Programme Title:
Improving Nutrition, Food Safety and Food Security for China’s Most Vulnerable Women and Children
Prologue

The MDG Achievement Fund was established in 2007 through a landmark agreement signed between the Government of Spain and the UN system. With a total contribution of approximately USD 900 million, the MDG-Fund has financed 130 joint programmes in eight Thematic Windows, in 50 countries around the world.

The joint programme final narrative report is prepared by the joint programme team. It reflects the final programme review conducted by the Programme Management Committee and National Steering Committee to assess results against expected outcomes and outputs.

The report is divided into five (5) sections. Section I provides a brief introduction on the socio economic context and the development problems addressed by the joint programme, and lists the joint programme outcomes and associated outputs. Section II is an assessment of the joint programme results. Section III collects good practices and lessons learned. Section IV covers the financial status of the joint programme; and Section V is for other comments and/or additional information.

We thank our national partners and the United Nations Country Team, as well as the joint programme team for their efforts in undertaking this final narrative report.

MDG-F Secretariat
## Participating UN Organization(s)
(Indicate the lead agency)
FAO, ILO, UNDP, UNESCO, UNICEF, UNIDO, WFP, WHO (lead)

## Sector(s)/Area(s)/Theme(s)
Please indicate Thematic window and other relevant sub thematic areas
Children, Food Security and Nutrition

## Joint Programme Title
Improving Nutrition, Food Safety and Food Security for China’s Most Vulnerable Women and Children (CFSN)

## Joint Programme Number
MDGF-1991

## Joint Programme Cost
[Sharing - if applicable]

<table>
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<th>[Fund Contribution]</th>
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<td>Govt. Contribution</td>
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<td>Agency Core Contribution:</td>
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**TOTAL:** USD 7 000 000

## Joint Programme [Location]
Region(s): China, Asia
Governorate(s): Guizhou, Yunnan, Shaanxi

### District(s)
- Pan County and Zheng’an County, Guizhou Province;
- Huize County and Wuding County, Yunnan Province;
- Luonan County and Zhen’an County, Shaanxi Province

## Final Joint Programme Evaluation
**Final Evaluation Done** Yes ☐ No ☐
**Evaluation Report Attached** Yes ☐ No ☐
**Date of delivery of final report**

## Joint Programme Timeline
**Original start date**
4 December 2009
**Final end date**
30 April 2013
<table>
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<th>Participating Implementing Line Ministries and/or other organisations (CSO, etc.) (in Alphabetical Order)</th>
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I. PURPOSE

a. Provide a brief introduction on the socio economical context and the development problems addressed by the programme.

China’s reform and opening up policy has brought about rapid economic development since late 1970s. This economic development has facilitated social change – poverty has been substantially alleviated, the problem of basic food availability has been solved, people’s standard of living has improved. With the economic and social development, food production and consumption have developed quickly, and this is well reflected in the improvement of people’s lives.

However, challenges remain in the areas of food security, nutrition and food safety, especially related to women and children living in the country’s poorer areas. Based on data from the National Bureau of Statistics, as of 2009 there were still more than 100 million people under the international poverty line. For its part, FAO estimates that during the period 2003-2005 there were approximately 120 million Chinese who were undernourished. For the population as a whole, an unhealthy diet is one of the major risk factors for the country’s largest disease burden, including cardiovascular diseases, cancer, diabetes and other conditions linked to obesity. UNICEF reports that 7.2 million of the world’s stunted children live in China, which ranks it the second in the world in terms of absolute number. ILO project surveys demonstrated that maternity related employment discrimination exists in all types of enterprises, with lack of supportive rules and nursing facilities in enterprises being the main reasons why majority of female workers were not breastfeeding their children during working time.

Massive disparities across different geographic areas exist. Maternal mortality rates as well as infant and under-five mortality rates are higher in western China compared with coastal areas. The prevalence of stunting and low weight for children under 5 years old in rural areas was 3 to 4 times higher than in urban areas during the period 1990-2010. UNICEF surveys revealed that less than 50% of children between 6 and 23 months in poor rural China receive the minimum acceptable diet.

In 2010 the anaemia rate for rural children aged 6-12 months was 28.2% while it was 20.5% for those aged 13-24 months. The baseline nutrition survey conducted in the joint programme pilot areas showed serious nutrition problems for women and children. For example, for children under 3 years of age, the anaemia prevalence was found to be 25.6%, iron deficiency 26.4%, Vitamin A deficiency and insufficiency 54.2%, and stunting 17.5%. The lowest exclusive breastfeeding rate was 10% in the pilot counties. The pilot counties’ lowest food insecurity rate at the household level was 35.1%.

Rapid economic and social development has also brought food safety challenges. Fraud and illegal addition of or misuse of chemical substances both contribute substantially to the burden of foodborne diseases, especially in children. For instance, more than 50,000 children were hospitalized and almost 300,000 suffered adverse health consequences following the scandal in which infant formula was contaminated with the chemical melamine.

The Joint Programme on Improving Nutrition, Food Safety and Food Security for China’s Most Vulnerable Women and Children (CFSN) aimed to improve food security, nutrition and food safety for women and children in six of the poorest counties in the three western provinces of Yunnan,

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Guizhou and Shaanxi, by addressing information gaps; implementing targeted interventions to improve breastfeeding and complementary feeding, safe and nutrition-sensitive food production, as well as balanced diet intake; and finally supporting policy development in relation to food security, nutrition and food safety.

b. List joint programme outcomes and associated outputs as per the final approved version of the joint programme Document or last agreed revision.

The joint programme had four outcomes:

1. Policy decisions and targeting are informed by reliable and up-to-date evidence on the magnitude, distribution, types and causes of undernutrition in China;
2. Undernutrition and micronutrient deficiencies reduced among poor women and children in selected demonstration counties;
3. Food-related illnesses reduced through safer food production and preparation for children;
4. National child nutrition and food safety policies, guidelines, regulations and standards are revised according to results of the pilots, and lessons are scaled up nationwide.

The ten outputs associated with these outcomes are as follows:

Output 1.1 Food security and nutrition situation in pilot counties understood by policymakers
Output 1.2 Targeting and monitoring improved through availability of an improved national database on nutritional status of women and children
Output 2.1 Exclusive breastfeeding increased and improved quality of complementary food with micronutrient supplements
Output 2.2 Household dietary intake of micronutrient-rich, locally-available food increased in three pilot counties
Output 2.3 National plan for food fortification in place and implemented
Output 3.1 Food production for children made safer in pilot areas
Output 3.2 Handling and preparation of food for infants and children made safer
Output 3.3 New national food safety law successfully implemented
Output 4.1 Advocacy package to convince of need to scale up to higher level
Output 4.2 Training of media

c. Explain the overall contribution of the joint programme to National Plans and Priorities

The Government of China pays high attention to food security, food safety and nutrition, women and children’s health. Food insecurity, malnutrition, and food safety challenges are major factors that restrict the development of rural areas, especially the poorest counties in China. CFSN is highly relevant to the following national plans and priorities, contributing in particular to maternal and child nutrition as well as food safety in the country’s poorest areas.

- China Food and Nutrition Development Outline (2001-2010)
- Food Safety Law

In brief, CFSN achieved the following:
• It contributed to the 8th Amendment to the Criminal Law that criminalizes acts endangering food safety.
• It contributed to the revision of the State Council’s Special Provisions for the Protection of Female Employees that extended maternity leave from 90 to 98 days to comply with international standards on maternity protection; and encourage enterprises to establish measures to support breastfeeding.
• It produced information on the key food security issues found in the six counties in terms of their geography, demography, economy, exposure to natural disasters and external shocks, agricultural productivity, accessibility, seasonal factors and the policies and programmes focused upon them.
• It supported the Ministry of Health to publish the 2012 National Report on the Nutritional Status of Children aged 0-6 years. This is the first government report on child nutrition in China.
• It piloted strategies on the production of a variety of micronutrient-rich foods and the consumption of a balanced diet promoting dietary diversification.
• It supported the integration of global indicators on maternal and child nutrition into the national nutrition surveillance system.
• The evidence that micronutrients supplements for children aged 6-23 months reduced children’s undernutrition stimulated government investment to sustain the intervention piloted by the programme.
• It piloted school-based education activities on nutrition and food safety.
• It led to improvements in the manufacturing practices of food-processing enterprises.
• It conducted many IEC (Information, Education and Communication) activities on food safety law and food safety knowledge, for food safety inspectors, food producers, lawyers, judges, media, women and children.
• It identified areas for improving food safety emergency response systems and food complaints systems at the local level.

The Joint Programme has contributed to national priorities on food security. The goal to ensure national food security and supplies of main agricultural products was prescribed in the 2020 blueprint for Chinese rural reform and development. It was further described in the “National Food Security mid- and long-term Plan (2008-2020)”. CFSN piloted strategies on nutrition-sensitive agricultural production. The strategies included support for keeping home vegetable gardens, raising poultry and animals, and nutrition education to achieve nutritional change at the household level. CFSN also worked on the information related to food security and vulnerability to allow evidence-based policy decision in relation to food security.

The China Food and Nutrition Development Outline 2001-2010, issued by the State Council in 2001, has several nutrition objectives to reduce undernutrition and specific vitamin and mineral deficiencies and related conditions. Specifically, the Plan aims to lower the prevalence of iron deficiency anaemia among children and pregnant women, and reduce vitamin A deficiency. It is clearly aligned with China’s Child Development Outline 2001-2010 and includes nutrition objectives. CFSN piloted the Yingyangbao intervention in the pilot counties, which reduced the prevalence of anaemia in children aged 6-23 months by 33.8% and by 48.4% in children aged 12-23 months.

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2 Yingyangbao is a sachet of soybean power mixed with vitamins and minerals. It is a form of food supplement given to young children to improve their nutrition status.
The CFSN’s food safety component was well aligned with a Government commitment at the highest level to strengthening food safety control as an area of public health, economic and development significance. Highlighting this enhanced commitment to addressing the safety of the food supply, the Food Safety Law of the People's Republic of China, 2009, was adopted by the National People’s Congress in February 2009. The legislation stipulates regulations and provision for the monitoring and assessment of food safety risks, food safety standards, and food production and business operations. This provided legislative backing for the implementation of activities under the CFSN. CFSN conducted extensive IEC (Information, Education and Communication) activities on food safety law and food safety knowledge, targeting food safety inspectors, food producers, lawyers, judges, media, women and children. The capacities developed will assist in the enforcement of the Food Safety Law, empower women and children to prepare food in a safer way and make safer choice of food. Some pilot food enterprises got HACCP certification through training to improve their food production practices. CFSN contributed to the revision of the Criminal Law to strengthen punishments for using dangerous food safety practices. These efforts will contribute to the reduction of foodborne diseases.

d. Describe and assess how the programme development partners have jointly contributed to achieve development results

Over 20 Ministries and national institutions at the central and local levels, as well as eight UN agencies worked together to bring valuable expertise and experience to this joint programme and build on each other's strengths. Within the programme’s short three year period, the multi-sectoral and multi-agency participation it engendered showed a significant advantage and higher efficiency over implementation by a single agency. The following management and coordination arrangements were used:

**National MDG-Fund Steering Committee**

Minister of Commerce (MOFCOM)
UN Resident Coordinator (UNRC)
Ambassador of Spain

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**Joint Programme Management Committee (JPMC)**

Co-chairs: Ministry of Health (MOH), WHO on behalf of participating UN agencies
Members: Participating UN agencies & government bodies

↓

**Programme Management Office (PMO)**

UN Joint Programme Coordinator
National Programme Coordinator
All roles and responsibilities were defined and understood. There were three layers of management and coordination mechanism under CFSN: the National MDG-Fund Steering Committee (NSC), the Joint Programme Management Committee (JPMC), and the Programme Management Office (PMO).

NSC was established to oversee this and other MDG Fund programme. It comprised the UN Resident Coordinator (UNRC), a representative from the Ministry of Commerce (MOFCOM) and a representative from the Government of Spain. MOFCOM, which serves as the national focal point of the UN system in China, was responsible for overall coordination of the joint programme. UNRC reported to the UNDP/Spanish MDG Achievement Fund Office on behalf of the joint programme. The UNRC took overall responsibility for facilitating collaboration between participating UN Organizations. It contributed to the joint programme implementation by providing oversight and strategic guidance to the joint programme.

The national and international organizations directly involved in implementing CFSN formed the JPMC, co-chaired by the WHO Representative and the Director-General of the Department of International Cooperation of Ministry of Health (MOH). WHO was the technical lead agency among the UN agencies and MOH took the lead role on the implementation of technical aspects of the joint programme. The UN Co-chair was responsible for coordination amongst UN organizations and the MOH Co-chair responsible for coordination amongst national organizations. JPMC contributed to the joint programme by ensuring operational coordination, managing joint programme resources to achieve the outcomes and outputs defined in the programme, addressing management and implementation problems and some other work.

PMO was responsible for the daily management of the CFSN. A National Programme Coordinator was responsible for overall programme supervision and coordination among ministries, agencies, provinces, municipalities and other programme implementing partners. Alongside the NPC, the UN recruited a UN Joint Programme Coordinator, who managed and coordinated the UN Agencies’ activities on a day-to-day basis. The UN Joint Programme Coordinator reported to the UN co-chair of the JPMC and National Programme Coordinator reported to the MOH co-chair of the JPMC. The National Programme Coordinator and UN Joint Programme Coordinator worked together closely to ensure a sound operation of the joint programme.

At implementation level, one participating national partner and the respective UN agency took joint overall responsibility and accountability for each output.

Each output was linked to one UN agency, which was technically and financially responsible for its implementation. To strengthen synergies and complementarities, each agency worked in close cooperation with other key UN agencies and partners that have significant experience in the related outputs and outcomes to ensure the maximum degree of results and information dissemination and usage.

For evidence-based information, WFP and the Chinese Academy of Agricultural Science focused on the analysis related to food security and vulnerability, UNICEF and China’s CDC on gathering and analysing the data on health and micronutrients deficiency, and WHO on the nutrition and child feeding data. WHO, UNICEF, NINFS and CIP jointly developed a unified survey tool.

FAO and MOA piloted the food-based approaches at the household level to achieve dietary adequacy of nutrients such as vitamin A and iron as a long term and sustainable way to address undernutrition.
For complementary feeding, UNICEF and China’s CDC implemented fortification intervention programme while WHO piloted the recipe using local food resources. WHO and ILO collaborated for maternity protection and breastfeeding.

For food safety, ILO and UNIDO selected the same food manufacturers for joint pilot studies.

For the training on the food safety law, UNESCO and the All Women’s Federation focused on women’s groups and local communities, WHO and National Center for Health Inspection and Supervision on the food safety inspectors and food business managers, UNDP and China Law Society on judges and lawyers.

WHO as lead agency coordinated all participating UN agencies in the development of a joint policy brief to the government as to the need to scale up from the pilot scale. UNICEF and UNESCO worked together with the support from each UN agency to develop a joint advocacy video on what the Joint Programme has achieved and its recommendations.

At the local level, government partners have cooperated to increase the Joint Programme’s productivity. For instance, the women’s association, the health inspection institute and the broadcasting bureau in Wuding County of Yunnan Province worked together to promote the food safety law.

II. ASSESSMENT OF JOINT PROGRAMME RESULTS

- Report on the key outcomes achieved and explain any variance in achieved versus planned results. The narrative should be results-oriented to present results and illustrate impacts of the pilot at policy level

<table>
<thead>
<tr>
<th>Planned Outcomes</th>
<th>Key Outcomes Achieved, and Impact at policy level</th>
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| 1. Policy decisions and targeting are informed by reliable and up-to-date evidence on the magnitude, distribution, types and causes of undernutrition in China; | -A baseline and end-line surveys were conducted on the food security situation at the household level in six pilot counties. Publication of *Analysis of Food Security and Vulnerability in Six Counties in Rural China* and a report on comparative analysis of data from a second survey made the number of people and regions affected by food insecurity as well as factors leading to food insecurity available, while making recommendations for policy intervention.  

The survey indicated that 13% of households in the six pilot counties are food insecure, with Luonan of Shaanxi Province having levels of household food insecurity as high as 35.1%. This has shown that food security is a localized issue with few areas with the greatest poverty being the most food insecure.  

*Analysis of Food Security and Vulnerability in Six Counties in Rural China* was broadly distributed to the relevant government agencies like the Ministry of Agriculture, National Development and Reform Commission, National Statistics Bureau etc. and international development and aid agencies as well as UN agencies such as the World Bank, ADB, DFID, FAO, UNDP, UNICEF, WHO etc. This will...
Contribute to the national policy decision and international development aid decision on food security.

The State Council Leading Group Office on Poverty Alleviation and Development wanted to adopt the methodology used in the food security and vulnerability surveys for their organization’s future research projects.

-Produced data on children’s growth, anaemia, and deficiency in iron, vitamin A, vitamin D etc. in the pilot counties. *Nutritional Status of Women and Children and Effectiveness of Nutrition Intervention in Improving Nutrition among Children* was issued.

-Child nutrition and feeding indicators were accepted by the Ministry of Health to be integrated into the national nutrition surveillance system.

| 2 Undernutrition and micronutrient deficiencies reduced among poor women and children in selected demonstration counties; | Due to the CFSN intervention, the prevalence in children of anaemia decreased by 33.8%. The prevalence of stunting, low weight and wasting decreased by 35.9%, 58.2% and 35.5%, respectively. The prevalence of vitamin A deficiency and insufficiency decreased by 46.0%. The prevalence of vitamin B12 deficiency decreased by 36.9%. The incidence of diarrhoea decreased by 27.9%.

- Food-based approach for dietary diversification was piloted at the household level to improve people’s nutrition especially women and children. The strategies included support for home vegetable gardens – growing vegetables rich in iron and vitamin A – through training, raising of poultry and livestock through training, nutrition education to achieve improvement on the nutrition knowledge, attitude and practice (KAP) at the household level.

Local production of micronutrient-rich foods and their consumption at the household level increased; nutrition knowledge, attitudes and practices improved; household incomes increased. The household dietary intake increased from 21.3% to 30.1% and Women Dietary Diversity increased from 3.5 to 5.3.

The model which was piloted of a multi-disciplinary approach, integrating agricultural and nutrition interventions, has been included in the Country Programming Framework for future cooperation between FAO and China during 2012-2015. This which will sustain the joint programme’s achievement and continue to make a contribution to the agricultural development, nutrition improvement and poverty reduction in the rural areas of China.

The pilot also helped change the agriculture sector’s mind-set. “Food security” in China tends to be equated with adequate grain supply. The pilot facilitated the agricultural sector to also have nutrition sensitive agricultural and food production mind-set and practices.
-13,055 children aged 6-23 months received and consumed Yingyangbao.

The effectiveness of Yingyangbao intervention stimulated government investment to scale up the project model. For example, in 2012 the central government decided to provide the children in 100 poor counties with free Yingyangbao valued at CNY 100 million.

-Studies were piloted to improve breastfeeding and complementary feeding. For example, recipes using local food were developed for complementary feeding; baby-friendly hospitals were re-evaluated; a series of advocacy and training materials were developed.

-Training package on maternity protection in the workplaces were developed and shared with partners; Research Report on Maternity Protection in Wuding County, Yunnan Province was published; An advocacy Pamphlet for Maternity Protection was produced by Wuding County; a Promotional Video named Luowu’s smile was produced and distributed;

The CFSN has contributed to the revision of the State Council’s Special Provisions for the Protection of Female Employees, which includes the extension of maternity leave from 90 to 98 days to comply with international standards on maternity protection; and encourages enterprises to establish measures to support breastfeeding.

3. Food-related illnesses reduced through safer food production and preparation for children

The CFSN’s food safety activities have strengthened food safety control systems at the local level in the pilot regions, focusing on the key food control system building blocks: food law and regulations; food control management; inspection services; laboratory services; information, education, communication and training. The specific results are as follows:

- Food enterprises manufacture practices were improved. Five pilot enterprises manufacturing food for children were trained in the HACCP (Hazard Analysis Critical Control Point) system, and four were certified as having established an HACCP system.

(Note: The HACCP system is a scientific and systematic way of enhancing the safety of foods from primary production to final consumption through the identification and evaluation of specific hazards and the taking of measures for their control to ensure the safety of food. HACCP is a tool to assess hazards and establish control systems that focus on prevention rather than relying mainly on end-product testing.)

-The capacity of pilot laboratories to perform food safety testing was enhanced. Four laboratories for food testing from Yunnan and Guizhou were trained in ISO standardization and management, with three being certified against ISO17025.
-The capacity of food safety/quality inspectors to carry out food safety monitoring was enhanced. 30 inspectors trained on carrying out inspections of HACCP systems.

More than 50 pieces of policy advice which were proposed, mainly in relation to the above two aspects, have been adopted by government and quality supervision departments in the pilot areas.

-More than 100 occupational safety and health inspectors and more than 400 food enterprise staff in the pilot enterprises have been trained in work safety;

Four pilot food enterprises have identified and corrected their potential workplace hazards and risks, and regulations on work safety have been developed.

-School-based education activities on nutrition and food safety were piloted. The project piloted the provision of education in nutrition and food safety to middle and primary school students. Supplementary materials for teachers and pupils respectively were prepared; head masters and teachers from 100 primary and secondary schools were trained, with such materials being integrated into the curricula of 60 primary and secondary schools.

Policy recommendations have been made to the government agencies: changes in mind-sets were brought about to improve awareness of and attention to nutrition and food safety education; teachers’ capacities on nutrition and food safety were increased; the development of textbooks on nutrition and food safety was strengthened; nutrition and food safety education was integrated into the curricula of primary school and middle school.

-Extensive IEC (Information, Education and Communication) activities were conducted on the food safety law and food safety knowledge, skills and practices for food safety inspectors, food producers, lawyers, judges, media, women and children.

-Areas were identified for improving food safety emergency response systems and food complaints systems at the local level. Flow charts for the food safety emergency response system and the food complaints system at county level were developed.

-100 media professionals were trained in child food safety and nutrition; Monthly increases greatly exceeding 10% in relevant articles were seen at the provincial level after training.

| 4. National child nutrition and food safety policies, | The CFSN has contributed to the revision of the relevant law and regulations during programme implementation: |
guidelines, regulations and standards are revised according to results of the pilots, and lessons are scaled up nationwide

- the 8th Amendment to the Criminal Law to criminalize acts endangering food safety.
- the State Council’s Special Provisions for the Protection of Female Employees, which includes the extension of maternity leave from 90 to 98 days to improve breastfeeding.
- The Yingyangbao intervention triggered a government investment of CNY 100 million to scale it up in 100 counties since Oct 2012.

The CFSN has produced a focused policy brief for the government entitled *Adequate, Nutritious and Safe Food for the Most Vulnerable Women and Children in China* and presented it and distributed it at the CFSN’s final event held on 11 April 2013.

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**b. In what way do you feel that the capacities developed during the implementation of the joint programme have contributed to the achievement of the outcomes?**

As mentioned earlier, the four CFSN outcomes are as follows:

1. Policy decisions and targeting are informed by reliable and up-to-date evidence on the magnitude, distribution, types and causes of undernutrition in China;
2. Undernutrition and micronutrient deficiencies reduced among poor women and children in selected demonstration counties;
3. Food-related illnesses reduced through safer food production and preparation for children;
4. National child nutrition and food safety policies, guidelines, regulations and standards are revised according to results of the pilots, and lessons are scaled up nationwide.

Many capacity building activities were conducted as part of the outputs leading to these outcomes. These capacity development efforts have contributed to the achievement of the outcomes in the following ways:

- By aiming the capacity building efforts at the above mentioned specific goals such as reducing undernutrition and micronutrient deficiencies of pilot counties’ women and children and improving safer food production and preparation for children. Therefore the planned outcomes motivated the capacity development efforts. For example, output 2.2’s planned goal was to increase by 30% household dietary intake of micronutrient-rich, locally-available food in the three pilot counties. In order to achieve this goal, 19 training sessions and 67 on-site technical demonstrations on agricultural techniques were conducted to strengthen capacity building for farmers. These capacity building activities played a salient role in helping local farmers to use practical agricultural technique to grow vegetables, raise poultry and livestock. In addition, nutrition education trainings were provided to more than 1000 households. These nutrition training activities have contributed to the household dietary intake of what they produced. As a result, household dietary intake of micronutrient-rich, locally-available food increased by 41.3%, which exceeded the target 30%.

- By changing the socio-political environment. To facilitate the use of Yingyangbao, multiple forms of nutrition and health advocacy and education measures were conducted like TV advertisement, lectures, slogans, and posters. These measures created a social atmosphere
that prioritized nutrition for women and children, which increased the compliance of Yingyangbao consumption: 99.6% of the children took the Yingyangbao as required.

