

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

Welcome!

Welcome to our 7th issue! This 6-monthly publication aims to bring you updates on Sustainable Change Achieved through Linking Improved Nutrition and Governance (SCALING). The project is implemented by Save the Children (SCI), CARE, Comité de Coopération avec le Laos (CCL) and ChildFund Laos (CFL). It is funded by the European Union (EU) under the Partnership for Improved Nutrition in Lao PDR (PIN).

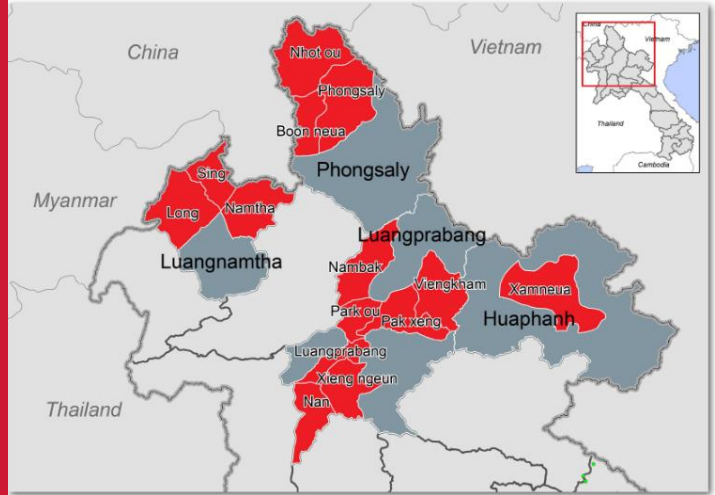
PROJECT AREA

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

14
Districts

422
Villages

210 villages in LPB province
102 villages in LNT province
80 villages in PSL province
30 villages in HUA province



Timeframe: December 2017  June 2022

This 7th Newsletter provides an update of the project results until December 2021 and the results of the End evaluation undertaken during the second half of 2021.

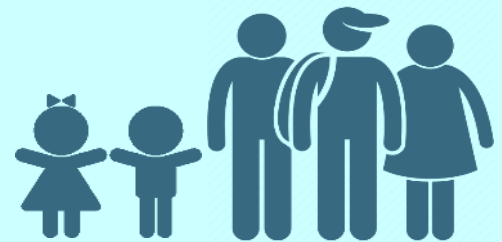
Update

At the end of November 2021, the SCALING Consortium partners and EU agreed on a six-month No Cost Extension (NCE) of the project until mid-June 2022. The NCE covers all four target provinces, in view of the delayed implementation in 2020 and 2021 due to the COVID-19 lockdowns and restrictive measures. The extension period allows the SCALING Consortium partners and government counterparts to complete the implementation of project activities and to strengthen the delivery of the Exit and Sustainability strategy. Key activities will be handed over to the target communities and government counterparts.

The lessons learnt on the SCALING approaches are being documented. A national level workshop on the dissemination of lessons learnt took place in Vientiane on 17 February 2022. A total of 95 people participated in person or online. The Case Studies on the main approaches (in Lao and English) and other materials will be available through the SCALING Consortium partners and the website of the SUN CSA Laos network (www.suncsalaos.org). We trust that the experiences under SCALING are relevant for future efforts to improve the nutrition status in Lao PDR by the government, Development Partners and NGOs.

Updated Project Results as of December 2021

Total number of direct beneficiaries reached: 211,262 (106,643 women),
Including Children (0-17 years): 98,066 (48,627 girls),
Total number of indirect beneficiaries reached: 84,093 (42,234 women),
Total number of beneficiaries reached: 295,355 (148,877 women).



