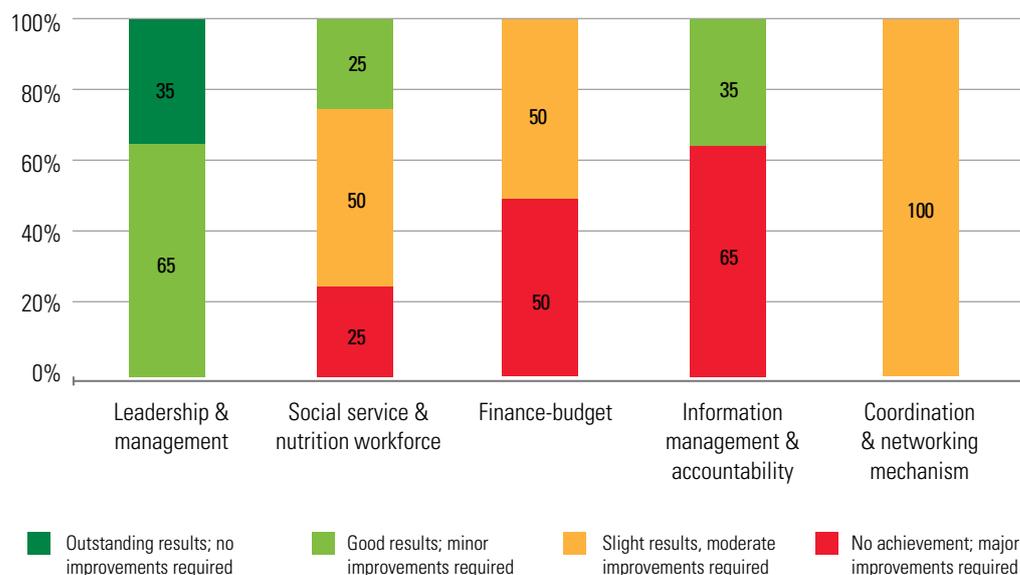
4.2 ASSESSMENT OF NUTRITION POLICY IMPLEMENTATION

An assessment of nutrition policy implementation was conducted at the sub-national level to document the extent to which national and sectoral policies are operationalized. The assessment is based on the system building blocks required for policy implementation¹⁶. It highlights the current nutrition policy implementation at the sub-national level, existing challenges and opportunities for efficiency and effectiveness. Five elements that are critical to general policy implementation, were assessed.

Graph 7 on the following page shows the assessment of the five critical elements.

¹⁶ MEASURE Evaluation is implemented by the Carolina Population Center, University of North Carolina at Chapel Hill in partnership with ICF International; John Snow, Inc.; Management Sciences for Health; Palladium; and Tulane University. Views expressed are not necessarily those of USAID or the United States government. TL-17-02

Graph 7: The assessment results of the key interview on five elements



SOCIAL AND NUTRITION WORKFORCE:

- ✓ There is no regulatory framework for training of this cadre of health staff in the country.
- ✓ Existing staff perform the activities based on their work experience.
- ✓ The Nutrition Centre, the MOH oversees nutrition service delivery in the country. Capacity of management of the Nutrition Centre to deliver this mandate is strong. A number of technical staffs work at the Nutrition Centre with various levels of capacity. Most of them are learning on the job as they are not trained nutritionists.
- ✓ At the sub-national level, there are no dedicated staff for nutrition service delivery in the respective departments. In some cases, focal persons add nutrition activities to their existing roles and schedules.
- ✓ Awareness of national nutrition strategies and technical knowledge declines as one goes from the central to sub-national level.
- ✓ Stakeholder assessment shows that about 75% of respondents believe that moderate to major improvements are required to improve the human resource base for nutrition at all levels in the country as shown in graph 7 above.



INFORMATION MANAGEMENT AND ACCOUNTABILITY:

- ✓ The analysis focused on the availability and use of nutrition data in the routine information systems of the respective ministries and departments.
- ✓ It was recognized that the key sectors (health, education and agriculture) have their institutional management information systems for tracking progress in their sectors.
- ✓ Stakeholders were of the opinion that major improvements are required in improving nutrition monitoring in some sectors such as education and agriculture where reporting is limited to quarterly progress reports that are paper based whilst minor improvements are required in the health sector.



COORDINATION AND NETWORKING MECHANISMS:

- ✓ NNC is responsible for multi-sectoral coordination at the national level. It is chaired by the Deputy Prime Minister. The NNC Secretariat that is chaired by the Minister of Health supports in convening meetings, preparing progress reports and routine operations of the NNC.
- ✓ A similar model has been replicated in all 18 provinces of the country known as the Provincial Nutrition Committees and are chaired by the Vice Provincial Governors. The committees are expected to meet on quarterly basis to discuss progress as well as how to scale up nutrition in those provinces.
- ✓ Development partners have been active in enhancing nutrition governance through coordination mechanisms at both national and sub-national levels.
- ✓ According to stakeholders, the coordination on nutrition activities between ministries was considered very good at central level, where there is a concentration of high-level staff.
- ✓ Whilst acknowledging these coordination mechanisms, stakeholders were of the opinion that moderate improvements are required.



FINANCE:

- ✓ All key interviewees confirmed that at central level there was no control of budgeting activities to support nutrition at the implementation level. The nutrition components are considered part of the activities described in each plan, which are revised periodically.
- ✓ There is heavy reliance on development partners for the implementation of nutrition activities at both national and sub-national levels.
- ✓ Stakeholders are of the opinion that moderate to major improvements are required on public financing for nutrition in the country.