- By changing the key decision maker’s motivation and attitude for their commitment to the addressed issue. For instance, a pilot child food enterprise knew nothing about HACCP. In the beginning the company staff were awed by the complex steps required to establish an HACCP system. They doubted the positive effect which the system could have on their production. The project therefore progressed slowly. However, through the training and a study tour to Austria to visit food enterprises there with HACCP systems, the General Manager recognized that HACCP had made a significant difference in management level and production volume to companies the same size and producing similar products as his. After he came back, he required his factory’s operations to come into strict accordance with the HACCP system.

c. Report on how outputs have contributed to the achievement of the outcomes based on performance indicators and explain any variance in actual versus planned contributions of these outputs. Highlight any institutional and/or behavioural changes, including capacity development, amongst beneficiaries/right holders.

Please find attached the CFSN’s monitoring framework (Annex 4) for detailed performance indicators. Institutional and/or behavioural changes, including capacity development, are highlighted below:

- The Food Safety Law Research Center, which the China Law Society created during programme implementation, sustains the CFSN.
- Four out of the five pilot enterprises manufacturing food for children which trained in HACCP (Hazard Analysis Critical Control Point) system, had their HACCP certified.
- Three of the four pilot food laboratories were accredited against ISO17025.
- The media professionals in the pilot provinces and counties are now better equipped with nutrition and food safety knowledge, which will enhance their reporting skills on nutrition and food safety issues.
- The agriculture sector is equipped with a nutrition-sensitive approach for agricultural production.
- The women and children’s knowledge, attitude and practice in nutrition and food safety improved in the pilot counties.

d. Who are and how have the primary beneficiaries/right holders been engaged in the joint programme implementation? Please disaggregate by relevant category as appropriate for your specific joint programme (e.g. gender, age, etc.)

The primary beneficiaries/right holders include women, children (0-2, 0-3), primary and middle school teachers and students, rural household, agriculture extensions, food safety inspection agencies, food enterprises, food control laboratories, journalists, government administrative agencies, legal workers, women’s association’s staff, safety production inspectors, women employees, maternal and child health workers.

The ways that the primary beneficiaries/right holders were engaged in the CFSN’s implementation include:
- They participated in the many IEC (information, education and communication) and training activities
- They participated in various surveys and studies
They cooperated in interventions: for example, children consumed Yingyangbao, households planted vegetables and raised animals and consumed them.

- implementation agencies directly implemented the programme

e. Describe and assess how the joint programme and its development partners have addressed issues of social, cultural, political and economic inequalities during the implementation phase of the programme:

i. To what extent and in which capacities have socially excluded populations been involved throughout this programme?

ii. Has the programme contributed to increasing the decision making power of excluded groups vis-a-vis policies that affect their lives? Has there been an increase in dialogue and participation of these groups with local and national governments in relation to these policies?

iii. Has the programme and it development partners strengthened the organization of citizen and civil society groups so that they are better placed to advocate for their rights? If so how? Please give concrete examples.

iv. To what extent has the programme (whether through local or national level interventions) contributed to improving the lives of socially excluded groups?

The CFSN worked with a fairly high level of equity in pilot areas. Interventions made no distinction of gender or race. Nutrition interventions by UNICEF, for example, covered all children aged 6-23 months in the pilot areas. Food safety education organized by UNESCO in schools covered all school children. Maternity protection supported by ILO addressed employment equality for men and women. Food safety knowledge was disseminated via multiple channels such as women’s associations, health inspection bureaus, and broadcasting stations, in an attempt to cover all planned beneficiaries of the interventions. Pilot manufacturers of infant food received all-round training and support on the basis of voluntary participation.

The CFSN recognized the importance of civil society and consumers as partners in addressing the issues of food security, nutrition and food safety. In all aspects, community participation was integrated into its design, implementation and monitoring. Increased media coverage of nutrition and food safety issues also allowed for a better informed citizen approach to this important issue.

The food security vulnerability analysis has provided data on the demographics, education levels, income, access to health, water, sanitation, agricultural practices, vulnerability to disasters, food consumption patterns and nutritional status of the households surveyed. It has contributed to a better understanding of food insecurity and nutrition issues in the country. In this way, it will be a valuable tool for the Government in the programming of resources, allowing it to target the most vulnerable groups when it formulates policy.

The CFSN empowered women and children as well as the local society to obtain their rights. For example, before the implementation of CFSN, most female workers regarded child bearing as a personal issue and those in the private sector were pressured by employers to resign after becoming pregnant and thus did not receive maternity protection. In the pilot county Wuding in Yunnan Province, there are a total of 228 enterprises with 3,712 female workers out of the total workers 15,921. Before CFSN implementation, only 164 female workers in four of these enterprises could enjoy maternity protection including breastfeeding support. After the programme’s implementation, 12 more enterprises started providing maternity protection to 447 female workers. After many women and children were trained on food safety knowledge and the food safety law, more women and local people started to use the food safety complaint hotline for expired food etc. The surveys
showed that over 60% of the women first selected “to complain to the relevant government sector” when they purchased substandard food after receiving training, which is 19% higher than the baseline survey. 73% of the women knew where to complain about food safety cases, far exceeding the baseline survey (less than 30%).

The CFSN contributed to improving the lives of the women and children as well as local people in many aspects. The sub-project which combined agricultural production and nutrition education also helped many households increase their income. One case study showed that one poor family could increase their annual pure income per person from CNY 1000 to CNY 1800 through selling the surplus food produced under the programme’s implementation. Food safety was enhanced and will continue to be enhanced through better knowledge and through safe food production, processing, handling and preparation at all stages along the food production chain. The end-line surveys showed that women had really put the knowledge to use in their daily practice. The percentages of women who do not eat expired food and who use different knives and different chopping boards to cut raw food and cooked food both rose 16%. Over 95% of the women thought that the training on food safety was very helpful in their daily lives and improved their life quality.

f. Describe the extent of the contribution of the joint programme to the following categories of results:

i. Paris Declaration Principles
   - Leadership of national and local governmental institutions
   - Involvement of CSO and citizens
   - Alignment and harmonization
   - Innovative elements in mutual accountability (justify why these elements are innovative)

ii. Delivering as One
   - Role of Resident Coordinator Office and synergies with other MDG-F joint programmes
   - Innovative elements in harmonization of procedures and managerial practices (justify why these elements are innovative)
   - Joint United Nations formulation, planning and management

The CFSN met the intervention targets of the thematic window, proved to be beneficial in advancing towards the achievement of the MDGs and putting the Paris Declaration into practice at national and local levels, and produced significant intervention results and impact. Certain results have been integrated into national policies or have been widely applied with a fairly high degree of sustainability. The key to ensuring such sustainability of projects in poor areas is policy support at national or provincial levels.

The CFSN facilitated the realization of the principles of the Paris Declaration. As concerns country ownership, for example, sub-projects of the CFSN offered a number of policy recommendations which were accepted and applied by several government departments, increasing the government’s attention to and action for achieving the MDG goals. For instance, the central government provided, free of charge, Yingyangbao intervention to children in 100 impoverished counties, and revised the Special Provisions for the Protection of Female Employees. Creating a favourable atmosphere for cooperation, the CFSN also facilitated cooperation among UN agencies, government departments and institutions in China to achieve the MDG goals. Rather than being collaborative merely in form, the CFSN took a multi-perspective approach to meet its objectives with an emphasis on effectiveness, and promoted coordinated efforts to achieve its objectives and fulfil its responsibilities.
The office of UN Resident Coordinator played an important role in facilitating collaboration between participating UN Organizations to ensure that the programme stayed on track, and that promised results were delivered. For example, it gave guidance on the organization of the CFSN’s mid-term review, the CFSN’s final evaluation, the organization of the meetings of the Joint Programme Management Committee, and the organization of the CFSN’s final event.

III. GOOD PRACTICES AND LESSONS LEARNED

   a. Report key lessons learned and good practices that would facilitate future joint programme design and implementation

For good practices:

(1) CFSN was well aligned with national and local development strategies and plans, which ensured government ownership and sustainability. Certain results were already integrated into national policies or were widely applied with a fairly high degree of sustainability during the implementation of the CFSN. For example, CFSN contributed to the eighth amendment to the Criminal Law for criminalizing acts that endanger food safety (implemented from 1 May 2011). The policy recommendations on maternity protection in connection with maternity protection including breastfeeding were incorporated into the Special Provisions on Labour Protection for Female Employees promulgated by the State Council (implemented from 28 April 2012). The successful Yingyangbao intervention stimulated the government to invest in the scale-up of the intervention in 100 poor counties.

(2).An integrated approach to agricultural production combined with nutrition education was explored and proved effective and sustainable to improve women, children and the whole population’s nutrition and health.

(3).A clear coordination and management structure with clearly defined roles and responsibilities was found to be important to the success of such multi-sector and multi-agency joint programme.

(4) Putting a monitoring framework in place and implementing the framework was found to be necessary to facilitate the programme’s implementation, hold the implementation agencies accountable and measure the programme’s progress and results.

(5) Capacity building activities in combination with the immediate practical application of what is learned was found to produce direct results. For example, four food enterprises applied and achieved certification to HACCP system after they were trained on HACCP system, which immediately led to increased buyers’ confidence through increased orders and reductions in complaints.

(6) Capacity building for occupational safety and health inspectors and the pilot food enterprise staff was found to be effective for improving their awareness on occupational safety; the guidance on establishing work-safety regulations and on-site identification of potential risks and hazards at workplaces, provided by the project expert team, strengthened the production safety level as well as the safe production capacity of the pilot enterprises.

(7) CFSN led to a number of innovative working mechanisms and models: for instance, the newly established China Food Safety Law Research Center, training of legal workers for court trials of criminal cases involving food safety, exploring ways to appropriately combine agricultural
development and nutrition education, and collaboration among women’s associations, health inspection institutes and broadcasting stations in pilot counties to promote food safety laws.

For lessons learned:

(1) Allow more time to design and implement the programme:

The 3-year schedule for CFSN implementation was very aggressive when there were eight UN agencies and over 20 national and local institutions working together to implement such a multifaceted programme at a high cost US$ 6 000 000. Although a 5-month no-cost extension was granted, this time was mainly spent on conducting the final evaluation and organizing the final event.

Coordination itself took time. There was the case of several months being spent on coordinating two UN agencies and their national counterpart agencies in their joint visits to the field. A significant lead time was required to set up the programme’s coordination mechanism and prepare for the formal launch of the sub-projects. The whole joint programme and most the sub projects were launched half year later when the CFSN was officially approved in December 2009. Agricultural production is seasonal and is easily affected by unusual weather patterns such as drought, which requires more time to implement agriculture-related projects. The agriculture sub-project of CFSN experienced this situation.

Therefore it is more realistic to set the timeframe to at least five years for the implementation of such an ambitious programme.

(2) Fewer agencies work together more jointly

Having eight UN agencies and over 20 national institutions working together addressing the issues of food security, nutrition and food safety at the same time through each agency’s distinct expertise and comparative advantage, was very effective in improving women’s and children’s health. However, further efforts can be made for more harmonization in future joint programmes. During the CFSN implementation, some activities with the same target beneficiaries or of a similar nature were implemented by individual agencies. Some local governments like Wuding County took the leadership role to coordinate some food safety IEC activities and achieve good synergies but it was not the case in all the pilot counties.

In the future, the number of participating agencies could be reduced so that the model can be explored of having fewer agencies involved in identifying the common priority areas and subjects as well as target population and coordinating joint planning and implementation towards the achievement of common objectives. This will help reduce coordination transaction costs, make harmonization easier, and achieve greater synergy to improve aid effectiveness and efficiency.

(3) Strengthen the role of PMO roles:

Because the CFSN involved a large number of agencies, the Programme Management Office (PMO) played an important role in coordination and communication to facilitate programme implementation. In any future joint programmes, their PMOs should be empowered with more authority, responsibilities and resources to strengthen coordination and integration.

b. Report on any innovative development approaches as a result of joint programme implementation
As a result of CFSN implementation, eight UN agencies and over 20 national ministries and institutions at national level and subnational level worked together to achieve the planned outputs in an orderly way. This is unprecedented. The success of this extensive coordination can be attributed to the management and coordination mechanisms adopted for the programme: the National MDG Steering Committee, the CFSN Management Committee and the Programme Management Office. The CFSN Monitoring Framework held the responsible agencies accountable for their specific outputs.

In order to better implement the programme, a number of new mechanisms were also established at the national level. For example, the China Law Society created the Food Safety Law Research Center. This Center is the first institution of its kind in China. It not only executed project activities efficiently but it will also sustain itself after the completion of the programme.

Some training activities have led to changes in the beneficiaries. For example, the HACCP training which UNIDO and AQSIQ/CNIS organized for five food enterprises helped four of them obtain HACCP certification. As a result, one of these enterprises reflected that in 2012 there were no complaints about the moon-cakes they had made for the mid-moon festival, in stark contrast with the many complaints they had received in previous years, while many dealers approached them for orders when they heard that they had HACCP certification, which increased their orders by 50% compared with previous years.

Some CFSN activities led to stronger links between national and local initiatives. For example, the National Center of Health Inspection and Supervision’s communication materials on WHO’s five keys message to safer food and how to identify safe food was adopted by the Office of the State Council Food Safety Commission and the Ministry of Health. 100,000 copies were printed and distributed throughout the country for the National Food Safety Awareness Week. They were also used as the main sources for the communication materials prepared for the awareness weeks in each province, repeatedly printed, and distributed locally.

Finally, CFSN targeted the education sector, media professionals and legal workers, which is very unique. This will have important implications for the improvement of nutrition and food safety.


c. Indicate key constraints including delays (if any) during programme implementation
   
   a. Internal to the joint programme
   
   b. External to the joint programme
   
   c. Main mitigation actions implemented to overcome these constraints

The large number of UN agencies involved in the programme did mean that a greater effort was required in coordination and information exchange. This necessarily increased the transaction costs of the programme. This meant among other things that the programme was actually launched about half a year after the CFSN was formally approved in December 2009.

Administrative/Financial: The differing administrative procedures of UN Agencies occasionally impeded smooth joint implementation. Partners usually needed to sign a contract with each agency, each with different budgeting and reporting requirements. In addition, the different budgeting systems and requirements of the UN Agencies and the MDG Achievement Fund overburdened UN staff in budget reporting exercises.
The government institutions involved in the programme have different reporting lines and do not possess mechanisms for cross-ministerial communication. This meant that MOH, as the lead national coordinating agency, had no formal authority to coordinate other government agencies for programme implementation. Coordination was based on the willingness and commitment of the programme partners to coordinate, rather than on institutional mechanisms.

Due to the serious drought which the pilot counties suffered from during the implementation period, the season for growing modified grains was missed and had to be postponed to next year. This delayed implementation of some activities.

The CFSN Management Committee meetings were organised to raise the awareness of high-level staff on the coordination and effectiveness of the CFSNs. The Ministry of Health encouraged local health authorities to play a leading role in local coordination. As a result of the CFSN’s mid-term review, an accelerated action plan was developed and followed by the joint programme team, which facilitated the programme completion.

d. Describe and assess how the monitoring and evaluation function has contributed to the:
   i. Improvement in programme management and the attainment of development results
   ii. Improvement in transparency and mutual accountability
   iii. Increasing national capacities and procedures in M&E and data
   iv. To what extent was the mid-term evaluation process useful to the joint programme?

Monitoring and evaluation (M&E) was implemented collaboratively throughout the CFSN. The programme monitoring framework and the annual work plans were the main tools for M&E activities. The participating UN agencies, in collaboration with their national counterpart agencies, reported the relevant information regularly. The information so collected and analysed included the indicators at the activity, output and outcome levels, to show progress towards the attainment of the expected outcomes. The information also included thematic indicators, CFSN coordination and the Paris Declaration. These exercises indicated with evidence where the programme was, which facilitated programme management and the attainment of programme’s outcomes.

This process stimulated greater transparency and accountability of the programme in delivering results. It also enhanced ownership and sustainability.

The mid-term evaluation led to a higher degree of output efficiency. For example, following the recommendation to provide coherent reports, the Programme Management Committee actively coordinated the work of participating agencies to strengthen cooperation and the integration of reports. The mid-term evaluation indicated that the duration of the CFSN was not sufficient to handle all the programme’s objectives, so the CFSN requested a no-cost extension, which was granted.

e. Describe and assess how the communication and advocacy functions have contributed to:
   i. Improving the sustainability of the joint programme
   ii. Improving the opportunities for scaling up or replication of the joint programme or any of its components
   iii. Providing information to beneficiaries/right holders
CFSN developed a set of Communication Guidelines for the CFSN to facilitate the promotion of the programme as well as the MDG-F itself; to brand the CFSN with a uniform and distinctive image and to ensure the uniformity of documents and publications.

CFSN conducted extensive communication and advocacy activities. On the one hand, communication and advocacy targeting beneficiaries/right holders is a means of achieving programme outcomes and or greatly facilitating the attainment of the results of CFSN interventions. The outreach activities to CFSN beneficiaries/right holders included focus group discussions, household surveys, use of local communication mediums such as county TV stations, radios, and newspapers, as well as various training activities. These activities enabled the programme’s beneficiaries/right holders to have adequate access to the programme’s information on nutrition, food safety and health, which in turn impacted/changed their attitudes and behaviours and improved their nutrition and health status.

On the other hand, the CFSN communicated and advocated the results to the relevant government decision-making agencies for scaling up or replication. As a result, the Yingyangbao intervention, for instance, stimulated the government to invest in a scale-up of the intervention to children in 100 poor counties.

The UN jointly produced a Policy Brief, and the PMO organized the national participating agencies to compile “Best Practices Report” targeting the various relevant government agencies and bringing to their attention the opportunities for scaling up or replicating the CFSN or any of its components.

e. Please report on scalability of the joint programme and/or any of its components
   i. To what extend has the joint programme assessed and systematized development results with the intention to use as evidence for replication or scaling up the joint programme or any of its components?
   ii. Describe example, if any, of replication or scaling up that are being undertaken
   iii. Describe the joint programme exit strategy and assess how it has improved the sustainability of the joint program

Much work was done to document the development results and policy recommendations in a systematic way. These are instrumental to facilitating replication or scaling up of the CFSN or its components.

- An external evaluation was conducted of the whole CFSN with evidence-based development results documented and recommended for replication and/or scaling up.
- The UN jointly developed a policy brief entitled “Policy Brief: Adequate, Nutritious and Safe Food for the Most Vulnerable Women and Children in China” to advocate replication of and/or scaling up of the CFSN or any of its components.
- The Programme Management Office organized the compilation of a “Best Practices Report”.
- The UN produced a video entitled “Eating Well, Growing Well” as an advocacy tool.
- Many sub-projects of CFSN conducted self-assessments of their good practices and lessons learned, and proposed recommendations to replicate or scale up their components. For example, UNIDO and AQSIQ-CNIS produced a series of policy advices, more than 50 of which were adopted by local governments and quality inspection departments.

Please see the following for the programme exit strategy including examples of replication or scaling up that are being undertaken:

(1) CFSN design and implementation
The programme was designed to bring about changes at both local and national levels. Sustainability of programme interventions at the local and national levels was achieved by building the capacity of local stakeholders, including through trainings, and by ensuring ownership through alignment with local and national development strategies and the use of participatory approaches. Working with the national and local governments and institutions to get their buy-in helps sustain the programme.

Sustainability is also being achieved through the contribution which the programme’s policy recommendations made to the revision of national legislation during the programme period. A number of programme results helped to bring about revisions in national legislation in relation to food safety and breastfeeding. The eighth amendment to the Criminal Law took into account programme recommendations for criminalizing acts that endanger food safety (implemented from 1 May 2011). The policy recommendation on maternity protection in connection with breastfeeding was inserted into the Special Provisions on Labour Protection for Female Employees promulgated by the State Council (implemented from 28 April 2012). Further actions are required to strengthen the implementation of the Special Provisions on Labour Protection for Female Employees in particular taking measures to promote maternity protection.

The establishment of new institutions and mechanisms under the programme and their maintenance after the programme’s end will also ensure sustainability. For instance, the China Law Society established the Food Safety Law Center in August 2010, which continues on even after the programme’s end.

Other examples as follows illustrate the sustainable impact of the CFSN:

- Key policy makers were informed by evidence-based data on the status of food security in the pilot areas, including the Ministry of Agriculture, the State Council Leading Group Office for Poverty Alleviation and Development, the State Council Development and Research Centre, the National Disaster Reduction Center of the Ministry of Civil Affairs and many other ministries and agencies. As a result, the National Nature Foundation has funded the Chinese Academy of Agricultural Sciences to conduct in-depth surveys and analyses of food insecurity building on the CFSN’s results.

- The local farmers have been equipped with the mind-set of nutrition sensitive food production and new agricultural techniques which they will continue to apply to their daily agricultural production practices even after the completion of the programme. This will promote the long-term sustainable development of local agricultural production, which will increase the household dietary intake of micronutrient-rich, locally available food.

- The pilot model of the multi-disciplinary approach integrating agricultural and nutrition interventions have been included in the Country Programming Framework for future cooperation between FAO and China during the period 2012-2015, which will sustain the CFSN’s achievements in this area and continue to make a contribution to the agricultural development, nutrition improvement and poverty reduction in the rural areas of China.

- The Yingyangbao intervention has stimulated government investments to sustain the intervention and improve children’s nutrition and health status over a wider area of China.
• Maternal and health nutrition indicators have been accepted by the Ministry of Health to be used in future national nutrition and health surveys. This will enhance evidence based policy decisions on maternal and child health and nutrition in China.

• Collective agreements now include maternity protection measures specifying the right to breastfeeding breaks for women.

• The fact that food production enterprises have attained HACCP certification through HACCP training directly contributes to safer food production. So does that fact that food testing laboratories have received ISO 17025 accreditation through ISO 17025 training since there is now improved capacity to analyse food samples and so verify the safety and quality of food, and to enable appropriate action to be taken to protect consumers whenever necessary.

• The food processing enterprises were trained on the work-safety-standardization system and conducted on-site correction of workplace hazards and risks to promote food safety. SAWS will continue to implement this work-safety-standardization system in order to contribute to safer food production.

• The China Law Society created the Food Safety Law newsletter and launched the China Food Safety Law website, which it will maintain after the programme ends. Please see the website [www.foodlaw.cn](http://www.foodlaw.cn)

In addition, national and local workshops under sub-projects have been held to share programme good practices, lessons and policy recommendations with decision makers and other key stakeholders.

(2) CFSN Final Event

The high-level CFSN final event was organized on 11 April 2013. It showcased CFSN achievements, shared good practices, proposed policy recommendations, and made the case for more efforts being made and resources allocated for improving nutrition, food safety and food security for vulnerable women and children. The event got a very high level and wide participation. High-ranking participants included the Vice-Minister of Health and five heads of UN Agencies in China. Other participants included representatives of government participating agencies, representatives from development agencies, and media. Four CFSN joint knowledge products were widely disseminated at the final event: Final Evaluation Report, Best Practices Report, A Collection of Presentations at the Final Event, Policy Brief: Adequate, Nutritious and Safe Food for the Most Vulnerable Women and Children in China.

Please see the Annex 2 for the minutes of the event.

(3) CFSN Policy Paper

A CFSN policy brief was developed in both English and Chinese by the UN participating agencies in collaboration with the national counterpart agencies. The policy paper aims to distil CFSN’s good practices and policy recommendations and advocacy for scale-up of good practices at both local and national levels and to promote policy change in improving nutrition, food safety and food security for China's women and children. The paper’s target audience includes national and local policy makers, potential donors, and development practitioners. Hard copies were disseminated at the Final Event and a digital version was posted on the MDG-F website.
IV. FINANCIAL STATUS OF THE JOINT PROGRAMME

a. Provide a final financial status of the joint programme in the following categories:
   1. Total Approved Budget 2. Total Budget Transferred 3. Total Budget Committed 4. Total Budget Disbursed

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b. Explain any outstanding balance or variances with the original budget

V. OTHER COMMENTS AND/OR ADDITIONAL INFORMATION
VI. CERTIFICATION ON OPERATIONAL CLOSURE OF THE PROJECT

By signing, Participating United Nations Organizations (PUNOs) certify that the project has been operationally completed.

