

Section I: Identification and JP Status

Improving nutrition and food safety for China's most vulnerable women and children

Semester: 1-11

Country	China
Thematic Window	Children, Food Security and Nutrition
MDGF Atlas Project	67235
Program title	Improving nutrition and food safety for China's most vulnerable women and children
Report Number	
Reporting Period	1-11
Programme Duration	
Official Starting Date	2009-12-04
Participating UN Organizations	<ul style="list-style-type: none">* FAO* ILO* UNDP* UNESCO* UNICEF* UNIDO* WFP* WHO

Implementing Partners

- * Asociación de Organizaciones de Productores Ecológicos de Bolivia (AOPEB)
- * All-China Federation of Trade Unions (ACFTU)
- * All-China Women's Federation (ACWF)
- * Capital Institute for Paediaetrics (CIP)
- * Central South University (SPHCSU)
- * China CDC (INFS)
- * China International Center for Economic and Technical Exchanges (CICETE)
- * China Law Society (CLS)
- * China National Institute of Standardization (CNIS)
- * Chinese Academy of Agricultural Sciences(CAAS)
- * Chinese Academy of Agricultural Sciences(CAAS)
- * Foreign Economic Cooperation Center
- * General Administration of Quality Supervision
- * Inspection and Quarantine (AQSIQ)
- * Institute of Nutrition and Food Safety
- * Ministry Agriculture
- * Ministry of Commerce (MOFCOM)
- * Ministry of Education
- * Ministry of Health (MOH)
- * National Bureau of Statistics (NBS)
- * National Center for Health Inspection and Supervision (NCHIS)
- * National Center for International Cooperation in Work Safety(NCICS)
- * School of Public Health
- * State Administration of Radio
- * State Administration of Work Safety (SAWS)
- * Training Center of State Administration of Radio, Film, and Television (TC-SARFT)

Budget Summary

Total Approved Budget

	FAO	\$1,028,600.00
ILO		\$481,500.00
UNDP		\$587,100.00
UNESCO		\$418,880.00
UNICEF		\$957,650.00

UNIDO	\$581,010.00
WFP	\$209,720.00
WHO	\$1,735,540.00
Total	\$6,000,000.00

Total Amount of Transferred To Date

	FAO	\$791,800.00
ILO	\$342,400.00	
UNDP	\$438,700.00	
UNESCO	\$328,490.00	
UNICEF	\$742,740.00	
UNIDO	\$460,100.00	
WFP	\$123,050.00	
WHO	\$1,157,740.00	
Total	\$4,385,020.00	

Total Budget Committed To Date

	FAO	\$283,420.00
ILO	\$182,185.00	
UNDP	\$291,791.00	
UNESCO	\$269,974.00	
UNICEF	\$742,741.00	
UNIDO	\$365,791.00	
WFP	\$123,050.00	
WHO	\$552,085.00	
Total	\$2,811,037.00	

Total Budget Disbursed To Date

	FAO	\$141,454.00
ILO	\$99,174.00	

UNDP	\$214,512.00
UNESCO	\$224,413.00
UNICEF	\$545,809.00
UNIDO	\$226,679.00
WFP	\$114,625.00
WHO	\$361,422.00
Total	\$1,928,088.00

Donors

As you can understand, one of the Goals of the MDG-F is to generate interest and attract funding from other donors. In order to be able to report on this goal in 2010, we would require you to advise us if there has been any complementary financing provided in 2010 for each programme as per following example:

Amount in thousands of US\$

Type	Donor	Total	For 2010	For 2011	For 2012
Parallel					
Cost Share					
Counterpart					

DEFINITIONS

1) PARALLEL FINANCING – refers to financing activities related to or complementary to the programme but whose funds are NOT channeled through UN agencies. Example: JAICA decides to finance 10 additional seminars to disseminate the objectives of the programme in additional communities.

2) COST SHARING – refers to financing that is channeled through one or more of the UN agencies executing a particular programme. Example: The Government of Italy gives UNESCO the equivalent of US \$ 200,000 to be spent on activities that expand the reach of planned activities and these funds are channeled through UNESCO.

3) COUNTERPART FUNDS - refers to funds provided by one or several government agencies (in kind or in cash) to expand the reach of the programme. These funds may or may not be channeled through a UN agency. Example: The Ministry of Water donates land to build a pilot 'village water treatment plant' The value of the contribution in kind or the amount of local currency contributed (if in cash) must be recalculated in US \$ and the resulting amount(s) is what is reported in the table above.

Direct Beneficiaries



Indirect Beneficiaries

Section II: JP Progress

1 Narrative on progress, obstacles and contingency Measures

Please provide a brief overall assessment (250 words) of the extent to which the joint programme components are progressing in relation to expected outcomes and outputs, as well as any measures taken for the sustainability of the joint programme during the reporting period. Please, provide examples if relevant. Try to describe facts avoiding interpretations or personal opinions

Progress in outcomes

Chinese government at all levels have been provided with the updated information on the current situation of undernutrition and food insecurity of women and children living in the 6 selected country level poverty counties through a series of baseline survey. This will support the relevant government agencies in the development of policy and action plan to correct the situation.

The majority of the young children under age 2 in the rural area of six counties have been supplied with Ying Yang Bao (Micronutrients package) to quickly improve their nutritional status and reduce the local mortality rate of children under 5. Breast feeding practice is being promoted. National food fortification action plan developed.

The government agencies in charge of child food quality and safety have also accumulated useful experiences by applying new practices in the child food manufacture enterprises in the pilot sites. Knowledge of food safety among women and child is enriched.

Social awareness of maternal and child undernutrition and food insecurity issues was raised through establishment of special website on Food Safety Law and training of the journalist in the local counties.

Progress in outputs

Output 1.1.1 Comprehensive food security situation of all six pilot counties have been surveyed and the results is officially released to the public.

Output 1.1.2 Nutritional status information on women and children in 3 intervention counties become available;

Output 1.2 Nutrition and child feeding data available for the three control pilot counties and incorporated into national surveillance systems;

Output 2.1.1 Multi-nutrients package (Ying Yang Bao) has been supplied to 9,000 kids 7 months -24 months old in 3 pilot counties. Training materials developed and nutrition knowledge is disseminated;

Output 2.1.2 Information on women and infant health and nutrition and food availability and on infant feeding preferences was available;

Output 2.1.3 National Code of marketing of breast milk substitutes is revised;

Output 2.2 The baseline survey on household locally available micronutrient rich foods finished and production materials being procured;

Output 3.1 Training programme on quality control of child food production is conducted in relevant factories in pilot areas; Trainings to laboratories, enterprises and inspectors 50% complete

Output 3.2 Survey on knowledge and need assessment related to properly handling food for children was conducted, training materials were developed. The nutrition and food safety education is integrated into the health education curriculum in the pilot schools and text books for teachers and students are developed.