LEADERSHIP AND GOVERNANCE:

- ✓ All systems in leadership and governance were almost without problems or requiring minor improvements.
- ✓ Stakeholders however expressed the need for minor improvements through institutional capacity building for the prioritization of nutrition in the various sectors and at all levels.

4.3 CHALLENGES TO NUTRITION POLICY IMPLEMENTATION

This section gives a summary of key bottlenecks that hinder the smooth implementation of nutrition policies in Lao PDR. The analysis is based on key informant interviews and focus group discussions conducted at both national and sub-national levels. Key challenges are summarized below:



1. **Nutrition policy implementation:**

The landscape analysis shows that the 22 priority interventions are reflected in the sectoral strategic plans. However, as one moves from national to sub-national level, the awareness of the presence of these interventions and their subsequent implementation decreases. Some staff at sub-national were not abreast with the sectoral national strategies. This has adverse effects on the ability of those provinces and districts to plan, allocate resources, implement and monitor those interventions.

2. **Limited human resource capacity for nutrition:**

Analysis of human resources capacity shows that only 20% of relevant staff had access to specific training in nutrition and planning. Efforts to develop capacity focused on each individual sector and were not framed as inter-sectoral nutrition capacity building. The study found that nutrition multi-sectoral knowledge is generally acquired in practice as part of the normal implementation of programmes. Therefore, the level of knowledge of basic health and nutrition was consistently high among MOH staff, but lower among those responsible for implementing nutrition interventions in other sectors.

There is no cadre of specialized staff in the areas of nutrition in the social workforce. There are no positions for nutritionists or social workers in the government structure. There are no technical courses for training of nutritionists, either at technical or university level. Nutrition is only taught at medical school for one semester. Changing this would require the development of specific training programmes.

Also, the number of public servants is very low, particularly at sub-national level, and therefore temporary personnel are hired to support service delivery. Consequently, when there are budgetary limitations/cuts, the jobs of temporary personnel are often terminated. This makes any capacity building or mentoring programme unsustainable. The percentage of temporary contracts in the field counts for more than 50% of human capacity, resulting in a lack of continuity in the provision of services.

3. **Low public finance for nutrition:**

Budget allocation and expenditure have been uneven across sectors, with most investments going to basic health and nutrition-specific interventions within the MOH. The remaining line ministries do not receive specific funds for nutrition interventions. Although the purpose of the team was not to study and analyse budget implementation, inadequate budget was mentioned several times during the interviews, mainly at provincial level. The lack of budget allocation makes the implementation of needed activities and nutrition interventions difficult.

4. **Weak nutrition governance:**

With reference to the desk review, nutrition interventions are reflected in almost 60% of the line ministries' strategic documents. However, the planning process continues to be in "silo", where each sector is focused on activities related to its own mandate. Nutrition is "seen and perceived" as a health problem that needs to be solved by the MOH and not a multi sectoral issue.

At the sub-national level, working in silos is apparent where reluctance is found in sharing information with different departments of the local governance structure. Coordination at sub-national level is fragile despite its formal status. It is generally limited to meetings and collation of reports.

5. **Limited use of data for evidence-based nutrition programming:**

Data is mainly collected for regular reporting of the interventions and indicators as part of routine activities. Nutrition reports often reflect a collage of data on service delivery by the sectors but do not reflect a truly multi-sectoral analysis. On the part of planning and implementation of nutrition interventions, there was limited evidence of how data influences targeting and decision making. While data is being regularly collected from sub-national levels and reported at the higher level, staff and managers in charge of implementing nutrition interventions at sub-national levels are not using the data for monitoring and improving programmes.



5. CONCLUSIONS AND NUTRITION POLICY RECOMMENDATIONS

5.1 MAIN FINDINGS AND CONCLUSIONS

This nutrition policy landscape analysis is the first to be conducted in Lao PDR. The findings, conclusions and recommendations are expected to inform ongoing policy dialogue and discussions on the next NPAN (2021-2025) as well as other sectoral strategic plans. The following summarizes key observations and conclusions:



1. **Enabling policy environment:**

The Government of Lao PDR has prioritized nutrition as one of its core intervention areas in the social sub-sector. This is reflected in its policies and sectoral strategies and plans of action. For more than 20 years, the State has designed and aligned the country's strategic documents with international recommendations. These policies exist at the ministry level as well written and comprehensive laws. The NNP exists as well as a very comprehensive NNSPA for the next 5 years (2021-2025).

Also, there exist strong partnership and commitment from development partners to support the implementation of the NNSPA. They provide both technical and financial resources for the smooth implementation of planned interventions and activities.

2. **Effective nutrition coordination mechanisms:**

Lao PDR joined SUN in 2011 and has been active at the international stage. At the highest level of the governance structure is the NNC, which is chaired the Deputy Prime Minister. It's a multi-sectoral platform that brings together key ministries that have direct or indirect roles to play in addressing the nutrition deprivations in the country. The fact that NNC exists at the Deputy Prime Minister's Office indicates the Government's commitment to nutrition. At the sub-national, Provincial Nutrition Committees have been formed in all provinces as well as some selected districts.

