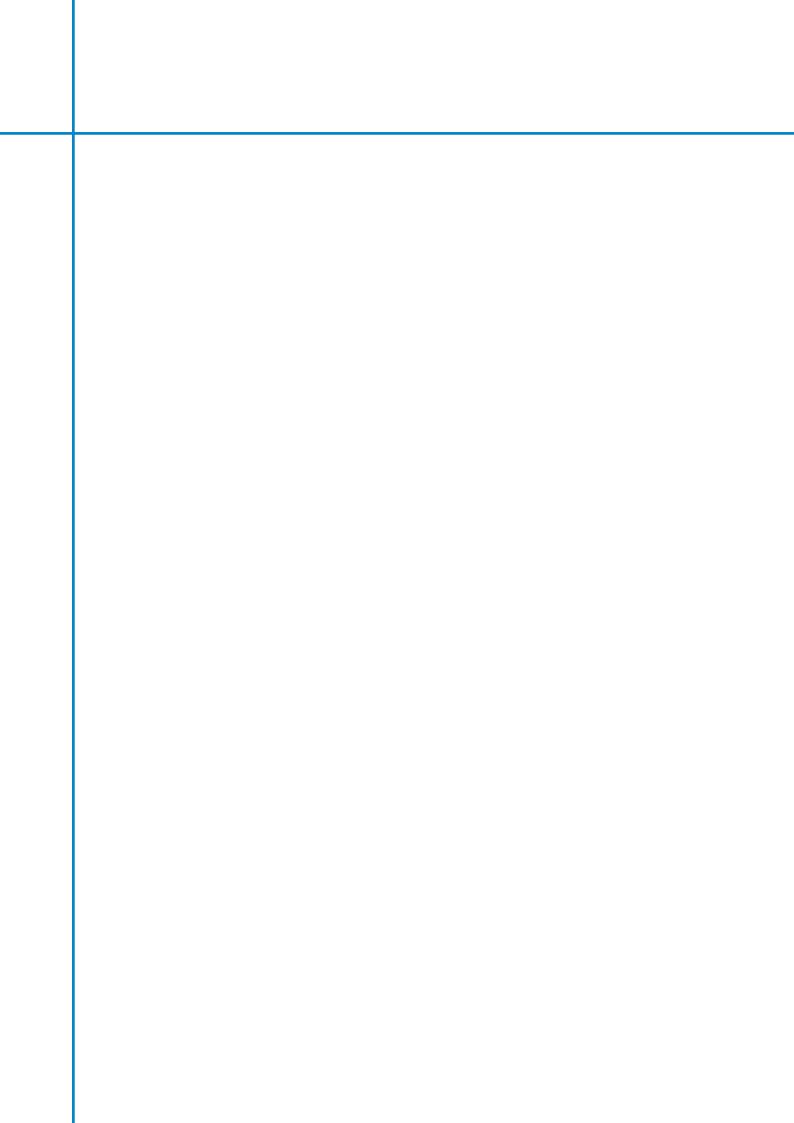
# WFP Lao PDR Country Strategy 2011-2015







# **Executive Summary**

WFP Lao PDR's Vision Statement

WFP's vision for Lao PDR is a country that is free from undernutrition and its debilitating impacts on human potential and national development.

Priorities to be addressed

- 1. WFP Lao PDR's Priority One: Preventing and reducing wasting
- 2. WFP Lao PDR's Priority Two: Reducing stunting
- 3. WFP Lao PDR's Priority Three: Reducing micronutrient deficiencies

WFP's comparative advantage

WFP's strong comparative advantages center on: emergency response, nutrition education, school meals, field presence, hunger analysis, purchasing power, and logistics.

Country/food and nutrition security analysis and basis of prioritization

The Government has set ambitious targets for transitioning Lao PDR to a middle-income country by 2020 while achieving the Millennium Development Goals (MDGs) by 2015. Although the nation has experienced strong economic growth over the past two decades, it remains 'seriously off track' to meet the hunger target of the MDGs and address undernutrition more broadly. In 2010, wasting rates exceeded 18 percent in one province; the national stunting rate remained at 40 percent; and micronutrient deficiencies, such as anemia, affected more than 40 percent of children under five years old. It is estimated that undernutrition led to productivity losses of USD 166 million between 2005 and 2010.

There are several contextual factors that help to explain the persistence of undernutrition despite the rapid economic expansion. Severe natural disasters, such as flooding, storms and droughts, continue to trigger crises and lead to high wasting rates in specific areas of the country for short periods of time. A combination of uneven economic growth, mountainous terrain, unexploded ordnance, development policies, cultural beliefs and low-levels of education have left a much larger portion of the population in Lao PDR without the knowledge or means to prevent stunting and micronutrient deficiencies.

In part due to strong advocacy from WFP and the UN Country Team, the Government has recognized the importance of addressing undernutrition in order to achieve its goals. With national policies and frameworks now in place, there is an opportunity to take concerted action to deal with the problem. Given its comparative advantages, and working in the context of the REACH Initiative, WFP Lao PDR's strategy will focus on supporting the Government to implement its nutrition agenda and reach its targets for reductions in wasting, stunting, and micronutrient deficiencies.

WFP Lao PDR Country Office Vision Statement

Lao PDR is a country that is free from undernutrition and its debilitating impacts on human potential and national development.

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# 1 Country Analysis

1. The Lao People's Democratic Republic (Lao PDR) is a small landlocked country in Southeast Asia with a population of six million people. A Least Developed Country (LDC) and a Low Income Food Deficit Country (LIFDC), it ranked 133rd out of 182 nations in the 2009 UNDP Human Development Index. However, the Government has set ambitious targets for transitioning Lao PDR to a middle-income country by 2020 while achieving the Millennium Development Goals (MDGs) by 2015. In many ways, the country is making substantial progress: the economy has expanded rapidly and the MDGs for reducing child mortality and halting the spread of malaria and TB are likely to be met. However, undernutrition remains a major problem, and Lao PDR is 'seriously off track' for achieving the hunger target of the MDGs¹. The causes can be traced to unequal economic growth, persistent development challenges, and past political priorities.