<table>
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<tr>
<th>PUNO</th>
<th>NAME</th>
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<td>Percy W. Misika</td>
<td>FAO Representative in China, DPR Korea</td>
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<td>Ann Herbert</td>
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VII. ANNEXES

1. Matrix of knowledge products produced by the join programme
2. Report of the CFSN final event on 11 April 2013
3. Final Evaluation Report
4. M&E framework with update final values of indicators
5. Policy Brief
## Annex 1 KNOWLEDGE PRODUCTS

**Joint Programme on Improving Nutrition, Food Safety and Food Security for China’s Most Vulnerable Women and Children**

### Outcome 1: Undernutrition and micronutrient deficiencies reduced among poor women and children in selected demonstration counties

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<td>Advocacy and communication materials</td>
<td>Analysis of Food Security and Vulnerability in Six Counties in Rural China</td>
<td>It’s a publication revealing the food security and nutrition situation in six poor counties in rural China. Advices on improving the nutrition, food security and food safety for China’s most vulnerable women and children are also given on the basis of the findings from the field study and analysis.</td>
<td>Print and electronic <a href="http://www.wfp.org/content/china-analysis-food-security-and-vulnerability-six-counties-rural-china-2011">http://www.wfp.org/content/china-analysis-food-security-and-vulnerability-six-counties-rural-china-2011</a></td>
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### Outcome 2: Undernutrition and micronutrient deficiencies reduced among poor women and children in selected demonstration counties

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<td>Lessons learned</td>
<td>1. Nutritional status of pregnant &amp; lactating women and children aged 0-3 years need to be improved. 2. Yingyangbao (YYB) is an effective intervention supplementary food</td>
<td>1. High prevalence of anemia, vitamin A&amp;D insufficiency, folic acid and vitamin B12 deficiency in women and children. High stunting and low weight in children. 2. YYB significantly improved anemia, stunting, low weight, diarrhea, vitamin A, B12 and folic acid deficiency.</td>
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<td>Case studies</td>
<td>Baizi village, maojie township, wuding county</td>
<td>Hongjia Zhu, 6 month of age, anemia affected, taking YYB for 9 months and</td>
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<td>Case studies</td>
<td>Research report on maternity protection in Wuding County</td>
<td>This report presents the main findings of an enterprise survey on maternity protection in Wuding, and proposes counter measures. The report contributes to the revision of the National Regulation on Labour Protection of Women Workers.</td>
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<td>Advocacy and communication materials</td>
<td>Improving Agricultural Production and Dietary Diversity</td>
<td>A project picture album that introduces the implementation and achievements of the project and presents the good practices.</td>
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<td>Education materials (for beneficiaries) e.g. leaflets, posters materials</td>
<td>Family Nutrition Guide Learning Manual Poster on Nutrition Education (Calendar) Vegetable Cultivation Learning Manual (Huize County/Wuding County/Pan County) Livestock and Poultry Breeding Learning Manual</td>
<td>Farmers’ learning manuals and posters on nutrition education, vegetable cultivation, livestock and poultry breeding.</td>
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<tr>
<td>(Huize County/Wuding County/Pan County)</td>
<td>Yingyangbao introduction books</td>
<td>1. To teach caregivers how to prepare and feed YYB on children 2. Breastfeeding and supplementary feeding, skills and children’s development milestone 3. Food choices for children 4. Food choices for women 5. The timing, sequence, quality and quantity for supplementary foods</td>
<td>print</td>
</tr>
<tr>
<td>Brochure on maternity protection</td>
<td>The brochure provides knowledge on maternity protection, with the purpose to raise public awareness.</td>
<td>Print</td>
<td></td>
</tr>
<tr>
<td>Maternity Protection Resource Package - From Aspiration to Reality for All</td>
<td>The Resource Package provides inspiration and tools to help organizations and individuals everywhere to strengthen and extend maternity protection to all women. The Package can be used as a reference for self-learning, training, policy advice, research and action by governments, trade unions, employers’ organizations, ILO and UN officials, NGOs, researchers and practitioners.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Technical guidance | Family Nutrition Guide Workbook
Vegetable Cultivation Training Manual (Huize County/Wuding County/Pan County)
Livestock and Poultry | Training guides on nutrition education, vegetable cultivation, livestock and poultry breeding. | Print |
<table>
<thead>
<tr>
<th>Breed Training Manual (Huize County/Wuding County/Pan County)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MDG-nutrition survey and intervention work manual</strong></td>
</tr>
<tr>
<td>All skills in nutrition survey including anthropometry, blood sampling and questionnaire, all skills in YYB reception, storage, distribution, advocacy and data collection</td>
</tr>
<tr>
<td><strong>print</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Training materials (for service providers)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>YYB standard</strong></td>
</tr>
<tr>
<td>YYB quality control, storage and transportation</td>
</tr>
<tr>
<td><strong>print</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Videos</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Video clips of project activities from project sites on agriculture production</strong></td>
</tr>
<tr>
<td><strong>electronic</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The Smile of Luowu</th>
</tr>
</thead>
<tbody>
<tr>
<td>The video presents how Wuding carried out maternity protection at workplaces under the support of Wuding trade union, and how workers benefited from it. The video will be distributed provincial or even national wide aiming to promote the “Wuding model” and strengthen and extend maternity protection.</td>
</tr>
<tr>
<td><strong>media</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Photographs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Photos of project activities from project sites</strong></td>
</tr>
<tr>
<td><strong>electronic</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Nutrition survey, YYB distribution, advocacy lectures, slogans, blackboard, YYB consumption, archive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Photos were taken on site during nutrition survey &amp; intervention including training meetings, survey field work, YYB storage, YYB distribution, YYB consumption, home visit, archive management.</td>
</tr>
<tr>
<td><strong>electronic</strong></td>
</tr>
<tr>
<td>Types of Product</td>
</tr>
<tr>
<td>------------------</td>
</tr>
<tr>
<td>Lessons learned</td>
</tr>
<tr>
<td>Other general products about the JP</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>3. “Needs assessment of training on new food safety law and rights protection in Zheng’an County, Guizhou Province”</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>Policy recommendation to the eight amendment to the criminal law</td>
</tr>
<tr>
<td>Print in Chinese</td>
</tr>
<tr>
<td>Advocacy and communication materials</td>
</tr>
<tr>
<td>Dali Management and Policy Advice Report, April 2012 (Chinese)</td>
</tr>
<tr>
<td>Yuxi Management and Policy Advice Report, April 2012 (Chinese)</td>
</tr>
<tr>
<td>Bi monthly China Food Safety Law Magazine</td>
</tr>
<tr>
<td>Print - 15 editions published and will continue the issuance after the programme</td>
</tr>
<tr>
<td>Education materials (for beneficiaries) e.g. leaflets, posters materials</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>1. “Improving Nutrition &amp; Food Safety Education in Primary and Secondary Schools in Shaanxi and Yunnan” Supplementary Teaching and Learning Materials for Grade One to Six (Student’s Handbook)</td>
</tr>
<tr>
<td>2. “Improving Nutrition &amp; Food Safety Education in Primary and Secondary Schools in Shaanxi and Yunnan” Supplementary Teaching and Learning Materials for Grade One to Six (Teachers’ Manual)</td>
</tr>
<tr>
<td>3. “Improving Nutrition &amp; Food Safety Education in Primary and Secondary Schools in Shaanxi and Yunnan” Supplementary Teaching and Learning Materials for Grade Seven to Nine (Students’ Handbook)</td>
</tr>
<tr>
<td>4. “Improving Nutrition &amp; Food Safety Education in Primary and Secondary Schools in Shaanxi and</td>
</tr>
<tr>
<td>Education materials (for beneficiaries) e.g. leaflets, posters materials</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>2. Food safety publicity materials for rural women of child-bearing age in project counties: apron</td>
</tr>
<tr>
<td>3. Food safety publicity material for rural women of child-bearing age in project counties: brochure</td>
</tr>
<tr>
<td>4. Food safety publicity material for rural women of child-bearing age in project counties: fan</td>
</tr>
<tr>
<td>5. Food safety publicity material for rural women of child-bearing age in project counties: handbag</td>
</tr>
<tr>
<td>6. Food safety publicity material for rural women of child-bearing age in project counties: poster</td>
</tr>
</tbody>
</table>
7. Food safety publicity material for rural women of child-bearing age in project counties: door curtain

8. The food safety training manual targeting food production and business managers in rural areas

7. The curtain includes picture with the theme of ‘food safety every day, health and peace every year’, and the food safety knowledge

8. The manual covers (1) essentials of administration of food production and operation enterprises; (2) outreach of food safety knowledge.

<table>
<thead>
<tr>
<th>Technical guidance</th>
<th>Guidelines on safety and health at work in food processing industry</th>
<th>The guideline provides instructions to the food enterprises who want to establish work safety standardization system.</th>
<th>Print</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training materials (for service providers)</td>
<td>1. Training manual on occupational safety and health for small and medium sized enterprises</td>
<td>1. The Guidelines will help food-producing enterprises improve work safety at workplaces.</td>
<td>Print</td>
</tr>
<tr>
<td></td>
<td>2. Training manual for work safety inspectors</td>
<td>2. This training manual will help OSH inspectors strengthen the capacity on law enforcement on work safety.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>HACCP Training Manual: Print</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Topic</td>
<td>Description</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dairy Industry, February 2011 (Chinese)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HACCP Training Manual: General Use, November 2011 (Chinese)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional Reporting on Food Safety and Child Nutrition Issues in China</td>
<td>A training handbook for journalists and media professionals on how to professionally report on food safety and nutrition Issues.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“Introduction of new food safety law and food security and safety”</td>
<td>A training manual for women groups on introduction of new food safety law, knowledge on food security and safety, as well as on rights protection.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The training manual for food safety inspectors in rural areas</td>
<td>The training manual includes three parts: (1) essentials of food safety supervision; (2) outreach of food safety knowledge; (3) contents of laws and regulations on food safety.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Videos</td>
<td>Food safety publicity material for rural women of child-bearing age in project counties: video. The play time of the video is about 10 minutes, and it includes two sets. The first set mainly explains about how to buy safe food, and the last set mainly explains the precautions on food processing and preservation.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Outcome 4 National child nutrition and food safety policies, guidelines, regulations and standards are revised according to results of the pilots, and lessons are
Training materials (for service providers)

<table>
<thead>
<tr>
<th>Type of Product</th>
<th>Title</th>
<th>Description</th>
<th>(Print/electronic/ media)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training materials (for service</td>
<td>Professional Reporting on Food Safety and Child Nutrition Issues in</td>
<td>A training handbook for journalists and media professionals on how to professionally report on food safety and nutrition Issues</td>
<td>Print/electronic</td>
</tr>
<tr>
<td>providers)</td>
<td>China</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Videos</td>
<td>Eat Well, Grow Well</td>
<td>Joint programme’s advocacy tool: a multimedia presentation showcasing the joint programme’s achievement and provide policy recommendations</td>
<td>electronic</td>
</tr>
</tbody>
</table>

scaled up nationwide.
Annex 2: Report on the Final Event on the Joint Programme on Improving Nutrition, Food Safety and Food Security for China’s Most Vulnerable Women and Children Supported by UN MDG Fund

The Final Event on the Joint Programme on Improving Nutrition, Food Safety and Food Security for China’s Most Vulnerable Women and Children was held in Beijing, on April 11, 2013. There were 150 participants from 6 Chinese Centre Government Agencies, 8 UN Agencies, Press Agencies, bilateral donor Agencies and 12 Chinese project implementation institutions including 6 pilot counties attended the final event. The purpose of the final event was to show case findings and conclusions of the programme, provide policy recommendation to the government, lay out areas and opportunity for future collaboration and partnership UN-China on improving nutrition, food safety and food security for China’s most vulnerable women and children. The Final Event was organized in company with achievements exhibition including printed products developed by the project implementation institutions from 2009-2012including the no cost extension.

The Event was carried out in 3 parts namely opening session, technical session of experience sharing on the best practice and introduction of evaluation conclusion as well as policy recommendation.

I. Views sharing at the opening session

1. UNRC

Mrs. Renata Dessallien, UN Resident Coordinator delivered speech. She said food security and safety are complex sustainable development issues. Not only are they directly linked with the health and wellbeing of all individuals, but they also relate to issues such as the environment, industry, employment, water and land resources, and other areas. Resolving food safety and security is an absolutely essential element of sustainable development, and it requires cross ministerial, cross discipline collaboration.

She pointed out that China has made great progress in the area of food and nutrition, but it continues to faces important challenges in this area.

Firstly, in terms of quantity, while China has reached grain self-sufficient rate above 95% in recent years, which also contributing to the world’s food security, nevertheless important disparities exist among regions of the country. Substantial efforts are still needed to ensure full access to food for vulnerable groups, especially in remote rural areas, where 91 million people in still at risk of experience food insecurity.

The second main remaining challenge relates to the quality of food and nutrition. This
requires continuous efforts to improve standards of the food production and processing industries, ensuring safety of the food chain all the way from production to consumption.

With the generous support of the Spanish Government, the UN Joint Programme brought together over 20 Government ministries and institutions and 8 agencies of the United Nations to promote a comprehensive approach to food security, including child and maternal nutrition. These efforts focused on six of China’s poorest counties in Guizhou, Yunnan and Shaanxi Provinces. Through multi-stakeholder cooperation, the programme piloted a strategy to respond to the challenge of improving nutrition, food safety and food security for women and children in poverty-stricken areas.

The work ranged from contributions to the legal framework for food safety in China, to promotion of good practices in increasing food safety and nutrition in schools, hospitals, and increasing the quality standards of food producing industries. Some of the outcomes have been integrated into national policies or are being widely applied. Since the economic capacity of poverty-stricken areas is limited, policy support from national or provincial levels is the key to guaranteeing sustainability of these efforts.

She stressed that The Joint Programme has also demonstrated that intersectoral cooperation in response to complex development challenges such as this is essential. No single institution can solve these problems alone. Only by sharing and integrating data, plans, financial coordination and implementation strategies between institutions can we achieve comprehensive and coherent solutions to these challenges. The engagement and cooperation of the Ministry of Health, Ministry of Agriculture, Ministry of Justice, and numerous other important institutions that participated in this programme were crucial for the success of this programme. We know how difficult this inter-institutional cooperation can be, as it challenges silo thinking and competitive relations between institutions. But it is the only way to effectively address complex development challenges.

Mrs. Nenata Dessalien also extended her heart-felt congratulations to all people who have worked in this joint program for their efforts to help achieve its results. She expressed her appreciation particularly to all the ministries involved in the programme, with special thanks to the Ministry of Health for its leadership of the programme. Vice Minister Chen Xiao Hong, the UN stands ready to continue our support to China’s efforts to promote a healthier society in China and in the world. Meanwhile she thanked the Ministry of Commerce of China for its wise guidance and coordination of the four MDGF Joint programmes in China. The MOFCOM colleagues have done a wonderful job on this.

In her speech, Mrs. Dessalien especially thanked the Government of Spain for its generous support to the joint programmes in China and globally with its MDG Fund.
She hoped that the fruits of this programme may live on long after the formal closure of the project, for the full benefit of all Chinese people. After all, the right to food (and by that we mean pure, unadulterated food) is one of the most fundamental human rights.

2. Representative of Spanish Government

Mr. Juan Ignacio Morro Villacian, Cultural and cooperation Counselor, Embassy of Spain to China, made remarks on behalf of the Spanish Government, at the opening session. He stated that in December 2006, Spain and the United Nations signed a landmark agreement establishing the MDG Achievement Fund, one of the largest in the history of the UN, to which Spain has given 565 million euros, around 800 million US dollars at that time, to supporting national efforts to eradicate poverty and accelerating progress on the MDGs. At present, more than 130 programmes are being implemented in 50 different countries around the world dealing with several critical issues, ranging from child nutrition to youth employment, empowerment of women, environment and climate change, or culture and development, among others.

In China this MDG Achievement Fund has financed four different Joint Programs since 2008 with a Spanish contribution of more than 30 million US dollars. Today we are closing the Joint Programme on “Improving Nutrition, Food Safety and Food security for China’s Most Vulnerable Women and Children” as we did in 2011 and 2012 with other three projects under the titles of “Culture and Development Partnership Framework”, “Protecting and Promoting the rights of China’s vulnerable young migrants”, and “Climate Change Partnership Framework”.

Spain attaches great importance to the problems of “Hunger, Food Safety and Nutrition”. Last week an international High Level Meeting took place in Spain with the presence of the Spanish Prime Minister, Mariano Rajoy, and the UN Secretary General, Ban Ki-Moon, as well as representatives of 32 countries, civil society organizations and all UN agencies. At this meeting Spain reaffirmed its commitment to improving food security and child nutrition, and all participants praised the work of the UN System when defending human dignity and agreed on the need to establishing a new development agenda for 2015 and beyond.

This Joint Programme focusing our attention today was funded with an estimated budget of 7 million US dollars, including 6 million funded by the MDG Achievement Fund, and it was implemented by 8 UN Agencies and more than 20 Government organizations in China. The implementation of the Programme started in December 2009 and after three years it was planned to end in December 2012 although an extension was approved into 2013. The Programme paid attention to a sensitive population of nearly 1.8 million children and women of child-bearing age by piloting a comprehensive approach to food security and child and maternal nutrition in six of the poorest counties located in remote areas.
This Joint Programme was carried off by UN agencies, Chinese governmental departments and technical institutions cooperating with each other in order to jointly tackle this critical challenge. For this reason, we want to praise all the efforts and activities implemented in this field, such as improving the management of baby-friendly hospitals, creating baby-friendly communities or implementing the existing regulations. Attention was paid to the importance of nutrition and health education as well as food safety for women and children, and it was recommended to integrate these issues into primary and secondary school curricula and establish a monitoring system for the production and management of safe food.

As we mentioned in previous meetings, when the Spanish Government established this MDG Achievement Fund, we had three main objectives in mind. First, to advance the implementation of the MDGs in developing countries; second, to ensure national ownership of all development programmes and ensure durability of our actions once the programmes had ended; and third, to promote UN reform at the country level by increasing the coherence of the UN programmes in cooperation with the national Governments.

This is what the MDG Achievement Fund was established for and the success of any of these 4 Joint Programmes implemented in China should be measured by these three priorities. So, we are glad to say that the Joint Programme which concludes today has also been a remarkable contribution to our objectives and the effort made by Spain with you in these important matters, and especially at these critical economic times, has given good results. Needless to say that seeing all these women and children benefitting from it makes it all worthwhile.

3. Representatives from the Chinese Government

Two Chinese central government officials took the floor in the opening session. In his speech, Mr. Chen Xiaohong, Vice Minister of The National Health and Family Planning Commission of China, expressed the appreciation to all UN Agencies, Spanish Government and all Chinese project implementation institutions for their great efforts in the last three years. He affirmed the great significant importance of this joint programme conducting in China and the due attention was given to the programme by different departments of the Chinese Government. He expressed that the appreciation and congratulations to UN Agencies, Spanish Government and the project implementation institutions and stressed that in the 8 goals of "The UN Millennium Declaration", three of them closely linked with health focusing on maternal and child health. The Chinese Government has made great efforts in achieving the goals while the international community rendered strong support to China. This joint programme fully demonstrated a good example of the collaboration between China and United Nations.
He spoke highly on the achievements and called for replicating those in some other areas of China while transforming them into government policies for the sustainable development to benefit more people. Facts proved strongly that the result of multi-intervention is much better than a single intervention. Nutrition, food safety and food security are so important to the health of women and children, which relates to the quality of the whole Chinese nation. In view of 592 poverty-stricken counties and many challenges still existing in China now, vice minister Chen Xiaohong expressed that the Chinese Government has worked hard to improve the work in this area and will continue to intensified its efforts to do better job in response the current challenges. He strongly urged further international collaboration to help China improve some relevant laws, regulations, technical guidance, applied technology provision, capacity building for all kinds of people at the grass root level etc., thus China can speed up its work for improving nutrition, food safety and food security for China’s most vulnerable women and children so as to let the vulnerable people have the same right to enjoy the progress of the world science and technology and social development. Vice minister Chen Xiaohong clearly stated that China is more willing to share its experiences with other developing countries for achieving the MDG goals.

Mrs. Sai Guohua, first secretary of Ministry of Commerce of China, commended the fruitful results of the join programme and expressed her gratitude to all parties concerned especially the generous support of Spanish Government and UN Agencies. She signed out that the joint programme just cooperated very well with the efforts of the Chinese Government to improve the outstanding issues of lively hood and wellbeing of the people which clearly stated in “Twelfth Five-Year Development Programme”, “The Chinese Women Development Outline “ and “The Chinese Children Development Outline”. China would like to conduct an in-depth cooperation with UN Agencies by using South-South Cooperation mechanism as a platform to share the Chinese experience and the best practice of the join programme with other developing countries so as to push the realization of MDG goals as scheduled. Moreover, it is very important for the next step to replicate the experiences gained in some other areas of China to benefit more vulnerable women and children.

II. Case findings in the technical session

Case-1: Nutritional status of women and children and effective nutrition interventions for child health/China CDC and UNICEF

The presentation was made by Dr. Wang Jie of China CDC. In her speech, she mentioned the project of Nutritional Status of Women and Children and Effective Nutrition Interventions for Child Health was implemented by the National Institute of Nutrition and Food Safety of CDC, China, UNICEF and MOH. They worked together to investigate and improve the nutritional status of women and children in 3 counties, i.e. Zhengan county in Guizhou Province, Wuding county in Yunnan Province and Zhenan county in Shaanxi Province. The finding from the baseline survey data they
found the following problems as the table 1 showed:

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Pregnant women</th>
<th>Lactating women</th>
<th>Children aged 0-3 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stunting</td>
<td>-</td>
<td>-</td>
<td>17.5</td>
</tr>
<tr>
<td>Low weight</td>
<td>-</td>
<td>-</td>
<td>8.6</td>
</tr>
<tr>
<td>Wasting</td>
<td>-</td>
<td>-</td>
<td>5.1</td>
</tr>
<tr>
<td>Anemia</td>
<td>26.1</td>
<td>14.5</td>
<td>25.6</td>
</tr>
<tr>
<td>Iron deficiency</td>
<td>54.2</td>
<td>25.3</td>
<td>26.4</td>
</tr>
<tr>
<td>VA deficiency and insufficiency</td>
<td>52.8</td>
<td>38.0</td>
<td>54.2</td>
</tr>
<tr>
<td>VD deficiency and insufficiency</td>
<td>59.1</td>
<td>37.2</td>
<td>13.4</td>
</tr>
<tr>
<td>B12 deficiency</td>
<td>67.6</td>
<td>30.5</td>
<td>20.7</td>
</tr>
<tr>
<td>Folic deficiency</td>
<td>45.2</td>
<td>42.9</td>
<td>14.4</td>
</tr>
</tbody>
</table>

The women were lack of child feeding common knowledge, including breastfeeding initiation, breastfeeding duration, and timing of introduction solid and semi-solid food. Children were fed according to local habits, early introduction of foods before 6 months of age, and early stopping breastfeeding at age of 12 months. The proportion of the children was small whose foods were diverse and rich in iron. Thus a comprehensive intervention was formulated such as Yingyangbao (YYB-nutrition food formula bag) and strong advocacy for the improvement of the children’s nutritional and health status. Yingyangbao (YYB) was designed according to General standard for complementary food supplements (GB/T22570-2008) to increase nutrient intake (vitamin A, D, B1, B2 B12, folic, calcium, iron, zinc) in infant and young children. In this project, YYBs were distributed to children aged 6-23 months in Wuding, Zhenan and Zhengan counties within 18 months from Oct 2010 to Mar 2012. Totally, there were 1,3055 children consumed YYB during the 18 months, which covered 98.2% of the targeted population, and 99.6% of the children took three or more sachets YYB weekly according to consumption record and statistics.

The evaluation data showed that YYB intervention and nutrition advocacy significantly improved the children’s nutritional and health status. The prevalence of stunting, low weight and wasting decreased by 35.9%, 58.2% and 35.5%. The prevalence of anemia was decreased by 33.8%. The prevalence of vitamin A deficiency and insufficiency was decreased by 46.0%. The prevalence of vitamin B12 deficiency was decreased by 36.9%. The occurrence rate of diarrhea was decreased by 27.9%.

The proportion of infants 6-8 months of age who received solid, semi-solid or soft foods during the previous day was increased from 75.5% in the baseline survey to 82.5% in the final survey (p>0.05). More children consumed vitamin A-rich foods or
iron-rich foods in the final survey than in the baseline survey (table 2.).

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Baseline</th>
<th>Final</th>
<th>Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stunting</td>
<td>18.1</td>
<td>11.6</td>
<td>35.9↓**</td>
</tr>
<tr>
<td>Low weight</td>
<td>9.8</td>
<td>4.1</td>
<td>58.2↓**</td>
</tr>
<tr>
<td>Wasting</td>
<td>6.2</td>
<td>4.0</td>
<td>35.5↓</td>
</tr>
<tr>
<td>Anemia</td>
<td>28.7</td>
<td>19.0</td>
<td>33.8↓**</td>
</tr>
<tr>
<td>VA deficiency and insufficiency</td>
<td>55.9</td>
<td>30.2</td>
<td>46.0↓**</td>
</tr>
<tr>
<td>B12 deficiency</td>
<td>29.3</td>
<td>18.5</td>
<td>36.9↓*</td>
</tr>
<tr>
<td>diarrhea</td>
<td>13.6</td>
<td>9.8</td>
<td>27.9↓*</td>
</tr>
<tr>
<td>Solid food intake by children</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>aged 6-8 months</td>
<td>75.5</td>
<td>82.5</td>
<td>9.3↑</td>
</tr>
<tr>
<td>Dietary diversity</td>
<td>47.9</td>
<td>59.4</td>
<td>24.0↑</td>
</tr>
<tr>
<td>Food&amp;supplements rich in iron</td>
<td>43.0</td>
<td>48.3</td>
<td>12.3↑</td>
</tr>
<tr>
<td>Food&amp;supplements rich in VA</td>
<td>72.2</td>
<td>83.4</td>
<td>15.5↑**</td>
</tr>
</tbody>
</table>

↓decrease, ↑increase, *P<0.05, **P<0.01

Experience and lessons learned
A. Nutrition intervention including Yingyangbao intake and knowledge advocacy significantly improved food intake of children, significantly improved the malnutrition and micronutrients deficiency, and decreased the occurrence of diarrhea.
B. Nutrition intervention did not change much breastfeeding practice, the reasons could include that: ① the main target population of nutrition intervention was children aged 6-23 months and their parents, and the main aim was to improve supplementary diets quality and children's health; ② there was no food product for nutrition intervention on pregnant and lactating women, and only nutrition advocacy during the project period could not change the traditional breastfeeding habits, such as most mothers take the thought that they should give other foods to their babies before 6 months of life; ③ one third of the children’s fathers and one tenth of the mothers worked outside of homeland so that the breastfeeding indicators was difficult to be improved.