The formal enactment of coordination bodies represents an important instrument to promote the implementation of strategies, albeit there is the need for strengthened actions to ensure it acts, in practice, is truly multi-sectoral. The NNC meets at least twice per year to monitor the nutrition situation and discuss relevant nutrition issues.

3. **Nutrition financing:**

There is high reliance on development partners for the implementation of the NNSPA. Whilst government's contribution has largely gone into payment of staff salaries and other recurring costs, development partners such as the United Nations, USAID, the World Bank, European Union among others have supported in nutrition service delivery through the provision of technical, financial and non-cash support to both central and sub-national levels.

Whilst the above is generally the case, the geographic distribution of development partners is inadvertently skewed towards some provinces and districts. This leaves huge resource gaps for implementation of highly desired nutrition services in some areas.

4. **Nutrition policy development process:**

The country has a well-designed and an all-inclusive process for the development of nutrition policies and strategies. This gives a good opportunity for the aspirations of all stakeholders at all levels to be captured through the process.

5. **Nutrition policy implementation:**

The key sectors of the NNC (Health, education, agriculture and WASH) have incorporated aspects of the NNSPA (2016-2020) in their sectoral national strategies to guide the implementation of the priority interventions. Most of the national strategies are aligned to the 8th NSEDP that is due to end in 2020.

The human resource base for nutrition programming is challenged due to several factors. Primarily, the country's educational system does not train nutrition cadres; staff are therefore assigned and learn on the job from senior colleagues who might have been trained outside the country. Also, there are no dedicated staff to support the implementation of nutrition interventions in the respective sectors. Staff are usually assigned the additional responsibility of nutrition.

5.2 NUTRITION POLICY RECOMMENDATIONS

HUMAN RESOURCES ARE CURRENTLY INSUFFICIENT TO IMPLEMENT THE NATIONAL NUTRITION STRATEGY

Limitations in the management of human resources in public nutrition impede the effective implementation of nutrition plans and policies. Temporary personnel are hired because the number of public servants, mainly at sub-national level, is too low. This makes any capacity-building or mentoring programme for these resources unsustainable, as temporary staff are at risk of being terminated whenever the country needs to cut the budget. The number of personnel in charge of nutrition across sectors at all levels of the system, and particularly at the sub-national level, needs to increase.



RECOMMENDATION 1

- ✓ Develop and/or update in-service training packages on nutrition as part of health workforce training.
- ✓ Consider the creation of dedicated specialist training of nutritionists at the health training institutions or university.
- ✓ Build institutional capacity on nutrition programming and service delivery through in-service training for staff of key sectors at national and sub national levels.
- ✓ Establish designated positions of nutritionists within the health sector to manage nutrition programmes and interventions.

MULTI-SECTORAL COORDINATION REQUIRES IMPROVEMENT ESPECIALLY AT SUB-NATIONAL LEVEL

Each of the designated sectors in the NNSPA have critical roles to play in addressing nutrition deprivations in Lao PDR. Harnessing the unique strengths of these sectors based on their areas of comparative advantages will inure to the benefit of the nutrition agenda. Strengthening inter sectoral collaboration for synergy in programmes implementation will help address the multiple causes of malnutrition.

Strengthening internal coordination within sectors/line ministries has the potential to reinforce the NNC Secretariat's role; promote linkage between national and provincial levels and the adaptation of policies to the local context.



RECOMMENDATION 2

- ✓ Strengthen capacity for joint planning, budgeting and coordination at all levels for the implementation of the National Plan of Action on Nutrition. This will ensure ownership and participation of the various sectors.
- ✓ Advocate for an increased attention to the implementation of nutrition interventions in the respective sectors.
- ✓ Develop guidelines on multi-sectoral nutrition coordination to guide the activities of the provincial/district nutrition committees.
- ✓ The National Nutrition Committee should invest in building capacity of staff at sub-national level on multi-sectoral coordination as well as functions of the provincial and district nutrition coordination committees.

BUDGET ALLOCATION AND EXPENDITURE HAVE BEEN UNEVEN ACROSS SECTORS, WITH MOST INVESTMENTS GOING TO BASIC HEALTH AND NUTRITION-SPECIFIC ASSISTANCE INTERVENTIONS WITHIN THE MOH

Nutrition is perceived as a health sector priority and not as a multi-sectoral issue that requires the contribution of the other sectors. Budget allocations and expenditures have been uneven across sectors, with most investments going to basic health and nutrition-specific interventions. The remaining ministries do not receive regular funding specifically for nutrition interventions.



RECOMMENDATION 3

- ✓ Advocate for an increase in public financing of nutrition in the various sectors by ensuring that annual costed plans of sectoral nutrition interventions are reflected in the annual budgets of the sectors.
- ✓ Strengthen monitoring and accountability of the key sectors in their implementation of priority nutrition interventions through the various nutrition coordination mechanisms at national and sub-national levels.
- ✓ Build capacity on planning and budgeting for nutrition at both national and sub-national levels.

LIMITED USE OF NUTRITION DATA FOR POLICY DECISION MAKING

Generally, data is collected at the sub-national levels and transmitted to the central level or entered into the information management systems of the organizations. There was limited evidence of staff and managers in charge of nutrition programmes at sub-national levels using data in their planning and budgeting processes.