### 1.1 Economic and Development Context

2. *Economic context*. In 1986, Lao PDR began moving from a centrally-planned to a market-oriented economy. As a result, the economy has grown rapidly over the last two decades. From 1990 to 2002, the average annual growth rate was 6.3 percent; in recent years, it has reached 8 percent. However, this expansion has not led to a commensurate decline in undernutrition in rural areas. (See Diagram 1.) The economy is still agriculturally based with over 80 percent of the population working in the sector and producing 45 percent of the gross national product. But the economic growth has been driven, especially in recent years, by gold and copper mining, hydroelectric dam projects, and logging and rubber agribusiness concessions, especially to China and Vietnam. These economic activities have brought opportunities for rural populations, but have also sometimes hindered existing livelihood activities centred on agriculture.

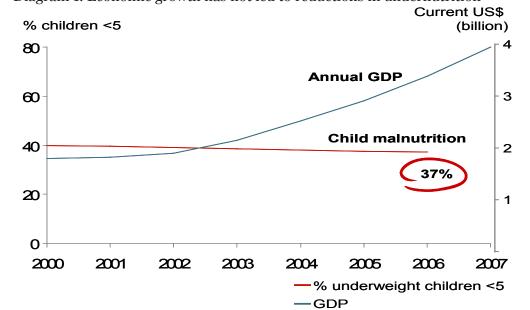


Diagram 1. Economic growth has not led to reductions in undernutrition<sup>2</sup>

<sup>1</sup> Lao PDR, 2010, Accelerating Progress Towards the MDGs.

<sup>2</sup> REACH, 2009, REACH Stocktaking Analysis Lao PDR.

- 3. Geographic context. Part of the challenge for addressing hunger also relates to the geography of Lao PDR. Broadly speaking, the country's terrain can be divided into two zones: lowlands and uplands. The lowlands lie in flat plains along the Mekong in the west of the country, are better integrated into the national infrastructure, and tend to produce surpluses of rice. However, over 70 percent of the population lives in the mountainous upland areas where villages are scattered, remote and often cut-off from health facilities and other essential services. The uplands tend to be food-deficit areas. Lao PDR is also the world's most heavily bombed country per capita. Two thirds of the country, mainly in the uplands, is still contaminated with unexploded ordnance (UXO) from the Second Indochina War, which continues to cause death and injury and prevents the use of land for agriculture and animal husbandry.
- 4. Cultural context. Lao PDR has one of the most ethnically diverse populations in the world. There are 49 officially recognized ethnic groups and over 200 different languages spoken. While this diversity represents a great strength of the country, it can also pose challenges for undernutrition. The cultural differences often translate into diverse views on care practices and appropriate foods. Moreover, the minority ethnic populations tend to be more poorly educated than the majority Lao-Tai group. In a 2007 survey, over 50 percent of the household heads had not finished primary education<sup>3</sup>. The situation was even more serious for their spouses, especially among ethnic groups in the upland areas. For example, in the Sino-Tibetan ethnic group, which has the highest rates of stunting, 66 percent of the heads of households and 89 percent of their spouses have no schooling at all<sup>4</sup>. This lack of education affects their knowledge of undernutrition and limits their means to address it.
- 5. Climatic context. Over the last 30 years, Lao PDR has experienced recurrent natural disasters, including floods, storms, droughts, and pests, in part as a result of climate change. Analysis of data indicates that the country faces serious floods and droughts every one and a half years. This pattern has continued in the recent past. The Mekong River extends for 1,900 kilometres in Lao PDR and there are numerous waterways in the mountains, which contributed to serious flooding in 2008. In 2009, the country was hit by Tropical Storm Ketsana which damaged crops at the time of the harvest. A rodent infestation in 2008 was the worst in over 40 years. In 2010, many parts of the country reported drought conditions which delayed the planting of rice. These natural disasters represent shocks that can lead to a rapid deterioration in the nutrition situation.

### 1.2 Political Situation

- 6. Since 1975, Lao PDR has been a politically stable country with a centralized, one-party system led by the President, Prime Minister and Politburo.
- 7. Policy context. In an effort to spur development, the Government has undertaken several policy measures that have had mixed impacts on nutrition in rural communities. One effort has been to resettle villages in lowland areas, closer to services. But this policy has also placed a strain on these communities as they struggle to adapt their livelihoods to a new context. There have also been efforts to ban slash-and-burn upland agriculture, but these restrictions, aimed at improving agricultural sustainability and preserving natural resources, have limited the area of land available for cultivation. Finally, largely successful attempts to eradicate opium have left some upland farmers in the north of the country without consistent alternatives for generating income.

<sup>3</sup> WFP Lao PDR, 2007, Comprehensive Food Security and Vulnerability Assessment (CFSVA).

