

## Section I: Identification and JP Status Improving nutrition and food safety for China's most vulnerable women and children

Semester: 1-12

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 1-12

Programme Duration

Official Starting Date 2009-12-04

Participating UN Organizations

- \* 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	\$1,040,896.00
ILO	\$477,327.00
UNDP	\$563,890.00
UNESCO	\$416,169.00
UNICEF	\$951,203.00
UNIDO	\$577,383.00
WFP	\$207,120.00
WHO	\$1,766,012.00
Total	\$6,000,000.00
Total Budget Commited To Date	
FAO	\$738,882.00
ILO	\$392,572.00
UNDP	\$445,863.81
UNESCO	\$358,117.12
UNICEF	\$952,273.00
UNIDO	\$525,799.18
WFP	\$174,689.00
WHO	\$960,198.00
Total	\$4,548,394.11
Total Budget Disbursed To Date	
FAO	\$586,547.00
ILO	\$299,927.00



UNDP	\$403,552.81
UNESCO	\$341,618.18
UNICEF	\$694,150.00
UNIDO	\$399,612.93
WFP	\$133,820.00
WHO	\$730,913.00
Total	\$3,590,140.92

#### **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 for each programme as per following example:

Please use the same format as in the previous section (budget summary) to report figures (example 50,000.11) for fifty thousand US dollars and eleven cents

Type	Donor	Total	For 2010	For 2011	For 2012
iype	Dolloi	iotai	1 01 2010	1 01 2011	1 01 2012

#### **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.

## **Beneficiaries**

Beneficiary type	Targetted	Reached	Category of beneficiary	Type of service or goods delivered
Individuals	280	140	Citizens/Men	Behaviour Change Communication Initiatives (Hand Washing, Etc)



Beneficiary type Individuals	<b>Targetted</b> 570	Reached 460	Category of beneficiary Ciudadanas/mujeres
Individuals	50	50	Citizens/Men
individuals	50	50	Ciudadanas/mujeres
individuals	800	3,000	Children Older Than 6/Male
individuals	800	3,000	Children Older Than 6/Female
organizations	3	3	National Institutions
organizations	42	42	Local Institutions
organizations	5	5	Food Producers
organizations	0	0	Health Centers
households	1,000	1,121	Families
individuals	36	36	Local Institutions
individuals	2,252	2,428	Food Producers
individual	20	30	Local Institutions
individual	1,800	1,900	Ciudadanas/mujeres
individual	1,800	1,890	Schools
individuals	400	350	Health Workers/Men
individuals	300	300	Food Producers

#### Type of service or goods delivered

Behaviour Change Communication Initiatives (Hand Washing, Etc)

Capacity to Collect, Analyze Data and/or Peoduce Analysis

Homestead Food Production and Diversification

Homestead Food Production and Diversification

Homestead Food Production and Diversification

Behaviour Change Communication Initiatives (Hand Washing, Etc)



Beneficiary type Individuals	<b>Targetted</b> 50	Reached 50	Category of beneficiary Citizens/Men
individuals	50	50	Ciudadanas/mujeres
individuals	800	3,000	Children Older Than 6/Male
individuals	800	3,000	Children Older Than 6/Female
organizations	3	3	National Institutions
organizations	42	42	Local Institutions
organizations	5	5	Food Producers
organizations	0	0	Health Centers
households	1,000	1,121	Families
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Homestead Food Production and Diversification

Behaviour Change Communication Initiatives (Hand Washing, Etc)



## **Section II: JP Progress**

## 1 Narrative on progress, obstacles and contingency Measures

Please provide a brief overall assessment (1000 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

#### Pleases describe three main achievements that the joint programme has had in this reporting period (max 100 words)

- 1 Policy makers were briefed on the status of food security in sample areas with evidence-based and reliable data from baseline survey. JP supported MOH to publish "National Report on Nutritional Status of Children Aged 0-6 Year (2012)".
- 2 The JP suggestions on maternity protection were reflected in the newly issued National Regulation on Special Labour Protection for Women Workers, P.R of China.
- 3 Three food enterprises have attained HACCP certification and one pilot laboratory was accredited to ISO 17025. Expert advice on amending the Food Safety Law was submitted to the Office of the State Council Food Safety Commission.

#### **Progress in outcomes**

Outcome 1: The quality baseline survey report was published on the status of food security in sample areas with evidence-based data and the policy makers were briefed accordingly. JP supported MOH to publish "National Report on Nutritional Status of Children Aged 0-6 Year (2012)".

Outcome 2: Trainings conducted on Infant and Young Child Feeding and Baby Friendly Hospital Initiative. Final draft of the revised code is for public comments. The policy recommendations for the breastfeding at the workplaces fit into the national regulation.

Outcome 3: Various trainings conducted to build the capcity for safer food preparation at the food enterprise level and household level.