Output 3.2.2 Policy review and needs assessment on nutrition and food safety education conducted, supplementary teaching and learning materials on nutrition and food safety education being developed

Output 3.3 The Legal Research Centre on Food Safety was established and provided policy advice to the national food safety authorities and a special website on enforcement of new National Food Safety Law was set up and functions well;

Output 3.3.2 Baseline survey report on understanding of new Food Safety Law and need for food safety service/support were available in both Chinese and English; A training manual on provision of rights-based service for women against food safety disputes were developed.

Output 4.1 Advocacy package for child nutrition was developed and distributed;

Output 4.2 Baseline survey and journalists' needs assessment conducted, a training manual developed for journalists to report nutrition, food safety and security issues, and 100 journalists trained on reporting of food safety and nutrition issues

Measures taken for the sustainability of the joint programme

1. Strengthening the ownership of the Chinese government;
2. Translating the achievement of the joint programme into policy and action;
3. Improving the awareness of the whole society and public of the importance of maternal and child nutrition;

A few examples observed below

1. The government agencies have fully involved in the development and implementation of the joint programme activities and the senior representatives from central government agencies and provincial health authorities and pilot counties government attended the launching ceremony of this joint programme to be convened on June 11 in Beijing;
2. Multi-sector meetings at national, provincial and county level about the malnutrition of children in poor rural areas and efficacy of YYB for children will be organized to advocate government priority child nutrition.
3. This is one of several pilots of YYB in China, and will inform massive expansion in poor rural areas if funded by MoF.
4. National Food fortification Guidelines in China is developed.
5. National Code of marketing of breast milk substitutes is being revised.
6. The development of supplementary teaching and learning materials on nutrition and food safety complements Minister of Education's ongoing effort of developing textbooks on health education for primary and secondary schools, and thus will be used by the Ministry and local education authorities beyond the project cycle and in more schools.
7. Special websites and journalists trained to promote the dissemination of child nutrition and food safety knowledge.

Are there difficulties in the implementation?

Coordination with Government

Coordination within the Government (s)

Administrative / Financial

Management: 1. Activity and output management. 2. Governance/Decision Making 4.Accountability

Joint Programme design

What are the causes of these difficulties?

Briefly describe the current difficulties the Joint Programme is facing

- High number of UN agencies involved in the programme requires a great effort in coordination and information exchange, increasing the transaction costs of the programme.

- Administrative/Financial: The differing administrative procedures of UN Agencies occasionally impede joint implementation. Partners usually need to sign a contract with each Agency, each with different budgeting and reporting requirements. In addition, different budgeting systems and requirements of UN Agencies and the MDG Achievement Fund

overburden UN staff in budget reporting exercises.

- Government institutions involved in the programme have different reporting lines and do not possess mechanisms for cross ministerial communication. MOH, as the lead national coordinating agency has no formal authority to coordinate other government agencies. coordination is based on willingness and commitment of the programme partners, rather than institutional mechanisms

- Lack of or insufficient budget for local logistic support also negatively influences the programme implementation

- Lack of specific budget for joint work

Briefly describe the current external difficulties that delay implementation

- Frequent occurrence of extreme climate. Due to the serious drought taking place in the pilot counties this spring, the season for growing of modified grains were missed and has to be postponed to next year.

- Rapid change of the government policies has significant impact on the environment of programme implementation, and the local implementing agencies may overwork to conduct the JP programme.

- The economic inflation and the rise of the price of food have negative impact on the programme implementation as it decreases the family purchasing capacity and access to quality food

Explain the actions that are or will be taken to eliminate or mitigate the difficulties

During the first year, a number of coordination mechanisms have been set in place. JPMC meetings will be organized more frequently to raise the awareness of high level staff on the coordination and effectiveness of the joint programmes.

Coordination meetings among UN agencies and national partners have been organized at the output level to increase efficiency of the coordination efforts.

Information of local points of all the programme activities has been collected and shared and Ministry of Health will encourage local health authority to play a leading role of coordination.

As it is decided at the meeting of the Joint Programme Management Committee (PMC), the MoH's Department International Cooperation (DIC) has informed the provincial health authorities to coordinate the programme activities in the area of health and the local implementing agencies were encouraged to actively communicate with partners in other working areas.

Output 3.1 There will be more communications with other participating UN agencies and implementing partners to foster synergies toward the joint outcome. We will also work closely with local government in the pilot sites to make references from the local practice and try to establish cross-sectoral food safety supervision mechanism in local level.

The specific Chinese website for joint programme implementation is established and provides platform of information sharing

2 Inter-Agency Coordination and Delivering as One

Is the joint programme still in line with the UNDAF?

Yes true
No false

If not, does the joint programme fit the national strategies?

Yes
No

What types of coordination mechanisms

- Regular PMC meetings for information sharing and collective decision making among partners.
- PMC Co-Chairs meeting for discussions on issues concerning joint programme coordination and implementation. More flexible and precise than PMC meeting.
- Regular UN inter-agencies meeting (UNRCO and PMC Co-Chair involved). Good opportunity to share information and seek synergies across agencies and outputs.
- PMO based in leading government office building and regular PMO staff meetings allow communication and information sharing at any time.
- The leading government Ministry, the Ministry of has internal joint programme leading group meeting which allows mobilizing expertise of different functional departments to support the joint programme implementation.
- Output working group meetings allow frequent communication and decision making across agencies related to each individual outcome.
- UNRCO provides continuous support to JPs so that good experiences and lessons can be shared among different JPs.
- PMO will actively participate and coordinate the working meeting of participating UN agencies related to individual outcome.
- It has been expected that lead agency of each outcome should play more active roles.

Examples as below:

Output 1.1 and 1.2 Several technical meetings took place among UNICEF, WHO and WFP as well as their implementing partners China CDC and CIP to ensure the development of a single standardized

Please provide the values for each category of the indicator table below

Indicators	Baseline	Current Value	Means of verification	Collection methods
Number of managerial practices (financial, procurement, etc) implemented jointly by the UN implementing agencies for MDF-F JPs	0	19	Special reports, pilot brochure, joint conference, meeting documents,	Review special reports, pilot brochure Review contracts, meeting minutes
Number of joint analytical work (studies, diagnostic) undertaken jointly by UN implementing agencies for MDG-F JPs	0	2	Baseline reports, training materials	Review baseline reports, training materials
Number of joint missions undertaken jointly by UN implementing agencies for MDG-F JPs	0	6	Mission reports,	Review the mission reports

3 Development Effectiveness: Paris Declaration and Accra Agenda for Action

Are Government and other national implementation partners involved in the implementation of activities and the delivery of outputs?