Case -2: Improving Food Safety for China’s Most Vulnerable Women and Children
This case was introduced by Ms. Guo Yan, Deputy Division Chief, National Center of Health Inspection and Supervision, Ministry of Health of China. The baseline survey results showed people in the pilot areas had lower awareness on food safety and it is, therefore, the priority was given to the publicity. She outlined the core achievements gained during the implementation, such as all kinds of health education materials were developed focusing on the Five Keys of the Food Safety recommended by World Health Organization and that was well accepted by the Government. In addition the training manuals were developed exclusively for the food safety supervisors and managers in food production and food business which were hit the record for the first time in the history. By doing so the capacity of food safety supervision has been enhanced.

Case-3. The project on improving the household dietary intake of micronutrient-rich foods

This project was jointly implemented by the Food and Agriculture Organization of the United Nations (FAO) and the Ministry of Agriculture of the People’s Republic of China (MOA). The ultimate goal of the project was to increase by 30% the intake of micronutrient-rich foods by the project households in the three pilot counties.

The project team conducted initial study and baseline surveys to identify intervention strategies for the project. At the beginning of the project, the Ministry of Agriculture and FAO sent relevant experts to the project counties to carry out field research and baseline surveys.

In order to achieve the ultimate goal, the project pursued a two-pronged approach by simultaneously improving (a) the availability and access to local micronutrient-rich foods through support to agricultural production, as well as (b) the consumption of such foods through nutrition education and hence, strengthening nutrition-related knowledge, attitudes and practices (KAP) of people in the project area.

The project provided agricultural inputs to farming households, which substantially promoted local agricultural production and income increase for farmers; conducted trainings and guidance on agricultural techniques to strengthen capacity building for farmers; organized nutrition education trainings and effectively improved the KAP of the farmers and organized meetings and workshops to strengthen project management and ensure successful implementation.

The project team conducted end-line survey to accurately assess project outcomes. In order to assess the project implementation and impact, as well as to review the good practices and eventual lessons to be learnt, FAO and MOA organized a group of experts to carry out an end-line survey in three project counties. The expert team applied various survey techniques, including institution interviews, group interviews,
household questionnaire survey, household visits, etc. The survey covered a sample of 270 households in total. Based on the survey findings, the expert team concluded that the project represents an example of high relevance to China's rural development and poverty reduction efforts. The project has greatly improved local agricultural output and increased the diversity of locally produced crops. It has increased the dietary intake of micronutrient foods in the project households by 41.3 %, higher than the objective of 30%. Furthermore, the indicators such as Household Dietary Diversity (HDD) and Women Dietary Diversity (WDD) as well as Knowledge, Attitude and Practice (KAP) reflect substantial improvements which indicate the complete success of the project.

**Good practice**

1. Combination of foreign funding and domestic matching funds
2. Combination of agricultural development and nutrition education
3. Combination of capacity building and in-kind support
4. Combination of short-term demonstration and long-term development

**Lessons learned**

First, the cross-department, multidisciplinary and multilevel management, as well as the complexity of management procedures increased the difficulty for project implementation, and the project was once encountered with the problem of low efficiency in delivery; Secondly, the limitation of project funding and the expansion of beneficiaries coverage in accordance with the needs of farmers in the project areas resulted in the comparatively less concrete support to demonstration households, which influenced the contents and impact of demonstration to some extent.

**Case 4. Comprehensive Food Security and Vulnerability Analysis in 6 Pilot Counties under the programme Output1.1.1**

In order to have an in-depth understanding on food security status at household level, the MDG Joint Programme “Improve the nutrition, food safety and food security for China’s most vulnerable women and children” decided to have a food security and vulnerability survey in 6 poverty counties, namely Zhen’an and Luonan in Shaanxi Province, Huize and Wuding in Yunnan Province, and Pan and Zheng’an in Guizhou Province, which were all identified by the previous project as the most vulnerable areas. The survey aimed to provide background information for joint programme interventions and improve the targeting of the joint programme and other poverty alleviation related programmes.

This CFSSA aims to understand the characteristic of the food insecurity population: their demography, education, livelihood, food sources, and exposure to shock etc. It also tends to dig out some most prominent factors which could be strongly correlated
to food-insecurity. Generally speaking, the baseline survey is going to answer the key questions: who, where, how many and why are they food insure? And what interventions might be appropriate to reduce their food insecurity and vulnerability? And the resurvey is going to answer the questions: What are the differences between the two surveys and what causes these differences?

From the analysis of the baseline survey, 113,202 rural HH or 13% of the HH in these 6 counties are currently food insecure. Of these 7 out of 1368 survey HH, accounting for 0.5%, were found to be severely food-insecure and the only less than 15% population were food insecure, but the nutrition status is still challenging, so in the resurvey, the research team also further analyzed the nutrition status for a more comprehensive analysis. The reasons for food insecure are poverty, lack of human capital, limited investment to rural infrastructure, vulnerability to weather, market risks and limited investment in medical and health service.

In order to evaluate the improvement of food security status in pilot counties during the project span, to monitor main factors impact the food security and provide further analysis for policy making, WFP& CAAS conducted the resurvey in 2012. In the process of the resurvey 69% households were re-interviewed. For those who were not re-interviewed, 34.6% were out for work, 55.2% for other affairs, 7.9% for die, and 2.3% were migrated (main finding in Annex2). Capacity in sampling and analyzing of the research team also improved significantly.

Comparative analysis of the baseline and resurvey

1. The overall situation of rural households
   From the comparison of the baseline survey in 2010 and resurvey in 2012, the aging trend in the poverty area is obvious. The migration increased. The health level, housing and drinking water conditions are all improved.

2. Food security status of rural households
   On the whole, the food security status of households has undertaken very little change during these two years. But there is an increase in meat consumption and food purchase. The food insecurity households are still mainly those who receiving government subsidies and doing crop farming and odd jobs. Moreover, those households whose heads are older and receive lower-level education, and have sick family members have higher proportion of food insecurity.

4. Nutritional status of rural households
   Energy intake: most of households meet the standards; less than 60% of households can meet the standards of protein intake.

5. Shocks and coping strategies
   Comparing the results from baseline survey and resurvey, the research team found that the external environment faced by poor farmers in rural areas is relatively stable. However, the proportion of famers who faced with fewer shocks is decrease. From the perspective of the category of shocks, natural disasters (60%)
are still the main shocks. Therefore the focus of poverty alleviation is to research on how to help poor farmers to prevent and mitigate the natural disasters. The main coping strategies are reducing daily living expenses and borrowing money, which consistent with the results of the survey in 2010. The proportion of farmers utilizing no coping strategies is relatively high in Zhen’an and Luonan.

Achievements

Through an in-depth data collection and analysis exercise, the project provided:

An understanding of the food security status and factors contributing to food insecurity in these counties; Identification of the number and location of food insecure populations; Inputs to inform the Joint Programme on policy and intervention recommendations; and Successful sampling methodologies to improve future data collection exercises in China. Besides, WFP& CAAS achieved fruitful outputs in the sustainability: The relation among WFP, CAAS and China’s government became much closer; The capacity building proved to be a success in sampling, survey and analysis. CAAS is now working for promoting the standard sampling methods in the new selected poverty counties under the support of State Council of Leading Group of Poverty Alleviation and Development; extended programs from State Council of Leading Group of Poverty Alleviation and Development and National Natural Science Foundation were funded for further research on food security in poverty counties.

Future work

Based on this program, WFP& CAAS will continue the further research on food and nutrition security, expand the program in a wider scope, and help to improve the data collection capacity in China for more institutions.

Case 5. “Food Safety Laws and Regulation” / China Law Society and UNDP

The food safety issue cannot be avoided any more in the globalization process. Many countries are making unremitting endeavor to promote their food safety. In China, management actions for food safety are in full swing, such as promulgate The Food Safety Law of the People’s Republic of China, amend The Criminal Law of the People’s Republic of China, and stipulate that food producers and supervisors will be judged to criminal liability for behaviors posed threat to food safety and these reflect that Chinese government determined to govern the chaos in heavy standards; Set up China Food and Drug Administration to realize the unification of management and supervision for food safety in areas of food producing, intermediating, and consuming, so that the situation of regulatory fragmentation has been changed. As a leader and organizer of China law research institution, leaders of China Law Society also pay high attention to related works of food safety law.

During the implementation of this project, it happened that the first “Food Safety Law
Research Center” was established with in China Law society. It undertook some important legislative works like amending “China Food Safety Law”, drafting “Implementing Rules on Food Safety Law” for Ministry of Public Health (Draft), drafting “Implementing Rules of In-factory Quality supervision on Infant Formula Milk Powder”, “Food Recalling Measures” and amending “Dairy Food Quality Safety Supervision Management Rule” etc. Most notably, on August 2010, entrusted by Safety Committee Office of the State Council, the Research Center put forward concrete suggestions to legislative perfection of food safety crimes on the 8th Amendment of the Criminal Law. Whereby, suggestions of adding “crime of negligence supervision on food safety”, modifying §143 of the original Criminal Law which stated as “crime of produce, sell incongruent health standard food” to “crime of produce, sell incongruent safety standard food”, cancelling the convicting and sentencing standard on “sales amount” of food safety crime in the original Criminal Law etc. were all adopted by legislation. After Standing Committee of the National People's Congress passed the 8th Amendment of Criminal Law at February, 2011, Legal Counsel of Standing Committee of NPC called, the Food Safety Committee Office of the State Council delivered thanks letter to the Research Center, highly evaluated the impartment role that China Law Society Food Safety Law Research Center had taken in the process of legislating.

The experiences gained during the implementation of this sub-project are as follows:

**Firstly**, to set up a specialized institution to provide organization guarantee, and meanwhile, effectively integrate related institutions and research powers. China Law Society took the project as an opportunity, set up the first food safety law research center in China.

**Secondly**, to get the support and guidance from central supervision departments and sub-project members. In the last three years, the Centre strongly felt that it was very important to establish a good cooperative relationship with central supervision departments and get their support and guidance if we were willing to smoothly implement the project in various areas, and make the achievements more effective.

**Thirdly**, to attach importance to the achievements transformation, especially transform into national legislation, central policy-making, and social publicity.

**Fourthly**, we should start from priorities of the state to design and decide themes of such activities like summits, pilots and trainings. Whether the implementing of a project could get support and approve from different sectors of the society.

**Fifthly**, to carry out derivative activities when work plans of the project have been finished with high quality on time.

**Sixth**, to set up a long-term mechanism for improving legislation work.

**Recommendation**

Currently, lots of activities of the sub-project are designed in “top down” way and hopefully, in future, the U.N. Agencies could help member state to design some activities in a “bottom-up” way with more participations of public. Food safety legal
protection and superstition will achieve good results only under a good cooperation between the government and the society.

Case 6. “Food Production for Children Made Safer in Pilot Areas”

This sub-project was jointly carried out by China General Administration of Supervision, Inspection and Quarantine (AQSIQ), China State Administration of Work Safety (SAWS), China National Institute of Standardization (CNIS), United Nations Industrial Development Organization (UNIDO) and International Labor Organization (ILO) aiming at improving the comprehensive level of child food safety in the pilot areas and guaranteeing the quality and safety of child food. Project time: January 2010 to December 2012.

Overall objectives of the project

The project has three overall objectives: first, thoroughly develop and implement the training and pilot work regarding Food Production for Children Made Safer in Pilot Areas; second, comprehensively promote and guarantee the “Food Production for Children Made Safer in Pilot Areas”; and third, effectively drive and improve the China’s overall level of food safety control and management.

Survey and site selection (March–May 2010)

CNIS Project Team, together with UNIDO, ILO, AQSIQ, SAWS, went to the pilot areas four times for field survey and understanding to the general food safety conditions; 9 pilot units were selected based on the principle of “selecting the child food enterprises and testing labs which are equipped with some software and hardware conditions, have a strong desire for improving management level and a certain room for improvement, but have not passed Hazard Analysis and Critical Control Point (hereinafter referred to HACCP) and China National Accreditation Service for Conformity Assessment (CNAS) certifications”. Based on findings some interventions were implemented in the pilot places.

Activity arrangement of the project

According to the objectives and thinking, four kinds of activities were arranged as below:

a. Child food production enterprise HACCP training
b. Child food testing laboratory ISO17025 system training
c. Food safety inspector’s comprehensive ability improvement training
d. Proposal of policy advices for food safety management in pilot areas

Main achievements of the project are as listed:

1. Developing a special series of training material
There are 5 books developed in this series of teaching material exceeding 500 pages and printed 1000 copies, including HACCP Training Material for Child Food Processing Enterprises, ISO17025 Laboratory Recognition Training Material and Training Material for Food Supervisors. This material is popular and easy to understand, simple and useful, laying a foundation for the Project Team to successful carry out various training and the project achievement promotion and application in the future.

2. **Helping 4 pilot enterprises pass HACCP certification**

With the guidance and help of the Project Team, each pilot enterprise strictly established and implemented HACCP system strictly according to the requirements of HACCP system. Through several rounds of strict document audit and onsite audit of China Quality Certification Center (CQC), four enterprises met HACCP certification requirements comprehensively, passed the certification and obtained certificates.

3. **Helping 3 pilot laboratories pass CNAS accreditation**

With the guidance and help of the Project Team, each pilot laboratory established and implemented laboratory standardization management system strictly according to the requirements of ISO17025 system. Through several rounds of strict document audit and onsite audit of China National Accreditation Service for Conformity Assessment (CNAS), 3 pilot laboratories formally passed CNAS Accreditation and obtained certificates.

4. **Improving the technical level of food safety inspectors in the pilot areas in a real way**

Passing the simulated site inspection and expert evaluation, the trainees mastered the basic knowledge for food safety, supervision and management theories comprehensively and systematically; comprehensively mastered enterprise inspection process, inspection skills and other practical operation skills and were able to apply them in the actual inspection environment. Through the training and practical activity, the supervision business ability of food safety inspectors in the pilot areas was improved obviously and a supervisor team with strong ability and high level was cultivated, providing more powerful guarantee for the food safety supervision.

5. **Proposing policy advices on food safety management in the pilot areas**

Dozens of policy advices have been proposed accumulatively for this project, more than 50 of which have been adopted by government and quality supervision departments in the pilot areas. The successful implementation of this activity provided a platform for food-related parties such as production enterprises, supervision institutions, detection institutions and scientific research institutions to propose
suggestions for the formulation of government suggestions, so as to make food safety management policies more applicable.

Experience obtained

1. Joint action needed for the improvement of food safety in the pilot areas

Improving food safety level is a complex and systematic project. To improve the food safety level in a region or a nation, it is not sufficient to work on one aspect alone. Producers or government alone cannot ensure food safety in a comprehensive and efficient way. Instead, we should consider all processes that have impact on food safety and recognize that all parties involved in the whole process of food production should coordinate and interact with one another and work together to secure food safety from the perspective of raw material supply, production, processing, product testing and market supervising, etc. The project considered the issue from the perspectives of food producers, quality testing institutes, food supervising bodies and government’s supporting policy. By making systematic planning and comprehensive implementation, it has improved the general level of food safety in pilot areas. If this model can be duplicated and executed in other regions and even in the entire country, it will produce great significance for the improvement of food safety level in China.

2. A joint information platform needed in help less-developed regions wider information channel

The pilot areas in the project are all less-developed regions in southwest China that share the characteristics of backward economy and lack of information, which in turn result in slow economic growth. In the process of executing the project, the project team found most pilot enterprises and laboratories had urgent need to improve quality and management. However, they couldn’t find channel to do so. Some of them had heard about HACCP and ISO17025. But they couldn’t find senior training specialists to provide guidance for them. Some laboratories aspired to go out to the advanced laboratories in developed regions to learn from their experience. But they couldn’t find proper people to bridge them. The project team deeply understood the importance of information channel for the development of pilot areas. As a result, when designing the project, the team considered establishing a platform. By taking full use of its strong points, the project team, with project as information exchange platform, actively invited the experienced specialists from China’s top certification and accreditation organs to provide senior-level training programs for the pilot enterprises, created opportunities for pilot enterprises to visit advanced overseas enterprises to learn from their experience and helped them to visit their advanced counterparts in Beijing and other developed regions to learn from their experience. These efforts have provided valuable opportunities for the pilot enterprises to expand their vision and learn from experience of others. The local governments can also bear upon the experience gained in the project. In the future, they will focus on coordinating
resources of all parties and providing information channel for similar enterprises and laboratories in the region so that they can achieve better and faster development.

In her summary of the technical session, Ms. Gillian Mellsop, Country Representative of UNICEF, said that The UN MDF project aimed to achieve the following outcomes:
1. Policy decisions informed by reliable and up-to-date evidence on the magnitude, distribution, types and causes of under nutrition in China;
2. Under nutrition and micronutrient deficiencies reduced among poor women and children in selected demonstration counties;
3. Food-related illnesses reduced through safer food production and preparation for children;
4. National child nutrition and food safety policies, guidelines, regulations and standards revised according to results of the pilots, and lessons scaled up nationwide.

Outcome 1 - Evidence based decision making:
China has achieved high levels of food security for most of its population. According to WFP, a few areas, primarily those with the greatest poverty, remain food insecure. In the MDG-F project counties increased diversity in food production and consumption was demonstrated.

According to FAO:
- The proportion of diets with micronutrient rich foods increased by 41.3% in rural households;
- Improvement in diversification of diets was impressive: From 4% to 24% at household level and from 29% to 89% at the level of individual female caretakers;
- A 32% average increase in production of vitamin A rich vegetables was observed.

Recommendation: Agricultural and nutrition support initiatives need to focus on the poorest areas.

Outcome 2 - Reducing under nutrition and micronutrient deficiencies:
According to UNICEF, China is home to the second largest population of stunted children in the world. Almost three quarters of infants in China are denied the benefits of exclusive breastfeeding. ILO project surveys demonstrated that maternity related employment discrimination exists in all types of enterprises, and lack of supportive rules and breastfeeding facilities in enterprises were the main reasons for the majority of female workers not breastfeeding children during working time; breastfeeding breaks were not guaranteed.

China is among the largest growth markets for breast milk substitute sales. Less than half of children between 6 and 23 months receive the minimum acceptable diet in poor rural China. Anemia affects more than one third of rural children. For the population as a whole, such dietary factors are by far the largest risk factor for disease and disability, accounting for 17% of cardiovascular disease, diabetes and cancer.

In MDG-F project counties Baby Friendly Hospitals were newly established with assistance from WHO, and soy based micronutrient food supplements (soy based Ying Yang bao) distributed to children 6-24 months were promoted though UNICEF. Upon hospital discharge 90% of mothers were exclusively breastfeeding according to WHO. A four-fold increase in enterprises offering maternity services was achieved, as
demonstrated by ILO. The prevalence of stunting decreased by 36%, while the prevalence of micronutrient deficiencies decreased by at least 34% in project areas. Recommendation: Infant and Young Child Feeding efforts need to be stepped up and cover multiple sectors to improve child nutrition outcomes in the short run and avert the increasing risk of non-communicable diseases and food safety crises.

Outcome 3 - on food safety:
According to WHO, food-borne illnesses and unsafe food have far-reaching effects on maternal and child health. Nearly 15% of food meant for domestic consumption was found to be substandard. Over 50,000 children were hospitalized and almost 300,000 suffered consequences following the incident of infant formula contaminated with melamine.

In MDG-F pilot counties food producers were certified to produce safe and quality food with support from WHO. Recommendations: Existing food safety laws and regulations need to be widely enforced. Nutrition, food safety and trade institutions and standards need to be integrated to ensure the highest quality feeding practices for the most vulnerable children.

Outcome 4 - scaling up & lessons learned:
Given the promising results of the joint program “Improving Nutrition, Food Safety and Food Security for China’s Most Vulnerable Women and Children,” the 8 collaborating UN agencies have the following recommendations for national action:
1. Ensure availability of information on maternal and child nutrition and food safety for policy makers and the public;
2. Introduce programs to improve nutrition interventions in women before and during pregnancy;
3. Scale up all successful child food safety and nutrition programme interventions
4. Increase investment levels and create separate budget line allocations for maternal and child nutrition, food safety and security interventions;
5. Formulate a cooperation and coordination framework on nutrition food security and food safety;
6. Develop a plan of action for the China food and nutrition development outline (2013-2020)
7. Strengthen nutrition and food safety legislation and its enforcement

Finally, with inputs from all participating agencies and partners, a multi-media presentation, which highlights the tremendous progress made, has been produced. This presentation will be shown later today.

We believe it reflects what can be achieved if we join forces and unite around clear outcomes to improve nutrition and food safety for China’s poorest women and children.

Session 3. Introduction of the Final Evaluation presented by Prof. Chen Jie from Shanhai Fudan University

Prof. Chen Jie introduced the findings from the programmed final evaluation by her
Team. She pointed out that Improving nutrition, food safety and food security for China’s most vulnerable women and children (hereinafter referred to as CFSN) is a joint programme under the MDG-F thematic window on Children, Food Security and Nutrition, the time frame being three years (2009-2012) with an overall budget of US$ 7 million. The goal is to improve nutrition, food safety and food security for China’s most vulnerable women and children, especially focusing on the high risk group of 1.2 million children and women of childbearing age in China. Pilot studies on comprehensive approaches to food safety, food security as well as maternal and child nutrition intervention were carried out in six of the most impoverished counties. Guided by its goal and employing the strategy of monitoring and evaluation, the joint programme constructed an intervention framework which consists of four main goals with ten sub-projects, involving 8 UN agencies, 4 central government ministries and more than 20 partner institutions in China which can be found in Table 1 of the green printed book CFSN PUBLICATION No. CN-00-2-40-11-Z.

The aim of this final evaluation is to evaluate the outputs and outcomes achieved by the CFSN as well as the resulting impact, and to summarize the best practices gained and lessons learned during the process of the CFSN, in order to extend their use to other similar development programmes. According to the scope and issues for evaluation designated by the MDG-F, the evaluation was carried out on the three levels of design, process and results.

The evaluation adopted a holistic and prospective approach with triangulation as its principle methodology. A multidisciplinary evaluation team was established to comprehensively collect monitoring and evaluation information and conduct interviews with national, provincial and county level managers and operators as well as MDG-F Secretariat, so as to achieve, through desk studies and field surveys, a multi-perspective evaluation of the outcomes and experience gained by the joint programme on all three levels.

Main findings of the evaluation

On issues such as nutrition intervention, promoting breastfeeding, agricultural development, enhancing the production and monitoring of safe food, promotional education of food safety knowledge and laws, and the revision of policies and laws, the CFSN integrated international and domestic resources to encourage UN agencies, Chinese government departments and institutions to tackle the challenge of improving nutrition, food safety and food security for the women and children in China’s impoverished areas. In the design process and during implementation, a distinct and highly logical programme management framework was established, including a clear allocation of institutional responsibilities, indicators for results, and a timeframe. At the same time, strategies for monitor and evaluation and promotion were established. PMC, the UN agencies and central government ministries duly adjusted the work plan in accordance with the results of the monitoring and evaluation, and the programme
coordination office reported important developments and trends of the programme through channels such as the programme’s website, thereby increasing the public’s attention and support for the programme.

The CFSN led to a number of new working mechanisms and models, such as the newly established China Food Safety Law Research Center, training of judges for court trials of criminal cases involving food safety, exploring ways to appropriately combine agricultural development and nutrition education, and collaboration among women’s associations, health inspection institutes and broadcasting stations in pilot counties to promote food safety laws.

The CFSN adopted the management model of leadership by the government with support from the UN agencies. The sub-projects have the distinct advantage of mutually complementary information and roles. Pilot counties have also developed ways to conduct multi-sector integration intervention for the promotion of food safety laws, and ways for women’s associations to acquire contributions from enterprises, so as to improve work efficiency.

Due to reasons such as natural disasters, the planned time for implementation of the CFSN prove to be insufficient, so an application was made for an extension with no cost implications. On the whole, the joint programme has been achieved as originally planned, and the financial goal has been largely met. During implementation, the central government ministries showed a high level of attention and played a proactive part in coordination and management. National technical institutions participated actively, and relevant provincial departments took responsibility for the supervision, examination and management of related sub-projects, converting the results of pilot areas into provincial policy documents. In addition, food safety knowledge was promoted, for example, in the form of theatrical performances spontaneously organized by the residents.