Outcome 4: E-journalist group is established. Number of media reports on nutrition, food safety and security increased over 10% in the three pilot provinces

## Progress in outputs

- Output 1.1.1 WFP/MOA: The data collection started for the evaluation survey on comprehensive food security and vulnerability situation in the pilot counties
- Output 1.2.1 WHO/MOH: The national nutrition indicator assessment conducted and data collection tool developed.
- Output 2.1.2 WHO/MOH: The local food research conducted and guidelines for daily food intakes based on the local food sources and national guidelines developed. The local food recipes distributed and local health staff training on IYCF conducted.
- Output 2.1.3 WHO/MOH-CIP: The final draft of the revised code was posted on the website for public comments. The joint UNICEF/WHO/UNFPA comments on the draft Code developed and shared with MOH. The national BFHI re-assessment tool developed and tested. The training workshop on BFHI conducted
- Output 2.1.4 ILO/ACFTU: Research Report on Maternity Protection in Wuding County, Yunnan Province was finalized. Capacity building on maternity protection organized for national and local Trade Unions. The ILO Maternity Protection Resource Package has been translated into Chinese and shared with Chinese counterparts as well as other UN agencies. Wuding Trade Unions has developed brochure on maternity protection to be distributed in Wuding enterprises.
- Output 2.2.1 FAO/MOA: Agri-techniques training material refinement and farmers training completed. Nutrition education materials developed and training in progress.
- Output 3.1.1 UNIDO/CNIS-AQSIQ: Five enterprises have been trained in HACCP process. Three of those have attained HACCP certification with an additional one currently in the application process.
- Output 3.1.2 UNIDO/CNIS-AQSIQ: Four pilot laboratories have received ISO 17025 training. Three of them have applied for accreditation, of which one (Dali Inspection Centre) has already been accredited.
- Output 3.1.3 UNIDO/CNIS-AQSIQ: Three of four trainings have taken place with 30 thirty total participants.



Output 3.1.4 ILO/SAWS: The Safety Standardization Guide for Food Producing Enterprises was finalized. The Training Manual for Work Safety Inspectors was finalized. Training on work safety was conducted for pilot children's food production enterprises and work safety inspectors. Work safety regulations for the pilot enterprises have been established in four pilot enterprises, and relevant training on how to smoothly operate the regulations was held in the enterprises. Workplace hazards and risks identified in the four factories have been corrected.

Output 3.1.5 UNIDO/CNIS-AQSIQ: Policy advice has been developed and the workshops planned to disseminate this advice.

Output 3.2.1 WHO/MOH-NCHIS: Completed the publicity on food safety knowledge and questionnaire survey for women and children.

Output 3.2.2 UNESCO/MOE: Piloting the integration of nutrition and food safety education in school teaching and learning from November 2011 to July 2012 in 20 primary schools and 10 junior secondary schools in 2 pilot counties. Assessment of the pilot study conducted in both pilot counties. First hand data, information and practices on how to integrate nutrition and food safety education in schools made available to inform policy making.

Output 3.3.1. UNDP/CICETE:

- 1. 240 senior judges were trained on 'Criminal Regulation of Food Safety Issues' on 6 March 2012.
- 2. Expert advice on amending the Food Safety Law and recommendation of organizing the Food Safety Awareness Raising Week in June 2012 were submitted to the Office of the State Council Food Safety Commission;
- 3. The Food Safety Law Research Center supported by the project was entrusted by the Ministry of Health to draft the Implementation Measures of the Food Safety Law.
- 4. The annual report of China's Food Safety Rule of Law (2011) was compiled and published.
- 5. A new China Food Safety and Rule of Law Forum was established and the first lecture on food safety and rule of law were organized.
- 6. Entrusted by the General Administration of Quality Supervision, the Food Safety Law Research Center supported by the project started the drafting of the Supervision System of Manufacturers of Infant Formula Milk Powder and had achieved positive progress.
- 7. The food safety law journal editions 10, 11, 12 and 13 were compiled and published.
- 8. The food safety law website was regularly updated.

Output 3.3.2 UNESCO/ACWF: A contract was signed with ACWF to collect best practices on effective ways for promoting food safety at the grass-roots level.

Output 3.3.3 WHO/ MOH-NCHIS: drafted the schemes to improve the food safety emergency response system and food complaint system and preparing for the drill exercise.

Output 3.3.4 WHO/ MOH-NCHIS: printed training manuals for the food safety regulators and food business managers and preparing for pilot training

Output 4.1 UNICEF/MOH

Output 4.2 UNESCO/SARFT: More than 50 news reports from trained journalists collected for a multi–media kit for experience sharing among journalists. A handbook titled "Professional Reporting on Food Safety and Nutrition" being developed based on the project training material. An E-group of journalists created.