Not Involved false
Slightly involved false
Fairly involved false
Fully involved true

In what kind of decisions and activities is the government involved?

Policy/decision making

1. *Development of the project documents;*
2. *Selection of the pilot sites;*
3. *Designation of the implementing units and implementation of the planned activities;*
4. *Evaluation of the programme implementation;*
5. *Scaling up of the achieved results;*
6. *Dissemination of the useful information, best practice and good lessons;*
7. *The Chairs of the National Steering Committee and Joint Programme Management Committee.*

Management: budget

1. *Development of the project documents;*
2. *Selection of the pilot sites;*
3. *Designation of the implementing units and implementation of the planned activities;*
4. *Evaluation of the programme implementation;*
5. *Scaling up of the achieved results;*
6. *Dissemination of the useful information, best practice and good lessons;*
7. *The Chairs of the National Steering Committee and Joint Programme Management Committee.*

Management: procurement

1. *Development of the project documents;*
2. *Selection of the pilot sites;*
3. *Designation of the implementing units and implementation of the planned activities;*
4. *Evaluation of the programme implementation;*
5. *Scaling up of the achieved results;*
6. *Dissemination of the useful information, best practice and good lessons;*
7. *The Chairs of the National Steering Committee and Joint Programme Management Committee.*

Management: service provision

1. *Development of the project documents;*
2. *Selection of the pilot sites;*
3. *Designation of the implementing units and implementation of the planned activities;*
4. *Evaluation of the programme implementation;*

5. *Scaling up of the achieved results;*
6. *Dissemination of the useful information, best practice and good lessons;*
7. *The Chairs of the National Steering Committee and Joint Programme Management Committee.*

Who leads and/or chair the PMC?

Ministry of Health and World Health Organization

Number of meetings with PMC chair

6

Is civil society involved in the implementation of activities and the delivery of outputs?

Not involved false
Slightly involved false
Fairly involved false
Fully involved true

In what kind of decisions and activities is the civil society involved?

Management: service provision

1. *conducting training programmes;*
2. *disseminating nutrition and food safety knowledge;*

Are the citizens involved in the implementation of activities and the delivery of outputs?

Not involved false
Slightly involved false
Fairly involved true
Fully involved false

In what kind of decisions and activities are the citizens involved?

Management: service provision

- The joint programme activities include training of the target group, women and children in the pilot areas;*
Most of the partners have interviewed the target group for their needs;
The school students are also encouraged to educate their family members;

Where is the joint programme management unit seated?

National Government

The National Center for Health Inspection and Supervision

Current situation

The joint programme was designed in close consultation with the Government of China; as a result all activities under the CFSN align with recent government policy and country

priorities. In January 2010, the No. 1 Central Document jointly was issued by the Central Committee of the Communist Party of China and the State Council. This Policy still focuses on rural issues and outlines concrete measures to reduce the vulnerability and protect the rights of rural residents, such as accessibility to safe food, health service for children and women.

At management and coordination level, MofCom as the overall coordinator for all the Spanish JPs in China and the MoH as the leading JP coordinating and implementing ministry have been very supportive and showed strong ownership and initiative. PMC meetings also show active participation on national side.

At implementation level, work plans are usually formulated and implemented jointly by UN and national partners. The joint programme adopts participatory approach. The joint programme values the participatory approach. The involvement and participation of local working staff and women federation and schools are integrated into most activities, i.e. baseline research activities, policy dialogue and advocacy campaigns, developing, pilot testing and validation of interventions, training materials and other services initiated by the project to identify the special needs of women and children in poor rural area to ensure that the JP responds to their needs.

Some examples as below:

Output 2.2 The MoH/MCH/CHD is aware of the MDG-F workplan and gave the authority for its implementation to the Capital Institute of Paediatrics supported by WHO.

Output 2.1.4 The government, institutions and civil societies are fully supportive to the project and helpful for coordination of the activities.

For example, the baseline research proposal was smoothly drafted due to the support of ACFTU, Wuding TU and other local governmental agencies including women's federations and bureaus of health, and other local Yunnan stakeholders etc.

Output 3.1.4 The government, institutions and civil societies are supportive to the project and helpful for coordination of the activities.

For example, under the communication and cooperation of SAWS and ACSIQ, as well as local stakeholders such as inspection bureaus and work-safety bureaus at city and provincial levels, pilot companies were selected out and the AWP was designed successfully.

4 Communication and Advocacy

Has the JP articulated an advocacy & communication strategy that helps advance its policy objectives and development outcomes?

Yes true
No false

Please provide a brief explanation of the objectives, key elements and target audience of this strategy

Coordinated with the other Spanish JPs in China, the joint programme Communication Guidelines was developed for the following objectives:

- Ensure the uniformity of documents and publications
- Brand the joint programme with uniformed and distinctive image;
- Facilitate the promotion of MDG-F and its programmes;
- Facilitate the documentation of results achieved and managing publications under CFSN.

The Guidelines covers key elements in JP communication, including:

- Naming of the JP, including full name and name in short of the JP both in English and Chinese;
- Use of unified MDG-F in China logo;
- Communication management principles;
- Editing and formatting guidelines;
- Unified product cover page;
- Template of product recording page.

The target audience of this strategy covers the public, women and children in the poor rural area, mass media at national and local level, national and local government and other stakeholder, such as technical agencies, research institutions, academic bodies, etc.

What concrete gains are the advocacy and communication efforts outlined in the JP and/or national strategy contributing towards achieving?

Increased awareness on MDG related issues amongst citizens and governments

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- *Unified product cover page;*
- *Template of product recording page.*

The target audience of this strategy covers the public, women and children in the poor rural area, mass media at national and local level, national and local government and other stakeholder, such as technical agencies, research institutions, academic bodies, etc.

Increased dialogue among citizens, civil society, local national government in relation to development policy and practice

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- *Brand the joint programme with uniformed and distinctive image;*
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- Communication management principles;
- Editing and formatting guidelines;
- Unified product cover page;
- Template of product recording page.

The target audience of this strategy covers the public, women and children in the poor rural area, mass media at national and local level, national and local government and other stakeholder, such as technical agencies, research institutions, academic bodies, etc.

New/adopted policy and legislation that advance MDGs and related goals

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- Communication management principles;
- Editing and formatting guidelines;
- Unified product cover page;
- Template of product recording page.

The target audience of this strategy covers the public, women and children in the poor rural area, mass media at national and local level, national and local government and other stakeholder, such as technical agencies, research institutions, academic bodies, etc.