<sup>4</sup> Ibid

### 1.3 Food Security Analysis

- 8. Because of these economic, geographic, climatic, cultural, and political challenges, Lao PDR continues to suffer from high rates of undernutrition. It faces three particularly serious problems: wasting, stunting, and micronutrient deficiencies.
- 9. Wasting. In Lao PDR, the national wasting rate stands at 6 percent<sup>5</sup>. In the aggregate, the level does not represent an alarming situation. However, in certain locations at specific times, the wasting rates can reach 'critical' levels. In June 2010, the province of Attapeu had a global acute malnutrition rate of 18.9 percent, which exceeded the emergency threshold of 15 percent. In Sarvavan and Savanakhett provinces, the levels were above the emergency alert level of 10 percent (see Diagram 3). At these rates, children were at serious risk of dying.
- 10. Wasting results from a combination of inadequate food intake and disease. In the Lao context, severe decreases in food intake usually result from natural disasters. Storms, floods, droughts and pests can lead to extensive damage to crops. When the harvest is less than expected, rice shortages lead to price rises, making it difficult to purchase sufficient amounts on the market. As a result, many households affected by natural disasters do not have adequate food to meet their needs through the next harvest. The high burden of diseases such as diarrhea, especially in the rainy season, exacerbates the problem. This combination can lead to spikes in the wasting rates. Given the increasing frequency of disasters in the context of climate change, wasting remains a concerning problem that puts lives at risk.
- 11. *Stunting*. In contrast to wasting, stunting rates are extremely high across most parts of the country. The national average is 40 percent<sup>6</sup>, which according to international classifications is 'very high' and constitutes a 'severe public health problem'. However, there are some variations within the country. Upland areas tend to have higher stunting rates than lowland areas, and minority ethnic groups have more elevated levels than the majority Lao-Tai communities. In the northern highlands and the central and southern highlands, the rates are 58 percent and 55.3 percent, respectively. The Sino-Tibetan ethnic group, concentrated in the northern provinces of Luangnamtha and Phongsaly, has an average stunting prevalence of 61.9 percent<sup>7</sup> (see Diagram 2). As a result, over half the children in rural parts of the country will never grow to their full physical or mental potential. It is estimated that stunting resulted in economic productivity losses of USD 166 million between 2005 and 2010<sup>8</sup>.
- 12. While wasting in Lao PDR is caused by a relatively rapid deterioration in the nutrition status due to natural disasters, stunting is a more chronic problem. Actual stunting occurs in early childhood when there are nutritional deficiencies during the critical 'window of opportunity' for growth between the moment of conception and 2 years of age the first 1,000 days of life. In Lao PDR, the nutrition deficiencies can arise because of inadequate food (in terms of both quantity and quality), poor caring practices or disease (in a challenging public health environment).

<sup>5</sup> Ministry of Health, 2009, National Nutrition Strategy and Plan of Action.

<sup>6</sup> Ibid

<sup>7</sup> WFP Lao PDR, 2007, CFSVA.

<sup>8</sup> WHO, 2004, Profiles Report (as cited by FAO).

Diagram 2. Stunting in Lao PDR

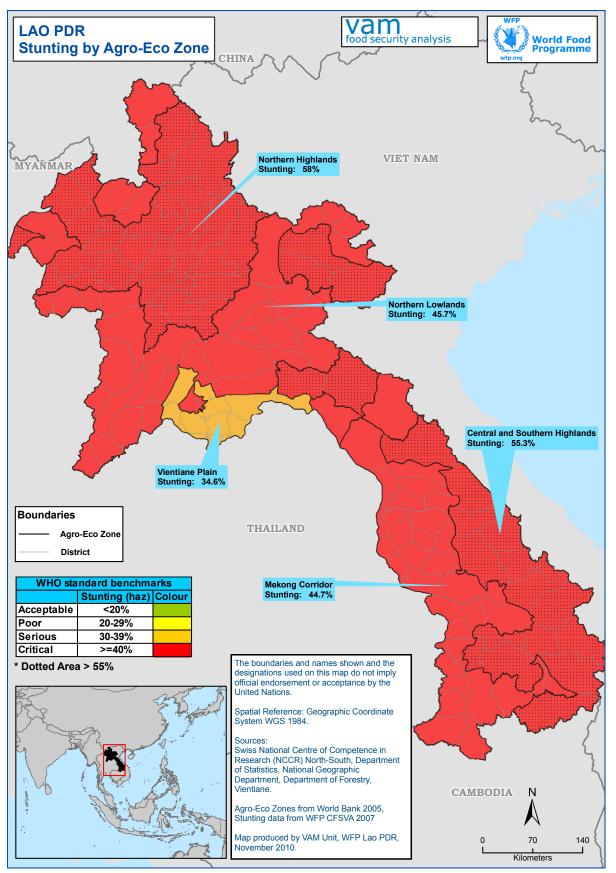
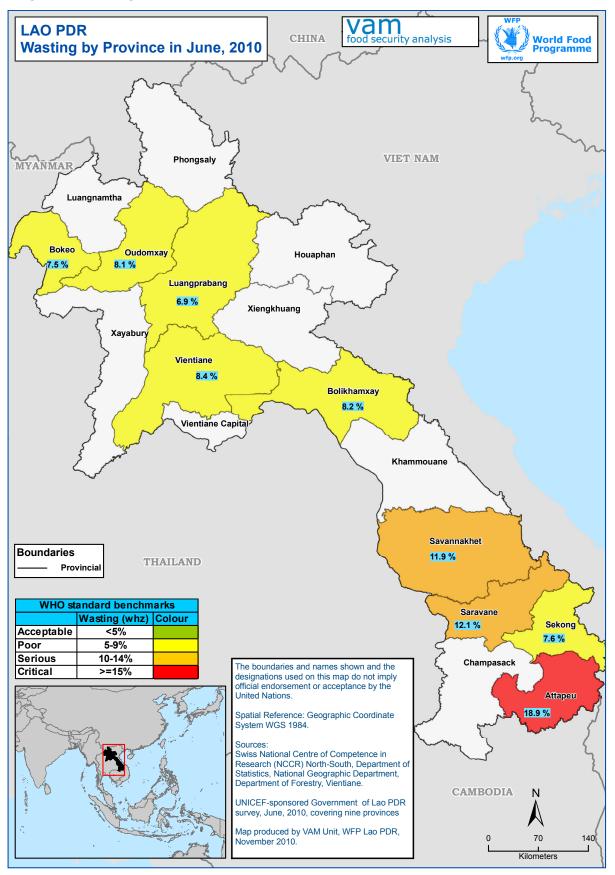


Diagram 3. Wasting in Lao PDR



In a 2010 survey, only 16 percent of children were receiving the necessary diet in terms of quantity and diversity<sup>9</sup>. In Lao PDR, stunting increases dramatically from 6 to 23 months, indicating that the problem may relate to care practices during the period of complementary feeding<sup>10</sup>. Finally, disease, particularly as a result of poor hygiene and sanitation, remains a persistent challenge: in the 2010 study, 43 percent of children were reported ill in the previous two weeks<sup>11</sup>.