## Measures taken for the sustainability of the joint programme

- 1 Work with the local government and institutions to get their buy-in; summarize the intervention model and experience.
- 2 The establishment of the new institution and work mechanism, i.g. "the food safety law research center", an E-group of journalists.
- 3 Several food enterprises received HACCP certification and ISO 17025 accreditation resulted from the trainings.
- 4 Capacity built after various trainings.

## 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



#### What are the causes of these difficulties?

Other. Please specify

- 1. Some national counterpart's staff change/temporary lack of project leadership slightly delays the project implementation. Their busy schedule affected the timely communication.
- 2. The budget for some agency is not enough to conduct the planned activities.
- 3. For some component, multi-agency coordination is challenging.

#### Briefly describe the current difficulties the Joint Programme is facing

Final evaluation synchronizing with the implementation of some of the programme activities will be a challenge.

#### Briefly describe the current external difficulties that delay implementation

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

- 1. Strengthen coordination and communication with national counterpart. Report difficulties timely to PMO for help coordination.
- 2. Well plan, organize and coordinate the final evaluation and on-going activities implementation.
- 3. Work with local government to help strengthen multi-agency coordination.

## 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 discussion on issues concerning joint programme coordination and implementation.
- -Regular UN inter-agencies meeting
- -A new National Programme Coordinator was assigned in March 2012, which strengthens the regular communication with UN Coordinator to strengthen the communication and coordination between the national counterpart agencies and UN agencies.
- -UNRCO provides coninuous support to JPs



-ILO and UNIDO have been working together for joint activities.

Output2.1.4

The ILO reports, such as the baseline report on maternity protection at enterprises in Wuding County, Yunnan Province, and the Chinese version of the Maternity Protection Resource Package, have both been shared with UN counterparts including UNICEF and WHO.

#### Output3.1.4

ILO and UNIDO who provide technical support for the same pilot enterprises, regularly have inter-discussions to ensure smooth project implementation. They also tried to conduct joint factory visits and training for the sake of enterprises' convenience. ILO and UNIDO also planned to hold a joint wrap-up at the end of the project.

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

Indicators	Baselin e	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	0		
Number of joint analytical work (studies, diagnostic) undertaken jointly by UN implementing agencies for MDG-F JPs	0	0		
Number of joint missions undertaken jointly by UN implementing agencies for MDG-F JPs	0	0		

JPMC meeting was held on 2 May 2012

## 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 Management: budget

Management: service provision Management: other, specify

-Project design and planning.

-Implement the project, like running trainings and other activities.



#### Who leads and/or chair the PMC?

WHO as the UN Co-Chair MOH as the National Co-Chair

## Number of meetings with PMC chair

two

## 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

Comments to the Secretariat: Civil society's involvement differs among different agencies

## Are the citizens 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 are the citizens involved?

Management: other, specify

Under 3.3.2 citizen beneficiaries are involved in determining effective ways for promoting food safety, as well as providing feedback on the project which will contribute to the design of future works

Comments to the Secretariat: Citizen's involvement differs among different agencies

## Where is the joint programme management unit seated?

National Government

The National Center for Health Inspection and Supervision hosts the programme management office.



#### **Current situation**

A new National Programme Coordinator was assigned in March 2012, which strengthens the programme coordination and communication.

## 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;
- •Eacilitate the promotion of MDG-F and its programmes;
- •Eacilitate 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 adovacy and communication efforts outlined in the JP and/or national strategy contributing towards achieving?

Increased awareness on MDG related issues amongst citizens and governments

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

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

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

Key moments/events of social mobilization that highlight issues

Media outreach and advocacy

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
Local citizen groups
Private sector
Academic institutions 1
Media groups and journalist 1
Other 2 (Governmental organization)

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
Household surveys
Use of local communication mediums such radio, theatre groups, newspapers
Open forum meetings
Capacity building/trainings
Others

Others: use of local county television



## **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

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



## **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 3708

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 12000

No. Urban

No. Rural 12000 No. Girls 5550 No. Boys 6450

## 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 % 8.8

## 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 19.2

#### Comments

## 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

Urban

Rural Girls

Pregnant Women

Boys

## **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 thousands of local citizen

Urban Rural

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

Urban

Rural

Girls

Pregnant Women

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 re	evised with t	he support of	the
programme						