Establishment and/or liaison with social networks to advance MDGs and related goals

Coordinated with the other Spanish JPs in China, the joint programme Communication Guidelines was developed for the following objectives:

- Ensure the uniformity of documents and publications
- Brand the joint programme with uniformed and distinctive image;
- Facilitate the promotion of MDG-F and its programmes;
- Facilitate the documentation of results achieved and managing publications under CFSN.

The Guidelines covers key elements in JP communication, including:

- Naming of the JP, including full name and name in short of the JP both in English and Chinese;
- Use of unified MDG-F in China logo;
- Communication management principles;
- Editing and formatting guidelines;
- Unified product cover page;
- Template of product recording page.

The target audience of this strategy covers the public, women and children in the poor rural area, mass media at national and local level, national and local government and other stakeholder, such as technical agencies, research institutions, academic bodies, etc.

Key moments/events of social mobilization that highlight issues

Coordinated with the other Spanish JPs in China, the joint programme Communication Guidelines was developed for the following objectives:

- Ensure the uniformity of documents and publications*
- Brand the joint programme with uniformed and distinctive image;*
- Facilitate the promotion of MDG-F and its programmes;*
- Facilitate the documentation of results achieved and managing publications under CFSN.*

The Guidelines covers key elements in JP communication, including:

- Naming of the JP, including full name and name in short of the JP both in English and Chinese;*
- Use of unified MDG-F in China logo;*
- Communication management principles;*
- Editing and formatting guidelines;*
- Unified product cover page;*
- Template of product recording page.*

The target audience of this strategy covers the public, women and children in the poor rural area, mass media at national and local level, national and local government and other stakeholder, such as technical agencies, research institutions, academic bodies, etc.

Media outreach and advocacy

Coordinated with the other Spanish JPs in China, the joint programme Communication Guidelines was developed for the following objectives:

- Ensure the uniformity of documents and publications*
- Brand the joint programme with uniformed and distinctive image;*
- Facilitate the promotion of MDG-F and its programmes;*
- Facilitate the documentation of results achieved and managing publications under CFSN.*

The Guidelines covers key elements in JP communication, including:

- Naming of the JP, including full name and name in short of the JP both in English and Chinese;*
- Use of unified MDG-F in China logo;*
- Communication management principles;*
- Editing and formatting guidelines;*
- Unified product cover page;*
- Template of product recording page.*

The target audience of this strategy covers the public, women and children in the poor rural area, mass media at national and local level, national and local government and other stakeholder, such as technical agencies, research institutions, academic bodies, etc.

What is the number and type of partnerships that have been established amongst different sectors of society to promote the achievement of the MDGs and related goals?

Faith-based organizations	
Social networks/coalitions	3
Local citizen groups	
Private sector	
Academic institutions	more than 10
Media groups and journalist	more than 10
Other	

What outreach activities do the programme implement to ensure that local citizens have adequate access to information on the programme and opportunities to actively participate?

Focus groups discussions

- 1. the target population have been interviewed in the first year to understand their needs and to guide the future interventions;*
- 2. the media and journalists from the pilot provinces have been trained in the area of women and children health and nutrition and food safety and were involved in the local programme activities;*
- 3. the local women federation and labor union were actively involved in the programme implementation;*

Household surveys

- 1. the target population have been interviewed in the first year to understand their needs and to guide the future interventions;*
- 2. the media and journalists from the pilot provinces have been trained in the area of women and children health and nutrition and food safety and were involved in the local programme activities;*
- 3. the local women federation and labor union were actively involved in the programme implementation;*

Use of local communication mediums such radio, theatre groups, newspapers

- 1. the target population have been interviewed in the first year to understand their needs and to guide the future interventions;*
- 2. the media and journalists from the pilot provinces have been trained in the area of women and children health and nutrition and food safety and were involved in the local programme activities;*
- 3. the local women federation and labor union were actively involved in the programme implementation;*

Capacity building/trainings

- 1. the target population have been interviewed in the first year to understand their needs and to guide the future interventions;*
- 2. the media and journalists from the pilot provinces have been trained in the area of women and children health and nutrition and food safety and were involved in the local programme activities;*
- 3. the local women federation and labor union were actively involved in the programme implementation;*

Section III: Millenium Development Goals

Millenium Development Goals

Additional Narrative Comments

Please provide any relevant information and contributions of the programme to de MDGs, whether at national or local level

On completing half of the programme activities, the joint programme has provided the central and local government the updated situation of undernutrition and food insecurity in the poor counties selected which will also serve as reference for developing national policy and workplan (MDG 1,4,5). Besides, most of the young children in the rural area of 3 pilot counties have been given nutrients package to directly improve their nutrition status (MDG 4). The special website for enforcement of food safety law will advocate knowledge and tools to systemically ensure availability of safe food to all the Chinese people (MDG 4,5). Training of journalists in the pilot counties will help to disseminate knowledge on maternal and child health more widely (MDG 4,5). The current situation with improvement of child nutrition and food safety initiative have also been investigated which has laid solid basis for effective and specific interventions in future (MDG 4,5).

Please provide other comments you would like to communicate to the MDG-F Secretariat

We are very glad to see that the Secretariat can understand the challenges and difficulties encountered in the programme implementation and supported the partners to make timely adustment.

Section IV: General Thematic Indicators

1 Integrated approaches for reducing child hunger and under-nutrition promoted

1.1 Number of individuals suffering from under-nutrition and/or food insecurity in the areas of intervention

Children under 2

Total No.	8060
No. Urban	
No. Rural	8060
No. Girls	3707
No. boys	4352

Children from 2 to 5

Total No.	
No. Urban	
No. Rural	
No. Girls	
No. Boys	

Children older than 5

Total	
No. Urban	
No. Rural	
No. Girls	
No. boys	

Women

Total	
No. Urban	
No. Rural	
No. Pregnant	

1.2 Number of individuals supported by the joint programme who receive treatment against under-nutrition and/or services supporting their food security in the areas of intervention

Children under 2

Total 9000
No. Urban
No. Rural 9000
No. Girls
No. Boys

Children from 2 to 5

Total
No. Urban
No. Rural
No. Girls
No. Boys

Children older than 5

Total
No. Urban
No. Rural
No. Girls
No. Boys

Women

Total
No. Urban
No. Rural
No. pregnant

Men

Total
No. Urban
No. Rural

1.3 Prevalence of underweight children under-five years of age

National % 6.9
Targeted Area % 8.7

Proportion of population below minimum level of dietary energy consumption

% National
% Targeted Area

Stunting prevalence

% National 10.5
% Targeted Area 18.2

Anemia prevalence

% National 16.9
% Targeted Area 36.5

Comments

1. The data quoted above on national prevalence is from national nutrition surveillance (2005)
2. The data for children is from UNICEF findings in three pilot counties.