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 <p>“Our Promise” Social and Behaviour Change Communication (SBCC) campaign rolled out in 403 villages</p> <p>12,983 1,000-day households visited by 1,171 trained Community Facilitators (96% women, 77% from ethnic groups)</p> <p>1,675 Peer Support Groups formed</p>	<p>1,013 Adolescent Facilitators (50% girls) trained in 79 Lower Secondary Schools</p> <p>650 Peer Support Groups formed among 7,923 students (50% girls, 63% from ethnic groups)</p> 
 <p>Staff of 86 Health Centers (HCs) and 14 district/provincial hospitals trained on Growth Monitoring and Promotion (GMP), Infant and Young Children Feeding, Family Planning counselling and Micro-planning to improve the Mobile Outreach Services. GMP equipment provided.</p> <p>150 district and HC staff mentored on Early Essential Newborn Care</p> <p>92 HCs provided with Personal Protective Equipment to manage the COVID-19 pandemic</p> <p>66 HCs enter DHIS2 data correctly and on time.</p> <p>42 HCs have a functional mechanism for community accountability.</p>	
<p>226 Village Savings and Loan Associations (VSLA) for women formed and functioning</p> <p>Women Workload Reduction and/or Gender Equality in Relationship training provided in 419 villages, covering 13,222 women (76% from ethnic groups) and 5,062 couples</p> <p>836 women (81% from ethnic groups) have completed a Women Leadership training</p>	
 <p>Water Supply Systems constructed or rehabilitated in 102 villages</p> <p>70 Nam Saat staff, 377 Community Sales Agents and 20 Private Vendors trained on WASH Marketing. As a result, 9,930 households constructed a Latrine and 889 households procured a Water Filter</p> <p>224 villages have been declared Open Defecation Free (ODF)</p>	
 <p>397 villages (94%) have completed a nutrition sensitive Village Development Plan 2020-2024. Average 71% of the nutrition priority interventions overlap with the priorities in the District Socio Economic Development Plan 2020-2024.</p> <p>Provided 8 internships for representatives of 5 local Non Profit Associations (NPAs) working on nutrition.</p> <p>Completed 3 rounds of monitoring of the implementation of the international Breast Milk Substitute (BMS) Code in the 14 districts. Contributed to the development of the national monitoring framework on the new Lao BMS decree.</p>	



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End Evaluation

The SCALING End evaluation was completed during the second half of 2021. Lao Social Research (LSR) collected quantitative data among 1,813 sample households (HHs) with pregnancy and/or one or more children under five. The same sample villages and indicators were applied as during the Baseline survey in 2018 for maximum comparison. In addition, LSR collected qualitative data through interviews and focus group discussions with government staff, target communities and other stakeholders as well as a survey among SCALING project staff. The draft results were presented and discussed among the Consortium partners at the beginning of December 2021. The final report was completed at the end of January 2022. Below you will find the full Conclusions and Recommendations as included in the final report.

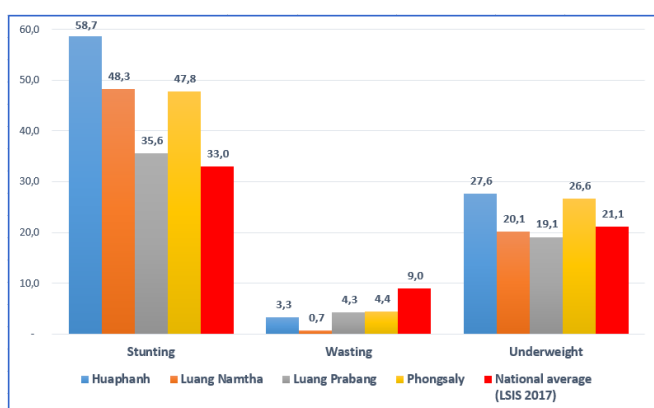


Figure 1: Prevalence of under-nutrition among children <5 in the SCALING project areas, in percentages (SCALING Baseline survey 2018)

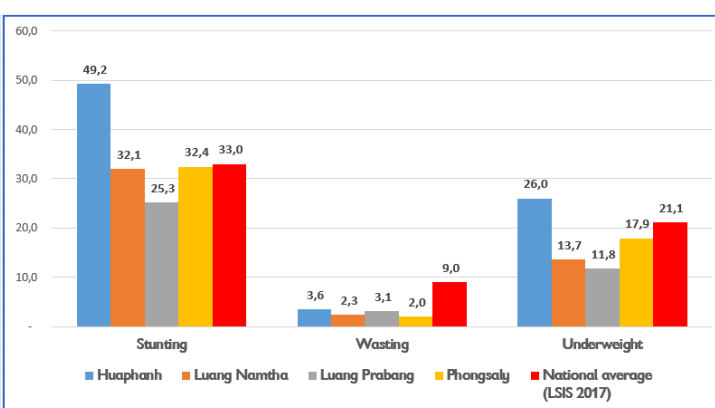


Figure 2: Prevalence of under-nutrition among children <5 in the SCALING project areas, in percentages (SCALING End evaluation 2021)

Conclusions

SCALING brought together evidence-based strategies to address normative, service delivery and governance challenges to improving child nutrition in some of the most remote and ethnically diverse parts of Laos. It achieved a lot in an abbreviated timeframe with positive outcomes addressing each of the objectives. It is recognized by the EU as one of the strongest projects under the PIN. The consortium was well managed. It worked effectively because the members each had a geographic presence in the project's provinces, and because each added technical expertise to the effort.

