

## Partnership for Improved Nutrition in Lao PDR Pillar 3: Sustainable Change Achieved through Linking Improved Nutrition and Governance

### Welcome!

Welcome to our 5<sup>th</sup> issue! This 6-monthly publication aims to bring you updates on the Sustainable Change Achieved through Linking Improved Nutrition and Governance (SCALING) project, implemented by Save the Children, CARE, Comité de Coopération avec le Laos (CCL) and Child Fund Laos (CFL). The project is funded by the European Union (EU) under the Partnership for Improved Nutrition in Lao PDR (PIN).

The overall objective of SCALING is to improve the nutritional status of adolescent girls, pregnant and lactating women, and children under 5 in 14 target districts in the provinces of Luang Prabang (LPB), Luang Namtha (LNT), Phongsaly (PSL) and Huaphanh (HUA). The action supports the Government of Laos (GoL) to implement at scale the current National Nutrition Strategy (NNS), NNS Action Plan (NNSAP) and convergent approach. The project period covers December 2017 to December 2021 (four years).

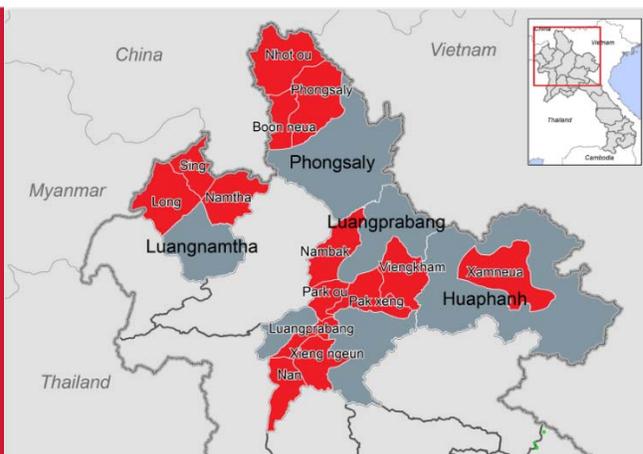
In this 5<sup>th</sup> issue we focus on results achieved under the project as of October 2020. We will also provide an update on key results on monitoring of BMS Code, and the approach and some experience in constructing water supply system with water connection and installing water meter at individual household and the construction with installation of public water taps in the community. In addition, we will give the update on Nutrition Governance Approach and SCALING response to Covid-19.

**SCALING PROJECT AREA**

**4**  
**Provinces**  
Luang Prabang (LPB), Luang Namtha (LNT), Phongsaly (PSL) and Huaphanh (HUA)

**14**  
**Districts**

**420**  
**Villages**  
210 in LPB, 100 in LNT, 80 in PSL, 30 in HUA



	<p><b>Social Behavior Change Communication (SBCC) at Community Level</b></p> <p><b>310</b> target villages in which the "Our Promise" SBCC campaign has been rolled out.</p> <p><b>883</b> Community Facilitators (<b>848</b> females) trained visiting <b>7,382</b> 1,000-days HHs on a regular basis</p>
	<p><b>SBCC among young Adolescents in Lower Secondary Schools (LSS)</b></p> <p><b>499</b> Peer Support Groups formed with <b>3,444</b> members (<b>1,781</b> girls)</p> <p><b>502</b> Adolescent Facilitators (<b>251</b> girls) from <b>150</b> LSS trained</p>
	<p><b>Health Systems Strengthening (HSS) at District Levels</b></p> <p><b>41</b> Health Centers and district hospitals using on line DHIS2 data entry on time and correctly</p> <p><b>86</b> health centers equipped with growth monitoring equipment</p> <p><b>174</b> (<b>144</b> females) of district and HC staff trained on Growth monitoring and growth promotion and IYCF</p>



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### Gender and Village Savings and Loans Associations (VSLA)

**178** VSLA have been formed and functioning  
**741** women attending leadership skills training  
**12,219** women and **3,075** couples in **361** villages have participated in Women Workload Reduction Training



### Water Sanitation and Infrastructure Construction

**56** Water Supply Systems constructed or rehabilitated  
**677** households have procured a Water Filter, and **4,787** households have constructed a latrine as a result of WASH Marketing



### Nutrition Governance

**03** provincial assembly visits to implementation sites facilitated in HUA, LNT and LPB provinces  
**10** inter-district learning exchange visits conducted in SCALING districts and provinces  
**194** GoL staff trained in nutrition technical content and implementation of the NNSAP and other policies/strategies  
**371** target villages have completed the new Village Development Plan 2020-2024. All have included one or more Nutrition Priority Interventions.