1.4 Type of interventions and/or strategies scaled up with the support the joint programme and number of citizens affected

Homestead food production and diversification

National
Local 360
Urban
Rural 360
Girls 108
Pregnant Women
Boys 72

Food fortification

National
Local
Urban
Rural



Girls
Pregnant Women
Boys

School feeding programmes

National
Local
Urban
Rural
Girls
Pregnant women
Boys

Behavioural change communication

National
Local 4500
Urban
Rural 4500
Girls
Pregnant women
Boys

Gender specific approaches

National
Local
Urban
Local
Girls
Pregnant Women
Boys

Interventions targeting population living with HIV

National
Local
Urban
Rural
Girls
Pregnant Women
Boys

Promotion of exclusive breastfeeding

National
Local 4045
Urban
Rural 4045
Girls
Pregnant Women 180
Boys

Therapeutic feeding programmes

National
Local
Urban
Rural
Girls
Pregnant Women
Boys

Vaccinations

National
Local
Urban
Rural
Girls
Pregnant Women
Boys

Other, specify

National
Local
Urban
Rural
Girls
Pregnant Women
Boys

2 Advocacy and mainstreaming of access to food and child nutrition into relevant policies

2.1 Number of laws, policies and plans related to food security and child nutrition developed or revised with the support of the programme

Policies
National 2
Local

Laws
National 1
Local

Plans
National 7
Local

3 Assessment, monitoring and evaluation

3.1 Number of information systems supported by the joint programme that provide disaggregated data on food security and nutrition

National 4
Local
Total 4

b. Joint Programme M&E framework

Expected Results (Outcomes & outputs)	Indicators	Baseline	Overall JP Expected target	Achievement of Target to date	Means of verification	Collection methods (with indicative time frame & frequency)	Responsibilities	Risks & assumptions
JP Outcome 1 Policy decisions and targeting are informed by reliable and up-to-date evidence on the magnitude, distribution and causes of undernutrition in China								
1.1 Food Security Situation in pilot counties understood by policymakers	1.1.1 Comprehensive food security indicators. Completed survey and a briefing workshop held	N/A	Report published	The activity is completed.	Publish of survey report and briefing workshop held	Report presented	WFP CAAS-MOA	None. Completed finished
	1.1.2 Nutritional status information on women and children in 3 intervention counties reported to policy makers	information not available.	The information on micronutrients deficiency of women and children collected.	Samples randomly chosen. Information on Dietary intake and IYCF collected. Veins blood of women and children collected for laboratory test of micronutrients deficiency. . The laboratory result is finished. The baseline survey report is in finalizing.	Questionnaire interview and laboratory test results.	Nutrition status survey analysing anthropometric, micronutrients status and IYCF and basic child health indicators in August 2010 and August	UNICEF Institute of Nutrition and Food Safety, China CDC	The laboratory tests have not good quality control

						2011 Questionnaires Vein blood collection to have laboratory tests of the nutrients,		
1.2.Targeting and monitoring improved through availability of improved national database on nutritional status of women and children	Nutrition and child feeding data available for the six pilot counties and incorporated into national surveillance systems.	No data available	Data available and incorporated	Baseline was survey conducted in November 2010. Baseline household survey data and report are available Discussion with Government planned.	Baseline coverage survey implemented . Indicators of national nutrition database compared with standard WHO indicators.	Baseline and endline household surveys (2010 and 2012)	WHO – support standardisation and conduct of survey in 3 control counties; support indicator comparison. UNICEF – support conduct of survey in 3 intervention counties.	<u>Assumption:</u> WHO and UNICEF, CIP and CDC, agree on a common survey instrument. INFS agrees to adjust national database <u>Risk:</u> Use of different survey instruments. Parallel systems keep existing.
JP Outcome2 Undernutrition and micronutrient deficiencies reduced among poor women and children in selected demonstration counties								

<p>2.1 Exclusive breastfeeding increased and quality of complementary food and micronutrient supplementation improved</p>	<p>2.1.1 Complementary food supplements(CFS) in 3 counties reaching 9000 children aged 6-24 months by Year 3. The coverage of CFS The compliance of CFS. Quality of product</p>	<p>To be assessed</p>	<p>At least 95% of the target children receive CFS one time. At least 80% of children who received CFS consume CFS more than 3 times per week.</p>	<p>Project launched, Plans for assessment developed , Procurement of supplements finished, training materials developed. Ying Yang Bao and communication materials have been delivered to households with children aged 6-23 months. Around 9000 children benefiting – 3.7 mn sachets delivered. Communication campaigns at county, township and village levels are conducted.</p>	<p>Regular report from provincial level</p>	<p>Report form and telephone interview the collected parents Every 6 months</p>	<p>UNICEF</p>	<p>Rumours on fortified complementary food will impact coverage and compliance of complementary food supplement</p>
	<p>2.1.2 Data on infant food availability and on infant feeding preferences, knowledge and practice coverage available.</p>	<p>No data available</p>	<p>Data available</p>	<p>Baseline coverage survey conducted in November 2010. Feeding preference survey conducted in November 2010. Data on infant feeding preference available and analysis report developed</p>	<p>Baseline coverage survey implemented . Feeding preference studies conducted. Survey report developed</p>	<p>Baseline and endline household surveys (2010 and 2012) Feeding preference studies conducted by Q4 2010</p>	<p>WHO – support standardisation and conduct of survey in 3 control counties; support local food studies.</p>	<p><u>Assumption:</u> Necessary tools and external technical support can be made available. <u>Risks:</u> Tools and support cannot be made available</p>