- 13. At a fundamental level, the economic, geographic, policy and cultural context shapes the knowledge and means of populations to provide adequate nutrition for their children. For example, an upland community from a minority ethnic group in a timber concession area will face multiple difficulties. Because of their food practices, limited education, and isolation, they may not be aware that stunting is a problem or know how to address it. At the same time, their livelihoods may be constricted by reduced access to forest products because of the timber concession. As a result, they will also lack the means (in terms of their own production and income) to act to address stunting. Yet this perpetuates the cycle of undernutrition: their children will become stunted, suffer from physical and cognitive impairments, not be able to take full advantage of educational opportunities, have low income earning potential as adults, and end up without the knowledge or means to address stunting in the next generation.
- 14. *Micronutrient deficiencies*. The levels of micronutrient deficiencies are also extremely elevated. Over 40 percent of children under 5 and 63 percent of children under 2 suffer from anemia, resulting from insufficient iron<sup>12</sup>. These rates constitute a 'serious public health problem' by international standards. Almost 45 percent of children under 5 and 23 percent of women between 12 and 49 years suffer from sub-clinical vitamin A deficiency. While the majority of households have access to iodized salt, in some places up to 20 percent of the population does not receive sufficient iodine. These micronutrient deficiencies, which can exist without stunting or wasting, lead to problems with motor and cognitive development (anemia), eye sight and the immune system (Vitamin A deficiency) and mental ability (iodine deficiency).
- 15. Micronutrient deficiencies arise when the required vitamins and minerals are not obtained from the food in diets. As with stunting, the fundamental challenges relate to contextual factors including economic, policy, geographic and particularly cultural circumstances that leave populations without the knowledge or means to address the problem. In the Lao context, there is limited consumption of meats, fats and oils and milk. Poorer households may only eat meat (an important source of iron) once or twice a month<sup>13</sup>. While vegetables (good sources of vitamins A and B) are consumed more frequently, they are only seasonally available. There are also important cultural differences among ethnic groups about preferred foods. The Sino-Tibetan ethnic groups consume fats and oils more than three times a week, while the Austro-Asiatics have them only once although they are necessary for absorbing key micronutrients. The Hmong-Mien tend not to consume insects, an important source of protein and calcium for other ethnic groups.

<sup>9</sup> National Institute of Public Health, 2010, Nutritional Assessment in 2008-2009 Flood and Typhoon-Ketsana Affected Provinces of Lao PDR.

<sup>10</sup> REACH, 2009, REACH Stocktaking Analysis Lao PDR.

National Institute of Public Health, 2010, *Nutritional Assessment in 2008-2009 Flood and Typhoon Ketsana Affected Provinces of Lao PDR*.

Ministry of Health, 2009, National Nutrition Strategy and Plan of Action.

Holmes, W., et al, 2007, 'Influences on maternal and child nutrition in the highlands of northern Laos', Asia Pacific Journal of Clinical Nutrition.

# 2 National Priorities and Food Insecurity Response

16. In the past, the Government recognized the problem of food insecurity, but tended to equate it with rice production. However, in part as a result of advocacy efforts by WFP and other stakeholders, it has now strongly prioritized undernutrition and has developed extensive policies and strategic frameworks for addressing it. It has now requested the UN system to support it in implementing these plans.

### 2.1 National Policy Framework and Response

- 17. National Socio-Economic Development Plan. The National Socio-Economic Development Plan (NSEDP) is the principal framework outlining the Government's development priorities. The draft 7th NSEDP 2011-2015 identifies specific directions and targets focused on: rural development and poverty reduction; economic development; social and cultural development; and environmental protection, natural resources management and sustainable development; among others. The section on Social and Cultural Development contains a sub-section on health and nutrition and provides clear government targets for the reduction of undernutrition by 2015 through lowering: the prevalence of wasting to 4 percent; the prevalence of stunting to 34 percent; and the prevalence of anemia to 30 percent in children under five years old and 25 percent for women of reproductive age.
- 18. Nutrition policy. The Government of Lao PDR has two key documents that provide a framework for action on nutrition: the National Nutrition Policy (NNP) and the National Nutrition Strategy and National Plan of Action for Nutrition (NNS/NPAN). The National Nutrition Policy was endorsed by the Prime Minster in 2008 and provides the political direction for the engagement of governmental agencies and developmental partners around nutrition issues. The strategy and plan of action identifies interventions in 10 key areas. The Government is in the initial stages of carrying out activities in the south focused on maternal and child health and nutrition and the treatment of acute malnutrition.
- 19. Education sector plan. The Education Sector Development Framework (2009-2015) is the main education sector policy in Lao PDR. School meals are well aligned with this policy: the expansion of school meals at both pre-primary and primary school levels is mentioned as one of the major targets for the Ministry of Education to achieve by 2015. In the National Inclusive Education Strategy and Plan of Action 2011-2015, school meals are also seen as a key element in overcoming barriers associated with remoteness and isolation and in providing school health and malnutrition reduction. The Ministry has indicated its strong interest in creating a national school meals programme, has established a unit to focus on this effort, and is working with WFP to implement a gradual handover.
- 20. Other key frameworks and responses. The Ministry of Agriculture and Forestry has recently finalized the Agriculture Development Strategy for Lao PDR which has a strong recognition of chronic malnutrition as a major problem in the country. The strategy focuses on improving the quantity and diversity of foods being produced. The National Disaster Management Office (NDMO) is leading the efforts to draft a national disaster management law; however, it is still at an early stage of development. The NDMO carries out assessments, coordinates NGOs, and provides limited amounts of assistance in cases of small-scale disasters, such as localized flooding or landslides.