### Monitoring the Code for Marketing of Breast Milk Substitutes (BMS)

As part of addressing environmental factors affecting the nutritional status of children under five, SCALING is supporting the Government of Laos to monitor the implementation of the BMS Code in the 14 target districts. In line with government policies, SCALING is supporting mothers to initiate breastfeeding within one hour after birth, ensure exclusive breastfeeding during the first six months and continue until the child of two years of age or longer. Inappropriate marketing of BMS is known to have an adverse effect. The aim of monitoring the implementation of the Code is not only to record violations but also as a way to raise awareness on the adverse effects of inappropriate BMS marketing and the existence of the Code in the public and private sector.

#### The International Code and the Lao Decree on the Marketing of BMS

In 1981, the members of the World Health Organisation (WHO) approved the International Code for Marketing of BMS to stop aggressive and inappropriate marketing. The aim of the Code is not to stop the distribution and availability of BMS products, but to regulate the marketing and distribution of products and to ensure mothers and fathers can make an informed choice. At the end of 2019, Laos passed a national decree on the marketing of BMS. At present the government is developing Implementation Guidelines which are due for completion by the end of 2020. In a writing workshop in the first week of November 2020 in Vang Vieng, SCALING shared its monitoring methodology and experiences with the government. The methodology has also been shared with other key stakeholders like UNICEF and the members of SUN CSA.



Save the Children



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The first round of monitoring took place in August/September 2019, the second round was completed in June/July 2020, in close cooperation with the Provincial and District Health Offices. Per round the implementation of the Code is monitored in eight selected shops and two pharmacies per district. In addition, selected health centres and the district hospital is visited. During the second round the Kobo tool was applied to facilitate the online entry of data and analysis.

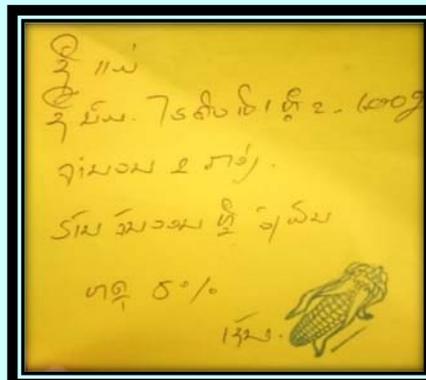
During the first round of monitoring, one or more violations were identified in more than half of the shops and pharmacies visited. Irregularities were also identified in some of the health facilities visited. During the second round, no violations were identified in the health facilities. Most likely, this was the combined effect of increased awareness and the new Lao decree. An important lesson learnt was that the monitoring effort needs to be led by the local government to provide the necessary credibility and authority, especially in the private sector.

Pending the completion of the Implementation Guidelines of the new Lao BMS decree, the international Code was used as the basis for the first two rounds of monitoring. In consultation with the Ministry of Health, the third round of monitoring will be rescheduled to the beginning of 2021 to be based on the new Implementation Guidelines. The monitoring tools will be adjusted accordingly. The government intends to take the results into account when preparing the monitoring at a national level later in the year.

Examples of violations during the 2nd round of monitoring, June/July 2020



Promotion of BMS products outside the shop



Two shops gave 5% discount when procuring two types of BMS products



Promotion of BMS products inside the store



Cross-promotion between BMS products for different age groups using the same logos, designs and colors.

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### Water Supply Construction Approach and Experiences

Nam Saat is the department in the Ministry of Health responsible for the supply of clean water in rural areas. SCALING aims to improve Nam Saat capacity at provincial and district level in two areas: water supply construction and WASH marketing. The water supply intervention addresses key bottlenecks on WASH (Water, Sanitation and Hygiene) in rural Laos: weak sector monitoring and lack of a sustainability support system/operations and maintenance mechanisms. In the meantime, the lack of water is an increasing bottleneck in many villages. Water sources are drying up as a result of climate change and more and more water sources are polluted as result of pesticide use in farming and mining. Other village have increased in size and the existing facilities are no longer sufficient. Under WASH Marketing households are encouraged to invest in latrine construction and procurement of water filters. Setting up and promoting WASH value chains ensures that the necessary materials are better accessible at community level at affordable prices.