SCALING was largely successful in increasing the capacity of individual PNC and particularly DNC members, and promoting inter department cooperation for nutrition goals, at least over the life of the project. These multi-agency committees were struggling or non-existent before SCALING; the project provided resources and a technical focus. DNC members (and some PNC members) were exposed to a range of best practice strategies related to WASH, gender, SBCC, nutrition, maternal, new-born and child health—stretching their insights beyond areas of their direct responsibility. Many were equipped with training of trainers, offering skills and hands-on practice. Vertical linkages between PNCs and DNCs were strengthened through field visits and joint meetings, some of them national. Nonetheless, functioning PNC and particularly DNCs relied on SCALING financial and technical support, and the project may have created an over reliance on these external inputs. Sustainability is hard to envision without another project or a new level of national government support going forward.

A multi-faceted gender strategy generated a powerful momentum in project communities and awareness amongst decision-makers contributing to convergence on gender equality. Maintaining a focus on gender from the outset, and continuing to refine direct intervention approaches, strengthen partnerships, and address patriarchal norms barring health and nutrition



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improvements in diverse cultural contexts paid off. Gender is an important element of the SCALING legacy, which bears examination in terms of linkages to needed systemic changes.

SCALING SBCC initiatives tackled some deep-seated traditions and behaviours and reached key target groups—women from more conservative ethnic communities, and school-going adolescents. The peer approach was appreciated by participants, village leaders, school staff and District officials.

In many of the strategies adopted in this project, progress was made on the shoulders of precursor projects. SCALING contributed to the refinement of approaches, and for this the project allowed for adaptation by participating consortium members while still adhering to established targets. Technical and financial flexibility from the EU contributed as well.

Although the project was part of a larger effort to boost nutrition convergence in Laos, its impact on translating multi-sectoral lessons from the field into scalable or policy solutions was impeded by contextual barriers. Limitations in the design itself may have also contributed—there are no explicit activities or targets that anticipated sharing of local lessons to inform the national dialogue, for instance. At the end of the project, SCALING has a range of knowledge products and viable strategies to share, but mechanisms for sharing are few¹.

As Laos moves towards its aim of graduating from LDC status, external resourcing for community-based programs, as well as nutrition-specific programs such as SCALING may become scarcer. Giving SCALING consortium members a seat at the (national nutrition- relevant) table in future nutrition planning will add value in continuing nutrition, gender, WASH, and health service delivery gains at scale.

Recommendations

Based on the findings presented in the report, this section considers individual components of the project and then multi-sectoral convergence. Because this is an end of project evaluation, many of the recommendations arising are as relevant for government and future funders - in terms of sustainability and scale - as they are for consortium partners who may be best placed to integrate recommendations into on-going or next generation programming. The intended audience or audiences for each recommendation is noted alongside the recommendations presented here.

Recommendations about specific programmatic elements

SBCC Community Facilitators

1. **Advocate for mainstreaming community-based volunteers** into the health delivery system. Integration of nutrition elements with other health information would be most cost effective. Consider specific lessons from SCALING about community-based volunteers in ethnic communities. (GOL, EU, SCALING)
2. **As SBCC becomes a mainstay of the NNSAP, advocate for remuneration to SBCC volunteers.** The gendered implications of relying on women's (unpaid) labour to shoulder this strategic part of the national program needs careful consideration going forward. Volunteers are a vital link between the client population and the health delivery system, and deserve to be paid. Remuneration may also attract more new graduates and help provide a stepping stone to other employment options.
3. **Include family planning advice** in training, information and referral linkages. This is a positive element of the national Village Health Volunteer initiative, which should be encouraged. Consider adding contraception (including social marketing) to the volunteer's offerings. (GOL, EU, SCALING)

¹ Provincial participation in national fora had some effectiveness but does not link to a wider strategy



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4. **Include refresher training and supervision for volunteers from HC and DHO staff** as a cornerstone of any community-based nutrition or health volunteer program going forward. (GOL)
5. **Consider revising reporting forms** with an eye to the time availability and literacy of volunteers. (SCALING)
6. **Consider the range of ingredients used in cooking demonstrations** with resource scarce households in mind. (SCALING, NUSAP)

LSS nutrition and SRH peer education

7. **Promote mainstreaming of key messages into the LSS curriculum.** (GOL)
8. **Revisit module content and materials** based on lessons learned. This might include consideration of linguistic diversity, maturity levels of students (particularly relevant to SRH topics for Grade 1 students), maximizing interactive formats. (GOL, SCALING)
9. **Repackage LSS peer educator training and materials to enable government approvals for mainstreaming.** (SCALING, GOL)
10. **Refresher training for teachers and student facilitators** is essential so that factual information continues to be communicated. Refresher training is also an opportunity to build facilitation skills. (GOL, SCALING)
11. **Trial inclusion of older students as facilitators.** Students from higher grades may be able to more effectually manage classroom dynamics, and deliver sensitive information while retaining the effectiveness of peer education. (SCALING)
12. **Promote peer networking** amongst peer facilitators in safe chat rooms and through scheduled web meetings to help facilitators coach and encourage one another, as they likely face similar issues. (SCALING)