The CFSN produced baseline survey and final survey reports of high quality, and developed a set of surveillance indicators for the nutritional status of vulnerable populations, which received much approval from Chinese government departments such as the Ministries of agriculture and health. Intervention with Ying Yang Baos showed significant results with a marked improvement in indicators such as growth, development, anemia prevalence and various micronutrients among children aged 6-23 months in pilot counties. Agricultural intervention led to a rise in the number of people receiving nutrition intervention and in the consumption of micronutrient-rich food in rural households, both of which exceeded the expected targets. Although the expected target has not been met for improvement in infant and young child exclusive breastfeeding rates, comprehensive measures such as the establishment of re-evaluation standards for baby-friendly hospitals, revision of the Regulations for Marketing of Breast-milk Substitutes and maternity protection by enterprises have provided support for improving breastfeeding rates. The newly developed standards
for fortification of supplementary food for infants and young children as well as dietary guidance for infants, young children and women have provided evidence for implementing food fortification.

The CFSN produced important outputs instrumental in the successful implementation of the Food Safety Law. For example, recommendations on criminal law amendments were adopted and related instructions were made by state leaders, including the premier of the State Council. At the same time, a number of local enterprises received help to achieve HACCP certification, and an ISO71025 system was established. Contributive attempts were also made to see how primary and secondary schools in rural areas could pursue systematic education in nutrition and food safety and how teachers could receive appropriate training, thereby creating innovative content and forms of training. Media training showed significant results. The advocacy package still needs to be integrated and implemented.

The CFSN offers a relatively high degree of equity. Interventions, for example, made no distinction of gender or race. It produced numerous excellent examples and much experience. For instance, the CFSN carried out surveys on maternity protection, and facilitated the revision of the State Council Special Provisions for the Protection of Female Employees. The joint programme increased the incentives for national government departments to autonomously apply interventions. The central government, for example, decided to provide funds amounting to 100 million Chinese yuan for free Ying Yang Baos to be distributed to children in 100 impoverished counties. Due to the lack of financial and human resources in the impoverished areas, policy and funding support from national or provincial levels is critical to ensure sustainable development in this aspect.

**Conclusions of the evaluation**

The CFSN led to cooperation among UN agencies, Chinese governmental departments and technical institutions, and facilitated the integration of resources, in order to jointly tackle the challenge of improving nutrition, food safety and food security for women and children in impoverished areas. The joint intervention model it created is an optimal strategy for addressing target issues.

With a fairly high degree of ownership at national, provincial and county levels, the active participation of governments at all levels as well as technical and financial support from UN agencies enhanced operational efficiency. Multi-sector participation in tackling the challenge of improving nutrition, food safety and food security shows a significant advantage over a single agency operation in terms of efficacy.

The CFSN met the intervention targets of the thematic window, proved to be beneficial in advancing towards the achievement of the MDGs and putting the Paris Declaration into practice at national and local levels, and produced significant
intervention results and impact. Certain results have been integrated in national policies or have been widely applied with a fairly high degree of sustainability, the key to ensuring such sustainability of projects in impoverished areas being policy support at national or provincial levels.

Recommendations

To strengthen the building of mechanisms for collaboration and coordination among agencies participating in the joint programme, so as to increase the comprehensive analytical potential of reports from government and technical departments; to optimize coordination mechanisms for resource management, and enhance the coordination capacity of the programme office; and to explore ways to set up multilateral financing mechanisms, in order to ensure sustainability of intervention activities in poverty-stricken areas.

To initiate comprehensive activities, such as enhancing the management of baby-friendly hospitals, creating baby-friendly communities and implementing the Regulations for Marketing of Breast-milk Substitutes, so as to develop and popularize foods providing nutrition intervention to pregnant and lactating women, and to facilitate the improvement of nutrition and health among women and children.

To promote a comprehensive intervention model of agricultural development and nutrition education in impoverished areas, and implement a strategy of food fortification, so as to correct the disturbing situation concerning food security and malnutrition.

To enhance educational reform and teacher training so as to ensure that health education on nutrition and food safety is integrated into primary and secondary school curricula, leading to increased awareness of healthy dietary habits and behavioral changes among school children.

To continue food security and micronutrient surveys in the long term, in order to provide evidence for policy making on scientific applications in poverty alleviation, food security and nutrition intervention.

To continuously integrate food safety campaigns into the routine work of women’s associations; to strengthen grassroots advocacy aimed at vulnerable groups by mobilizing the civil society and community bodies through the network of women’s associations; and to continue the training of media journalists, government officials and judicial workers, so as to promote enforcement of the new Food Safety Law.

To continuously enhance the building of a system for food safety emergency responses and complaints as well as for inspection support by increasing the input of human and financial resources at the grassroots level; and to comprehensively
enhance capabilities for the production, supervision and management of safe food by expanding training on the HACCP system for food manufacturers, increasing laboratory testing capacity, and strengthening the ability to control food safety in poverty-stricken areas.

To facilitate the development of rules for the implementation of the Special Provisions for the Protection of Female Employees promulgated by the State Council as soon as possible, and to enhance the ability of employees to carry out collective negotiations on maternity protection, so as to ensure optimal results.

Speaker 2 in the third session was UN coordinator Ms. Zhnag Pingping from WHO China Office who gave the policy brief at the final event. In her statement she mentioned that

1. **The Challenges of Maternal and Child Nutrition and Food Safety in China**

   China has achieved phenomenal progress in the Millennium Development Goals (MDGs), particularly in reducing poverty, improving child health and achieving universal primary education and youth literacy. However, challenges remain in the areas of maternal and child nutrition and food safety.

   Food and nutrition security exists only when all people at all times have physical, social and economic access to sufficient, safe and quality food to meet their dietary needs and food preferences. Food and nutrition security is supported by an environment of adequate sanitation, health services and care, allowing for a healthy and active life.


   The rate of early initiation of breastfeeding is just 41% and the exclusive breastfeeding rate in children below six months is only 28%. The low proportion of exclusive breastfeeding is related to the aggressive marketing of breastmilk substitutes, inappropriate hospital practices, misconceptions among mothers, home environment, short maternity leave and unsupportive workplaces.

   In China, the average rate of anemia is 20% in women of childbearing age and 29% in pregnant women. There is a need for specific policies or programmes for the distribution of multiple micronutrient or iron-folic acid supplements during pregnancy, which could address the situation.

   Food-borne illnesses and unsafe food have far-reaching effects on maternal and child health. In 2007, nearly 15% of food meant for domestic consumption was substandard.
More than 50,000 children were hospitalized and almost 300,000 suffered adverse health consequences following the scandal in which infant formula was contaminated with melamine.

2. The CFSN Programme: A multi-stakeholder approach to improve maternal and child nutrition and food safety in China

Over a three-year period, a total of more than 1.2 million high-risk children and women of childbearing age were targeted.

Among the programme results are the integration of global indicators in the national nutrition surveillance system and the certification of model hospitals as Baby Friendly. The State Council’s Special Provisions for the protection of female employees was revised. As a result, maternity leave was extended from 90 to 98 days and a fourfold increase in enterprises offering maternity services was achieved. Farmers received training and support to improve the quantity and variety of local food production in order to increase the consumption of vegetables and other micronutrient-rich foods. Some 13,055 children aged between six and 23 months received a soy-based micronutrient-fortified food supplement (Ying Yang Bao). The results triggered government investment to scale-up the intervention. Schools piloted educational activities on nutrition and food safety. Four out of five pilot food enterprises were certified for producing safe food. A proposal to criminalize acts endangering food safety was adopted in the Eighth Amendment to the Criminal Law. Food safety inspectors, producers, lawyers, judges, media and communities received training on the Food Safety Law.

On average, 90% of mothers delivering in the newly-established Baby Friendly hospitals were exclusively breastfeeding at the time of discharge.

Compared with the baseline results, the prevalence of stunting decreased by 35.9%; anemia deficiency decreased by 33.8% and vitamin-A deficiency decreased by 46%.

Production of locally planted vegetables rich in Vitamin A and iron increased by 33%, on average. The average consumption of micronutrient-rich foods increased by 41%. The pilot interventions worked, but maternal, infant and young child nutrition and food safety are still matters of national concern. Food security remains a problem in the poorest counties of China.

3. A Call for Action: from Pilot to Results on a bigger scale

To scale up all the successful interventions, the following recommendations are proposed:

1. Formulate a cooperation and coordination framework among institutions and agencies working on nutrition, food security and food safety to improve the
nutritional status of the population:

- Ensure cooperation and coordination between the National Food and Nutrition Advisory Committee and the State Council Food Safety Commission.

2. Develop an action plan for the China Food and Nutrition Development Outline (2013-2020) with policy and implementation guidelines to help improve the nutritional status of China’s most vulnerable women and children under two years:

- In 2000, China formulated a strategic framework for food and nutrition development (2001-2010). In 2013, a revised framework will be issued. The experiences of the MDG-F programme should be the basis for an action plan for national and sub-national actions.

- Ensure an evidence-based planning process supported by a periodic review of nutrition surveillance reports.

- Increase and diversify the production and consumption of micronutrient-rich foods for a balanced diet. Integrate the two-pronged approach of “combining technical support to farmers with community-based nutrition and health education” into the country’s agricultural and rural development plans.

- Implement a comprehensive maternal, infant and young child nutrition plan with a focus on establishing supportive health facilities, workplaces and communities, and providing a strong legislation for the regulation of the marketing of breast milk substitutes.

- Include maternal and child health and nutrition strategies in the national development plans (new socialist countryside construction program, poverty alleviation program and agricultural development programs).

- Integrate nutrition and food safety education into primary and secondary education by strengthening the national health education policies and curriculum, and through capacity building for education administrators, school principals and teachers in order to achieve more effective classroom teaching and learning.

3. Strengthen the enforcement of the Food Safety Law:

- Improve food safety emergency response and complaints system at the sub-national level by defining roles and responsibilities of different sectors, ensure their coordination, accountability and increase their human and financial resources.

- Promote HACCP certification to manufacturers of food for infants and children

- Strengthen implementation of the “Outline for Food Safety Information,
Education and Communication (2011-2015)” in China. Ensure that Food Safety information, educational training and communication efforts become systematic and routine work for the relevant stakeholders and ensure access to information on safe, adequate and nutritious food.

4. Increase investment in food and nutritional development in poor provinces/counties:

• Include a separate budget line for nutrition, food safety and food security interventions for central and provincial government.

At the end of the technical session a video was shown for the participants. This video mainly told the people what kind of role UN Agencies played during the implementation.

VI. The Final Event Closure activity

Before the closure of the final event each designated person from 8 UN Agencies and 2 coordinators from UN and Chinese side conferred a Plate in acknowledgement of the 12 projects implementation institutions for their best practice.

On behalf of Dr. Michael O’Leary, Co-Chair of the UN/Spanish MDG Achievement Fund Joint Programme on Improving Nutrition, Food Safety and Food Security for China's Most Vulnerable Women and Children, Dr. Marianna Trias from WHO’s Office in China made a closing remarks. She said for the past three years, several Ministries and national institutions, together with us UN agencies, have all brought valuable expertise and experience to this Joint Programme and built on each other's strengths to improve lives on the ground. The programme activities have been completed, and significant results have been generated, as we have heard from this morning's presentations.

WHO hopes that the achievements of this Programme will have a long-lasting impact, and that they can be built on, replicated, and mainstreamed into national programmes to ensure that the Millennium Development Goals will be realized throughout the country.

Food security, nutrition and food safety is important to human survival, health and development, especially so to children and women of child-bearing age. Nutritional needs are only met when all people at all times have physical, social and economic access to adequate and safe food of good quality to meet their dietary needs. Nutrition has increasingly been recognized as a basic pillar for social and economic development.

This Joint Programme had a specific focus on reducing micronutrient malnutrition,
keeping in mind its major contribution to the global burden of disease. Micronutrient malnutrition is responsible for reduced resistance to infections, metabolic disorders, and delayed or impaired physical and psychomotor development. Globally, 35% of deaths among children under 5 are also associated with malnutrition.

It is therefore important to consider the public health implications of micronutrient malnutrition in designing strategies for the prevention and control of a wide range of diseases including diet-related chronic diseases, HIV/AIDS, malaria and TB, and for achieving the MDG targets.

5 April 2013 was the 1000-day mark to the 2015 target date for the MDGs. By now, the world has started to discuss the Post-MDG agenda. Nutrition and universal health coverage have been highlighted. After 2015, efforts must be sustained to build on the MDGs and to overcome new health and development challenges such as noncommunicable diseases, mental health disorders etc.

In 2012, the World Health Assembly endorsed a comprehensive implementation plan 2012-2025 to address maternal, infant and child nutrition, aiming to alleviate the double burden of malnutrition in children. The plan includes six global nutrition targets. They tackle child stunting, wasting, and overweight; anaemia in women of reproductive age; low birth weight, and exclusive breastfeeding.

Scaling up of this joint programme's successful interventions is important to sustain the impact of the joint efforts. The presented Policy Brief has outlined the way forward.

Close coordination and strong partnerships have been the key for the success of this Joint Programme. Without the support and commitment of so many partners from different agencies, sectors and levels, it would have not been possible to accomplish what has been collectively achieved today.

It is important to continue working in partnership to sustain and expand the achievements.

Dr. Trias expressed that she was happy to see that some international development agencies and media are also joining today's final event. I have heard of a Chinese saying zhongren shichai huoyan gao (众人拾柴火焰高 The more people pick up the wood, the brighter and stronger the fire is).

She also extended her gratefulness to the Government of Spain for its generous financial support, the Government of China and all the implementing agencies for their enduring commitment and hard work, and the fellow UN agencies for their continued support to this joint programme.
The Final Event was completed successfully.

The Programme Office reminded all participants that for the detailed information of the joint programme the implementation, intervention, the best practice and recommendation etc. please approach WHO for the Final Event Conference paper which contained in following books:

1. CFSN publication No. CN-00-2—40-09-Z/ “Best Practice Report”;
2. CFSN publication No. CN-00-2-40-10-Z/ "The Final Evaluation Report “/ UN/Spanish MDG Achievement Fund Joint Programme on Improving Nutrition, Food safety and food Security for China’s Most Vulnerable Women and Children”;
3. CFSN publication No. CN-00-2-40-11-Z/ “Policy Brief: Adequate, Nutritious and Safety Food for the Most Vulnerable Women and Children” ;
4. CFSN publication No. CN-00-2-40-12-Z/ “ A collection of Presentation at the Final Event”. 
The UN/Spanish MDG Achievement Fund Joint Programme on Improving Nutrition, Food Safety and Food Security for China’s Most Vulnerable Women and Children

Final Evaluation Report

April 2013
Acknowledgements

The evaluation team is led by Prof. Chen Jie, director of Key Laboratory of Health Technology Assessment (Fudan University), Ministry of Health. The School of Public Health of Fudan University (including departments of Nutrition and Food Hygiene, Maternity and Child Hygiene, Adolescent Health, Health Statistics and Social Medicine, Hospital Management) and Shanghai Municipal Health Technology Assessment Research Center participate jointly. The final compilation and editing of this report is made by Wang Haiying and Chen Bo. The evaluation gets guidance and generous assistance from UN Joint Programme Coordinator, Ms. Zhang Pingping, National Programme Coordinator, Ms. Ge Lijun, and MDG-F Secretariat. Meanwhile, leaders and officers of the programme related agencies of the United Nations’s liaison offices in Beijing and the China central ministries give us great supports and provide us lots of information. The field survey in Yunnan province is supported and assisted by provincial and county level government and offices. Special thanks to Mr. Zhang Guoliang who used to be the translator of WHO and now assist in translating of this report.

DISCLAIMER

This report is the work of a independent evaluation team and does not necessarily represent the views, policy, or intentions of the United Nation Agencies.
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ACRONYMS

ACFTU: All-China Federation of Trade Unions
ACWF: All-China Women’s Federation
AQSIQ: General Administration of Quality Supervision, Inspection and Quarantine
CAAS: Chinese Academy of Agricultural Sciences
CDC: Chinese Center for Disease Control and Prevention
CDRF: China Development Research Foundation
CFSN: MDG Achievement Fund Joint Programme on Improving Nutrition, Food Safety and Food Security for China’s Most Vulnerable Women and Children
CFSVA: Comprehensive Food Security and Vulnerability Analysis
CICETE: China International Center for Economic and Technical Exchanges
CIP: Capital Institute for Pediatrics
CLS: China Law Society
CNIS: China National Institute for Standardization
FAO: Food and Agriculture Organization of the United Nations
FECC: Foreign Economic Cooperation Center, Ministry of Agriculture
HACCP: Hazard Analysis and Critical Control Point
ILO: International Labour Organization
INFOSAN: FAO/WHO International Food Safety Authorities Network
NINFS: National Institute of Nutrition and Food Safety
MDG: Millennium Development Goals
MOA: Ministry of Agriculture
MOE: Ministry of Education
MOFCOM: Ministry of Commerce
MOH: Ministry of Heath
NCHIS: National Center for Health Inspection and Supervision
NCICS: National Center for International Cooperation in Work Safety
NBS: National Bureau of Statistics
SARFT: State Administration of Radio, Film and Television
SAWS: State Administration of Work Safety
SPHCSU: Central South University School of Public Health
TC-SARFT: Training Center, State Administration of Radio, Film and Television
UNDP: United Nations Development Programme
UNESCO: United Nations Educational, Scientific and Cultural Organization
UNICEF: United Nations Children’s Fund
UNIDO: United Nations Industrial Development Organization
WFP: World Food Programme
WHO: World Health Organization
Executive Summary

Improving nutrition, food safety and food security for China’s most vulnerable women and children (hereinafter referred to as CFSN) is a joint programme under the MDG-F thematic window on Children, Food Security and Nutrition, the time frame being over three years (December 2009 – April 2013) with an overall budget of US$ 7 million. The goal is to improve nutrition, food safety and food security for China’s most vulnerable women and children, especially focusing on the high risk group of 1.2 million children and women of childbearing age in China. Pilot studies on comprehensive approaches to food safety, food security as well as maternal and child nutrition intervention were carried out in six of the most impoverished counties. Guided by its goal and employing the strategy of monitoring and evaluation, the joint programme constructed an intervention framework which consists of four main goals with ten sub-projects, involving 8 UN agencies, 4 central government ministries and more than 16 partner institutions in China (see Table 1).

The aim of this final evaluation is to evaluate the outputs and outcomes achieved by the CFSN as well as the resulting impact, and to summarize the best practices gained and lessons learned during the process of the CFSN, in order to scale up their use to other similar development programmes. According to the scope and issues for evaluation designated by the MDG-F Secretariat, the evaluation was carried out on the three levels of design, process and results.

The evaluation adopted a holistic and prospective approach with triangulation as its principle methodology. A multidisciplinary evaluation team was established to comprehensively collect monitoring and evaluation information and conduct interviews with national, provincial and county level managers and operators as well as MDG-F Secretariat, so as to achieve, through desk studies and field surveys, a multi-perspective evaluation of the outcomes and experience gained by the joint programme on all three levels.

Main findings of the evaluation

On issues such as nutrition intervention, promoting breastfeeding, agricultural development, food security, enhancing the production and monitoring of safe food, information, education and communication of food safety knowledge and laws, and the revision of policies and laws, the CFSN integrated international and domestic
resources to encourage UN agencies, Chinese government departments and institutions to tackle the challenge of improving nutrition, food safety and food security for the women and children in China’s impoverished areas. In the design process and during implementation, a distinct and highly logical programme management framework was established, including a clear allocation of institutional responsibilities, indicators for results, and a timeframe. At the same time, strategies for monitor and evaluation and promotion were established. PMC, the UN agencies and central government ministries duly adjusted the work plan in accordance with the results of the monitoring and evaluation, and the programme coordination office reported important developments and trends of the programme through channels such as the programme’s website, thereby increasing the public’s attention and support for the programme.

The CFSN led to a number of new working mechanisms and models, such as the newly established China Food Safety Law Research Center, training of judges for court trials of criminal cases involving food safety, exploring ways to appropriately combine agricultural development and nutrition education, and collaboration among women’s associations, health inspection institutes and broadcasting stations in pilot counties to promote food safety laws.

The CFSN adopted the management model of leadership by the government with support from the UN agencies. The sub-projects have the distinct advantage of mutually complementary information and roles. Pilot counties have also developed ways to conduct multi-sector integration intervention for the promotion of food safety laws, and ways for women’s associations to acquire contributions from enterprises, so as to improve work efficiency.

Due to reasons such as natural disasters, the planned time for implementation of the CFSN prove to be insufficient, so an application was made for an extension with no cost implications. On the whole, the joint programme has been achieved as originally planned, and the financial goal has been largely met. During implementation, the central government ministries showed a high level of attention and played a proactive part in coordination and management. National technical institutions participated actively, and relevant provincial departments took responsibility for the supervision, examination and management of related sub-projects, converting the results of pilot areas into provincial policy documents. In addition, food safety knowledge was promoted, for example, in the form of theatrical performances spontaneously organized by the residents.
The CFSN produced baseline survey and final survey reports of high quality, and developed a set of surveillance indicators for the nutritional status of vulnerable populations, which received much approval from Chinese government departments such as the Ministries of agriculture and health. Intervention with Ying Yang Baos showed significant results with a marked improvement in indicators such as growth, development, anemia prevalence and various micronutrients among children aged 6-23 months in pilot counties. Agricultural intervention led to a rise in the number of people receiving nutrition intervention and in the consumption of micronutrient-rich food in rural households, both of which exceeded the expected targets. Although the expected target has not been met for improvement in infant and young child exclusive breastfeeding rates, comprehensive measures such as the establishment of re-evaluation standards for baby-friendly hospitals, revision of the Regulations for Marketing of Breast-milk Substitutes and maternity protection by enterprises have provided support for improving breastfeeding rates. The newly developed standards for fortification of supplementary food for infants and young children as well as dietary guidance for infants, young children and women have provided evidence for implementing food fortification.

The CFSN produced important outputs instrumental in the successful implementation of the Food Safety Law. For example, recommendations on criminal law amendments were adopted and related instructions were made by state leaders, including the premier of the State Council. At the same time, a number of local enterprises received help to achieve HACCP certification, and an ISO71025 system was established. Contributive attempts were also made to see how primary and secondary schools in rural areas could pursue systematic education in nutrition and food safety and how teachers could receive appropriate training, thereby creating innovative content and forms of training. Media training showed significant results. The advocacy package still needs to be integrated and implemented.

The CFSN offers a relatively high degree of equity. Interventions, for example, made no distinction of gender or race. It produced numerous excellent examples and much experience. For instance, the CFSN carried out surveys on maternity protection, and facilitated the revision of the State Council Special Provisions for the Protection of Female Employees. The joint programme increased the incentives for national government departments to autonomously apply interventions. The central government, for example, decided to provide funds amounting to 100 million Chinese yuan for free Ying Yang Baos to be distributed to children in 100 impoverished counties. Due to the lack of financial and human resources in the impoverished areas, policy and funding support from national or provincial levels is
critical to ensure sustainable development in this aspect.

Conclusions of the evaluation

The CFSN led to cooperation among UN agencies, Chinese governmental departments and technical institutions, and facilitated the integration of resources, in order to jointly tackle the challenge of improving nutrition, food safety and food security for women and children in impoverished areas. The joint intervention model it created is an optimal strategy for addressing target issues.

With a fairly high degree of ownership at national, provincial and county levels, the active participation of governments at all levels as well as technical and financial support from UN agencies enhanced operational efficiency. Multisectoral participation in tackling the challenge of improving nutrition, food safety and food security shows a significant advantage over a single agency operation in terms of efficacy.

The CFSN met the intervention targets of the thematic window, proved to be beneficial in advancing towards the achievement of the MDGs and putting the Paris Declaration into practice at national and local levels, and produced significant intervention results and impact. Certain results have been integrated in national policies or have been widely applied with a fairly high degree of sustainability, the key to ensuring such sustainability of projects in impoverished areas is policy support at national or provincial levels.

Recommendations

To strengthen the building of mechanisms for collaboration and coordination among agencies participating in the joint programme, so as to increase the comprehensive analytical capacity of reports from government and technical departments; to optimize coordination mechanisms for resource management, and enhance the coordination capacity of the programme management office; and to explore ways to set up multilateral financing mechanisms, in order to ensure sustainability of intervention activities in poverty-stricken areas.

To initiate comprehensive activities, such as enhancing the management of baby-friendly hospitals, creating baby-friendly communities and implementing the Regulations for Marketing of Breast-milk Substitutes, so as to develop and popularize foods providing nutrition intervention to pregnant and lactating women, and to
facilitate the improvement of nutrition and health among women and children.

To scale up a comprehensive intervention model of agricultural development and nutrition education and work on food fortification in impoverished areas, so as to correct the disturbing situation concerning food security and malnutrition.

To enhance educational reform and teacher training so as to ensure that health education on nutrition and food safety is integrated into primary and secondary school curricula, leading to increased awareness and behavioural changes of healthy dietary habits and food safety among school children.

To continue food security and micronutrient surveys in the long term, in order to provide evidence for policy making on scientific applications in poverty alleviation, food security and nutrition intervention.