So far, SCALING has supported the construction of 56 water supply systems in selected target communities. 18 out of 56 water systems are constructed with water connection and water meter installed at individual household (HH) level. The community provides free labour and local materials. In some cases, communities in Luang Namtha and Phongsaly have volunteered to contribute in cash up to LAK 1 mln per HH. A Water Management Committee is formed in each selected village to coordinate the construction and manage the maintenance and repair after completion and hand-over of the system. Nam Saat provides the technical support. A Memorandum of Agreement is signed between the selected community, Nam Saat and the concerned SCALING partner. The agreement includes the commitment of both the community and local government to keep the water source clear. Information Boards are placed in front of completed structures. In consultation with the EU, the boards reinforce key behaviour change messages on the use of clean water for hygiene, drinking and cooking.

The construction of a water supply system is normally accompanied by a commitment of the community to construct a latrine in all remaining households. It is therefore a key investment in the government target to achieve Open Defecation Free (ODF) in all villages in Laos by 2025. Both the Water Management Committees and Nam Saat are trained on securing safety during construction. A water construction safety plan is developed per village. A safety poster and a checklist is available for the safety and quality of latrine construction by the individual households.

The water supply systems are typically constructed with water public taps in the communities. However, SCALING is aiming to promote connections and installing a water meter at individual HH level. The average costs of the construction of a water supply system is LAK 150-200,000,000. The additional costs of individual connection and water meter is some LAK 300,000 per household and are covered by the households concerned. The advantages and disadvantages of the individual water connection and water meter are listed in the table below. The conclusion is that the system of individual connection and water meters is working better. New selected target communities will be encouraged to follow this method.

*Example of direct quote from Mr. Chanh, Village Water Management Committee in Sing Village, Luang Prabang province*

Chanh said that “I feel happy to have new water system with water connection and installing a water meter at individual HH. It can save more water. The community ownership toward the use of water and water management has increased if compared with the old construction with public water taps installed at the community level. It is also very good that we have specific village water management committees as well as maintenance fund”

### The Advantages and Disadvantages of water supply construction with water connection and installing water meter at individual household level

Advantages	Disadvantages
<ul style="list-style-type: none"> <li>It is fair for every HH to pay a fee based on the actual volume of water they consume</li> <li>It is more private and more convenient for individual HH members to get water from an individual water tap for cooking, washing, bathing, cleaning, flushing their toilet, etc. During busy times there may be queues at public taps.</li> </ul>	<ul style="list-style-type: none"> <li>Village people have less chance to meet and talk about their life or stories compared to fetching water from a public tap</li> <li>The individual households have to invest additional money to connect and install the water meter HH level and it takes longer time to complete the construction.</li> </ul>

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- It creates a high level of ownership among the individual HHs to maintain and repair the water pipe, water meter and tap when it is broken. The system is therefore more sustainable.
- Reduce women and children’s physical labor to fetch water from a public water tap or water source that is far away from home, especially for pregnant women and lactating mother.
- Young children, adolescents and women are less exposed to sexual harassment and/or sexual abuse when collecting water from a public tap, especially during the evening.
- Increased awareness of the “value” of water. The use of water meters and individual connections results in a more efficient use of water. This has a positive impact on the environment and sustainability, especially in cases where the availability of water is limited
- The average quantity of water used by a HH is around 3-5 m3 per month and pay 2,000 LAK per m3.
- The fees to be paid to the water management committee is around 1,000,000 LAK/year
- The poorer HHs in the village may not be able to afford the individual water connection and water meter.
- Villagers may lack the knowledge for maintenance and repair of the water meter. They may need technical support from relevant stakeholders
- Villagers need training to record the water at the end of each month as well as to calculation the water bill per HH.
- The average quantity of water used by a HH per month is unknown, but each HH has to pay for water fees around 20,000 LAK per year
- The fees to be paid to the water management committee is around 400,000 LAK/year



Water supply construction with filter system in Cha Vangmai village, Sing district, LNT province



The water supply filter system

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Water supply construction with water meter installing at individual household level in NamthalarnNua village, Namtha district, LNT



Water supply construction in Houay Oun village, Nan district, LPB province



Water supply information board in Namai village, Nambak district, LPB province



Poster on safety latrine construction is applied by Houay Oun village, Nan district, LPB province



A household in Viengthong village, Viengkham district, LPB province is constructing a home latrine



