

Total Budget:	USD 4,000,000		
Budget by Agency:	UNICEF: 2,214,170	FAO: 782,170	WHO: 1,003,660
Participating Gov. Entities:	Ministry of Agriculture, Ministry of Health		
Start Date:	26 January 2010	Approval Date:	24 July 2009
Est. End Date:	26 January 2013	Signature Date:	14 December 2009
Disbursements:	First Disbursement:	26 January 2010	USD 872,915
	Second Disbursement:	15 February 2011	USD 1,490,519
	Third Disbursement:		
In Brief:	<p>The proposed Joint Programme by UNICEF, WHO and FAO will improve the nutritional status of infants and young children in Albania, with special focus on resource-poor population segments. It will thereby contribute to the attainment of the Millennium Development Goals, in particular MDG1, by:</p> <ul style="list-style-type: none"> strengthening the Government of Albania’s managerial and technical capacity to prevent and address the immediate and underlying causes of under nutrition; delivering better and more equitable child and maternal food, health and nutrition services; developing and including a public health nutrition module in ongoing education of primary health care workers; and improving the monitoring, surveillance and regulation systems in a more sustainable way. 		

Outcomes:

- National capacities strengthened to incorporate nutritional objectives into sectoral policies and programmes.
- Cross sectoral interventions addressing malnutrition are developed, tested and implemented in target areas.
- National capacities strengthened to deliver nutrition services to the public.



Regions of Intervention:	<ul style="list-style-type: none"> National and Regional: Kukës and Shkodra Prefectures, and in 2 peri-urban Municipalities of Tirana 	
MDGs	MDG1 T1.C	
Beneficiaries	Direct	Indirect
<ul style="list-style-type: none"> No. Institutions No. Women and girls No. Men and Boys No. ethnic groups 	<p>25</p> <p>1,060 and 600</p> <p>260 and 600</p> <p>50</p>	<p>10</p> <p>9,000 and 500</p> <p>8,500 and 500</p> <p>200</p>

Project coordinator: Mariana Bukli
RCO Focal Point: Fioralba Shkodra

Status	<p>The programme is advancing well on its expected outcomes and outputs. Throughout the implementation the programme has had a participatory and consultative approach both at local and national level.</p>																									
Estimated financial execution status as of the June 30, 2011 semi-annual report:	<table border="1"> <thead> <tr> <th>Year</th> <th>TOTAL</th> <th>Transferred</th> <th>Committed</th> <th>Disbursed</th> </tr> </thead> <tbody> <tr> <td>2009-2</td> <td>4,000,000.00 (100.00%)</td> <td>0.00 (0.00%)</td> <td>0.00 (0.00%)</td> <td>0.00 (0.00%)</td> </tr> <tr> <td>2010-1</td> <td>4,000,000.00 (100.00%)</td> <td>892,915.00 (22.32%)</td> <td>263,877.00 (6.60%)</td> <td>112,216.00 (2.81%)</td> </tr> <tr> <td>2010-2</td> <td>4,000,000.00 (100.00%)</td> <td>892,915.00 (22.32%)</td> <td>780,809.00 (19.52%)</td> <td>678,326.00 (16.96%)</td> </tr> <tr> <td>2011-1</td> <td>4,000,000.00 (100.00%)</td> <td>2,363,434.00 (59.09%)</td> <td>1,413,854.00 (35.35%)</td> <td>1,186,757.00 (29.67%)</td> </tr> </tbody> </table>	Year	TOTAL	Transferred	Committed	Disbursed	2009-2	4,000,000.00 (100.00%)	0.00 (0.00%)	0.00 (0.00%)	0.00 (0.00%)	2010-1	4,000,000.00 (100.00%)	892,915.00 (22.32%)	263,877.00 (6.60%)	112,216.00 (2.81%)	2010-2	4,000,000.00 (100.00%)	892,915.00 (22.32%)	780,809.00 (19.52%)	678,326.00 (16.96%)	2011-1	4,000,000.00 (100.00%)	2,363,434.00 (59.09%)	1,413,854.00 (35.35%)	1,186,757.00 (29.67%)
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Main Achievements:	<ul style="list-style-type: none"> • Outcome 1: National and regional capacities have been strengthened to use data in policy development and planning interventions for food and nutrition. <ul style="list-style-type: none"> ○ Participation of key stakeholders in planning targeted interventions for nutrition and food security was ensured through regional conferences in target areas. Data from the baseline survey are being used to plan and target interventions. Information package was updated/expanded with information from recent studies on nutrition and food security. ○ And inter-sectoral technical working group drafted an inventory of existing data related to food, health and nutrition and is carrying out a critical review of these data sets and information systems. ○ National capacities of policy makers and technical working group on food and nutrition action plan have been strengthened to analyze impact of policy choices on food and nutrition and to review and analyze the current FNAP. • Outcome 2: Nutrition curricula for health and education professionals are developed <ul style="list-style-type: none"> ○ The integrated training modules on nutrition have been completed. The training of trainers on monitoring of child growth assessment was conducted; Capacity development of 160 health personnel on child growth assessment has been completed. Health personnel are trained in skills to assess the child's growth, identify any problems and provide advice to families. ○ A communication plan for behaviour change for nutrition practices was drafted in collaboration with Albanian experts. It will provide the basis for community interventions for improved feeding and dietary practices. A technical working group on nutrition modules for school curricula was established and preparation of modules has started. Already, the module outlines for grades 1-3 have been developed. • Outcome 3: Improved knowledge and skills of academic staff at medical and nursing schools are improved to teach public health nutrition. <ul style="list-style-type: none"> ○ Albanian public health specialists are now using the international standards for improvement and development of public health, competency –based, nutrition curricula at university and post-university level. 																									
<p>Does the JP incorporate gender considerations in the activities/outputs/outcomes?</p>																										
Observations																										
Paris Declaration	<p>Leadership of national and local governmental institutions: There is strong national ownership and commitment to this JP. The Minister of Health has appointed a national coordinator for the JP, sitting at the MOH. JP activities were included into the annual work plan of MoH and MOA. The continuous participation of all stakeholders in planning and implementation of activities has been ensured. National and local institutions are the implementers of JP activities, and all capacity building activities will be accredited by the Center for Continuous Medical Education.</p> <p>Involvement of CSOs and citizens: Citizens involved in focus group discussions on feeding practices and household food security.</p> <p>Alignment and Harmonization: The JP is well aligned with priorities of the Government. However, in some instances competing priorities and commitments combined with insufficient numbers of trained staff in food security and</p>																									