To continuously integrate food safety campaigns into the routine work of women’s associations; to strengthen grassroots advocacy aimed at vulnerable groups by mobilizing the civil society and community bodies through the network of women’s associations; and to continue the training of media journalists, government officials, judicial workers, food safety inspectors and food producers, so as to promote enforcement of the new Food Safety Law.

To continuously enhance the building of a system for food safety emergency responses and complaints as well as for inspection support by defining roles and responsibility of different sectors, ensure their coordination, accountability and increasing their human and financial resources at the grassroots level; and to comprehensively enhance capabilities for the production, supervision and management of safe food by expanding training on the HACCP system for food manufacturers, increasing laboratory testing capacity, and strengthening the ability to control food safety in poverty-stricken areas.

To facilitate the development of rules for the implementation of the Special Provisions for the Protection of Female Employees promulgated by the State Council as soon as possible, and to enhance the ability of employees to carry out collective negotiations on maternity protection, so as to ensure optimal results.
I. INTRODUCTION

I.1 BACKGROUND

I.1.1 MDG-F and the thematic window on children, food security and nutrition

The MDG Achievement Fund (MDG-F) is a partnership agreement for the amount of approximately €528 million signed by the United Nations Development Programme (UNDP) and the Spanish government in 2006 with the aim of contributing to progress on the MDGs and other development goals through creative and replicable programmes supported by the United Nations system. The Fund uses a joint programme mode of intervention involving 130 programmes in 50 countries.

The MDG-F consists of eight thematic windows, of which the window on children, food security and nutrition involves a field with the largest coverage. About US$ 134.5 million was allocated to the five regions to carry out 24 joint programmes in the field of children, food security and nutrition with the aim of eliminating preventable mortality due to child starvation and malnutrition. Interventions included providing low-cost Ying Yang Baos, raising food safety and nutrition awareness among pregnant and lactating women, and encouraging national governments to develop intervention plans and policies targeting food safety and nutrition issues for children.

I.1.2 Improving nutrition, food safety and food security for China’s most vulnerable women and children

The total budget of the CFSN is US$ 7 million for a period of over three years (December 2009 – April 2013) with a focus on China’s 1.2 million children, women of child-bearing age and other populations at risk from food-related issues. Pilot studies were carried out in six of the most impoverished counties, adopting a comprehensive approach to improve overall food safety, food security, and nutrition for children and women. The programme was jointly carried out by 8 UN agencies, 4 central government ministries and 16 partner institutions in China.
I.2 Goals and methodology of the evaluation

I.2.1 Goals of the evaluation

According to the TOR, the final objectives of the CFSN are (1) to measure to what extent the joint programme fulfilled the programme’s activities, outputs and expected outcomes, especially the outcome of measuring development; (2) to formulate best practices and lessons that could be utilized in other parts of China and in other countries.

The specific goals are ① to measure to what extent the CFSN programme solved the needs and issues established at the design stage; ② to measure the CFSN programme’s degree of implementation, efficiency and quality delivered on outputs and outcomes, against what was originally planned or subsequently officially revised; ③ to measure to what extent the CFSN programme has attained practical results for the targeted population, beneficiaries and participants, whether individuals, communities, institutions, etc.; ④ to measure the CFSN programme’s contribution to the objectives set in the thematic window as well as the overall MDG fund objectives at local and national level; ⑤ to Identify and document substantive lessons learned and good practices on the specific topic of the thematic window, MDGs, Paris Declaration, Accra Principles and objectives, and UN reform with the aim to support the sustainability of the CFSN programme or some of its components.

I.2.2 Methodology of the evaluation

The evaluation is based on triangulation to perform data collection and evaluation with a multi-perspective and multidisciplinary approach. Information sources included documentation as well as information from field surveys and interviews related to the CFSN programme. The actual methods employed were:

(1) Desk studies
An evaluation database was established to comprehensively collect data and information related to the CFSN programme, including strategic country development documents, progress reports, the mid-term evaluation report, baseline report and final evaluation report, monitor and evaluation reports, annual summary reports and quarterly reports on activities, programme activity information, programme implementation reports and activity implementation plans, programme output documents, media information on meetings, and any other documentation
that may provide evidence on which to form judgments. Such documentation was repeatedly studied, and relevant information was extracted and evaluated in accordance with the issues to be assessed.

(2) Field surveys
Managers, technical staff and beneficiaries participating in the CFSN programme at various levels (for example, at national, provincial and county levels) were selected for field surveys and interviews. The beneficiaries were farmers from villages close to the county town of a pilot county (Wuding County) who were willing to cooperate in the survey. The field survey also included visits to a number of rural families with children who have benefited from the programme, as well as to village doctors. On the other hand, the managers and technical staff acted as key organizers and operators for the various sub-projects. Programme data from implementation bodies, suggestions from beneficiary populations and data needed to supplement investigation and evaluation have been sampled for verification.

(3) Brainstorming
Bearing in mind the evaluation guidelines, experts in food safety, maternal and child health, health policy management, epidemiology, health statistics, health technology assessment and other relevant fields were invited to evaluate and discuss issues such as design, efficiency, efficacy, sustainability and policy recommendations.

I.2.3 Limitations of the evaluation

The limitations of the evaluation consist of two major aspects: (1) the CFSN programme involves multiple levels and institutions with numerous data sources that lack integration. In addition, as it was not possible to interview all stakeholders during the field surveys, the evaluation data may not be comprehensive; (2) in view of the fact that the CFSN programme encompasses a multitude of scientific fields and is carried out through a number of sub-projects, and considering that the evaluation group relies on experts from various fields in the evaluation team to separately perform relevant evaluations, the final conclusions may have its limitations.

On the one hand, the evaluation group presented key indicators and interview issues through a discussion and analysis of the information needed for the evaluation of the sub-projects, and made all possible efforts to obtain comprehensive data by collecting information from multiple sources and including a greater number of key informant interviews. On the other hand, a crisscrossing of multidisciplinary
perspectives through a number of evaluation discussions avoided the possible lack of diversity. Efforts were made to reduce the possible limitations of the current evaluation to a minimum.

I.3 Brief account of CFSN

I.3.1 Background of programme implementation

Although China has made great progress in reducing poverty and hunger, the situation is not yet optimistic. At present, China has about 120 million people suffering from malnutrition, and there are 7.2 million children with stunted growth in China (4% of the global total); in the rural areas, the percentage of children with growth retardation (12.4%) is four times higher as compare to that in the cities (3.4%); the situation concerning the lack of micronutrients has yet to be improved, with the prevalence of anaemia among children being 19.3% in 2005, and prevalence in the most impoverished county being 80%. Nearly one out of every two children in rural areas is on the verge of vitamin A deficiency [1].

Food safety is currently an important public health issue in China. It is estimated that the foodborne diseases affect some 3 million people each year. In 2007, a national survey found out that nearly 15% of all food produced for domestic consumption did not meet the designated requirements. The impact of unsafe food on children suffering from malnutrition in the impoverished areas is of great concern, as these children have a very limited resistance against diseases and very limited access to medical healthcare services.

While paying closely attention to food safety, food security and child nutrition, the Chinese government formulated relevant intervention policies. Food security is a primary goal of the reform and development blueprint of China’s rural areas for 2020, which was launched during the third plenary session of the 17th conference of the Chinese Communist Party. The State Council promulgated the China Nutrition Improvement Action Plan and Chinese children development programme (2001-2010), setting targets for improving child feeding and nutrition. In 2009, the newly developed Food Safety Law of People’s Republic of China underlined the goal of improving food safety.
I.3.2 Brief account of CFSN implementation

The primary goal of the CFSN is to provide evidence for policy making, to improve dietary intake and food safety, to reduce the number of children and women in China suffering from malnutrition, to expand successful governmental actions in order to benefit populations in greater need. The CFSN adopted the strategy of “synchronized action from four aspects”, the four aspects being information gaps, targeted interventions, food safety in manufacturing and policy making. Its four major fields of success are as follows: (1) providing evidence for policy making by offering reliable and timely information on the extent, distribution, types and causes of malnutrition in China so as to better achieve optimization of results; (2) developing and applying comprehensive and targeted plans to alleviate child hunger and malnutrition by focusing on improving exclusive breastfeeding rates and providing healthier nutrition supplements though school-based intervention; (3) improving food safety during the manufacturing, processing and production of infant food by sharing responsibilities; (4) amending national policies, guidelines, regulations and standards for child nutrition and food safety on the basis of outcomes of the pilot projects, and disseminating relevant experience nationwide.

The CFSN was conducted in six of the most impoverished counties in China, i.e., Pan County and Zheng’an County of Guizhou Province; Huize County and Wuding County of Yunnan Province; Luonan County and Zhen’an County of Shanxi Province.

The CFSN lasted for three years, with the first year mainly focusing on building a solid foundation for programme implementation, such as making workplans, setting intervention standards and training personnel, etc. The second year focused on on-site implementation results, and capacity building continued to expand, in order to let participants pursue the programme in a fast and efficient manner. Meanwhile, monitoring surveys and questionnaires followed, and exploration of exit strategies commenced. During the third year, all projects were operational and entered the evaluation stage. The emphasis of the work shifted to evaluation, sharing experience and lessons, implementing exit strategies, and holding meetings to draw conclusions.

The participants of the CFSN included the United Nations, China’s central and local governments, and other public or private institutions, among which government ministries provided leadership and guidance, while UN agencies offered technical support. With organization from the Coordination Office, the participants made all efforts to find practical approaches to integrating activities and sharing resources.
II. RESULTS OF THE EVALUATION

II.1 Design relevance: High

Food insecurity, malnutrition, and food safety are major factors restricting the development of rural areas in China, especially in poverty-stricken counties. Such issues are areas of concern both to the government and citizens, and require prioritized intervention. Considering the current problems and possible underlying factors, the CFSN’s response covered issues such as information gaps, targeted interventions, food safety in manufacturing and policy making, so as to improve dietary intake and food safety in pilot areas, reduce the number of malnourished children and women in China, and expand successful government initiatives to benefit populations in greater need. According to the requirements on the design level stated in the TOR, the evaluation analyzed the relevance between the CFSN and the needs of the people, the interest of the country and the Millennium Development Goals. It also analyzed the experience on the design level acquired by the joint programme in the process of achieving the goals and benefits, and any remaining problems.

The design of the CFSN is highly relevant with the needs of target populations, related national policies and the MDGs. Firstly, the nutrition, food safety and food security situation among women and children in the six most impoverished areas selected was very disturbing\cite{2,3}. In 2010, for example, on average 13% of rural households in the pilot areas were in a state of food insecurity, the highest rate being 35%. 57% of those rural households relied on crop farming and animal husbandry. Baseline surveys show that, among children aged 0-3 years in the pilot areas, 17.5% suffered from stunting, 8.6% from underweight, 5.1% from wasting, 25.6% from anemia, 26.4% from iron deficiency, 54.2% from vitamin A insufficiency, and 20.7% from vitamin B12 deficiency. Among pregnant women, the prevalence rates were: anemia 26.1%, iron deficiency 54.2%, vitamin A insufficiency 52.8%, vitamin D insufficiency 59.1%, folic acid deficiency and insufficiency 45.2%, and vitamin B12 deficiency 67.6%. Secondly, a large number of national policy plans in China stated improving nutrition, food safety and food security as their objectives. In view of events which have occurred in recent years, such as the Sanlu milk powder incident, food safety has become a high priority for intervention by the Chinese government. In 2010, for example, the Food Safety Commission of the State Council was established to strengthen supervision over food safety. Other relevant policies include the Eleventh Five Year Plan which set out an action plan for nutrition
improvement and promulgated, among others, the China Nutrition Improvement Action Plan, the National Plan of Action for Child Development in China (2001-2010), and the Medium- and Long-Term National Programme for Food Security (2008-2020). Again, the goal of the joint programme is consistent with many of the MDG goals, for example, 1) MDG1: to eradicate extreme poverty and hunger; 2) MDG3: to promote gender equality and empower women; 3) MDG4: to reduce child mortality; 4) MDG5: to improve maternal health.

The CFSN took a comprehensive multi-perspective approach to respond to challenges in a scientific manner, so as to encourage the integration of resources and focused efforts by the government, and to explore solutions. For example, the challenge of improving nutrition, food safety and food security for women and children in China’s impoverished areas was addressed by responding to issues such as interventions on nutrition and agricultural production, improving breastfeeding rates, enhancing the production and monitoring of safe food, advocacy and education concerning food safety knowledge and laws, as well as revising policies and laws. In addition, nationwide expansion and replication was carried out on the basis of exploratory experience from localized pilot projects and policy recommendations. Intervention strategies are of far-reaching constructive significance.

The designing, implementation, monitoring and evaluation processes of the CFSN have been carried out in an orderly manner. In accordance with the guidelines for implementation of joint programmes, for example, a framework was developed under the management of the National MDG Steering Committee (NSC), the Joint Programme Management Committee (PMC) and the Programme Management Office (PMO), establishing a clear framework model for outcomes, which determined the responsible bodies for each project, the indicators for outcome evaluation, and the timeframe, while also including the monitoring and evaluation strategy and the advocacy strategy[^4]. The high level of attention from the national government and collaborating support from local levels have enabled orderly operation of the CFSN as planned.

CFSN joint intervention is the best strategy for the Chinese government’s response to the challenge of improving nutrition, food safety and food security for women and children in China’s impoverished areas. Firstly, the CFSN integrated international and domestic resources in a joint response to the challenge of improving nutrition, food safety and food security. UNESCO and MOE, for example, took the approach of integrating nutrition and food education into primary and secondary school curricula.
so as to bring about improvements in that aspect, therefore indirectly, yet effectively, facilitating MOH in the achievement of its objectives. Secondly, the CFSN built on the latest experience from joint programmes worldwide, for instance, to develop policies for food security and nutrition on the basis of reliable and up-to-date evidence, to apply evidence-based interventions to populations in greater need, and to adopt a collaborative model of government leadership combined with UN activities. This is helpful in encouraging multi-sectoral collaboration under the Chinese government’s current pattern of decentralized management, as well as policy making based on scientific evidence, so as to raise the level of output and efficiency.

The CFSN developed an effective monitoring and evaluation strategy to measure outputs and outcomes. The collection of evaluation information, for example, included internal reports, such as semi-annual monitoring reports, quarterly workplans, annual reports, mission reports from the secretariat and financial progress reports, as well as documentation from mid-term external evaluations organized and conducted by the UN secretariat. The monitoring reports provided evidence and effective support for the management of the joint programme. The mission reports, for example, suggested amendments to the workplan to make it scientifically feasible and to improve the quality of reports based on outcomes rather than activities [5]. Except for certain sub-projects for which implementation was delayed due to natural causes such as droughts, the PMC proactively coordinated efforts from the various parties and pressed for accelerated outputs, so that most of the projects were completed as expected.

CFSN implementation bodies created a number of novel mechanisms and models to respond to challenges. UNICEF and NINFS, for example, collaborated to form a comprehensive model for child nutrition intervention, including distribution of Ying Yang Baos in the order of “county – town – village – parents” and data feedback in the reverse order, multiple forms of nutrition and health advocacy and education, as well as family visits to evaluate and promote the project. This child nutrition intervention model was accepted and widely used by MOH. UNDP and CLS jointly founded the China Food Safety Law Research Center, which hosted the China Food Safety Law Summit Forum and provided training to judges for court trials of criminal cases involving food safety, and whose recommendations concerning amendments to the criminal law targeting crimes involving food safety were adopted [6]. Moreover, in the project to increase the intake of micronutrient-rich food in rural households, FAO and MOA jointly explored ways to appropriately combine agricultural development and nutrition education, and significantly improved diversity in food production and consumption by rural households through comprehensive
interventions involving a combination of in-kind support to agriculture, training in agricultural technology and nutrition education. In addition, women’s associations, health inspection bodies and broadcasting stations in pilot areas undergoing field surveys collaborated closely to promote food safety laws, greatly improving the efficacy of advocacy.

The CFSN established effective mechanisms for the communication and dissemination of information. The PMO, for example, developed advocacy guidelines clarifying requirements and principles for external advocacy of the programme. At the same time, a website was built for the joint programme, regularly updating and presenting important programme developments and outcomes. Parties involved in programme implementation also worked to increase the public’s attention and support to the programme through the media, website and outcome presentation conferences. Communication of information among the sub-projects was mainly achieved through the PMO and PMC. Due to the lack of infrastructures and mechanisms for sharing data, however, internal communication of information among sub-projects has yet to be improved.

The mid-term evaluation presented a number of constructive recommendations, which were adopted and implemented by the joint programme. An example was to develop a plan for accelerated action and to consider an extension of the programme with no cost implications. As a result, the PMC coordinated all parties to accelerate implementation, and the goals of the programme were basically achieved as expected. It was also proposed to establish a multilateral financing body, according to which the PMC recommended that sub-projects present policy recommendations to the government concerning a mechanism for integrating financial resources, so as to improve sustainability. As recommended, the joint programme also strengthened coordination and collaboration among the parties concerned, and improved the quality of reports.

In the CFSN design, the coordination and integration mechanism still needs to be improved. The evaluation found that the extent and range of collaboration among the sub-projects were limited at the national level, and there was insufficient sharing and integration of data. There was close structural collaboration in certain outcome areas. In the area of Outcome 1, for example, FAO, UNICEF, WFP and WHO frequently exchanged information on baseline surveys. Many sub-projects, however, were often separately implemented, lacking inter-communication and integration. This is expressed as diverse activity reports and fragmented and redundant outcome reports.
II.2 Process efficiency: High

The CFSN was launched with collaboration between UN agencies and their partners in China. As concerns management coordination, the Ministry of Commerce of PRC is responsible for overall coordination of the joint programme and programme outputs. The Ministry of Health plays a leadership role in the implementation of technical aspects. The National MDG Steering Committee (NSC) and the Joint Programme Management Committee (JPMC) are responsible for supervision and management. The Programme Management Office (PMO) is responsible for daily coordination of management. Implementation is jointly carried out by the UN agencies and their partners in China. The CFSN operates under the leadership of governments at all levels, of which the central and provincial administrative departments are in charge of programme design, organization, management and training, while technical departments are in charge of programme operation. Funding is provided in instalments by the UN agencies according to the progress of work undertaken by the implementing bodies.

The CFSN adopted a management model of leadership by the government with participation of UN agencies, which increased operational efficiency. On the one hand, government leaders at all levels placed great emphasis on the matter by creating coordination mechanisms at various levels. Relevant national and provincial administrative and technical departments, for example, actively carried out supervision and coordination, and the practice of involving major government leaders in relevant meetings was formed at the county level, in order to coordinate and ensure programme implementation as planned. Such measures ensured smooth operation for a majority of the projects. For example, a food safety survey covering 1368 rural families from 144 villages in six pilot counties was completed within two months; body measurements, surveys by questionnaires and blood sample collection covering 276 pregnant women, 413 lactating mothers and 1380 children aged 0-3 years from 41 villages were completed within a month; and nutrition evaluation as well as analysis and feedback on anaemia and micronutrients were completed within three months. During the 18 months of Ying Yang Bao intervention, 4 242 420 Ying Yang Baos were distributed to 13 055 children aged 6-23 months with a coverage of 98.2%, and 99.6% of the children consumed Ying Yang Baos at least 3 times a week for an average period of 14 months. In addition, nutrition awareness advocacy and education was performed in 11 different ways, distributing and posting 58 806 copies of advocacy material. On the other hand, the PMC met for a number of times
each year, offering feasible technical guidance to the sub-projects and enhancing coordination and cooperation among projects. WHO, UNICEF, NINFS and CIP, for example, jointly discussed and developed a unified survey tool which improved output efficiency; putting their respective strengths into play, ILO and UNIDO selected food manufacturers for joint pilot studies, assisting some of the enterprises to achieve HACCP certification, and achieving maximum results for the sub-projects while increasing the ability of enterprises to promote safety in production [10]. Interviews, however, revealed that multi-sectoral participation increased the transaction costs and opportunity costs of coordination, and inter-agency coordination was very difficult.

The efficiency of the CFSN’s approach of addressing the challenge of improving nutrition, food safety and food security through multi-sectoral intervention is significantly higher than that of a single institution. On the one hand, the challenges faced by the CFSN resulted from a variety of factors. For example, the baseline survey discovered that malnutrition among children and pregnant women was related to the presence of food insecurity, insufficient intake of micronutrient-rich food, low breastfeeding rates, inappropriate food processing and production practices, a lack of knowledge on nutrition and food, etc., and that the output efficiency of intervention by a single institution was limited, whereas a multi-agency, multi-perspective and comprehensive intervention approach could accumulate and magnify intervention effectiveness. On the other hand, the mutually complementary information and roles of a joint programme have significant advantages, leading to far-reaching implications as well as results in the near term. For example, UNICEF intervened by providing Ying Yang Baos as well as nutrition awareness advocacy and education, WHO focused on long-term intervention of food formulae, and UNESCO conducted safety training for food manufactures. In addition, during the World Breastfeeding Week in 2012, WHO and ILO jointly advocated for maternity protection and breastfeeding, calling through the media for the entire society to increase its interest and understanding of breastfeeding, and encouraging the creation of breastfeeding facilities in public places and baby-feeding rooms set up by enterprises. This improvement in the efficiency of sub-project outputs would have been very difficult for a single body, such as a health institution, to achieve in a short period of time.

The operational institutions adopted a number of approaches to increase the productivity of the joint programme. An outstanding example in this respect involved training for advocacy of food safety laws. For instance, the office of the Food Safety Committee of Wuding county, one of the pilot counties, is located in the
Health Inspection Center. The Committee involves and communicates closely with a number of county government departments, forming an integrated intervention framework. The Women’s Federation, Health Inspection Center, Center for Disease Control and Prevention, TV and Broadcasting Bureau of Wuding county have also collaborated with each other to implement their respective projects by making full use of their unique strengths in resources, reducing duplication and improving operational efficiency of the interventions. In addition, health bureaus and institutions participating in provincial and county projects in pilot provinces paid much attention to baseline surveys of the nutritional status and related interventions, making efforts to fill the gap in project funding with local funds, building a social atmosphere prioritizing the improvement of nutrition for women and children through comprehensive advocacy and education measures such as public service advertising on county TV channels, posters and billboards, and outdoor advocacy banners, and promoting compliance with requirements for the consumption of Ying Yang Baos. Another example is the Women’s Federation, which enlisted sponsorship from local enterprises to expand advocacy coverage by printing and disseminating safety advocacy material[11].

Although financial support for the CFSN ensured smooth implementation of the project, coordination mechanisms for the management of funds need to be strengthened. On the one hand, the UN agencies responsible for planning and managing funds operate on the premise of the annual workplan and budget of the programme. In some cases, direct payment was made to operating parties through mechanisms involving the establishment of conditions for payment and schemes for allocation, thereby minimizing intermediate links in the management of resources and ensuring timely access to financial support for parties involved in the implementation of projects. ILO, for example, allocated funds directly to project sites and such streamlining of financial management procedures contributed to the smooth operation of the programme. On the other hand, since the budget and financial reporting procedures of the MDG-F do not coincide with the pattern of financial management in UN agencies and there is no parallel framework for budgets and accountability or institutional mechanism for inter-ministerial coordination, the coexistence of several forms of resource management and variation in the progression of financial management also make it fairly difficult for the programme office to manage resources. Furthermore, the evaluation revealed an insufficient degree of involvement in the joint programme at the provincial level. The problem is related to the tasks to be performed and the allocation of resources. Funding for food safety education undertaken by the health inspection center, for example, applies mainly to pilot areas, and indispensible funding for supervision is all that is
received on the provincial level\textsuperscript{[12]}. That is why there is a lack of enthusiasm at the provincial level.

The mid-term evaluation led to a higher degree of output efficiency for the joint programme. For example, following the recommendation to increase the financial budget and to provide coherent reports, the PMC actively coordinated the work of UN agencies to strengthen cooperation and the integration of reports. In view of the fact that natural disasters encountered in early stages of the projects resulted in delayed initiation, the joint programme applied for an extension with no cost implications. However, as the projects accelerated the progress of work, making efforts to distribute and manage funding as planned, the financial targets have presently been basically met. For example, UNICEF, ILO and WHO budget transfers and actual expenditure are both at the level of 100%, and the expenditure rates for UNESCO, UNDP, UNIDO and FAO are all above 90%(Table 1).