Health Systems Strengthening

13. **Advocate for sufficient resourcing for mobile clinic outreach for remote villages.** (GOL, EU, SCALING)
14. **Include support to village volunteers** in job descriptions and performance metrics for HC staff. (GOL)
15. **Advocate for more prominent integration of family planning services** in RHMCH. Teen pregnancies impact on maternal and child nutrition and close off education and livelihood options for women. (GOL, SCALING)
16. **Aggregate findings from community accountability pilots** for presentation to MoH to highlight client priorities and strategies for quality service delivery and advocate for accountability standards. (SCALING)

VSLA

17. The introduction of nutrition, gender, and financial literacy information through the VSLA would offer a cost-effective conduit. (SCALING)
18. Continued support to LWU to backstop VSLA offers good value for money. (SCALING)
19. **Support well established VSLA to share advice with new or recently formed VSLA.** Functioning VSLA can help orient new groups. This would elevate the modelling element of the activity and be particularly helpful when language is an issue. This would also contribute to cost efficiencies. (SCALING)
20. **Explore whether and how the VSLA can provide a steppingstone to the formal banking sector for members.** (SCALING)

WWR/GER

21. **Develop materials to enable LWU to mainstream WWR/GER** at a practical cost point (SCALING)
22. **Bring media attention to gains made in gender equality,** including impacts on health and nutrition, through profiles of individual couples. (SCALING)

WASH Systems

23. **Consider quality branding for private sector WASH engineering maintenance support.** There is an unmet demand for water systems and water systems maintenance. Results from SCALING demonstrate a willingness to pay for reliable water supply maintenance. *Nam Saat under the National Centre for Environmental Health*



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appears to be under resourced and overly bureaucratic. In order to maintain quality and fair pricing, a future project could vet and certify service suppliers. Suppliers could sign contracts with WASH committees which detail the types, timing and costs of services. Payment of a retainer fee may incentivize prompt supplier response. (EU, SCALING)

24. **Help the Nam Saat department develop a digital support function** to provide remote WASH maintenance troubleshooting. This would work best in communities where a “barefoot engineer” had already been trained as part of water systems construction, and where connectivity is not an issue. (GOL, EU)

Recommendations about mainstreaming multi-sectoral integration/coherence

Nutrition governance

25. **Share lessons learned with national decision makers about nutrition governance and multi-sectoral approaches at subnational level**, based on the SCALING experience. Ideally this would be presented in concert with provincial and district partners as knowledgeable “insider” advocates. Planned. (SCALING, EU, GOL)
26. **Develop standards and guidelines for PNCs and DNCs** that include expectations related to inter-departmental programming, resourcing options, and performance criteria that extend beyond simply convening. (EOL, EU)
27. **Promote cross visits** and sharing amongst committees to encourage learning and networking. This could also be done virtually to reduce costs and expand participation. (GOL, EU)
28. **Anticipate exit in design.** Future projects with provincial and district government (and LWU) partners could be designed with incremental handover in technical and management leadership over the project cycle. INGO partners would finish in a technical support role by the end of the project. This approach could be piloted under the EU budget support mechanism. This would work best in districts and provinces that have already demonstrated an understanding of and interest in convergence, and where SCALING consortium partners already have an established, trusted relationship with key government offices. Agreed performance and accountability milestones would be essential. (EU, SCALING)
29. **Conduct a costing analysis** during close out for each component. This would help to inform planning at scale. Costing analysis would require clear guidance about required human resource capacity and associated costs in addition to activity-based expenses. (SCALING)

Next steps

The full End evaluation report has been shared with the EU, AFD, NUSAP and other stakeholders. We will translate the Executive Summary in Lao. The conclusions and recommendations will be presented and discussed with the government counterparts during the planned close-out meetings at provincial level.

Where possible, follow-up to the recommendations will still be given during the remaining project period and in future projects. It should be kept in mind that the End evaluation was an independent process. In general, the SCALING Consortium partners are pleased with the results. However, the SCALING Consortium partners will justify if they do not (fully) agree with specific conclusions and recommendations.

We encourage all readers to take note of the recommendations and give follow-up in their own way.

For comments or questions on this Newsletter or SCALING in general, please contact communications.laos@savethechildren.org

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