	2.1.3 National Code of marketing of breast milk substitutes revised	No data available	National Code revised	The draft of the revised code available and sent to the relevant Ministries and WHO/CO and WPRO for comment	The final version will be available	By the end of 2011	WHO MOH, CIP	<u>The revised code will be approved by the government</u>
	2.1.4 Increase by 25% the number of businesses providing the right to and capacity for continuing breastfeeding upon return to work in the pilot counties by Year 3.	No data available	National policies and legislation, and enterprise practices on maternity protection reviewed and improved.	Baseline survey on maternity protection at enterprise conducted in Wuding county and the survey report is available; Training for county union officials and enterprise unions' representatives conducted in Dec. 2010.	Draft of the baseline report was shared with the ILO experts, WHO, ACFTU and Wuding Trade Union for comments. Final report was agreed by the ACFTU. In addition, the baseline survey information-sharing workshop will be held in late August 2011 to share findings of the survey and discuss with county stakeholders	This research adopted a mixed research methods approach, involving both quantitative questionnaire surveys and qualitative interviews via on-site visits to the enterprises and public sector organisations in Wuding County	ILO provides guidance and technical advice/inputs in the process of designing the questionnaires, training for interviewers, and finalizing the survey report. ACFTU selected the national consultant, organised and conducted the baseline survey, and prepared the report together with national	Assumption: Quality ensured by the ILO through technical guidance and inputs, and close cooperation with the ACFTU and the local trade unions in all stages of the project. Risks: Lack of strong commitments by policy makers and employers in improving the current situation of maternity

					the measures for improvement		consultant.	protection.
2.2 Household dietary intake of micronutrient-rich, locally-available food increased in 3 pilot counties	Proportion of diet made up by locally available micronutrient rich foods in pilot areas.	To be set as per baseline survey report	Target: increase 30% by Year 3.	The baseline survey finished and reporting is in progress.	Survey; Progress reports; Secondary information;	Survey; Progress report; Training report;	Component 2.2 is coordinated by FAO at the international level FAO also provides technical and managerial support for the programme.	Farmers in areas of most need reached by supplies distribution and training approach. Farmers reached with supplies and training are willing and able to apply processes proposed. The low awareness of participatory approach among government counterpart institutions and local communities, which will result in higher difficulty in implementation. It will be

								important to get local government support, which seems likely since food security is a government priority, especially in poor areas.
2.3 National plan for food fortification in place and implemented	2.3.1 In-home food fortification plan developed and approved. Plan developed	There is currently no plan on food fortification	A plan for addressing micronutrients in high risk groups developed and costed	One working group meeting held, to be expanded to include relevant sectors. The nutrition intervention technical guidelines are in preparation.	Working group notes for record	As and when meetings are held	UNICEF	Agreement by key sectors to attend these meetings and develop the plan
JP Outcome 3 Food-related illness reduced through safer food production and preparation for children								
3.1 Food production for children made safer in pilot areas	3.1.1 Pilot enterprises trained in HACCP process by Year 3.	0	5	Training materials have been compiled 50% training complete in coordination with ILO and SAWS	Monitoring report and evaluations on the project site.	Monitoring reports/spot evaluations carried out by project team;	UNIDO CNIS-AQSIQ	Must ensure businesses are able and willing to complete the training process in the prescribed timeframe. Personnel cost and production time will be increased with implementation

								n of HACCP. Counterpart will be asked to identify willing partners to mitigate against the above risks.
	3.1.2 Increase in the capacity of pilot laboratories to perform food safety monitoring by Year 3.	0	4	Training materials have been compiled 50% trainings complete	Monitoring report and evaluations on the project site.	Monitoring reports/spot evaluations carried out by project team; list of training participants	UNIDO CNIS-AQSIQ	Laboratories must be able and willing to complete the training process in the prescribed timeframe. It will thus be important to, working closely with the local counterparts, select suitable laboratories, work closely with them, and monitor progress. Information sharing and the translation of needed materials will

								also be important.
	3.1.3 Increase in the capacity of food safety/quality inspectors to carry out food safety monitoring by Year 2	0	30	<p>Training materials have been compiled</p> <p>50% training complete</p>	<p>Quality of monitoring or evaluation reports;</p> <p>Interviews with food safety/quality inspector.</p>	<p>Monitoring reports/spot evaluations carried out by project team after each training is completed.</p> <p>List of training participants.</p>	<p>UNIDO</p> <p>CNIS-AQSIQ</p>	<p>In order to overcome resistance to using the new manuals developed by this project, it will be important to develop materials in the context of existing guidelines and practices, and to conduct training on new materials highlighting the benefits and improvements of the new methodologies . Monitoring and evaluation will also be key to ensuring the new manuals are adopted.</p>

	<p>3.1.4 Guidelines on safety and health at work including the safe use of chemicals in industries producing child nutrition products developed and 8 businesses applying them by Year 3.</p> <p>50 OSH inspectors trained to provide quality services to the businesses</p>	0	5	<p>5 food production businesses selected;</p> <p><i>The Training Manual on OSH in Food Production Enterprises</i> is printed out;</p> <p><i>The Guideline on OSH in Food Production Enterprises</i> is under development;</p> <p>The Training Manual for OSH inspectors is under development;</p> <p>Two rounds of training for 5 pilot enterprises have been implemented</p>	<p>Published training materials and the guideline.</p> <p>Business reports demonstrating their application of the training knowledge.</p>	<p>Collection and maintenance of guidelines.</p> <p>Audits completed by Year 3</p>	<p>ILO</p> <p>SAWS</p>	<p>The enterprises are willing to cooperate on improvement of chemicals management and OSH management. SAWS will identify responsive enterprises.</p> <p>ILO and UNIDO have previous experience on implementing enterprise programmes together, so risks related to this are low.</p>
	3.1.5 Management plans developed for target sectors in pilot areas in Year	No such management plans	Management plans for two pilot provinces	First draft of management plan in progress	Management plans; government dialogue; expert	Research report; minutes of government dialogues;	UNIDO CNIS-AQSIQ	Governments are willing and committed to developing management

	3				dialogue	management plans		plans; management plans do not overlap with any other current policy developments. Good relations with counterparts will be key. Many organizations look at policy and standards, so we must be aware of policy developments and clearly focussed.
3.2 Handling and preparation of food for infants and children made safer	3.2.1 Selected primary and secondary schools, hospitals/departments of gynaecology obstetrics and paediatrics, and women's association in the six counties trained or made aware of WHO's	0	primary and secondary schools, hospitals and women's association groups in the six counties trained by Year 3.	Baseline survey has been implemented and completed. relevant information analyzed; the survey report submitted and the dissemination material has been developed	Report from project activities ,survey report and baseline data	questionnaire , on site visit and seminar	WHO	MOE, MOH, UNESCO and WHO coordinate closely by holding regular meetings. Revive Working Group on Food Safety and Schools. Make use of WHO's