<table>
<thead>
<tr>
<th>Agency</th>
<th>Via budget (US$)</th>
<th>Budget transfer (US$)</th>
<th>% of payment transfer</th>
<th>Total expenditure (US$)</th>
<th>% of expenditure incurred</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAO</td>
<td>1040896</td>
<td>1024627</td>
<td>98.4</td>
<td>997332</td>
<td>95.8</td>
</tr>
<tr>
<td>WFP</td>
<td>78570.09</td>
<td>68115</td>
<td>86.69</td>
<td>54524.39</td>
<td>69.4</td>
</tr>
<tr>
<td>ILO</td>
<td>477327</td>
<td>477327</td>
<td>100.00</td>
<td>467991</td>
<td>98.0</td>
</tr>
<tr>
<td>WHO</td>
<td>1,778,492</td>
<td>1,778,492</td>
<td>100</td>
<td>1,778,492</td>
<td>100.0</td>
</tr>
<tr>
<td>UNICEF</td>
<td>888994.32</td>
<td>888994.32</td>
<td>100.00</td>
<td>8889.9432</td>
<td>100.0</td>
</tr>
<tr>
<td>UNESCO</td>
<td>416169</td>
<td>406503.51</td>
<td>97.68</td>
<td>397414.84</td>
<td>95.5</td>
</tr>
<tr>
<td>UNIDO</td>
<td>539610.28*</td>
<td>533876.71</td>
<td>98.90</td>
<td>510956.88</td>
<td>94.7</td>
</tr>
<tr>
<td>UNDP</td>
<td>119,027</td>
<td>-</td>
<td>-</td>
<td>110,354</td>
<td>93.0</td>
</tr>
</tbody>
</table>

* 7% to be deducted as programme support costs.

Factors affecting the operational and financial efficiency of the CFSN mainly include: 1) Poor natural and transportation conditions. Pilot counties are mostly located in remote mountainous areas, where residents live in scattered locations, and road connections are vulnerable to floods and landslides, making it all the more difficult to conduct intervention surveys and deliver supplies. Serious spring drought, for example, affected the pilot counties in the first year of the programme, hence the time for planting test crops was missed. As a result, last-minute changes were made to replace some of the sample villages in the survey plan. 2) The local support system was far from ideal. The shortage of rural health centers in certain areas, for example, increased the difficulty of communication and organization during the surveys. The
lack of qualified inspection bodies made it impossible to effectively detect hazards when food safety complaints arose. 3) The procedures and mechanisms for financial management differ among the agencies, and there is no collaborative mechanism responsible for interministerial coordination. For the aforementioned reasons, the evaluation believes a variety of factors should be fully taken into consideration in the design of the joint programme with more time allocated for intervention and attention paid to the building of coordination mechanisms, in order to avoid adverse factors and improve the quality of outputs.

II.3 Process ownership: High

There was a fairly high degree of ownership at the national level. Ministries of the central government paid great attention and actively participated in coordination and management. National technical institutions such as the Institution of Nutrition and Food Safety under the Chinese Center for Disease Control and Prevention, Chinese Academy of Agricultural Sciences, and All-China Women's Federation applied the latest UN experience to programme management as guidance for the design, training and summary of each sub-project. At the national level, current policies were revised and improved in accordance with outcomes of the programme. Examples include the revision of the State Council’s Special Provisions for the Protection of Female Employees[^13], the newly developed Indicator System for the Nutritional Status of Women and Children in China which will be included in the national nutrition supervision system[^14], the creation of a long-term mechanism for the Food Safety Law Summit Forum, and instructions from state leaders after publication of the Report on the China Food Safety Law Summit Forum (2011), requesting relevant departments to pay attention and actively respond.

At provincial and county levels, there was also a fairly high degree of ownership. Relevant provincial departments were responsible for supervision, assessment, and management of the sub-projects, actively transforming outcomes of the pilot projects into provincial policy documents. For example, the newly developed Twelfth Five Year Food Safety Plan of Yunnan Province, and Yunnan Food Safety Ordinance (draft) included ideas such as encouraging and supporting food manufacturers to promote the application of advanced technology and management systems, as well as establishing a system of regular training for food manufacturers. Partner institutions in pilot counties actively cooperated in programme implementation. For example, the Wuding County Center for Disease Control and Prevention introduced methods and tools from the joint programme into its routine work; the Wuding County Agriculture Bureau actively institutionalized agricultural technology training.
and learning; and the Women’s Federation of Wuding County integrated nutrition and food safety advocacy into its daily workplan.

In addition, the beneficiaries and community residents also enjoyed a fairly high degree of programme ownership. Interviews in pilot counties, for example, revealed that residents participating in the dissemination of food safety knowledge had spontaneously organized theatrical performances to disseminate food safety knowledge, and community management personnel also took the initiative in carrying out such work in the community to improve food safety awareness.

II.4 Effectiveness of results: Excellent

The logical framework of CFSN interventions includes four major planned outcome objectives and ten specific goals, which can be listed as: 1) To determine the nutrition and food security status in pilot areas and improve national databases for the nutritional status of women and children, in order to enhance monitoring capabilities. 2) To improve breastfeeding rates, improve the quality of micronutrient-rich food supplements, increase intake and supply of micronutrient-rich food among families in the pilot areas, as well as develop and implement national programmes for nutrition fortification. 3) To produce safer child food in pilot counties by enhancing safety in infant food processing and preparation, in order to successfully implement new food safety laws. 4) To launch national, provincial and local advocacy programmes on an experimental basis, integrate such programmes into policies, guidelines and regulations, and train at least 100 journalists in the pilot counties. A series of quantitative and qualitative targets were set under the aforementioned objectives to serve as a basis for evaluating achievement of such objectives.

The CFSN met the established intervention goals with significant efficacy and impact. Based on the established outcome framework, the evaluation group analyzed the main activities carried out in the process of programme implementation, and summarized the main outputs and key outcome indicators, which were classified as excellent, good, average or poor according to how well the objectives were achieved. By comparing pre- and post-intervention indicators, the evaluation group found significant improvement in nutrition among children and women in the pilot counties, an increase in the proportion of micronutrient-rich food consumed by rural households, a marked improvement in the ability of local food manufacturers to observe safety in production, and significant enhancement of knowledge on food safety laws among residents. The evaluation will concentrate on plans and outputs
Objective 1 planned to acquire accurate information on food security and its vulnerability, prevalence of anemia among children and women, and the supply of micronutrients in pilot counties, and to evaluate and improve national databases on nutrition among women and children. The evaluation found that this objective was well achieved. Details include the publication by implementing bodies of high-quality reports for the baseline survey and final survey, the collection of first-hand information on pre- and post intervention survey indicators in impoverished areas, and the development of a system of nutrition monitoring indicators aimed at priority groups. These results were highly acknowledged by Chinese government departments such as the Ministry of Agriculture and the Ministry of Health (Table 2).

Objective 2 planned to carry out nutrition interventions for infants and young children, improve breastfeeding rates, strengthen support for breastfeeding from enterprises, increase the proportion of micronutrient-rich food produced, and develop and implement food fortification programmes. The evaluation concluded that this objective was well achieved; the expected targets for the scope of nutrition intervention and the increase in the proportion of micronutrient-rich food in rural households both being exceed. Although exclusive breastfeeding rates of infants and young children failed to meet the expected targets, comprehensive measures such as the establishment of re-evaluation standards for baby-friendly hospitals, revision of the Regulations for Marketing of Breast-milk Substitutes and maternity protection by enterprises provided support for improving breastfeeding rates. The standards for supplementary food fortification and guidance on supplementary food fortification for infants and young children developed by UNICEF also provided evidence for future implementation of food fortification (Table 3).

Objective 3 planned to increase the capacity for producing safe food through enhancing the HACCP, laboratory testing capacity and training on food safety control; to improve food safety for infants and young children through enhancing food safety education in primary and secondary schools, hospitals and women’s associations; and to facilitate the implementation of food safety laws through training on such laws. The evaluation found that this objective was well achieved with a number of innovative outcomes. For example, recommendations concerning amendments to the criminal law were accepted, and central government leaders made instructions following the Food Safety Law Summit Forum and its report. In addition, the programme enabled certain local enterprises to achieve HACCP certification, established the ISO71025 system, facilitated exchange with enterprises from other
countries\textsuperscript{15}, explored ways to integrate nutrition and food education into primary and secondary school curricula\textsuperscript{16} (Table 4).

Objective 4 planned to develop an advocacy package which would transform into policies, guidelines and regulations with enhanced advocacy from the media. The evaluation found that this objective was in the process of implementation with tangible results in media training, increasing the scope and depth of advocacy for food safety knowledge\textsuperscript{17}. Building on the experience obtain from the sub-projects and policy recommendations, UNESCO and UNICEF developed an advocacy package and prepared advocacy material in cooperation with advocacy agencies, work on which is presently still in progress. In addition, the sub-projects carried out policy advocacy and promotion in their respective fields (Table 5).

CFSN intervention had a significant impact on the population and agricultural production in pilot areas. Firstly, there was significant improvement in indicators such as growth and development, anemia prevalence, vitamin A and B\textsubscript{12} among children aged 6-23 months in the pilot counties (Table 6). Secondly, there was an obvious increase in the proportion of micronutrient-rich food consumed in pilot areas (Table 7). Thirdly, media advocacy on food safety increased significantly (Table 8), and awareness among various group such as women, children and teachers was greatly enhanced (Table 9). In addition, there was also an increase in animal husbandry and the frequency of meat consumption among rural households, a change in the way nutritious agricultural products are produced and consumed, and a significant improvement in maternity protection of employees (Tables 10-12).

The CFSN produced many excellent practical examples and much experience as listed below. 1) A comprehensive model for nutrition intervention was developed, which promoted the all-round effectiveness of nutrition intervention through providing Ying Yang Baos to children, training doctors and healthcare workers for women and child health at all levels, offering guidance on feeding to persons who look after children, building a social atmosphere that prioritizes nutrition for women and children (TV programmes of public service advertising, slogans, posters, etc.). 2) A comprehensive intervention model was explored to appropriately combine agricultural development and nutrition education. The model expanded family-based forms of diversified farming such as vegetable farms and animal husbandry through joint action combining the provision of agricultural supplies, agro-technological training and nutrition education. A method of “specialists - technicians – pilot farmers – all farmers” was applied in technical training and expansion, with priority given to vulnerable groups such as women and young children in poverty-stricken
counties \(^{18}\). 3) Efforts were made to explore ways of integrating nutrition and food safety education into related courses in primary and secondary schools, developing supportive teaching material and training teachers. 4) Measures including training, guidance, assistance, and recommendations were taken in connection with four different aspects: enterprise production, quality control, food inspection and policy guidance. Comprehensive intervention was applied in pilot areas, encompassing HACCP training, management of standardized laboratory testing, enhancement in the capability of food safety supervisors, on-site rectification of safe production practices in enterprises, and policy-making for the management of food safety; 5) efforts were made to expand the dissemination of knowledge on food safety laws by providing training to media personnel and judges; 6) By making use of the network of women’s associations and full mobilization of civil society and community organizations in the dissemination of knowledge on food safety laws, the effectiveness of advocacy was increased, and channels for dialogue were opened between the government and civil society organizations\(^{19}\). 7) Internationally recognized state-of-the-art tools for food security and nutrition surveys were introduced in an attempt to explore ways of conducting surveys for the final report. 8) In-depth understanding of domestic law enforcement was obtained through surveys of maternity protection at grassroots level, and recommendations were made to facilitate legislative action by the State Council. In addition, maternity protection was improved by following through with the Special Provisions for the Protection of Female Employees. This legislative model of acting from bottom to top and from top to bottom protects the rights of women and children in China in a fundamentally sound manner, and facilitates the sustainable advancement of maternity protection.

The joint programme worked with a fairly high level of equity in pilot areas. Nutrition intervention by UNICEF, for example, covered all children aged 6-23 months in pilot areas, offering equal benefits irrespective of race or gender. Food safety education organized by UNESCO in schools covered all school children, and maternity protection supported by ILO addressed the issue of equity in employment for young women in particular. Food safety knowledge was disseminated via multiple channels such as women’s associations, health inspection bureaus, and broadcasting stations, in an attempt to cover all planned beneficiaries of interventions. Pilot manufacturers of infant food received all-round training and support on the basis of voluntary participation.

The CFSN facilitated the achievement of MDG goals at national and local levels in a beneficial manner. On the one hand, results obtained at the local level facilitated
achievement of the MDG goals. The joint programme, for example, increased the
capacity for food production and proportion of nutritious food consumed by rural
households in pilot areas, improved the indicators for child growth, development
and nutrients, and enhanced the protection of maternal rights. On the other hand,
the CFSN promoted the revision of relevant national policies and legislations, for
example, the Special Provisions for the Protection of Female Employees, and
amendments to the criminal law which now includes provisions on food safety.

The CFSN facilitated the realization of principles of the Paris Declaration. As concerns
country ownership, for example, sub-projects of the CFSN offered a number of policy
recommendations which were accepted and applied by several government
departments, increasing the government’s attention to and action for achieving the
MDG goals. For instance, the central government provided, free of charge, Ying Yang
Bao intervention to children in 100 impoverished counties, and revised the Special
Provisions for the Protection of Female Employees. Creating a favourable
atmosphere for cooperation, the joint programme also facilitated cooperation
among UN agencies, government departments and institutions in China to achieve
the MDG goals. Rather than being collaborative merely in form, the joint programme
took a multi-perspective approach to meet its objectives with an emphasis on
effectiveness, and promoted coordinated efforts to achieve its objectives and fulfill
its responsibilities.

There is still room for improvement concerning integration of the CFSN. On the one
hand, as the management systems of UN agencies and the Chinese government are
decentralized, it will be some time before the various departments can be integrated
and unified. On the other hand, policy-making by the Chinese government relies on
sufficient evidence. When developing strategies for food fortification, for example,
the government pays much more attention to possible emergence of health hazards
as compared to the accompanying benefits. As a result, implementation of certain
policy recommendations was delayed. Nevertheless, the joint programme
encouraged the various departments to jointly reflect on ways to address common
objectives and come up with collaborative responses, thereby advancing the process
of integration of the various departments.

II.5 Sustainability of results: Excellent

Although the results of the CFSN, with an excellent sustainability, have implications
for national policy making, policy and financial support should be further
strengthened at national or provincial levels.

Firstly, the following were included in national policies or plans: 1) The revised nutrition surveillance database, which has been acknowledged by MOH and will be integrated into provincial and municipal surveillance networks. 2) Revision of the State Council’s Special Provisions for the Protection of Female Employees, which promoted the development of rules for implementing the Provisions and facilitated the signing of special contracts for female employees to guarantee protection for them. 3) Nutritional package intervention aimed at infants and young children, which has been included in the 2012 national fiscal plan. 4) More than 30 policy recommendations produced by projects for managing food safety in the production process, which have already been adopted by local governments and will provide important evidence in the future development of regional policies for management of food safety. 5) Recommendations concerning amendments to the criminal law on food safety, which have been taken into consideration in Amendment to the Criminal Law (8).

Secondly, the following will continue to be pursued or expanded: 1) The practice of using Ying Yang Baos for nutrition intervention, which has been embraced by the Chinese government and is being applied and expanded to a larger number of poverty-stricken areas. In 2012, the Qinghai provincial government, for example, provide 10 million Chinese yuan to all 15 impoverished counties in the province for nutrition intervention aimed at more than 100,000 children aged 6-12 months, and the central government decided to provide 100 million Chinese yuan to children in 100 impoverished counties as financing for free Ying Yang Baos. 2) The comprehensive intervention model appropriately combining agricultural development and nutrition intervention, which is included in the FAO/Chinese government national programme framework (2012-2015), and which received necessary support for expansion. 3) The sample survey method for food safety applied by the Chinese Academy of Agricultural Sciences, which has been adopted by the poverty-alleviation office of the State Council, and applied to poverty surveys in 37 impoverished counties from 28 provinces.

Thirdly, it was revealed during interviews in pilot areas that, when attending a summary meeting, the deputy governor of Wuding county promised, on behalf of the local government, to enhance intervention in relevant aspects. Interviews with staff from operational institutions found, however, that all departments lacked financial and human resources, local government funding available for MDG goals related to prioritized CFSN activities was limited, and the operating party at the
county level also lacked channels to appeal for funding. The sustainability of projects in the pilot areas, therefore, relies on external sources of funding, such as policy or financial support from national or provincial levels.

III. CONCLUSION OF THE EVALUATION

Jointly implemented by a number of UN agencies, central government ministries and partner institutions in China, the CFSN consists of four major outcome goals and ten sub-project targets. Based on the evaluation scope and questions established by MDG-F, the evaluation is carried out on the three levels of design, process and results to evaluate the outputs and outcomes of the CFSN and their impact, and to sum up the practical experience gained and the lessons learned.

The CFSN joint intervention framework is the best strategy for the Chinese government to respond to the challenge of improving nutrition, food safety and food security for women and children in poverty-stricken areas. The management model of government leadership with participation by UN agencies has a fairly high operational efficiency, and multisectoral participation in the response to the challenge of improving nutrition, food safety and food security has an obvious advantage. National, provincial and county levels enjoy a fairly high degree of ownership. The CFSN achieved the expected intervention goals as planned, with significant intervention results and impact. Some of the outcomes have been integrated into national policies or are being widely applied with a fairly high degree of sustainability, but since the economic capacity of poverty-stricken areas is limited, policy support from national or provincial levels is the key to guaranteeing sustainability. The CFSN has been helpful in advancing towards the achievement of the MDGs and putting the Paris Declaration into practice at national and local levels. Further improvements should be made in intersectoral cooperation, sharing and integrating data, and financial coordination and management.

IV. LESSONS LEARNED

1. As the joint programme involves several bodies, much attention should be given to building an effective, smooth and efficient mechanism for communication and coordination. It is particularly important to clarify the authority and responsibilities of the coordination office. More time needs to allocate to the joint programme in order to ensure quality in completing the programme.
2. As numerous sub-projects are being implemented, reporting is relatively fragmented. Data sharing and analysis should be improved, and greater efforts should be made to summarize and identify overall outcomes.

3. On the one hand, the strategy of monitoring and evaluation can control the progress of the programme and any problems there may be. On the other hand, it effectively facilitates timely completion of the programme, acting as an important measure to ensure the outcome of the joint programme.

4. The Ying Yang Bao intervention model and the comprehensive strategy combining agricultural development and nutrition education effectively improved the nutritional status as well as the supply and consumption of micronutrient-rich food among children and rural households in pilot areas. These two methods of intervention should be built on and extended for wider use.

5. The integration of nutrition and food safety education into primary and secondary school education is an important way to improve awareness and behavior. To ensure effectiveness, it is essential to have support from policies related to educational reform and long-term implementation.

6. Mechanisms for collaboration among women’s associations, health inspection bodies and the media should be explored, and training on food safety knowledge and laws should be conducted.

7. Surveys on nutrition and food security should be continued, in order to identify problems concerning nutrition and food security in impoverished mountainous regions and gain an understanding of their distribution, so as to provide evidence for the development of intervention policies.

8. An all-round intervention framework aimed at manufacturers and involving production, quality control, food inspection and policy guidance effectively enhanced safe production among manufacturers participating in pilot projects.

9. Policy recommendations proposed on the basis of findings from surveys on maternity protection in pilot areas facilitated the revision of the State Council’s Special Provisions for the Protection of Female Employees. In order to ensure effectiveness, rules for implementation need to be developed as soon as possible, and collective negotiating abilities should be enhanced for maternity protection.
of employees.

10. Strengthening the management of baby-friendly hospitals, creating baby-friendly communities and implementing the Regulations for Marketing of Breast-milk Substitutes constitute a comprehensive strategy for ensuring high rates of exclusive breastfeeding. Capacity building should be enhanced for such activities.

V. RECOMMENDATIONS

1. A comprehensive intervention model appropriately combining agricultural production and nutrition education in poverty-stricken areas can effectively facilitate agricultural development and diversification of nutritious food in such areas, helping to solve the problem of malnutrition and to alleviate poverty.

2. The integration of nutrition and food safety education into primary and secondary school curricula requires attention, on the part of governments and educational authorities at all levels, to nutrition and food safety education in schools. The training of teachers for nutrition and food safety as well as the development of training material should be strengthened, and ways should be explored to experiment on combining and complementing other courses with nutrition and food safety education.

3. In-depth work should be carried out on maternity protection for female employees, in order to facilitate the development and promulgation of the rules for implementing the Special Provisions for the Protection of Female Employees, to further facilitate the signing and improvement of collective contracts on maternity protection for employees, and to improve maternity protection in workplaces. This is highly important to improve child nutrition, to protect the maternity protection rights of employees, and to promote gender equality.

4. Continuous long-term surveys of food security and micronutrients may reveal existing problems concerning food security and nutrition in poverty-stricken areas, and will contribute, in a scientific manner, to poverty alleviation, food security and the formulation of nutrition intervention policies.

5. Training programmes on the HACCP system and capacity building for laboratory testing and for the inspection of food quality and safety in poverty-stricken regions are of great significance in increasing awareness of food safety among manufacturers and in enhancing related capabilities, thus improving food safety.
and security in the region.

6. Training of media journalists should continue, in order to take full advantage of media resources to achieve universal awareness of nutrition and food safety.

7. Expanding training on systems of standardized production procedures for food safety and training of work safety inspectors, as well as providing guidance to food manufacturers for the improvement and on-site reform of rules and regulations for work safety, will be helpful in enhancing the ability of work safety inspectors to enforce such rules and regulations, raising food manufacturers’ awareness of work safety, establishing systems for the management of work safety, and identifying potential safety hazards.

8. Food safety advocacy should continue to be integrated with the routine work of women's associations. The network of women's associations should be used to mobilize the civil society and community groups, in order to strengthen advocacy aimed at vulnerable populations at the grassroots level.

9. Intervention activities using Ying Yang Baos should continue, and exploratory efforts should be made to develop a food fortification programme, in order to continue intervention for vulnerable populations, especially for children. Food for nutrition intervention aimed at pregnant women and lactating mothers should be developed and popularized, and joint nutrition intervention activities should be carried out for pregnant women, lactating mothers, infants and young children, in order to comprehensively improve the nutrition and health of women and children.

10. Continuous efforts should be made to strengthen the building of systems for food safety emergency response and complaints, enhance coordination between different sectors and strengthen human resources and capital investment, and to improve the laboratory testing support system.

11. Communication and coordination mechanisms should be strengthened. Programme coordination offices should be established at different levels of implementation. The accountability and authority of the Programme Coordination Office at the national level, as well as provincial and county level intersectoral communication and coordination on the operational level, should be strengthened. In addition, greater efforts should be made to build a joint database and to develop a mechanism for sharing data.
12. Efforts should be made to explore ways of establishing a multilateral financing agency, which will carefully analyze and assess the health status of vulnerable populations in China, in order to help achieve the established goals in the field of food safety, children and nutrition in a timely manner.

13. In accordance with local conditions, qualified local food manufacturers should be identified for the production of Ying Yang Baos, so as to reduce the delivery cost of Ying Yang Baos, and to benefit a larger number of people by promoting local economic development.