### 2.2 Response of the UN and Other Key Partners

- 21. *UN response*. The UN country team works closely together on nutrition issues. Lao PDR is one of two pilot countries worldwide for the REACH (or 'Renewed Efforts to Address Child Hunger and Undernutrition') Initiative, a joint collaboration between the Government of Lao PDR, UN agencies, NGOs, the private sector and civil society to help combat child malnutrition. REACH supports country efforts to coordinate and scale up interventions. UNICEF focuses on therapeutic feeding, micronutrient supplementation, and breastfeeding campaigns; WHO concentrates on disease control and acute malnutrition; and FAO is key in the agricultural sector and local diet diversity. However, the efforts are still at their early stages: while the coordination mechanism has been established, the actual implementation is limited.
- 22. NGO response. There are over 20 non-governmental organizations in Lao PDR that have nutrition-related programmes. Their activities range from the treatment of acute malnutrition over diarrhea reduction and parasite control to livelihood projects. In general, organizations concentrate in specific geographic areas in order to focus on the quality of their interventions.
- 23. Donors and multi-lateral agencies. Some donors have a presence in Vientiane, while others provide support to Lao PDR from offices in the neighbouring countries of Vietnam and Thailand. In terms of hunger and undernutrition, Australia, the European Union, Germany, Luxembourg, Republic of Korea, Switzerland, the United States, and others<sup>14</sup> have funded or are considering funding key interventions. The World Bank and Asian Development Bank have strong presences in Lao PDR. They support large-scale hydroelectric dams and other infrastructure projects. The World Bank also has programmes focused on mother and child nutrition, safety nets, and support for a national school meals initiative, while the Asian Development Bank works in the areas of health and sanitation, among others.

14

These countries are named alphabetically, rather than on the size of their contributions.

### 3 Lessons Learned

### 3.1 Gaps in National Response

- 24. While the policies, frameworks and actions plans for addressing undernutrition are now in place, there have been limited interventions to date. In terms of actual implementation (rather than planning), several gaps exist:
- Gaps in the types of programmes: In regard to wasting, the emphasis has been on preventing the problem in emergencies by providing calories in the form of rice rations. However, it has not been on the treatment of malnutrition through supplementary and therapeutic feeding. The Ministry of Health currently has limited capacity, but concerted efforts are underway to improve the situation. In terms of stunting, attention has been given to school age and preprimary children, but relatively little emphasis has been placed on infants during their critical first 1,000 days (conception to 2 years) or on improving livelihoods for adults.
- Gaps in coverage for existing programmes: Where programmes do exist, they tend to concentrate on limited geographic areas. The Government has identified 47 priority districts, but these represent only the areas most in need (in a country where stunting is above 40 percent in almost all provinces) and many of these priority districts do not receive a full package of nutrition interventions.
- Gaps in coordination and management of programmes: Many of the relevant programmes are run by different ministries. The Ministry of Health is central to nutrition efforts, but the Ministry of Agriculture, the Ministry of Education, and the National Disaster Management Office all have important roles. At present, there is not a central coordination unit in the Government for nutrition, though efforts are underway (with the support of REACH) to identify an appropriate body.

### 3.2 WFP Lessons Learned

- 25. Since establishing a country office in Lao PDR in 2000, WFP has learned a number of lessons that have informed this strategy. In the recent past, WFP Lao PDR has had three major programmes: a Protracted Relief and Recovery Operation (PRRO), a Food-for-Education Development Project, and a Food-for-Work Development Project. In 2008, a mid-term review of the Protracted Relief and Recovery Operation (PRRO) found that the activities are 'relevant and generally responding to the needs of the most vulnerable in Lao PDR'. However, given the high levels of stunting in the country, it suggested a focus on promoting dietary diversity, offering community-based nutrition and health trainings, and supporting agricultural schemes. It also pointed to the need to consider a more nutritionally balanced food basket.
- 26. In 2009, WFP carried out a portfolio evaluation of all its activities. The evaluation, which was based on wide-ranging consultations with stakeholders, identified several key lessons for the country office as it considered options for its new strategy. It expressed concern about the fragmentation of programme activities and implementation structure and identified the lack of a unifying goal as one of the causes of this problem. It also underlined the importance of working with partners especially in areas that require technical inputs. The evaluation further underscored the importance of adapting interventions to local context with a clear consideration of ethnicity in the design of programme activities. It made recommendations about the importance of maintaining leadership on hunger analysis, developing a strong monitoring and evaluation system, and creating a sustainable funding model.

# 4 WFP Country Strategy in Lao PDR for 2011 - 2015

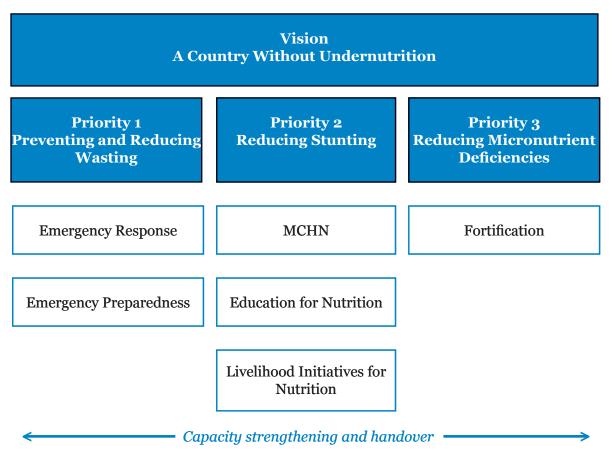
### 4.1 Comparative Advantages

27. WFP's country strategy draws upon its clear comparative advantages. In terms of activities, WFP Lao PDR is recognized as a leader in hunger analysis, emergency response, school meals and nutrition education. In terms of capacities, it stands out among humanitarian and development agencies for its extensive field presence and its strong logistics capacity which allows it to reach hundreds of distribution points in the remote mountainous regions of the country. Increasingly, WFP Lao PDR is also recognized for its purchasing power, which enabled it to buy more than US\$4 million in food commodities in the country last year.