	Five Keys to Safer Food, by Year 3.							<p>role coordinating agency on food safety in China.</p> <ul style="list-style-type: none"> ■ The sample village are all accessible ■ The local authority support the survey
	<p>3.2.2</p> <p>At least 15 schools in each selected target counties will integrate nutrition and food safety into school health education curriculum with 100% of their science and health education teachers as well as head teachers in pilot schools trained in the use of newly developed supplementary materials in classrooms by Year</p>	<p>Nutrition and food safety education not systematically planned and included in school teaching and learning activities.</p>	<p>1 To train principals and science/health teachers from 50 schools of each project counties in the use of supplementary materials in classroom; 2 To support 15 schools of each county to pilot integration of nutrition and food safety</p>	<p>Policy analysis and needs assessment on nutrition and food safety education conducted, supplementary teaching and learning materials being developed</p>	<p>Annual progress report, policy analysis and field study report, supplementary learning materials prepared and used, teacher training reports available</p>	<p>Site visits, school data provided by pilot schools</p>	<p>UNESCO</p>	<p>The capacity of local practitioners might be a challenge for integrating nutrition and food safety education in school teaching and learning. Training workshops for teachers will help ensure they understand and adopt the materials.</p>

	3 (This target is under revision)		education in school teaching and learning and activities					
3.3 New national food safety law successfully implemented	3.3.1 300 government officials, 500 legal personnel and 500 employees will be trained in the new food safety law.	N.A.	1) To promote the improvement of China's food safety law and its supportive regulations, rules and judicial interpretations. 2) To strengthen legal awareness, legal knowledge and the ability of applying laws of the food safety law enforcement agencies, operators and consumers as well.	Research Center for China Food Safety Law was launched in Aug. 2010. Expert consultation seminar on food safety law was convened and suggestions of adding two crimes endangering food safety were incorporated to the 8 th Amendments to the Criminal Law; Training on food safety law is in process; China Food Safety Law website(www.foodlaw.cn)was established; China's Food Safety Law magazine (bi-monthly) was launched and published 5 editions. New English table of contents and executive summary for each paper published have been added; the knowledge contest for Food Safety law was announced in	Annual progress report, on site visit, training evaluation. Tripartite program review of the progress and lessons learned. Monitoring mission	Progress reports and monitoring visits	UNDP NPC China Law Society	The government's willingness to accept policy recommendations is the key. The China Law Society intends to leverage its high standing and access to leaders to encourage adoption. High level officials will be engaged from the earliest research stages and in piloting and training to ensure their interest and acceptance.

				<p>June 2010 in major news media and is in process; establishment of experiment of food safety supervision mechanism is under preparation; Prize for food safety innovation Institution is in process; Field study on legal problems arising from food safety issues is under preparation; China Food Safety Law Summit will be held in August 2010.</p>				
	<p>3.3.2 New food safety law promoted and disseminated in partnership with civil society, especially to women's groups and local communities in pilot counties by Year 3</p>	0	<p>Women's groups (100 female cadres) will be trained and awareness on food safety raised among at least 1000 residents in the selected communities by year 3</p>	<p>Needs assessment conducted to examine women's awareness about the new food safety law, knowledge about nutrition and their need for food safety services/support , a training manual on provision of rights-based services for women against food safety disputes developed for local social workers and women's federation staff</p>	<p>baseline reports , training manual</p>	<p>Training reports</p>	<p>UNESCO ACWF</p>	<p>National counterparts are able and have capacity to organise training in the geographical, cultural and societal contact of the pilot counties</p>

	3.3.3 The establishment and testing of a documented food emergency response system and a food complaints system that are operational at county-level by Year 3	0	Target: Systems in place and operational at county-level by Year 3.	Baseline survey has been finished, Relevant information analysed. Survey report submitted. Draft guidelines of food safety emergency response system and food complaints system developed	Model draft available.	Literature search, Workshops and seminars.	WHO	All participating counties have the capacity to participate in the trial because their systems are adequately developed by the same time in Year 3. To ensure this, work with China CDC who have a food surveillance system. <ul style="list-style-type: none"> ■ Local government support
	3.3.4 Training of trainers targeting regulators and food producers and traders on the new food safety law conducted at county-level by Year 3.	0	Training of trainers conducted at provincial-level by Year 1 and at county level by Year 3.	Baseline survey has been completed. Survey report submitted. Draft training material developed.	from project activities Survey report and baseline data reports available.	questionnaire, on site visits and local seminars	WHO	Ensure collaboration occurs between counterparts. Use Working group on food safety. <ul style="list-style-type: none"> ■ The sample village are all accessible ■ The local authority

								support the survey
JP Outcome 4 National child nutrition and food safety policies, guidelines, regulations and standards are revised according to results of the pilots and lessons learned are scaled up nation-wide								
4.1 Development and printing of advocacy package for in-home food fortification	The advocacy package for in-home food fortification developed.	None	Advocacy package for food fortification especially covering high risk groups	advocacy package for in-home food fortification developed	Finalised versions of advocacy package	N/A	UNICEF	Continued interest by current working group
4.2 Media training of at least 100 journalists in pilot counties	At least 10% increase in articles on food security, safety and nutrition in target areas by Year 3 (Baseline: Media review through sampling in selected pilot counties)	Baseline assessment and training needs analysis conducted,	100 journalists from target areas trained and the impact assessed.	Baseline survey on media situation conducted, analysis of journalists' needs for training on reporting issues related to nutrition, food safety and security conducted, a journalist manual developed with information on nutrition, food safety and security as well as reporting skills. 100 journalists from six pilot counties and provincial capitals in Guizhou, Yunnan and	Baseline survey report, needs assessment report, training manual and training reports	Site visits, media survey, training workshops, progress and assessment reports by national counterpart	UNESCO Training centre of SARFT	Journalist professionalism to be improved Ensure the sustainability of the training

				Shaanxi provinces trained. News reports on food safety and nutrition being collected and final assessment being developed.				
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c. Joint Programme Results Framework with financial information

Definitions on financial categories

- **Total amount planned for the JP:** Complete allocated budget for the entire duration of the JP.
- **Estimated total amount committed:** This category includes all amount committed and disbursed to date.
- **Estimated total amount disbursed:** this category includes only funds disbursed, that have been spent to date.
- **Estimated % delivery rate:** Funds disbursed over funds transferred to date.