## **Policies**

National Local

Laws

National

Local

**Plans** 

National 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 Local

Total

## Joint Programme M&E framework –Update for the 1st half year 2012

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)	Responsibilit ies	Risks & assumptions
JP Outcome 1 in China	Policy decisions and to	argeting are in	formed by relia	able and up-to-date eviden	ice on the magni	tude, distributio	n and causes of	undernutrition
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	The baseline survey report published	The activity is completed.	Publish of survey report and briefing workshop held	Report presented	WFP CAAS-MOA	None.  Completed finished
	·	Pls refer to the baseline report.	Evaluation report completed and policy makers informed	The questionnaire has been developed by broad consultation with national experts. The data collection in the field started.	Questionnair e developed	Updated every month	WFP CAAS-MOA	There is no major weather disasters to impede the data collection.
	1.1.2 Nutritional status information on women and children in 3 intervention counties reported to policy makers	informatio n not available.	The information on micronutrie nts deficiency of women and children	Samples randomly chosen. Information on Dietary intake and IYCF collected. Veins blood of women and children collected for laboratory test of micronutrients deficiency The	Questionnair e interview and laboratory test results.	Nutrition status survey analysing anthropomet ric, micronutrien ts status and IYCF and	UNICEF Institute of Nutrition and Food Safety, China CDC	The laboratory tests have not good quality control

			collected.	laboratory result is finished. The baseline survey report is in finalizing.	Development	basic child health indicators in August 2010 and August 2011 Questionnair es Vein blood collection to have laboratory tests of the nutrients,	W/IO	
1.2.Targeting and	Nutrition and child feeding data	No data available	Data available	Baseline was survey conducted in November	Baseline coverage	Baseline and end line	WHO – support	Assumption: WHO and
monitoring	available for the		and	2010.	survey	household	standardisati	UNICEF, CIP
improved	six pilot counties		incorporate	Baseline household	implemented	surveys	on and	and CDC, agree
through	and incorporated		d	survey data and report	. Indicators of	(2010 and	conduct of	on a common
availability of	into national			developed and shared	national	2012)	survey in 3	survey
improved	surveillance			with government	nutrition	,	control	instrument.
national	systems.			The national nutrition	database		counties;	INFS agrees to
database on				data base improving is	compared		support	adjust national
nutritional				on going	with standard		indicator	database
status of				the national nutrition	WHO		comparison.	Risk:
women and				indicator assessment	indicators.		UNICEF -	Use of
children				conducted and data	The MOH		support	different
				collection tool	national		conduct of	survey
				developed	report on		survey in 3	instruments.
					child		intervention	Parallel .
					nutrition		counties.	systems keep
					launched,			existing

ndernutrition and mid	cronutrient de	ficiencies reduc	ced among poor women ar	nd children in sel	ected demonstr	ation counties	
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	To be assessed	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.	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.	Regular report from provincial level	Report form and telephone interview the collected parents Every 6 months	UNICEF	Rumours on fortified complementar y food will impact coverage and compliance of complementar y food supplement
2.1.2 Data on infant food availability and on infant feeding preferences, knowledge and practice coverage available.	No data available	Data available	Baseline coverage survey conducted in November 2010. Feeding preference survey conducted in November 2010. Data on infant feeding preference available and analysis report	Baseline coverage survey implemented . Feeding preference studies conducted.	Baseline and endline household surveys (2010 and 2012) Feeding preference studies	WHO – support standardisati on and conduct of survey in 3 control counties; support local	Assumption: Necessary tools and external technical support can be made available. Risks:
	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  2.1.2 Data on infant food availability and on infant feeding preferences, knowledge and practice coverage	2.1.1 To be assessed 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  2.1.2 Data on infant food availability and on infant feeding preferences, knowledge and practice coverage	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  2.1.2 Data on infant food availability and on infant feeding preferences, knowledge and practice coverage  To be assessed At least 95% of the target children receive CFS one time. At least 80% of children who received CFS CFS onsume CFS more than 3 times per week.	2.1.1 Complementary food supplements(CFS) in 3 counties reaching 9000 children aged 6-24 months by Year 3. The coverage of CFS Quality of product  2.1.2 Data on infant feeding preferences, knowledge and practice coverage available.  2.1.1  To be assessed of the target children for assessment developed, Procurement of supplements finished, training materials developed. Ying Yang Bao and communication communication 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 in November 2010. Data on infant feeding preference available	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  2.1.2 Data on infant food available infant food available.  2.1.2 Data on infant feeding preferences, knowledge and practice coverage available.  2.1.2 Data on compliance of complements finished, training materials developed. Ying Yang brovincial level  At least 95% of the target for assessment developed, Procurement of supplements finished, training materials developed. Ying Yang Bao and communication communication communication 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 in November 2010. Feeding preference survey conducted in November 2010. Data on infant feeding preference available and analysis report studies conducted.	2.1.1 Complementary food supplements(CFS) in 3 counties reaching 9000 children aged 6-24 months by Year 3. The coverage of CFS. Quality of product  2.1.2 Data on infant feeding preferences, knowledge and practice coverage available.  At least 95% of the target children receive CFS one time. At least 80% of children receive CFS one time. At least 80% of children received CFS one time. At least 80% of children who and telephone interview the collected parents Every 6 months with children aged 6-24 months by Year 3. The coverage of CFS.  Quality of product  2.1.2 Data on infant feeding preferences, knowledge and practice coverage available.  At least 95% of the target for assessment developed, Procurement of supplements finished, training materials developed. Ying Yang Bao and received communication communication communication communication campaigns at county, township and village levels are conducted.  Data available available survey conducted in November 2010. Peeding preference survey conducted in November 2010. Data on infant feeding preference available and analysis report studies	Complementary food supplements(CFS) in 3 counties reaching 9000 children aged 6-24 months by Year 3. The coverage of CFS.  Quality of product  2.1.2 Data on infant food availability and on infant feeding preferences, knowledge and practice coverage available.  Sassessed of the target children developed, Procurement of supplements finished, training materials developed. Ying Yang Bao and communication communication communication campaigns at county, township and village levels are conducted in November 2010.  Data on infant feeding preferences, knowledge and practice coverage available.  Of the target children developed, Procurement of supplements finished, training materials developed. Ying Yang Bao and communication communication communication communication campaigns at county, township and village levels are conducted in November 2010.  Data an infant feeding preference survey conducted in November 2010.  Data on infant feeding preference available and analysis report  Of the target children receive CFS one tinstend developed, Procurement of supplements finished, training materials developed. Ying Yang Bao and communication communication communication communication campaigns at county, township and village levels are conducted in November 2010.  Feeding preference survey conducted in November 2010.  Data on infant feeding preference available and analysis report studies  Of the target developed. Ying Yang Bao and communication survey conducted in November 2010.  Data on infant feeding preference available and analysis report survey in 3 preference conducted.