### 4.2 Vision and Strategic Priorities

28. WFP and the Government's vision for Lao PDR is a country free of undernutrition and its debilitating impacts on individual potential and national development. It has identified three priorities in line with Government plans to reduce the prevalence of wasting, stunting and micronutrient deficiencies in a sustainable manner.

Diagram 4. Chart of Vision and Priorities



### 4.3 WFP Lao PDR Priority One: Preventing and Reducing Wasting

- 29. In the context of increased natural disasters, in part attributable to climate change, Lao PDR will likely continue to face emergency situations that lead to wasting and a high risk of mortality. WFP Lao PDR will therefore have preventing and reducing wasting as its first priority for this strategy.
- 30. Responding to wasting. WFP is looked to as the lead agency for **emergency response** in Lao PDR. With a clear target of reducing wasting levels, its efforts will have a much stronger nutritional focus under this strategy. In practice, this means that any general distributions will attempt to prevent more people from becoming malnourished by including a nutritionally balanced ration, providing complementary items such as soap through partners, and conveying nutrition messages relevant to the other immediate and underlying causes of the problem at the distribution points. It further entails the introduction of the treatment of those who are already malnourished through the implementation of the integrated management of acute malnutrition in partnership with the government, UN agencies, and NGOs. WFP would take the lead on supplementary feeding and provide support on therapeutic feeding programmes.
- 31. Strengthening government capacity for wasting responses. The Government has taken important steps to strengthen its capacity to respond to disasters. It has established a National Disaster Management Office with the mandate to coordinate responses and co-chairs the Inter-Agency Standing Committee for humanitarian activity. However, it has also clarified that it would like much greater support to enhance its capacity for **emergency preparedness**. WFP would offer comprehensive training involving simulations to strengthen government and community capacity to identify, plan for and respond to emergencies in the country.
- 32. WFP will partner with UN agencies (such as UNDP, UNICEF and WHO) and non-governmental organizations with technical expertise in the area of emergency preparedness and response to carry out these trainings. It is envisioned that most of the small-scale disasters affecting less than 5,000 people will be handled by the Government within the five years of this strategy, and that the Government will have in place a network of supplementary feeding centers.

Target: Wasting rates reduced to 4 percent in the country as a whole (and kept below the critical threshold of 10 percent in every province) by 2015.

# 4.4 WFP Lao PDR Priority Two: Reducing Stunting

- 33. Given the extremely high levels of chronic undernutrition, and considering the Country Office's areas of comparative advantage, reducing stunting will be the second priority for WFP Lao PDR. In order to ensure that populations have both the knowledge and the means to address stunting, WFP will take an integrated approach that tailors interventions to contexts and involves five steps: problem analysis, awareness raising, nutrition education, action, and follow-up and celebration.
- 34. *Problem analysis*. Given the many different ethnic groups and contexts, WFP will begin each intervention with a detailed quantitative and qualitative survey that will assess the level of stunting and pinpoint the precise causes of the problem for a particular location. This problem analysis, utilizing the tools of VAM, will form the basis for the remaining steps in the process.

- 35. Awareness raising. Once the scope of the problem is identified, WFP and partners will work together to raise awareness in the community about the issue and its impacts. For many, small stature is considered normal and not particularly concerning. An awareness campaign involving theme songs, slogans, community champions, radio talk shows, and dance events will get the communities to discuss the topic and to become interested in learning more.
- 36. Nutrition education. Once awareness is raised about the problem of stunting, the programme will then focus on providing nutritional education. Drawing on its comparative advantage in this area, WFP will use its interactive, participatory 'Feeding the Future' nutrition education package, which helps villagers to learn the basics of nutrition through games, role plays, cooking demonstrations, and informal quizzes. The nutrition education is tailored to the needs of different ethnic groups and administered in the local language.
- 37. Action. Once communities have been equipped with knowledge about nutrition problems, they need opportunities to act on that knowledge to improve the situation for themselves and their children. WFP will offer a menu of options that will be tailored to the needs of the communities. One of the key interventions will be Maternal and Child Health and Nutrition (MCHN) programmes targeting pregnant and lactating women and their infants to ensure that young persons receive the required nutrients and care during the first 1,000 days of their lives when most stunting occurs. In order to break the inter-generational cycle of stunting, there will also be options for interventions at other stages of life. For school age, WFP's emphasis will be on education for improved nutrition. In conjunction with partners, WFP will provide a package that combines school meals with family planning and nutrition messages. The package, directed particularly at girls and ethnic minorities, will help ensure that children attend school and learn once there, so that they grow up with the knowledge and means to prevent stunting among their children. For adulthood, WFP will identify context-specific livelihood initiatives for **nutrition.** In rice surplus areas, the emphasis will be on Purchase-for-Progress and connecting smallholders to markets to improve their incomes. When combined with awareness and nutrition education, the increased incomes will enable households to better meet the nutritional needs of their children. In deficit areas, the focus will be on tailored activities such as vegetable gardens that address the specific nutritional problems (e.g. diet diversity) in a particular ethnic community.
- 38. Follow up and celebration. As communities act on the knowledge, WFP will follow up to celebrate successes and adjust programmes to address points of weakness. Regular growth monitoring will be a key component of the efforts, and a strong Monitoring and Evaluation system will be put in place to ensure WFP's contribution is targeted in the most effective way possible. Awards and prizes will be given to recognize communities that have been successful in following the programme.
- 39. In carrying out these activities, WFP will partner closely with government, UN, NGO and multilateral agencies. In some cases, WFP will work directly with the partner to implement a project (e.g. NGOs for nutrition education). In other cases, complementary initiatives will be coordinated through REACH in order to achieve maximum impact on stunting in a geographic area.