RECOMMENDATION 4

- ✓ Strengthen capacity of staff of key line ministries and departments on results-based management by highlighting the use of data in planning, budgeting, targeting and general service delivery.
- ✓ Optimize the National Information Platforms for Nutrition (NIPN) for capacity building of government staff on data generation, analysis and dissemination.
- ✓ Explore the use of appropriate monitoring tools for routine and timely monitoring in the non-health sectors
- ✓ Invest in the health information management system by ensuring that the integration of nutrition indicators for timely reporting as well as tracking of nutrition investments in the country.

LOW COVERAGE AND IMPLEMENTATION OF THE 22 PRIORITY NUTRITION INTERVENTIONS

A key challenge in the implementation of nutrition intervention in the country relates to the low coverage of the 22 priority interventions of the NPAN (2016-2020). The national strategies of the respective sectors cover some of the nutrition interventions, however actual geographic coverage and implementation remains a major challenge.

In some instances, there is limited information in the national strategies of the key line ministries and sectors on implementation of nutrition interventions as mandated by the NPAN (2016-2020). Also, knowledge on these national strategies and policies on nutrition declines as one moves from national to sub-national levels.



RECOMMENDATION 5

- ✓ Increase coverage of high impact and low-cost nutrition interventions to the entire population by ensuring access especially for those living in rural areas.
- ✓ Ensure that the National Nutrition Strategy and Plan of Action (NNSPA, 2016-2020) and the next 5-Year Plan of Action are properly disseminated to all provinces and districts nationwide to enable all sectors to have better understanding of the nutrition strategy and be able to implement it well.
- ✓ Assess the implementation of the National Plan of Action on Nutrition (NPAN, 2016-2020), document lessons learnt and use findings to inform the development of the next plan of action (2021-2025).

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ANNEXES

A. NATIONAL POLICIES AND STRATEGIES IN LAO PDR

Lao PDR ID	Policy document in order of dates	Summary of policy documents
1	National Strategy for Environmental Health and Water Supply (2004)	Describe strategic sustainability of rural water supply and sanitation. Focused on health and socio-economic impact of using clean water and sanitation services.
2	Law on protection of children rights and benefits (2006)	Identify the principles, rules and measures on management, monitoring and benefits and supervision of the implementation of the protection of the rights and interests of ethnic children.
3	UN Convention on the Rights of Persons with Disabilities (March 2007)	It highlights the promotion, protection ensuring the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.
4	National Nutrition Policy (2008)	Formalize the essential conditions (water, sanitation, environment and health services) to reduce levels of malnutrition, especially for vulnerable groups.
5	Water supply law (2009)	Law on water supply for towns and rural areas. As rural areas it emphasis supervision, coordination with the support of communities.
6	National Food Safety Policy (2009)	Protect and promote better health by ensuring that people consume safe, hygienic and nutritious food. As a law has clear responsibilities for government, ministries and organizations.
7	National Policy on Inclusive of Education (2010)	Ensure 39% of 3-5-year-old children, especially girls from poor ethnic communities and children with disabilities have access to community-based school readiness programmes, crèches, pre-primary education, and pre-primary attached classes.
8	National School Health Policy (2010)	A policy document aims at improving and promoting the physical, emotional and mental health of children from pre-school onwards. It focuses mainly on increasing the enrolment rate and preventing dropouts.
9	National Nutrition Strategy and Plan of Action 2011 to 2015	National Nutrition Strategy to substantially reduce levels of malnutrition, especially of vulnerable groups, and to mainstream nutrition in National Socio-Economic Development Plans (NSEDPs) in line with the implementation of the NSEDP.
10	Law on Hygiene, Disease Prevention & Health Promotion (2011)	Determine the principles, rules and measures relating to MOH on hygiene-related disease prevention and health promotion to improve the good health, quality of life and longevity of the citizens.
11	7th 5-Year National Socio-Economic Development Plan (2011-2015)	Key objective is to achieve sustainable economic growth, poverty reduction and the MDGs by 2015. Also includes the evaluation and lessons learnt from this period.
12	7th 5-Year Health Sector Development Plan (2011-2015)	The plan was formalised and provide strategic direction to the health sector to ensure the achievements of MDGs by 2015.
13	National Strategy & Plan of Action on Inclusive Education (2011-2015)	Ensure 39% of children 3-5 years old, especially girls from poor ethnic communities and children with disabilities, have access to community-based school readiness programmes, crèches, pre-primary education, and pre-primary attached classes.
14	Food Law (revised) (2013)	Define principles, rules and measures in the management, monitoring and control of food for quality, effectiveness, food safety and nutrition value purposes.
15	National Growth and Poverty Eradication Strategy (2013-2020)	National plan on the development of necessary infrastructure to ensure greater access to clean water and sanitation in rural areas, thus improving the quality of their lives.
16	Health Sector Reform Strategy and Framework (2013-2025) (2016)	"Ensure that the Lao PDR will reach the health related MDGs by 2015 and Universal HealthCoverage (UHC) by 2025. Focus on basic health care based on 5 years health plan VII (2011 - 2015)"