			The local food research conducted and guidelines for daily food intakes based on the local food sources and national guidelines developed The local food recipes distributed and local health staff training on IYCF conducted	The local food research conducted  The local food recipes and calendars available	Q4 2010  Conducted in Q4 2011  End line survey proposal developed		support cannot be made available.
2.1.3 Nation Code of ma of breast m substitutes	rketing available ilk	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 draft posted on the website for public comments. The joint UNICEF/WHO/UNFPA comments on the draft Code developed and shared with MOH.  The national BFHI re assessment tool developed and tested.  The training workshop on BFHI conducted, and the media workshop	The final version will be available  The revised final version is available.  The report will be available by the end of Aug  The media report on BF will be available.	By the end of 2011  By March 2012  By the end of 2011	WHO MOH, CIP	The revised code will be approved by the government ministries

CODE/BF and WBW are planned from 1-3 Aug 2012  2.1.4 Increase by 25% the number available policies and National policies and National policies and National policies and Naternity Protection in report both es and	ILO provides technical	Assumption:
of businesses providing the right to and capacity for continuing breastfeeding upon return to work in the pilot counties by Year 3.  Interviewed and improved.  Interviews; providing the right to and capacity for continuing breastfeeding upon return to work in the pilot counties by Year 3.  Interviewed and improved.  Interviews; protection of the report will be available in August;  Interviews; progress report by local unions.  Interviews; progress available.  Interviews; progress report by local unions.  Interviews; progress available.  Interviews; progress report by local unions.  Interviews; progress available.  Interviews; progress report by local unions.  Interviews; progress available.  Interviews; progres available.  Interviews; progres available.  Interviews; progres available.  Interviews; progress available.  Interviews; progress available.  Interviews; progress available.  Interviews; progress availab	guidance, advice, training and advocacy materials to all project activities.  ACFTU and local trade unions implement project activities in accordance with local context.	initiatives on promotion of maternity protection will be developed by the ACFTU and local trade unions.  Risks: Workers organisation lack skills in collective bargaining for improving enterprise facilities and conditions for support of breastfeeding at work.

				agencies. The Package will be printed out and published in August;  Wuding Trade Unions has developed brochure on maternity protection to be distributed in Wuding enterprises. There are 50 questions and answers regarding maternity issues in the brochure.  Wuding Trade Unions is producing a video to advocate maternity protection at work.	Video will be available in Oct-Nov 2012.			
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.	As per baseline survey reports	Target: increase 30% by Year 3.	The baseline survey and supplementary baseline survey completed;  Supply of agri-inputs to local farmers in the project counties completed;  Agri-techniques training material refinement and training finished, reporting in progress;  Nutrition education	Survey reports;  Published training materials and guidelines;  Project progress reports;  M&E protocols.	Household /individual questionnair es; Field visits and M&E missions; Project activity report at the end of the assignment;	FAO FECC/MOA China CDC	The project end-line survey has to be implemented right after the completion of 1 cycle of intensive nutrition education at community level, the impact of nutritional

				materials development finished and training in progress.				intervention in terms of improving dietary diversity may not be fully captured in survey results.
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 fortificatio n	A plan for addressing micronutrie nts 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
3.1 Food production for children made safer in pilot areas	3.1.1 Pilot enterprises trained in HACCP process by Year 3	0 Enterprises Trained	5 Enterprises Trained	Training materials have been compiled  100% HACCP training completed in coordination with ILO and SAWS. 4 of 5 enterprises have received HACCP certification.	Monitoring reports from CNIS and UNIDO evaluations on the project sites.	Monitoring reports/spot evaluations carried out by project team; list of training participants	UNIDO CNIS-AQSIQ	Assumed long-term benefits of HACCP hard to measure as project ends in the fall.