40. Over time, the programmes will be handed-over to the Government, so that it can sustain the efforts in the future. For MCHN, the focus will be on strengthening the Ministry of Health's capacity to implement the activities and on developing lower-cost, locally-produced lipid-based foods for use by the Government to ensure that the programme is affordable. For school meals, the plans are well advanced for a government-led school feeding programme in 39 districts. For P4P, the efforts will concentrate on linking smallholders to markets in a manner that allows them to be competitive and meet quality standards over the long run.

Target: Prevalence of stunting reduced to 34 percent by 2015.

### 4.5 WFP Lao PDR's Priority Three: Reducing Micronutrient Deficiencies

- 41. Because the high levels of anemia and vitamin A deficiency continue to pose a serious public health problem, reducing micronutrient deficiencies will be the third priority of WFP Lao PDR. There are three principal interventions for addressing micronutrient deficiencies: supplementation, diet diversification, and fortification. Supplementation programmes for Vitamin A and iron are well-established with support from UNICEF to the Ministry of Health. However, the rates still remain at unacceptably high levels, suggesting a need for complementary approaches. To a certain extent, the Livelihood Initiatives for Nutrition will help to address diet diversification as part of the larger effort to reduce stunting; however, fortification may be a way to specifically and cost effectively tackle micronutrient deficiencies.
- 42. *Fortification*. There are a number of possibilities to consider for fortification and value addition. These include: soybean and peanut oil plants, fortified noodle production, and Nutri-rice, in which a grain-like capsule of micronutrients is mixed in with rice; and production of a lipid-based, low-cost ready-to-use food. WFP would be involved in supporting the fortification of the products and in providing part of the market for the final commodities. These efforts may also include social marketing and sensitization on appropriate storage and handling.
- 43. In its efforts to address micronutrient deficiencies, WFP will work closely with the Government and the private sector and will explore partnerships with academic institutions and international organizations, such as GAIN, with expertise in this area.

Target: Prevalence of anemia decreased to 30 percent for children under five by 2015.

# 4.6 Alignment with National Priorities, UN and WFP Strategic Plan 2008-13

44. The strategy is directly aligned with the timing and priorities of the National Socio-Economic Development Plan (2011-2015) and the United Nations Development Assistance Framework (2012-2015).

Diagram 5. Alignment of Country Strategy with National Plan and UN Frameworks

WFP Lao PDR Goals (Country Strategy 2011-2015)	WFP Lao PDR Priority 1: Preventing and Reducing Wasting	WFP Lao PDR Priority 2: Reducing Stunting	WFP Lao PDR Priority 3: Reducing Micronutrient Deficiencies	
WFP Lao PDR Interventions (EMOP and CP 2011-2015)	EMOP: Emergency response CP: Emergency response preparedness	CP: MCHN, education for nutrition, and livelihood initiatives for nutrition	CP: Fortification	
WFP Goals (Corporate Strategic Plan 2008-2013)	WFP SO1: Save lives and protect livelihoods WFP SO5: Strengthen capacities of countries to reduce hunger	WFP SO4: Reduce chronic hunger and undernutrition WFP SO5: Strengthen capacities of countries to reduce hunger	WFP SO4: Reduce chronic hunger and undernutrition WFP SO5: Strengthen capacities of countries to reduce hunger	
UN Goals (UNDAF 2012-2015)	Investing in Human Development – Outcome: 'By 2015, vulnerable people are more food secure and have better nutrition'			
National Goals (NSEDP 2011-2015)	Social and Cultural Development – Specific Direction and Task on Health and Nutrition: 'To ensure adequate best nutrition and capacious food security for the Lao people to achieve the Millennium Development Goals'			

# **5 Programme Implications**

### **5.1** Assessment of Risks Related to the CS Process and Implementation

- 45. As WFP Lao PDR makes the transition to this new strategy, it faces several risks both external and internal that could undermine the viability of the approach.
  - WFP does not gain the support of Government and partners for the new strategic direction (external). This is considered a low risk. Partnership is critical to achieve the targets set out in this strategy. Therefore, WFP has formulated the strategy on the basis of extensive consultation (see Annex 3) and the approach has been well-received by partners.
  - WFP is not able to attract sufficient donor funds for its nutrition-focused approach (external). This is considered a moderate risk because the emphasis on nutrition may inadvertently create the impression that WFP is only engaged in activities in the health sector, thereby limiting the pool of interested donors. This risk will be addressed by highlighting the multi-sectoral nature of nutrition in meetings with donors and through a targeted resource mobilization strategy. It is believed that the benefits of having a coherent strategy with a clear overarching goal outweigh the risks associated with this approach.
  - WFP is not able to design and deliver credible and efficient programmes in line with the new strategy (internal). This is considered a low risk. Although the strategy includes some new areas for WFP Lao PDR, most reflect areas of comparative advantage and strength. For new activities, such as fortification, WFP Lao PDR has made sure that the expertise exists at the Regional Bureau level in case there is need for support. A careful programme for ensuring that staff members have the right skill set will be pursued (see section 5.2 below).