17	Health System Review (2014)	Review on the health situation mainly for the nutrition 29 indicators
18	School Lunch Policy (2014)	Refers to access to education through school lunch It mentions the MOES' role in the coordination of all development partners involved in school feeding.
19	Decree on Persons with Disabilities (2014)	It defines principles, rules and measures for the protection of the rights and legitimate interests of persons with disabilities in the management, monitoring and control to create conditions for self-development and self-reliance in social activities.
20	Directions and Functions of the VIIIth Five-Year Health Sector development Plan (2016-2020)	Ensure the population are healthy, through the health policy of focusing on the hygiene, prevention, and health promotion as priority, and curative care and provision of health services with quality, equity and equality as important issue and modern method.
21	Social Protection in Lao PDR (2015)	Report of a national social protection need system for Laos. It defines principles according to International Labour Organisation (ILO) recommendations (access to nationally defined sets of goods and services, and basic income security for all including children) and coordination mechanisms on social protection including coping strategies for women and children.
22	Agriculture Development Strategy to 2025 and vision to 2030 (2015)	Develop a strategy for agriculture and forestry focusing on the industrialization and services provided as the basis for the national economy. It also refers to minimum energy consumption of 2,600 Kilocalories per day by 2020.
23	Law on Trafficking (2016)	Define principles, rules and measures in the management, monitoring and control of anti-human trafficking activities to have an accurate and effective system.
24	8th 5-Year National Socio-Economic Development Plan (2016-2020)	Ensure that continued economic growth with quality and macro-stability is achieved. Strengthen human resource capacity. It contains the plan to implement it, referring mainly for the sub-national level.
25	Education & Sports Sector Development Plan (ESDP) (2016-2020)	Have equitable access to quality education and sports and benefits from socio-economic development for all. It refers to the importance of nutrition and hygiene aspects working with health on vaccination and deworming programs.
26	National Strategy & Action Plan for Integrated Services on RMNCH 2016-2025	Improve the reproductive health status and reduce maternal, neonatal and child mortality and morbidity including malnutrition in Lao PDR.
27	National Nutrition Strategy to 2025 and Plan of Action 2016-2020	National strategy to reduce malnutrition rates and improve the nutritional status of the Lao people so that it graduates from its status as a least developed country (LDC) in 2020 and attains its strategic targets in 2025.
28	Strategic framework for sustainable development strategy (2016-2030)	Approach on implementation of national policies and coordination.
29	National code of marketing breast milk (2017)	It is a monitoring and drafting stage regulation to implement the International Code of Marketing Breast Milk Substitute.
30	Inter-Agency Contingency Plan (2018)	Government plan as disaster risk mitigation to have an effective, timely, sufficient supply and an efficient coordinated disaster response team, to face the risks and minimize the impact of natural disasters on Lao communities.
31	Monitoring Guidelines for the Social-Cultural Sector Committee (2018)	Manuals and guidelines for implementation of the 18 Provinces Social-Cultural Sector Committees.
32	Ending violence against children strategy (2018)	Establish the modalities to end physical, emotional and sexual violence against children and prevent the circumstances in which childhood violence occurs. Develop an integrated package of education to end violence with focus on coordination from the different sectors.
33	Law on Persons with Disabilities (2019)	Several articles on social acceptance of people with disabilities.
34	National Social Protection Strategy(2019-2030)	Strengthen the Health Insurance, the development of Social Security and the Social Welfare schemes. Still in draft format.

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1.3	Dr. Khamla NHAIHIENG ONE	Department of Health	Bokeo	Deputy Director
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1.6	Mr. Bomby SONEMIXAY	Department of Agriculture and Forestry	Bokeo	Technical Officer
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3.2	Ms. Somvilay SOUPHAXAY	Department of Education and Sports	Savannakhet	Technical Officer
3.3	Dr. Sengdao SIDALAY	Department of Health	Savannakhet	Deputy Director
3.4	Ms. Keophone KETTAVONG	Provincial Lao Women's Union	Savannakhet	Deputy Director
3.5	Mr. Khamdeng KHOUNSAVANH	Department of Planning and Investment	Savannakhet	Technical Officer
4	Ms. Souphonh BOUNNHALATH	District Planning and Investment Office	Outhoum-phone	Director
4.1	Ms. Kongmany KEODOUANGDY	District Health Office	Outhoum-phone	Deputy Director
4.2	Ms. Bounsouay	District Agriculture and Forestry Office	Outhoum-phone	Deputy Director
4.3	Ms. Venvong NAMVONGSA	District Education and Sports Office	Outhoum- phone	Deputy Director
4.4	Ms. Viengxay SAYXOMMA	District LWU	Outhoum- phone	Deputy Director
4.5	Ms. Hatsady THEPVONGSA	District Planning and Investment Office	Outhoum-phone	Technical Officer
4.6	Ms. Malathip PHILAMAKHOT	District Planning and Investment Office	Outhoum-phone	Chief of Planning Unit