3.1.2 Increase in the capacity of	0 Laboratorie	4 Laboratories	Training materials compiled	Monitoring reports from	Monitoring reports/spot	UNIDO	Yuxi plans to apply for
pilot laboratories to perform food safety monitoring via ISO 17025 accreditation training by Year 3.	S		100% trainings complete. 2 of 4 inspection centres in accreditation application process. Dali has received accreditation. Yuxi will not apply because the centre is moving facilities next year.	CNIS and UNIDO evaluations on the project sites.	evaluations carried out by project team; list of training participants	CNIS-AQSIQ	accreditation next year after moving to new facilities. The centre will not have the support of CNIS and UNIDO at that time. Centres in application may not receive accreditation, or need to make minor changes before receiving.
3.1.3 Increase in the capacity of food safety/quality inspectors to carry out food safety monitoring by Year 2	0 Inspectors trained	30 Inspectors trained	Training materials compiled  75% training complete. Final training will be held this summer.	Monitoring and evaluation reports from CNIS;	Monitoring reports after each training is completed. List of training participants.	UNIDO CNIS-AQSIQ	Only aspect of programme implementatio n that has not been monitored first-hand by UNIDO.

3.1.4 Guidelines	0	4	The Safety	Published	Training	ILO	CNIS reports the trainings are on schedule and have gone well.
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.  50 OSH inspectors trained to provide quality services to the businesses	0	50	Standardization Guide for Food Producing Enterprises has been finalized and shared with OSH officials, inspectors, and pilot enterprises;  The Training Manual for Work Safety Inspectors has been finalized and shared with OSH inspectors in pilot provinces;  Training on work safety has been conducted for pilot children's food production enterprises;  Training workshop for work safety inspectors have been held in Guizhou and Yunnan Provinces;	training materials and the guideline.  Established regulations on work safety in four pilot enterprises.  Factory visit will be carried out to check the improvement s of workplace practices.	reports, enterprise regulations, training guide books were submitted.	SAWS	enterprises are willing to cooperate on improvement of OSH management.

			for the pilot enterprises have been established in four pilot enterprises, and relevant training on how to smoothly operate the regulations has been held in the enterprises;  Workplace hazards and risks identified in the four factories have been corrected under the direction of the OSH specialist.				
3.1.5 Management plans and policy advice developed for target sectors in pilot areas in Year 3	No such manageme nt plans or policy advice.	Create managemen t plans and disseminate policy advice for two pilot provinces	No management plans have been created. Policy advice from participating organizations and CNIS and UNIDO has been developed.	Policy advice from participating enterprises attained. Policy discussions with CNIS held. Policy advice disseminatio n workshops are planned for the fall.	Reports from enterprises after they finished HACCP training.	UNIDO CNIS-AQSIQ	Governments are willing and committed to developing management plans; management plans do not overlap with any other current policy developments. Good relations with

								counterparts will be key.
3.2 Handling and preparation of food for infants and children made safer	3.2.1 Selected primary and secondary schools, hospitals/departm ents 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.	0	primary and secondary schools, hospitals and women's association groups in the six counties trained by Year 3.	The publicity/IEC activities and survey for women and children completed	Report from project activities ,sur vey report and baseline data	questionnair e , 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 role coordinating agency on food safety in China. The sample village are all accessible The local authority support the survey
	3.2.2  At least 15 schools in each selected target counties will	Nutrition and food safety education not	1 To train principals and science/heal th teachers	Policy analysis and needs assessment on nutrition and food safety education conducted,	Annual progress report, policy analysis and field study	Site visits, school data provided by pilot schools	UNESCO	The capacity of local practitioners might be a challenge for