	<p>nutrition poses a challenge in terms of timely planning development and implementation of JP interventions.</p> <p>Innovative elements in mutual accountability:</p> <p>The Programme Management Committee, which meets on a quarterly basis and is co-chaired by the UN Resident Coordinator and MoH, provides oversight and guidance to all agencies participating in the joint programme. The activities of the joint programme have been structured in order to complement each other and are closely interlinked to prevent the various components of the JP from running in parallel as separate sub-programmes.</p> <p>Government and UN agencies sit together frequently. Periodic consultation sessions were held with participating UN agencies and government counterparts to elaborate quarterly activity plans and discuss preparation of specific activities. The Government and UN agencies sit together on specific assignments to ensure full buy-in of the Government in programme activities. An example of this was the preparation of the integrated nutrition survey when the full technical team from government and UN agencies sat together for one week.</p>
<p>Delivering as One</p>	<p>Innovative elements in harmonization of procedures and managerial practices:</p> <p>Role of the RCO and synergies with other MDG-F JPs:</p> <p>At the invitation of the Resident Coordinator the joint programme CTA/coordinator have been meeting to share lessons learned and experiences to improve and strengthen the work of all JPs in the country.</p> <p>Inter-agency coordination:</p> <p>The JP is part of the one UN programme in Albania and is structured under the Basic Services pillar. Therefore, activities are part of the standard planning and reporting cycle foreseen by the one UN programme along with those of other JPs active in the country. There seems to be good coordination among UN agencies, for instance UNICEF is hosting FAO programme manager.</p>
<p>Sustainability (concrete actions and strategic partnerships)</p>	<p>Sustainability Plan in place?</p> <p>The signing of the MOU between 5 line ministries helps to ensure the Government's ownership and sustainability of the JP activities. JP's sustainability is anchored in a strong national ownership, on-going consultation and continuous participation of all stakeholders in planning and implementation of activities. Moreover, the JPs capacity building efforts will further the potential for continuity and replicability. All capacity building activities will be accredited by the Center for Continuous Medical Education. Pre and in-service public health curricula development contributes to national capacity development and therefore to long term sustainability of interventions to improve the food and nutrition status of the population.</p>
<p>Innovation and Scale-up</p>	<p>The JP is working to create a knowledge base on nutrition and food security to support evidence based advocacy, policy development and interventions.</p>
<p>External Factors and mitigation</p>	
<p>Communication and Advocacy</p>	<p>C&A plan in place?</p> <p>The Advocacy strategy is in preparation process, using information from the cost benefit analysis and the results of the baseline nutrition survey. The communication strategy is drafted in close collaboration with national team of experts. Key objectives include:</p> <p>After communication for behavior change interventions</p> <p>Health Staff will:</p> <ul style="list-style-type: none"> • Know the new infant feeding guidelines and why they are better than the traditional practices • Believe it is essential for mothers to follow them exactly • Have the skills and the materials necessary to convince mothers in law and mothers to follow the new guidelines <p>Mothers in law will:</p> <ul style="list-style-type: none"> • Be aware that there are new infant feeding guidelines • Believe they are better than the traditional practices • Believe it is their duty to make sure their daughters in law to follow them exactly. <p>Mothers will:</p> <ul style="list-style-type: none"> • Know the new infant feeding guidelines • Believe they are the best for their baby

	<ul style="list-style-type: none"> • Decide to try the new infant feeding guidelines • Have the skills to explain to family members and others why they are doing that. 	
M&E	Strong M&E system in place	
Missions from MDG-F Secretariat:	Date: February 2010	Members: Paula Pelaez
Mid Term Evaluation:	Evaluator: Period: <i>[Link to final report and improvement plan]</i>	