E. KEY INFORMANT INTERVIEW GUIDE

Leadership and Governance
Knowledge of a legal and policy framework that addresses nutrition
Knows and can enumerate policies that explicitly refer to nutrition (confirm he/she can give examples)
Has knowledge of the translation of the laws (referred to above) for implementation at decentralized level
Has knowledge and can give examples of operational guidelines to facilitate implementation of the policy
Knowledge of a national strategic plan that includes nutrition
Has knowledge of the existence of indicators with some targets, at least for the key indicators
Operational guidelines and targets have been disseminated at provincial level (in several components)
Knowledge that the national strategic plan on nutrition has been implemented
Knows that it is a yearly plan or bi-annual plan
Knows about some up-to-date results (last meeting participation about results or last document received about results)
Knows about the process of the plan implementation at provincial level
Knows about the costs of the implementation of the nutrition plan at provincial level
Can refer to the reviews on the national nutrition plan based on provincial results
The ministry has basic organizational capacity to work with nutrition
The routine monitoring and supervision happen at least quarterly
The supervision happens with the participation of other ministries (coordinated supportive supervision)
There are regular meetings to conduct regular assessments of the strengths and weaknesses of the supervision results
Information Management and Accountability
Existence of a national monitoring and evaluation plan for the national strategic plan(s) that include nutrition protection
Knows indicators, framework, who will do the monitoring and the guided plan
Knows the implementation level (provincial or national)
Availability of good-quality nutrition data
Have the data been disaggregated as needed
Is the data actual and comprehensive
Is the nutrition data of good quality? What means good quality to he/she
Existence of a national monitoring and evaluation plan for the national strategic plan(s) that includes nutrition
If she/he knows the monitoring and evaluation plan, confirms he/she knows at least 2 or 3 indicators. Ask the opinion if the indicators are clear and disaggregated
What type of data is he/she using (approved) from the plan?
Availability of nutrition data
Related to nutrition data – available? At what level?
Disaggregated? By geographic areas? Time for the data (current)
When was the data taken? (updated / current data?)
Percentage of provinces that submit timely and complete data on nutrition services to the national ministry of social services (or equivalent)
Does she/he know the provinces producing data? By partners? How often does he/she use this data?
Coordination and Networking Mechanisms
Existence of a functional national body that provides multi-sectoral oversight of the implementation of the nutrition protection policy framework
Participation in meetings within a regular framework (once per quarter)
Organization partners, Ministries or NNC participation in the meetings and minutes approved
Joint intervention within a collaborative perspective and analysed at NNC meetings

Existence of a functional national body that provides multi-sectoral oversight of the implementation of the child-protection policy framework
of research shared with partners and results published
Monitoring reports analysed and shared at NNC and recommendations implemented
Number and percentage of provinces with at least one functional coordinating body that provides multi-sectoral oversight of the implementation of the nutrition protection policy framework
Representation of NNC in provinces
Representation of SUN in provinces
of meetings of coordination at provincial level
Human resource workforce
Knowledge of a national social service workforce
Professional qualifications and standards for social workers have been defined in the regulatory framework
The ToR for the social service staff is clear about the need to work with children
The ToR for the social service staff requires interaction across sectors (social service, health, education, justice, etc.)
There is a sufficient workforce specialised in nutrition
Existence of a functional national regulatory body for the social service workforce
Social workers have licenses and authorizations
Social workers have a code of conduct
Monitors the compliance of social service practitioners with the code of conduct
Mechanisms are in place to deal with acts of non-compliance
Availability of social- service workforce data to be used for decisions
Data comes from provinces and is consolidated at national level
Data is disaggregated by workforce area
Data is disaggregated by gender, age, geographic area
Data is up to date
Data is comprehensive
Number of social service workers by sector
Number of social workers by province and by area
Ratio of social workers by CU5
Financing
The national medium-term expenditure framework (or equivalent) includes nutrition policy and programming
There is a specific and explicit reference to national nutrition policy
Social protection financing/resource envelope for nutrition (a top-down determination)
The budget is a top-down determination or bottom-down budget planning (as per estimated needs)
The estimates are realistic (in terms of the resources available)
Total annual government budget allocation to nutrition
The allocation of funds (money) relates to the national policy
The allocation of funds (money) based on a top down decision
The allocation of funds reflects estimated financial needs of the provinces and districts
Total annual government expenditure on nutrition
Is there a budget allocated to?
Is there a total expenditure on nutrition?

F. SUMMARY OF RESULTS ACROSS ALL KEY INFORMANT INTERVIEWS

Summary of Results Across All Components

This page summarizes all the results entered across all system components. Responses to the benchmarks provided earlier are automatically calculated to provide a value for a denominator and a numerator. These are used to calculate a final score. Indicator scores of >75% are categorized as “sufficient evidence, no improvements required.” Indicator scores of 50-74% are categorized as “some evidence, minor improvements required.” Indicator scores of 25-49% are categorized as “not sufficient evidence, considerable improvements required.” Indicator scores of <25% are categorized as “no evidence, major improvements required.” The purpose of these categorizations is help determine areas of each system component that are weaker than the other areas. Overall, this tab displays scores, which can be used to set baselines and observe change over time.

System Component	Indicator Name	Average Score
Leadership & Governance	Knowledge of a policy framework that addresses nutrition protection	Good results; minor improvements required
	Knows and can enumerate policies that explicitly refer to nutrition	Good results; minor improvements required
	Knowledge of a national strategic plan that includes nutrition protection	Outstanding results; no improvements required
	Evidence that a national strategic plan on nutrition protection is being implemented	Good results; minor improvements required
	Existence of the national nutrition strategic plan	Good results; minor improvements required
	Evidence that the national nutrition strategic plan is being implemented	Good results; minor improvements required
	The ministry has basic organizational capacity to work with nutrition	Good results; minor improvements required
	No. and % of provinces with a good-quality strategic plans that include nutrition protection	Outstanding results; no improvements required
	No. and % of provinces with a good-quality strategic plans that include nutrition	Outstanding results; no improvements required
	Knowledge and existence of a national regulatory framework for the social service workforce	Slight results; moderate improvements required
Social service Workforce	Existence of a functional national regulatory body for the social service workforce	No achievement; major improvements required
	Availability of social-service workforce data to be used in decision-making	Slight results; moderate improvement required
	Existence of a good-quality national strategic plan that includes strengthening the social service workforce	Good results; minor improvements required
	Number of social service workers in your organization	No achievement; major improvements required
	Ratio of social workers to CU5	No achievement; major improvements required