Programme Outputs	Activity	YEAR			UN AGENCY	RESPONSIBLE PARTY	ESTIMATED IMPLEMENTATION PROGRESS			
		Y1	Y2	Y3			Total Amount Planned	Estimated Total Amount Committed	Estimated Total Amount Disbursed	Estimated % of Delivery Rate of Budget
JP Outcome 1 Policy decisions and targeting are informed by reliable and up-to-date evidence on the magnitude, distribution and causes of undernutrition in China										
1.1 Food security situation in pilot counties understood by policymakers	1.1.1 Comprehensive food security and vulnerability analysis completed in each of the six counties by Year 1	X			WFP	MoA and CAAS	115,000	115,000	106,574.35	92.7
	1.1.2 Data on anaemia, iron, vitamin A, zinc, folic acid, vitamin B12 deficiencies for children and women available from a micronutrient survey of the six pilot counties documented and available by Year 1	X	X		UNICEF	MOH	192,000	96,000	107,057	111.5
1.2 Targeting and monitoring improved through availability of an improved national database on nutritional status of women and children	1.2.1 Nutrition and child feeding data incorporated into maternal and child health information systems by Year 2	X	X		WHO	MOH	101,250	32,936	32,936	100
JP Outcome2 Undernutrition and micronutrient deficiencies reduced among poor women and children in selected demonstration counties										
2.1 Exclusive	2.1.1 Complementary food	X	X		UNICEF	MOH	412,150	372,150	303,923	81.7

breastfeeding increased and improved quality of complementary food with micronutrient supplements	supplements in 3 counties reaching 9000 children aged 6-24 months and prenatal supplements reach 9000 women of child bearing age respectively by Year 3									
	2.1.2 (A) Community based breastfeeding support model available (B) 30-50% increase in exclusive breastfeeding for six months (baseline to be determined by initial survey). (C) 30% of women's groups begin campaigns (baseline is no groups currently campaigning)	X	X		WHO	MOH	281,250	94,415	62,069	65.7
	2.1.3 (A) A national plan on the Code on Marketing of Breast Milk Substitutes is documented by Year 3 (baseline is that it is not currently included in a national plan). (B) The code has been the basis of training on breastfeeding in 100% of those hospitals taking up the Baby Friendly Hospital Initiative nation-wide.	X	X		WHO	MOH	75,000	53,795	27,868	51.8
	2.1.4 Increase by 25% the number of businesses providing the right to and capacity for continuing breastfeeding upon return to work in the pilot counties by Year 3	X	X	X	ILO	ACFTU	137,000	92598.245	41923.51	34,9
2.2 Household dietary intake of micronutrient-rich, locally-available food increased in 3	2.2.1 Increasing by 30% proportion of diet made up by locally-available, micronutrient-rich foods in pilot areas by Year 3 (Baseline will be determined from joint survey)	X	X		FAO	MOA	1,048,600	283,420	141,454	19.1

pilot counties										
2.3 National plan for food fortification in place and implemented	2.3.1 Food fortification plan developed and approved. Baseline: there is currently no plan; Indicator: approved plan by Year 3	X	X	X	UNICEF	MOH	155,000	127,150	57,150	44.9
JP Outcome 3 Food-related illness reduced through safer food production and preparation for children										
3.1 Food production for children made safer in pilot areas	3.1.1 4-6 enterprises in 2 provinces trained in HACCP trained by year 3	X			UNIDO	CNIS-AQSIQ	543,000	341,860	211,849	50
	3.1.2 Four laboratories trained in standardization and management capacity related to food safety and quality by Year 3	X								
	3.1.3 Thirty inspectors trained in standardization and management capacity related to food safety and quality by Year 3	X								
	3.1.5 Management plans and policies advise developed/ formulated for target sectors in pilot areas by Year 3	X								
	3.1.4 Guidelines on safe and healthy work processes including chemical safety in industries producing child nutrition products developed, applied in 8 businesses and used and enforced by 50 OSH inspectors by Year 3.	X			ILO	SAWS	313,000	89,586.24	57,250.1	32
3.2 Handling and preparation of food for infants and children made safer	3.2.1 Selected primary and secondary schools, hospitals/departments of gynaecology obstetrics and paediatrics, and women's association in the six counties trained or made aware of WHO's Five Keys to Safer Food, by Year 3.	X			WHO	MOH	360,000	120,000	64,000	26.7
	3.2.2 Collection of national policy documents and curriculum materials; needs analysis of rapid assessment of teaching and learning methods and materials in health and nutrition	X	X	X	UNESCO	MoE School of Public Health of China Central South University	211,477	130,112	112,112	67.1

	education in schools; consultation meetings with experts, teachers, parents and community members and development of outline for supplementary materials									
3.3 New national food safety law successfully implemented	3.3.1 300 government officials, 500 legal personnel and 500 employees will be trained in the new food safety law. Formation of industry CSR association. Government implements suggested policy changes.	X	X	X	UNDP	CICETE	450,000	251,791.28	174,511.53	49.7
	3.3.2 Taking into account the results and findings from the survey, form expert teams, develop training materials, and organize training of trainers. Raising awareness through rights-based training for women's groups and local communities on the new food safety law.		X		UNESCO	ACWF	90,000	48,000	39,300	60.1
	3.3.3 The establishment and testing of a documented food emergency response system and a food complaints system that are operational at county-level by Year 3	X	X	X	WHO	MOH	200,000	130,000	65,000	40.6
	3.3.4 Training of trainers targeting regulators and food producers and traders on the new food safety law conducted at county-level by Year 3.	X	X	X	WHO	MOH	70,000	25,000	12,000	26.7
JP Outcome 4 National child nutrition and food safety policies, guidelines, regulations and standards are revised according to results of the pilots and lessons learned are scaled up nation-wide										
4.1 Advocacy package to convince of need to scale up to higher level	10,000 copies of an advocacy package produced and meetings held at national and participating provincial and county levels by Year 3	X	X	X	UNICEF	INFS, China CDC	135,850	98,850	62,850	63.6
4.2 Media training of	Drawing on conclusions from other	X	X		UNESCO	UNESCO	90,000	74,200	58,320	72.9

at least 100 journalists in pilot counties.	components of the program and in consultation with other agencies, develop media training curriculum. Survey existing media reports through sampling in selected pilot counties. Conduct a planning meeting, identify how to engage media in relation to those advocacy issues previously determined. In cooperation with UNICEF, conduct media trainings and assess the impact of training.					SARFT Training Center				
WFP management fee							13,720	8,050	7,460	92.7
FAO management fee							68,600	51,800	9,254	19.1
ILO management fee							31,500	22,400	6,488	28.9
UNDP management fee							29,439	19,626	9,597	48.9
UNICEF management fee							62,650	48,590	35,707	73.5
UNESCO management fee							27,403	21,490	14,681	68.3
UNIDO management fee							38,010	23,946	11,798	50
WHO management fee							113,540	75,740	23,644	31.2
Project preparation / formulation (funds administered by UNDP)							20,000	20,000	20,000	100
Programme Coordinator (funds administered by WHO)							240,000	160,000	120,000	75
PMO budget (funds administered by WHO)							90,000	60,000	30,000	50
RC Office (funds administered by UNDP)							60,000	40,000	40,000	100
Total Planned Budget without management fee							5,607,477	2,627,137	1,801,951	43.9
Management fee for MDGF (7%)							392,523	183,900	118,629	64.5
Total							6,000,000	2,811,037	1,928,087	43.9