	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 3  (This target is under revision)	systematic ally planned and included in school teaching and learning and activities.	from 50 schools of each project counties in the use of supplement ary materials in classroom; 2 To support 15 schools of each county to pilot integration of nutrition and food safety education in school teaching and learning and activities	supplementary teaching and learning materials being developed	report, supplementa ry learning materials prepared and used, teacher training reports available			integrating nutrition and food safety education in school teaching and learning. Training workshops for teachers will help ensure they understand and adopt the 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.	N.A.	1) To promote the improvement of China's food safety law and its supportive regulations, rules and judicial interpretatio	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 <sup>th</sup>	Annual progress report, on site visit, training evaluation. Tripartite program review of the progress and lessons learned.	Progress reports and monitoring visits	UNDP  NPC  China Law Society	The government's willingness to accept policy recommendati ons is the key. The China Law Society intends to leverage its high standing and access to

ns. 2) To	Amendments to the	Monitoring		leaders to
strengthen	Criminal Law; Training on	missions		encourage
legal	food safety law is in			adoption. High
awareness,	process; China Food			level officials
legal	Safety Law			will be
knowledge	website(www.foodlaw.c			engaged from
and the	n)was established and			the earliest
ability of	regularly updated;			research
applying laws				stages and in
of the food	magazine (bi-monthly)			piloting and
safety law	was launched and			training to
enforcement	published 13 editions.			ensure their
agencies,	New English table of			interest and
operators	contents and executive			acceptance.
and	summary for each paper			•
consumers as	published have been			
well.	added; the first			
	nationalknowledge			
	contest for Food Safety			
	law was organized; The			
	food safety supervision			
	mechanism and food			
	safety innovation was			
	piloted in Shangluo City			
	of Shaanxi Province.;			
	The first China Food			
	Safety Law Summit was			
	organized in December			
	2011, the NPC Secretary			
	General Mr. Li Jianguo			
	and over 10 Vice			
	Ministers in food safety			
	regulation in China			
	attended and delivered			
	speech. In the first half			

(2042 II ( II )
of 2012, the following
was achieved.
(1) 240 senior judges
were trained on 'Criminal
Regulation of Food
Safety Issues' on 6
March. Judge Miao
Youshui, the Presiding
Judge and the Director-
General of the Second
Criminal Adjudication
Tribunal of the Supreme
People's Court were
invited to give lectures at
the training;
(2). Expert advice on
amending the Food
Safety Law and
recommendation of
organizing the Food
Safety Awareness
Raising Week in June
2012 were submitted to
the National Food
Safety Office of the
State Council;
(3). The Food Safety
Law Research Center
supported by the
project was entrusted
by the Ministry of
Health to draft the
Implementation

			Measures of the Food Safety Law.  (4). The annual report of China's Food Safety Rule of Law (2011) was compiled and published.  (5). A new China Food Safety and Rule of Law Forum was established and the first lecture on food safety and rule of law were organized.  (6). Entrusted by the General Administration of Quality Supervision, the Food Safety Law Research Center supported by the project started the drafting of the Supervision System of Manufacturers of Infant Formula Milk Powder and had achieved positive progress.				
3.3.2 New food safety law promoted and disseminated in partnership with civil society, especially to women's groups	0	Women's groups (100 female cadres) will be trained and awareness on food	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	baseline reports , training manual	Training reports	UNESCO ACWF	National counterparts are able and have capacity to orgnanise training in the geographical, cultural and

and local communities in pilot counties by Year 3		safety raised among at least 1000 residents in the selected communitie s by year 3	, 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				societal contact of the pilot counties
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.	The schemes to improve the food safety emergency response system and food complaint drafted and the drill exercise being prepared.	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.  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.	Training manuals printed and pilot training being prepared.	from project activities Survey report and baseline data reports available.	questionnair e, on site visits and local seminars	WHO	Ensure collaboration occurs between counterparts. Use Working group on food safety. The sample village are all accessible The local authority support the survey
	National child nutrition d are scaled up nation		ety policies, gui	idelines, regulations and s	tandards are rev	ised according to	results of the <sub>l</sub>	pilots and
4.1 Development and printing of advocacy package for in-home food fortification	The advocacy package for inhome 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

review through	and security conducted,	training	reports by	of the training
sampling in	a journalist manual	reports	national	
selected pilot	developed with		counterpart	
counties)	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			
	Shaanxi provinces			
	trained. News reports			
	on food safety and			
	nutrition being			
	collected and final			
	assessment being			
	developed.			



# Joint Programme Results Framework with financial information – Update for the 1<sup>st</sup> half year 2012

			YEAR				ESTIN	MATED IMPLEM	EMENTATION PROGRESS		
Programme Outputs	Activity	Y1	Y2	Y3	UN AGENCY	RESPONSIBLE PARTY	Total Amount Planned	Estimated Total Amount Committed	Estimated Total Amount Disbursed	Estimated % of Delivery Rate of Budget	
JP Outcome 1 Policy d	ecisions and targeting are informed by rel	iable a	nd up-	to-dat	e evidence on the	magnitude, distribu	tion and causes o	f undernutrition	n in China		
1.1 Food security situation in pilot counties understood	1.1.1 Comprehensive food security and vulnerability analysis completed in each of the six counties by Year 1	Х			WFP	MoA and CAAS	79,595	79,595	68,115	40%	
by policymakers	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	Х	Х		UNICEF	МОН	192,000	96,000	147,057	153.2	
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	Х	Х	Х	WHO	МОН	101,250	32,936	32,936	100	
JP Outcome2 Undernu	trition and micronutrient deficiencies redu	iced a	mong p	oor w	omen and childre	n in selected demons	tration counties				
2.1 Exclusive breastfeeding increased and improved quality of complementary food with micronutrient supplements	2.1.1 Complementary food 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	Х	X		UNICEF	МОН	412,150	372,150	372,150	100	
	2.1.2 (A) Community based	Х	Х	Х	WHO	МОН	281,250	94,415	62,069	65.7	