A completed latrine in Viengthong village, Viengkham district, LPB province

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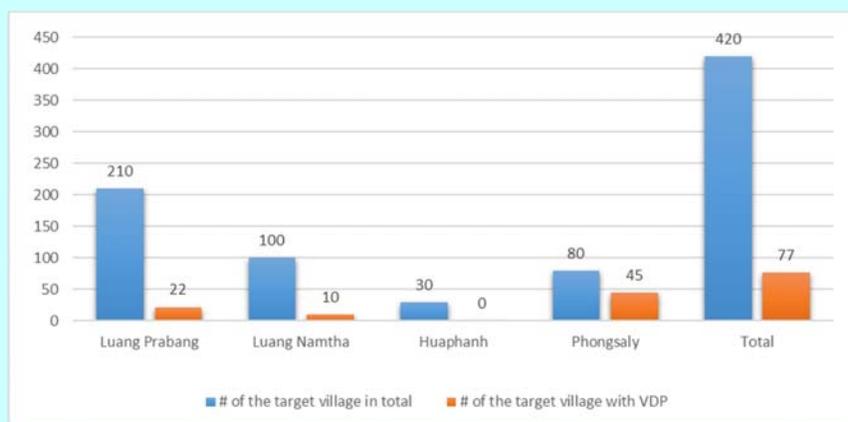
### Nutrition Governance Approach

Key outcomes on Nutrition Governance under SCALING are that each target district has a functioning nutrition committee and that the development plans at village and district level are nutrition sensitive and convergent.

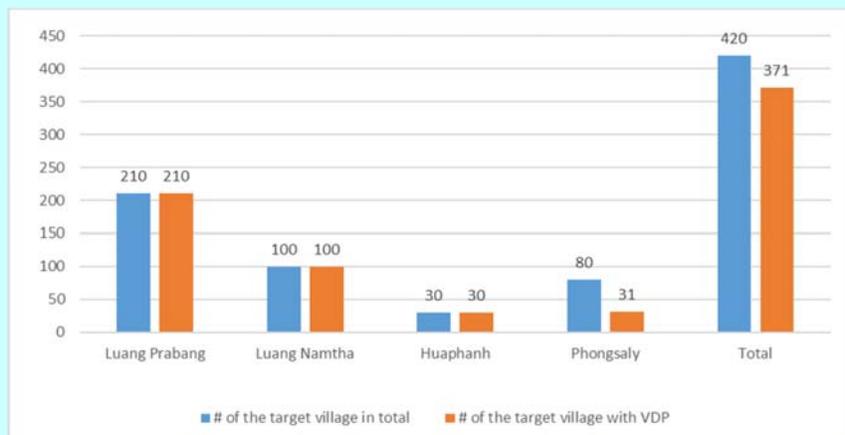
The activities not only aim to increase coordination between different actors working on nutrition at district level but also to strengthen the capacity and support for nutrition among government and civil society agencies at the local level, as called for in the National Nutrition Strategy (NNS) 2016-2025.

Capacity building activities include awareness raising on nutrition policies, guidelines and nutrition interventions, NNS implementation, multi-sector coordination, planning, monitoring and evaluation. SCALING project staff participates and supports the quarterly district multi-sector nutrition meetings and multi-sector support to the development of Village Development Plans with at least one nutrition priority intervention as defined in the NNS. As of October 2020, 371 target villages had developed a new nutrition sensitive Village Development Plan (VDP) 2020-2024. This is a substantial increase compared to the number of 77 villages with VDP at the beginning of the intervention at the beginning of 2019.

**Chart 1:** The target villages with completed VDP, baseline data of 2019



**Chart 2:** The target villages have completed the new Village Development Plan 2020-2024 as of October 2020



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### Updated SCALING response to COVID-19

In addition to the distribution of various Personal Protective Equipment (PPE) and medical supplies to health facilities, communities and village volunteers from early April 2020, SCALING has continued to integrate COVID-19 messages and measures in its activities on behavior change and health systems strengthening. Among others, SCALING has supported the roll-out of the training on COVID-19 clinical preparedness by WHO and the Ministry of Health to district level in Luang Namtha and Phongsaly provinces. It has committed to do the same in the target districts in Luang Prabang and Huaphanh provinces. The messages and measures should increase the preparedness and resilience of both communities and health facilities in the case of a second COVID-19 outbreak and lockdown in Laos.



### ວິທີການປ້ອງກັນພະຍາດປອດອັກເສບສາຍພັນໃໝ່ COVID-19



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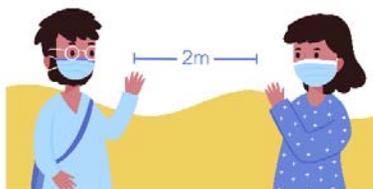
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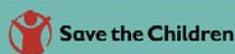
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Poster on COVID-19 at community level, May 2020

To subscribe to our 6-monthly newsletter, send comments or suggestions, please contact Houmphanh Soulivongxay at [Houmphanh.Soulivongxay@savethechildren.org](mailto:Houmphanh.Soulivongxay@savethechildren.org).

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