Financing	The national midterm expenditure framework (or equivalent) includes nutrition protection policy and programming	Slight results; moderate improvement required
	The national midterm expenditure framework (or equivalent) includes nutrition policy and programming	Slight results; moderate improvement required
Information Management & Accountability	Total annual government budget allocation for nutrition	No achievement; major improvements required
	Total expenditures framework by nutrition intervention	No achievement; major improvements required
	Existence of a national monitoring and evaluation plan that includes nutrition protection	Good results; minor improvements required
	Availability of reliable, adequate and disaggregated nutrition protection data	Slight results; moderate improvement required
	Frequency of reporting on national monitoring and evaluation	Slight results; moderate improvement required
	Availability of reliable, adequate and disaggregated nutrition data	Slight results; moderate improvement required
Coordination & Networking Mechanisms	Existence of a functional national body that provides multi-sectoral oversight of the implementation of nutrition	Slight results; moderate improvement required
	Existence of a functional national body that provides training and supervision on the nutrition intervention	Slight results; moderate improvement required

G. FOCUS GROUP DISCUSSION GUIDE

Knowledge about policies and implementation

- Do you know your policy?
- Can you name any indicator existing in your policy? How is your policy being implemented?
- Do you have training before implementing the policy?
- Are you part of the team that develops the implementation process? Do you have guidelines to develop the implementation process?
- How many indicators do you know from the NNC strategy that you need to implement?

Existence of a functional implementation process

- How is the implementation being performed?
- Is implementation being monitored and measured?

Bottlenecks and constraints

- What are the constraints that you face in implementing the policy?
- List the constraints

List threats that enable your implementation

Other discussions

Monitoring

- Number of monitoring session meetings
- Denominator: Total number of meetings that should happen

Coordination

- Numerator: Number of coordination meetings
- Denominator: Number of total meetings expected

Summarise the strengths, weaknesses and recommendations identified

F. ASSESSMENT OF POLICY IMPLEMENTATION AT SUB NATIONAL LEVEL

Summary of the Progress Made to date and Ongoing Work in the Province and District

Instructions: There are four discussion topics. Provide a score for each of the discussion themes listed. For each discussion theme, add a justification explaining why that score was provided. Each discussion theme is defined and provided a value for a denominator and a numerator. These are used to calculate an average score. Indicator scores of >75% are categorized as "sufficient evidence, no improvements required." Indicator scores of 50-74% are categorized as "some evidence, minor improvements required." Indicator scores of 25-49% are categorized as "not sufficient evidence, considerable improvements required." Indicator scores of <25% are categorized as "no evidence, major improvements required." These categorizations assist in identifying areas of each system component that are weaker than other areas. Overall, this tab displays scores, which can be used to set baselines and observe change over time.

Discussion Topic	Discussion Theme	Average Score
Leadership & Governance	Do you know your policy?	Good results; minor improvements required
	Can you name any indicator in your policy?	Good results; minor improvements required
	How is your policy being implemented?	Good results; minor improvements required
	Do you have training before implementing the policy?	Slight results; moderate improvements required
	Are you part of the team that develops the implementation process?	Slight results; moderate improvements required
	Do you have guidelines to develop the implementation process?	Slight results; moderate improvements required
Existence of a functional implementation process	How many indicators do you know from the NNC strategy that you need to implement?	Good results; minor improvements required
	How is the implementation being performed?	Good results; minor improvements required
	Is implementation being monitored and measured?	Slight results; moderate improvements required
	Numerator: number of monitoring meetings?	10
Number of monitoring session meetings	Denominator: Total number of meetings that should happen	12
	Percentage (auto calculates)	83%
Coordination	Numerator: Number of coordination meeting happened?	2
	Denominator: Number of total meetings expected	4

I. COUNTS OF NUTRITION TERMS IN MAJOR STRATEGIC PLAN DOCUMENT

Ministry	National Policies/ Strategies (MPI)	MOES	MAF	MOH	MOLSW
Pages in Policy documents	107	18	88	46	31
Terms used for comparison in percentage					
Policy strategy	14	70	15	13	19
Ministry reference	7	15	9	13	70
Government plans	14	38	20	16	81
Sector references subject	0	69	0	16	39
Defined main sectors for nutrition-sensitive					
Nutrition	36	78	20	38	35
Poverty	18	4	6	0	4
Agriculture	12	7	83	25	2
Infrastructure	18	2	21	18	0
Human resources	15	8	12	16	52
Finance	2	2	5	5	8
Pages in Strategic documents	76	80	78	43	68
Terms used for comparison in percentage					
Policy strategy	8	8	7	19	12
Ministry reference	3	3	26	33	27
Government plans	7	0	45	14	59
Sector references subject	0	0	4	23	3
Defined main sectors for nutrition-sensitive					
Nutrition	30	32	70	36	32
Poverty	20	11	4	5	9
Agriculture	25	2	14	24	2
Infrastructure	15	0	7	16	5
Human resources	12	4	2	12	21
Finance	0	0	2	7	1

Ministry	National Documents (MPI)	MOH	LWU
Pages in Reports documents	137	61	47
Terms used for comparison in percentage			
Policy strategy	7	29	35
Ministry reference	7	14	59
Government plans	7	72	53
Sector references subject	3	86	41
Defined main sectors for nutrition-sensitive			
Nutrition	65	53	23
Poverty	3	0	4
Agriculture	12	12	0
Infrastructure	7	2	0
Human resources	11	28	70
Finance	2	6	2

Observations: Term count excludes titles, table of contents, abbreviations and the reference lists. The frequency of the terms “policy”, “ministry”, “government” and “sector” were recoded for comparison purpose.