						T	T			
	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)									
	2.1.3 (A) A national plan on the Code on	Χ	Χ	Х	WHO	МОН	75,000	53,795	53,795	71.7
	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.									
	2.1.4 Increase by 25% the number of	Χ	Х	Χ	ILO	ACFTU	136,490	100,797	72,030	52
	businesses providing the right to and						,			
	capacity for continuing breastfeeding									
	upon return to work in the pilot									
	counties by Year 3									
2.2 Household	2.2.1 Increasing by 30% proportion of	Χ	Χ	Χ	FAO	MOA	1,040,896	738,882	586,547	79.4
dietary intake of	diet made up by locally-available,									
micronutrient-rich,	micronutrient-rich foods in pilot areas									
locally-available	by Year 3 (Baseline will be determined									
food increased in 3	from joint survey)									
pilot counties										
2.3 National plan for	2.3.1 Food fortification plan developed	Χ	Х	Х	UNICEF	MOH	155,000	127,150	112,093	88.2
food fortification in	and approved. Baseline: there is									
place and	currently no plan; Indicator: approved									
implemented	plan by Year 3		<u> </u>							
	elated illness reduced through safer food p						T			
3.1 Food production	3.1.1 4-6 enterprises in 2 provinces	Χ	Х	Χ	UNIDO	CNIS-AQSIQ	539,610.28	525,799.18	399,612.93	74
for children made	trained in HACCP trained by year 3									
safer in pilot areas	3.1.2 Four laboratories trained in	Χ	Χ	Χ			1			

	standardization and management capacity related to food safety and quality by Year 3 3.1.3 Thirty inspectors trained in standardization and management capacity related to food safety and quality by Year 3 3.1.5 Management plans and policies advise developed/ formulated for	X	x	X						
	advise developedy formulated for target sectors in pilot areas by Year 3  3.1.4 Guidelines on safe and healthy work processes including chemical safety in industries producing child nutrition products developed, applied	X			ILO	SAWS	309,610	273,701	210,822	68.1
3.2 Handling and preparation of food	in 8 businesses and used and enforced by 50 OSH inspectors by Year 3. 3.2.1 Selected primary and secondary schools, hospitals/departments of	Х			wно	МОН	360,000	173,029.1	148,339.67	85.7
for infants and children made safer	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.									
	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 education in schools; consultation meetings with experts, teachers, parents and community members and development of outline for supplementary materials	X	X	X	UNESCO	MoE School of Public Health of China Central South University	211,477	130,112	112,112	67.1
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.	Х	Х	Х	UNDP	CICETE	450,000	445863.81	403552.81	90.5

	Government implements suggested policy changes.									
	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	Х	X	Х	WHO	МОН	200,000	103,807.81	82,621.67	79.6
	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.	Х	Х	Х	WHO	МОН	70,000	182,775.54	141,116.67	77.2
JP Outcome 4 National nation-wide	l child nutrition and food safety policies, g	uidelir	ies, reg	gulatio	ns and standards	are revised according	to results of the	pilots and lesso	ns learned are s	caled up
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	Х	Х	X	UNICEF	INFS, China CDC	135,850	98,850	62,850	63.6
4.2 Media training of at least 100 journalists in pilot counties.	Drawing on conclusions from other 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	X	X		UNESCO	UNESCO  SARFT Training Center	90,000	74,200	58,320	72.9

UNICEF, conduct media trainings and assess the impact of training.				
WFP management fee	13,720	8,050	7,460	92.7
FAO management fee	68,096	68,096	42,546	62.5
ILO management fee	31,227	18074	18074	100
UNDP management fee	29,439	29439	27076	92.0
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	37,772.72	37,772.72	37,772.72	100
WHO management fee	113,540	113,540	113,540	100
Project preparation / formulation (funds administered by UNDP)	20,000	20,000	20,000	100
Programme Coordinator (funds administered by WHO)	240,000	206,335	206,335	100
PMO budget (funds administered by WHO)	90,000	66,843	36,712	54.9
RC Office (funds administered by UNDP)	60,000	40,000	40,000	100
Total Planned Budget without management fee	5,340,178	4,085,036	3,468,487	84.9
Management fee for MDGF (7%)	383,848	345,052	296,857	86.0
Total	6,000,000	4,430,088	3,765,343	85.0