### 5.2 Skill Set and Profile Required to Implement the CS

46. Under the new approach, the Country Office will require staff with expertise in nutrition, fortification and linking smallholder to markets. To ensure that WFP Lao PDR has the right skill set and staff profile to implement the Country Strategy, it will follow two approaches. First, it will help existing staff to enhance their skills through support for training and further education, especially in the area of nutrition and P4P. Second, it will recruit, where necessary, people with the required specialized skill sets on a short- or longer-term basis.

# **Annexes**

# Annex 1. Key Undernutrition, Hunger, and Food Insecurity Statistics

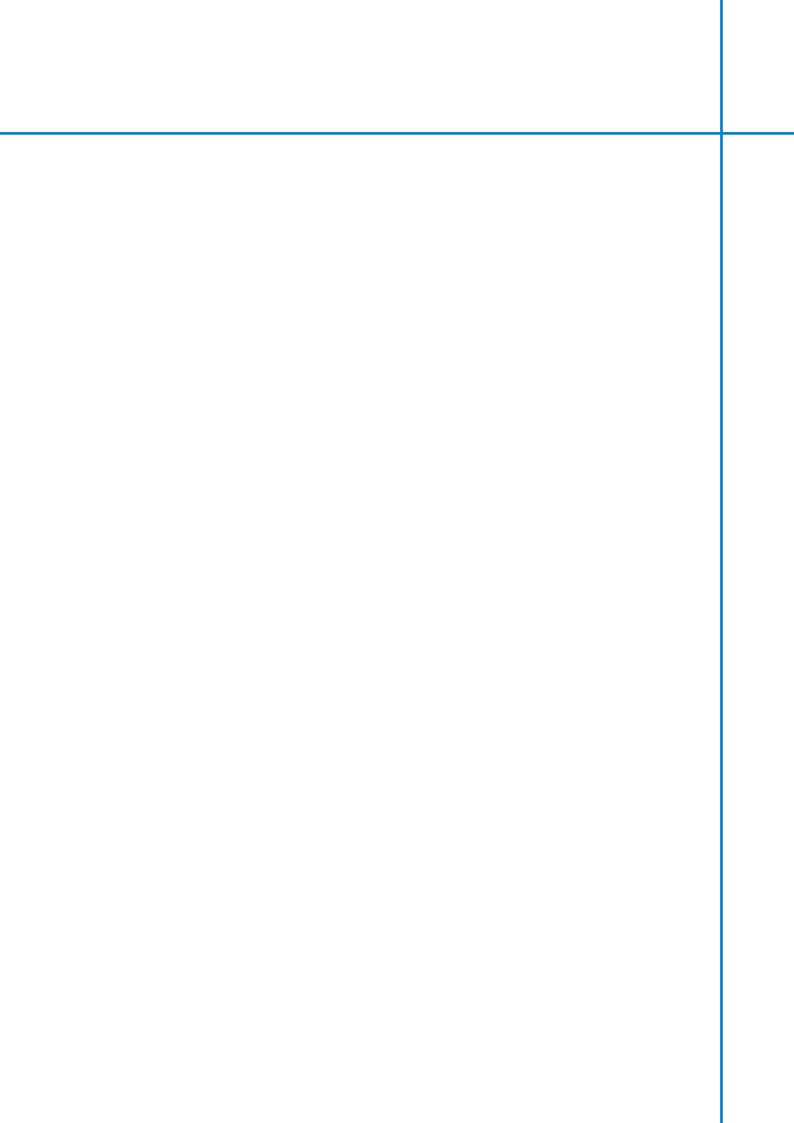
Issue	Indicator	Figure	
Undernutrition (NNS/NPAN,	Rate of stunting among CU5 (NCHS standard)		
Lao PDR, 2009)	Rate of wasting among CU5 (NCHS standard)		
	Rate of underweight among CU <sub>5</sub> (NCHS standard)		
	Rate of anemia among CU5 (Hemoglobin <11g/dL)		
	Rate of anemia among women of reproductive age (WRA) (Hemoglobin <12g/dL)		
	Iodine deficiency among school age children (urinary iodine excretion <100µg/L)	27	
	Iodine deficiency among women of reproductive age (WRA) (urinary iodine excretion <100µg/L)		
	Vitamin A deficiency among CU5 (serum retinol <0.7)	45	
Hunger and Food Insecurity (GHI, 2010)	Global Hunger Index	18.9	

### Annex 2. Country Strategy Process

This Country Strategy has been prepared through a three-stage, consultative process.

- 1. Country Portfolio Evaluation: In August 2009, WFP undertook a comprehensive country portfolio evaluation. The evaluation carefully reviewed the Country Office's programmes and consulted with over 100 people from the Government, communities, donors, UN agencies, non-governmental organizations, and the World Food Programme in-country and at the regional level. It made a series of recommendations, including the importance of identifying a unifying goal, that have guided the development of this strategy.
- 2. Country Strategy Workshop: In September 2010, the senior staff from WFP Lao PDR's central office and sub-offices met for a two-day retreat to identify the vision and priorities for the country strategy. The participatory, interactive workshop had four sessions. First, it established a common understanding of the basics of hunger and identified the range of hunger problems in Lao PDR. Second, it examined the hunger responses of various stakeholders, including government, UN agencies, NGOs, and donors. Third, it identified WFP's comparative advantages. Finally, it determined WFP Lao PDR's vision and priorities for the country strategy. On the basis of the workshop, a first draft was prepared.
- 3. Country Strategy Consultations: In October and November 2010, WFP Lao PDR held a series of consultations with government, UN agencies, NGOs, and donors. From the Government, there was strong support for the direction at both central and provincial levels. The major suggestions focused on the importance of sustainability and coordination with other UN agencies. The UN and NGOs also welcomed the approach and expressed interest in working in partnership. The donors indicated that the strategy was well thought out and logical, but underscored the importance of coordinating efforts with other UN agencies.

Overall, because of the close consultations, there has been strong support for the new approach.



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