J. MAPPING OF PRIORITY NUTRITION INTERVENTIONS IN POLICIES AND STRATEGIES

Doc No.	Policies and strategic documents	2016-2020 National Nutrition Strategy and Action Plan Interventions	
		Directly (indicator exist)	Indirectly (indicator exist)
National Policies / Strategies (MPI)			
15	National Growth and Poverty Eradication Strategy (2013-2020)	Part I, chapter 1, chapter 3, chapter 4, chapter 5, chapter 7; part II chapter 1, chapter 2, chapter 5; Part III, chapter 2; Part IV, chapter 1, chapter 2, chapter 3, chapter 4, chapter 5, chapter 6, chapter 8; Part V, chapter 2, chapter 3, part VI	chapter 2
24	8th 5-Year National Socio-Economic Development Plan (2016-2020)	Logical framework indicators, pages - 29, 32, 41, 45, 50, 57, 63, 71, 72, 77, 78, 79 to 81, 107, 108, 112, 114, 123 to 125, 127 to 129 and 146	Not applicable
MOH			
1	National Strategy for Environmental Health and Water Supply (2004)	Item 5 and Annex 2 (log frame)	Not applicable
4	National Nutrition Policy (2008)	Section 2.2 (nutrition status) and 2.3, targets by 2015 - 2020	targets by 2015-2020
5	Water supply law (2009)	Art 5, 45	art 9, 17
6	National Food Safety Policy (2009)	Part IV 1, part I 3, part IIIA, part III B, part I 1, part I 4	part IIIB
10	Law on Hygiene, Disease Prevention & Health Promotion (2011)	Art 12, art 40, art 36, art 48	art 8, art 35
11	7th 5-Year Health Sector Development Plan (2011-2015)	Chapter 2, 2.2, Annex 2,	chapter 2
14	Food Law (revised) (2013)	Art 1, 4, 6, 8, 9, 11, 12, 13, 16, 17, 19, 22, 25, 26, 27, 34, 47, 62, 65, 66, 67, 68, 69, 70,	Not applicable
16	Health Sector Reform Strategy and Framework (2013-2025) (2016)		
20	Directions and Functions of the 8th Five-Year Health Sector Development Plan (2016-2020)		
26	National Strategy & Action Plan for Integrated Services on RMNCH 2016-2025	1.4, 2.2, framework, 2.6, 1.2,	1.4, 17
27	National Nutrition Strategy to 2025 and Plan of Action (2016-2020)	Annex, part I, part II, part III	Not applicable

MOLSW			
2	Law on protection of children rights and benefits (2006)	Art 10, 11, 13, 14, 15, 16,	Art 3, 5, 25, 35, 41, 79, 80,
3	UN Convention on the Rights of Persons with Disabilities (2007)	Only indirect	Art 4; 24; 25, 28
19	Decree on Persons with Disabilities (2014)	Chapter 3 - art 17, 17; chapter 5 - art 21.	Chapter 1 - art 1, 4; chapter 2 - art 11, 14; chapter 9 - art 33; chapter 10 - art 36.
23	Law on trafficking (2016)	Not incorporating nutrition	Not applicable
30	Inter-Agency Contingency Plan (2018)	Situation and Risk Analysis - 5, 6, 7, 8. Response Strategy - 10. Operational delivery - 11, 12, 13, 14, 15, 16, 17, 18, 46. Coordination and Management Arrangement - 20, 21, 22, 23, 26, 29. Operational Support Arrangements - , Annex 2 - 37, 39, 40, 42, 45.	Summary - 1. Annex 3 - 53, 55,
33	Law on Persons with Disabilities (2019)	Art 27, 40,	Art 30, 31, 71, 75
34	National Social Protection Strategy (2019-2030)	Part II 1, part II 3, part III 3, part IV 1,	part I 1, part I 3, part IV 5, methodological note - 28
MAF			
22	Agriculture Development Strategy to 2025 and vision to 2030	Topic 1.2, 3.1, 3.2, 4.1, 5	Not applicable
MOES			
7	National Policy on Inclusive of Education (2010)	II 1; III	I; IV
8	National School Health Policy (2010)	Part I - 1, 2. Part II - 2, 3 (3.1, 3.2, 3.6). Part III - 2,3,	Not applicable
13	National Strategy & Plan of Action on Inclusive Education (2011-2015)	VI - 9, 12, 14, 15, 22, 23.	V - 5, VI - 19
18	School Lunch Policy (2014)	I; II; III; IV; V	Not applicable
25	Education & Sports Sector Development Plan (ESDP) (2016-2020)	Part I 4.4; Part II - 1.3.2.3, 3.3,	Not applicable