14. Follow-up surveys and evaluations should be carried out on the nutritional status, production patterns and food safety knowledge of residents in pilot areas, including, for example, blood monitoring of rural residents to verify the effectiveness and long-term impact of agriculture and nutrition intervention.
VI. APPENDICES

VI.1 Tables

Table 1. List of domestic and international agencies participating in the CFSN joint programme

<table>
<thead>
<tr>
<th>UN agencies</th>
<th>Chinese government departments and technical institutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAO</td>
<td>MOA</td>
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<tr>
<td></td>
<td>FECC</td>
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<tr>
<td></td>
<td>CDC</td>
</tr>
<tr>
<td>WFP</td>
<td>CAAS</td>
</tr>
<tr>
<td>WHO</td>
<td>MOH</td>
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<tr>
<td>UNICEF</td>
<td>NINFS</td>
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<td></td>
<td>CIP</td>
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<tr>
<td>UNESCO</td>
<td>MOE</td>
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<td>SPHCSU</td>
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<td></td>
<td>ACWF</td>
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<td>SARFT</td>
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<td></td>
<td>TC-SARFT</td>
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<td>UNDP</td>
<td>CICETE</td>
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<td>CLS</td>
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<td>ILO</td>
<td>SAWS</td>
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<td>UNIDO</td>
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<td></td>
<td>NCICS</td>
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<td>ACFTU</td>
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<td>NBS</td>
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<td>MOFCOM</td>
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Table 2. Goals of expected Outcome 1, process of programme implementation and analysis of results

<table>
<thead>
<tr>
<th>Goals</th>
<th>Targets</th>
<th>Process</th>
<th>Outputs</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1 Food security situation in pilot counties understood by</td>
<td>1.1.1 Existence of accurate data on food security and vulnerability</td>
<td>1.1.1 Food security baseline and final surveys of 1368 rural households</td>
<td>Publication of <em>Analysis of Food Safety and Vulnerability in Impoverished Counties in China</em> and a report on comparative analysis of</td>
<td>Very good</td>
</tr>
</tbody>
</table>
### Goals

<table>
<thead>
<tr>
<th>Goals</th>
<th>Targets</th>
<th>Process</th>
<th>Outputs</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>policymakers. in the six pilot counties.</td>
<td>from 144 villages in the six pilot counties.</td>
<td>data from a second survey, providing the number of people and regions affected by food insecurity as well as factors leading to food insecurity, while making recommendations for policy intervention.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1.2 Data on anemia, 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.</td>
<td>1.1.2 Providing data from surveys on anemia, iron, vitamin A, zinc, folic acid, vitamin B12 deficiencies for children and women, and conducting comparative analysis in Year 3.</td>
<td>Publication of <em>Nutritional Status of Women and Children, and Effectiveness of Nutrition Intervention in Improving Nutrition among Children</em> and a report on comparative analysis of data from a second survey, providing information on nutrition among women, will-be-mothers, parturients and children, breastfeeding, and supplementary foods.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.2 Targeting and monitoring improved through availability of an improved national database on nutritional status of women and children.</td>
<td>Evaluation and revision of existing national database on nutritional status of women and children; revision and launch of system for nutrition and health indicators.</td>
<td>Development of system for nutrition and health indicators mainly aimed at adolescent girls, women of child-bearing age, will-be-mothers, lactating mothers and children under the age of five.</td>
<td>Good</td>
<td></td>
</tr>
</tbody>
</table>

Table 3. Goals of expected Outcome 2, process of programme implementation and analysis of results
<table>
<thead>
<tr>
<th>Goals</th>
<th>Targets</th>
<th>Process</th>
<th>Outputs</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1</td>
<td>Breastfeeding increased and micronutrient supplementatio n improved.</td>
<td>2.1.1 Ying Yang Baos reaching 13055 children aged 6-23 months; advocacy</td>
<td>(1) The number of persons benefiting from intervention exceeded advocacy expectation with</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.1.1 Nutrition supplements in 3 pilot counties reaching 9000 children aged 6-23 months.</td>
<td>2.1.2 30%-50% increase in breastfeeding for six months.</td>
<td>98.2%, among which 99.6% of children consumed Ying Yang Baos at least 3 times per week. Nutrition education was conducted at the same time.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.1.2 Establishment of baby-friendly hospitals; community activities to promote breastfeeding; surveys of food resources.</td>
<td>2.1.3 Revision and advocacy for the Regulations for Marketing of Breast-milk Substitutes.</td>
<td>(2) Baby-friendly hospitals re-evaluated; report prepared on local feeding practices and food resources; a series of advocacy and training material developed.</td>
<td>Good</td>
</tr>
<tr>
<td></td>
<td>2.1.3 Baseline survey on maternity protection in workplaces; preparation of advocacy pamphlet on maternity protection in workplaces.</td>
<td>2.1.4 Briefing on breastfeeding rates.</td>
<td>(3) Preparation of the Regulations for Marketing of Breast-milk Substitutes completed; Revision and a quest for comments in progress.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.1.4 Report on preparation of advocacy in workplaces.</td>
<td></td>
<td>(4) Report on maternity protection in workplaces</td>
<td></td>
</tr>
<tr>
<td>Goals</td>
<td>Targets</td>
<td>Process</td>
<td>Outputs</td>
<td>Evaluation</td>
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<tr>
<td>maternity protection in workplaces; facilitation of legislative amendments.</td>
<td>Increasing 30% the proportion of diet made up by micronutrient-rich foods in pilot areas by Year 3</td>
<td>Agricultural intervention and nutritional intervention, including distribution of agricultural supplies, training of farmers, technical guidance, and advocacy and training on nutrition knowledge.</td>
<td>Advocacy Pamphlet for Maternity Protection produced by Wuding County; filming of “Luowu’s smile – a Promotional Video on Maternity Protection in Wuding County” completed; revision of the Special Provisions for the Protection of Female Employees facilitated.</td>
<td>Very good</td>
</tr>
</tbody>
</table>

2.2 Household dietary intake of micronutrient-rich, locally-available food increased in 3 pilot counties.

Increasing 30% the proportion of diet made up by micronutrient-rich foods in pilot areas by Year 3

Agricultural intervention and nutritional intervention, including distribution of agricultural supplies, training of farmers, technical guidance, and advocacy and training on nutrition knowledge.

(1) Comprehensive intervention strategy of “vegetable farms + animal husbandry + training on agricultural techniques + nutrition education” developed.

(2) Proportion of diet in rural households made up by micronutrient-rich foods increased by 41.3% (higher than established goal) as compared to baseline.

(3) Significant
Goals | Targets | Process | Outputs | Evaluation
--- | --- | --- | --- | ---
improvement in household dietary diversification (HDD): 4%~24%; in women dietary diversification (WDD): 29%~89%. Average increase in production of vegetables rich in vitamin A: 32.5%; significant expansion of family-based animal husbandry. (4) Nutrition knowledge, attitudes and practices (KAP) on nutrition significantly improved among rural household, as compared to baseline.

2.3 National plan for food fortification in place and implemented. Local food fortification plan developed and approved Risk analysis of food fortification strategy; development of related standards and guidelines. National standards for fortification of supplementary foods and guidelines on food fortification for infants aged 0-2 years, young children above the age of 2 and women developed and submitted. Good

Table 4. Goals of expected Outcome 3, process of programme implementation and analysis of results

<table>
<thead>
<tr>
<th>Goals</th>
<th>Targets</th>
<th>Process</th>
<th>Outputs</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1 Food</td>
<td>3.1.1 Pilot</td>
<td>3.1.1 Five child</td>
<td>(1) Four out of five</td>
<td>Good</td>
</tr>
<tr>
<td>Goals</td>
<td>Targets</td>
<td>Process</td>
<td>Outputs</td>
<td>Evaluation</td>
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<tr>
<td>production for children made safer in pilot counties.</td>
<td>food enterprises trained in HACCP process; HACCP system established.</td>
<td>pilot enterprises assisted in achieving HACCP certification.</td>
<td>(2) Laboratory ISO17025 Training Material developed; four pilot labs assisted in establishing ISO17025 quality control system, and three pilot labs assisted in achieving CNAS accreditation.</td>
<td>(2) Laboratory ISO17025 Training Material developed; four pilot labs assisted in establishing ISO17025 quality control system, and three pilot labs assisted in achieving CNAS accreditation.</td>
</tr>
<tr>
<td>3.1.2 Increase in the capacity of pilot laboratories to perform food safety monitoring.</td>
<td>laboratories for food testing from Yunnan and Guizhou trained in HACCP process.</td>
<td>Four laboratories for food testing from Yunnan and Guizhou trained in ISO 26000 standardization and management.</td>
<td>(3) Training for food quality inspectors performed: 200 person-times; study trip to visit enterprises in Austria completed.</td>
<td>(3) Training for food quality inspectors performed: 200 person-times; study trip to visit enterprises in Austria completed.</td>
</tr>
<tr>
<td>3.1.3 Increase in the management and operational capacity of food quality and safety inspectors.</td>
<td>guidelines on safe and healthy work processes developed.</td>
<td>3.1.3 Thirty food quality and safety inspectors trained to improve operational capacity; short-term international exchanges organized.</td>
<td>(4) More than 100 food quality and safety inspectors and more than 400 managers and technical personnel in food processing enterprises trained.</td>
<td>(4) More than 100 food quality and safety inspectors and more than 400 managers and technical personnel in food processing enterprises trained.</td>
</tr>
<tr>
<td>3.1.4 Guidelines on safe and healthy work processes developed.</td>
<td>development of plans and policy advice for food safety management in pilot areas.</td>
<td>3.1.4 Guidelines on safe and healthy work processes developed.</td>
<td>Four pilot food processing enterprises assisted in detection and elimination of potential hazards, comprehensively enhancing safety in the enterprises.</td>
<td>Four pilot food processing enterprises assisted in detection and elimination of potential hazards, comprehensively enhancing safety in the enterprises.</td>
</tr>
<tr>
<td>3.1.5 Management plans and policy advice concerning food production and inspection developed for targeted departments in pilot areas.</td>
<td></td>
<td></td>
<td>(5) Survey in pilot areas completed and three seminars held, providing more than 50 policy recommendations on food safety for pilot areas.</td>
<td>(5) Survey in pilot areas completed and three seminars held, providing more than 50 policy recommendations on food safety for pilot areas.</td>
</tr>
<tr>
<td>Goals</td>
<td>Targets</td>
<td>Process</td>
<td>Outputs</td>
<td>Evaluation</td>
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</tr>
<tr>
<td>3.2 Handling and preparation of food for infants and children made safer.</td>
<td>3.2.1 Selected primary and secondary schools, hospitals and women's associations in pilot counties trained in WHO's Five Keys to Safer Food.</td>
<td>3.2.1 Training conducted in food safety knowledge and WHO's Five Keys to Safer Food.</td>
<td>(1) KAP related to food safety for women and children in pilot counties greatly improved.</td>
<td>Good</td>
</tr>
<tr>
<td></td>
<td>3.2.2 At least 50% of the schools in pilot counties will integrate nutrition and food safety into school curricula with 100% of their science and health education teachers as well as head teachers trained in the use of supplementary materials in classrooms.</td>
<td>3.2.2 Policy analysis, development of teaching material, training of teachers and government officials in charge of educational affairs, and school-based experiments.</td>
<td>(2) Policy analysis report and baseline survey completed; Supplementary materials for teachers and pupils respectively prepared; head masters and teachers from 100 primary and secondary schools trained, with such materials being integrated into the curricula of 60 primary and secondary schools; KAP related to food safety improved among pupils following intervention.</td>
<td></td>
</tr>
<tr>
<td>3.3 New food safety law successfully implemented</td>
<td>3.3.1 300 government officials, 500 legal personnel and 500 employees trained. 3.3.2 New food safety law promoted and disseminated, especially to women's groups and local communities in pilot counties.</td>
<td>3.3.1 Training of government officials, legal personnel and employees as well as a series of other activities accomplished. 3.3.2 Surveys on food safety conducted in two pilot counties; targeted training carried out. 3.3.3 Survey on</td>
<td>(1) Food Safety Law Research Center founded; China Food Safety Law website set up; Food Safety Law journal (journal for internal distribution) launched; Annual Report on China’s Food Safety Law prepared; competition on food safety law knowledge and food safety law summit forum held; recommendations on</td>
<td>Very good</td>
</tr>
<tr>
<td>Goals</td>
<td>Targets</td>
<td>Process</td>
<td>Outputs</td>
<td>Evaluation</td>
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<tr>
<td>3.3.3 The establishment and testing of a food emergency response system and a food complaints system with practical operability.</td>
<td>food emergency response system and food complaints proposed.</td>
<td>3.3.4 Food safety law training of various forms</td>
<td>amendments to the criminal law accepted.</td>
<td>(2) A fairly large change in KAP concerning food safety among women and children achieved; Training material and promotional products of various forms.</td>
</tr>
<tr>
<td>3.3.4 Training of government officials, food safety regulators and people involved in safe food production.</td>
<td>government officials, food safety regulators and people involved in safe food production.</td>
<td>3.3.4 Food safety law training of various forms</td>
<td>amendments to the criminal law accepted.</td>
<td>(2) A fairly large change in KAP concerning food safety among women and children achieved; Training material and promotional products of various forms.</td>
</tr>
</tbody>
</table>

Table 5. Goals of expected Outcome 4, process of programme implementation and analysis of results

<table>
<thead>
<tr>
<th>Goals</th>
<th>Targets</th>
<th>Process</th>
<th>Outputs</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1 Advocacy package developed and trials done at national, provincial and county levels, using it as a policy, guideline, norm and standard.</td>
<td>4.1.1 Some of the approaches taken by pilot projects accepted as policies, guidelines, regulations or standards at national, provincial or local levels by Year 3.</td>
<td>4.1.1 Information sharing by all parties through coordination meetings; preparation of tools for dissemination of experience with interactive data interface.</td>
<td>(1) Policy for child nutrition intervention in 2012 developed by Qinghai provincial government on the basis of nutrition intervention from pilot counties; 100 million Chinese yuan allocated by the Ministry of Finance in 2011 for nutrition.</td>
<td>Good</td>
</tr>
<tr>
<td>Goals</td>
<td>Targets</td>
<td>Process</td>
<td>Outputs</td>
<td>Evaluation</td>
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<td>-------</td>
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<tr>
<td>advocacy package produced and disseminated; meetings held at participating provincial and county levels by Year 3.</td>
<td>young child feeding; project summary meeting open to media.</td>
<td>intervention using Ying Yang Baos in 100 impoverished counties.</td>
<td>(2) 58806 copies of advocacy material on women and child nutrition and feeding distributed.</td>
<td>(3) Advocacy package being developed.</td>
</tr>
<tr>
<td>4.2 Media training of at least 100 journalists in pilot counties.</td>
<td>4.2.1 Media training of at least 100 journalists in pilot counties.</td>
<td>4.2.1 Phased, focused and result-oriented media training on child food safety and nutrition conducted in three phases: preparation, training and follow-up.</td>
<td>(1) 100 media journalists trained in child food safety and nutrition.</td>
<td>(2) Monthly increase in relevant articles greatly exceeding 10%, as shown by sampling of food safety and nutrition reporting from radio and TV stations in pilot counties and media at provincial level after training.</td>
</tr>
<tr>
<td></td>
<td>4.2.2 10% increase in relevant articles concerning pilot areas.</td>
<td>4.2.2 Collection of information on food safety and nutrition reporting from radio and TV stations in pilot counties and provinces after training.</td>
<td>Very good</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4.2.3 Experience acquired from the joint programme seen in media reporting at national level and county level of pilot counties to promote nutrition and food safety.</td>
<td>4.2.3 Collection of information on food safety and nutrition reporting from radio and TV stations in pilot county (Wuding county), regularly disseminating knowledge on food safety and nutrition for children;</td>
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</tbody>
</table>
### Table 6. Indicators before and after nutrition intervention for pregnant women and children in pilot counties (Zheng’an, Wuding and Zhenan)

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Subjects</th>
<th>Baseline (%)</th>
<th>Final result (%)</th>
<th>Improvement (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stunting</td>
<td>Children aged 6-23 months</td>
<td>18.1</td>
<td>11.6</td>
<td>35.9↓**</td>
</tr>
<tr>
<td>Underweight</td>
<td>Children aged 6-23 months</td>
<td>9.8</td>
<td>4.1</td>
<td>58.2↓**</td>
</tr>
<tr>
<td>Wasting</td>
<td>Children aged 6-23 months</td>
<td>6.2</td>
<td>4.0</td>
<td>35.5↓</td>
</tr>
<tr>
<td>Anaemia</td>
<td>Children aged 6-23 months</td>
<td>28.7</td>
<td>19.0</td>
<td>33.8↓**</td>
</tr>
<tr>
<td>Insufficiency of</td>
<td>Pregnant women</td>
<td>26.1</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Vitamin A</td>
<td>Children aged 6-23 months</td>
<td>52.8</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Insufficiency of</td>
<td>Pregnant women</td>
<td>55.9</td>
<td>30.2</td>
<td>46.0↓**</td>
</tr>
<tr>
<td>Vitamin D</td>
<td>Children aged 6-23 months</td>
<td>59.1</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Insufficiency of</td>
<td>Pregnant women</td>
<td>2.6</td>
<td>41.2</td>
<td>#</td>
</tr>
<tr>
<td>folic acid</td>
<td>Children aged 6-23 months</td>
<td>45.2</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Insufficiency of</td>
<td>Pregnant women</td>
<td>67.6</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>B12</td>
<td>Children aged 6-23 months</td>
<td>29.3</td>
<td>18.5</td>
<td>36.9↓*</td>
</tr>
</tbody>
</table>

↓Range of decline; *P<0.05; **P<0.01; # The baseline survey was carried out in summer, therefore there is less vitamin D deficiency; the final survey was carried out in winter, when there is more vitamin D deficiency due to lack of sunshine.

### Table 7. Evaluation on effectiveness of agriculture sub-projects at results level

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Pre-intervention</th>
<th>Post-intervention</th>
<th>Increase (%)</th>
</tr>
</thead>
</table>

---

MDG Achievement Fund China Maternal and Child Nutrition and Food Safety and Security Programme
<table>
<thead>
<tr>
<th>Proportion of micronutrient-rich foods consumed(%)</th>
<th>21.3</th>
<th>30.1</th>
<th>41.3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Score of Household Dietary Diversity (HDD)</td>
<td>5.8~6.8*</td>
<td>7.0~8.1</td>
<td>4~24</td>
</tr>
<tr>
<td>Score of Women Dietary Diversity (WDD)</td>
<td>2.7~4.2#</td>
<td>4.4~6.1</td>
<td>29~89</td>
</tr>
</tbody>
</table>

*(Total range: 0-12)  # (Total range: 0-9)

| Table 8. Number of reports on food safety before and after media training |
|---------------------------------|-----------------|-----------------|-----------------|-----------------|
| Statistical items               | 6 months pre-training | 6 months post-training | Monthly increase | Increase (%) |
| Monthly number of media reports at Guizhou Provincial level | 18.67 | 34.29 | 15.62 | 84 |
| Monthly number of media reports from Zheng’an County and Pan County | 8.5 | 10.5 | 2 | 24 |
| Monthly number of media reports at Yunnan Provincial level | 13.7 | 18.55 | 4.83 | 35 |
| Monthly number of media reports from Huize County and Wuding County in Yunnan Province | 6.5 | 11.17 | 4.67 | 72 |
| Monthly number of media reports at Shanxi Provincial level | 10.83 | 13.33 | 2.5 | 23 |
| Monthly number of media reports from Zhen’an County | 4.11 | 5 | 0.89 | 22 |
| Monthly number of media reports from Luonan County | 1.67 | 3 | 1.33 | 80 |

<table>
<thead>
<tr>
<th>Table 9. Intervention results on KAP related to food safety</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indicators</td>
</tr>
<tr>
<td>KAP on Women Nutrition and Food Safety</td>
</tr>
<tr>
<td>Correct knowledge on nutrition and food safety (Total score for correct knowledge)</td>
</tr>
<tr>
<td>Related attitudes (Percentage of beneficiaries with highly positive attitudes %)</td>
</tr>
<tr>
<td>Related behaviour (Total score)</td>
</tr>
</tbody>
</table>
KAP on child nutrition and food safety

| Correct knowledge on nutrition and food safety(%) | 83.4 | 99.2 | 15.8 |
| Related attitudes (Percentage of beneficiaries with highly positive attitudes %)) | 61.5 | 95.3 | 33.8 |
| Related behaviour (Total score) | 13 | 16 | 23.1 |

Correct knowledge on nutrition and food safety among primary school teachers(%)  

| Correct knowledge on nutrition and food safety among primary school teachers(%) | 67.3 | 82.6 | 22.7 |

Correct knowledge on nutrition and food safety among secondary school teachers(%)  

| Correct knowledge on nutrition and food safety among secondary school teachers(%) | 67.1 | 82.8 | 23.4 |

Table 10. Average increase in productivity of vegetables rich in Vitamin A in pilot counties

<table>
<thead>
<tr>
<th>Crop</th>
<th>Cultivation area (mu)</th>
<th>Output (kilogram/mu)</th>
<th>Mean rate (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Pre-CF SN</td>
<td>Post-CFS N</td>
<td>Increase (%)</td>
</tr>
<tr>
<td>green beans</td>
<td>5</td>
<td>10</td>
<td>100</td>
</tr>
<tr>
<td>pumpkin</td>
<td>29.3</td>
<td>30.3</td>
<td>3.4</td>
</tr>
<tr>
<td>eggplant</td>
<td>4.7</td>
<td>6.3</td>
<td>35.5</td>
</tr>
<tr>
<td>cabbage</td>
<td>4</td>
<td>8</td>
<td>100</td>
</tr>
<tr>
<td>spinach</td>
<td>2</td>
<td>5</td>
<td>150</td>
</tr>
<tr>
<td>turnips</td>
<td>1.5</td>
<td>4</td>
<td>167</td>
</tr>
</tbody>
</table>

Table 11. Change in scale of animal husbandry under agriculture sub-projects in pilot counties

<table>
<thead>
<tr>
<th>Region</th>
<th>Average number of pigs raised per household</th>
<th>Average number of chicken raised per household</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Pre-CFSN</td>
<td>Post-CFSN</td>
</tr>
<tr>
<td>Wuding County</td>
<td>7.8</td>
<td>10.3</td>
</tr>
<tr>
<td>Huize County</td>
<td>3</td>
<td>4.5</td>
</tr>
</tbody>
</table>
Table 12. Maternity protection for employees promoted by Wuding County Federation of Trade Unions

<table>
<thead>
<tr>
<th>Variables</th>
<th>Enterprises offering maternity protection</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Pre-intervention</td>
</tr>
<tr>
<td>Number of enterprises</td>
<td>4</td>
</tr>
<tr>
<td>Number of employees</td>
<td>622</td>
</tr>
<tr>
<td>Number of female employees</td>
<td>164</td>
</tr>
</tbody>
</table>

VI.2 Main references

1. Joint programme proposal on *Improving Nutrition, Food Safety and Food Security for China’s Most Vulnerable Women and Children* (Chinese version)
2. WFP and CAAS: *Final Report on Comprehensive Food Safety and Vulnerability Analysis in 6 Pilot Counties*.
5. Sophie de Caen, Paula Pelaez: *MDG-F China Mission Report*
8. Rema Nair Balasundaram: *Mid-term Evaluation of MDG-F Programme to Improve Nutrition, Food Safety and Food Security for China’s Most Vulnerable Women and Children*
10. Final Evaluation Group: *Summary of Interviews with Programme Managers and Participants from UN agencies and Central Government Departments*
11. Final Evaluation Group: *Summary of Interviews with Managers and Operational Personnel from Participating Institutions and Beneficiaries in Wuding County, Yunnan Province*.
12. Final Evaluation Group: *Summary of Interviews with Programme Managers and Operational Personnel at Provincial Level in Kunming City, Yunnan Province*.
13. ACFTU: *Summary Information on Maternity Protection for Female Employees Promoted by ACFTU and ILO.*


15. UNIDO, AQSIQ and CNIS: *Summary Report on Sub-Project 3.1 – Control of Safety in Manufacturing Processes in Child Food Enterprises.*

16. SPHCSU: *Summary Report on Implementation of CFSN 3.2.2 – Project for Promotion of Nutrition and Food Safety Education in Primary and Secondary Schools in Shanxi Province and Yunnan Province.*


18. FAO, FECC and China Agricultural University International Center for Rural Development: *Final Survey Report of Project for Improving Rural Household Micronutrient Intake under the MDG-F Joint Programme on Nutrition and Food Safety for Women and Children in China.*

## Annex 4CFSN Final M&E Framework

<table>
<thead>
<tr>
<th>Expected Results (Outcomes &amp; outputs)</th>
<th>Indicators</th>
<th>Baseline</th>
<th>Overall JP Expected target</th>
<th>Achievement of Target to date</th>
</tr>
</thead>
<tbody>
<tr>
<td>JP Outcome 1  Policy decisions and targeting are informed by reliable and up-to-date evidence on the magnitude, distribution and causes of undernutrition in China</td>
<td>1.1 Food Security Situation in pilot counties understood by policymakers</td>
<td>1.1.1 Comprehensive food security indicators. Completed survey and a briefing workshop held</td>
<td>N/A</td>
<td>Report published Evaluation report completed and policy makers informed</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>A baseline and end-line surveys were conducted on food security situation at the household level in six pilot counties. Publication of <em>Analysis of Food Security and Vulnerability in Six Counties in Rural China</em> and a report on comparative analysis of data from a second survey availed the number of people and regions affected by food insecurity as well as factors leading to food insecurity, while making recommendations for policy intervention. <em>Analysis of Food Security and Vulnerability in Six Counties in Rural China</em> was broadly distributed to the relevant government agencies like Ministry of Agriculture, National Development and Reform Commission,</td>
</tr>
<tr>
<td>1.1.2 Nutritional status information on women and children in 3 intervention counties reported to policy makers</td>
<td>information not available.</td>
<td>The information on micronutrients deficiency of women and children collected.</td>
<td>The nutritional status information on women and children in project counties collected at baseline and after Ying Yang Bao intervention. Samples randomly chosen. Information on Dietary intake and IYCF collected. Veins blood of women and children collected for laboratory test of micronutrients deficiency. The laboratory result is finished. The comprehensive report finalized and submitted.</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>1.2. Targeting and monitoring improved through availability of improved national database on nutritional status of women and children</td>
<td>Nutrition and child feeding data available for the six pilot counties and incorporated into national surveillance systems.</td>
<td>No data available</td>
<td>Baseline was survey conducted in November 2010. Baseline household survey data and report developed and shared with government. The national nutrition data base improving is on going the national nutrition indicator assessment conducted and data</td>
<td></td>
</tr>
<tr>
<td>2.1 Exclusive breastfeeding increased and quality of complementary food and micronutrient supplementation improved</td>
<td>To be assessed</td>
<td>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.</td>
<td>Project launched, Plans for assessment developed. Procurement of supplements finished, training materials developed. Yingyangbao (CFS) and communication materials delivered to households with children aged 6-23 months. Around 13055 children benefiting. The coverage of Yingyangbao in project counties was 98.2% and 99.6% of the children consumed CFS more than 3 times per week. Communication campaigns at county, township and village levels were conducted, which increased the awareness of Yingyangbao by parents and the compliance of Yingyangbao.</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>2.1.2 Data on infant food availability and on infant feeding preferences, knowledge and practice coverage available.</td>
<td>No data available</td>
<td>Data available</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Baseline coverage survey conducted in November 2010. Feeding preference survey conducted in November 2010. Data on infant feeding preference available and analysis report developed 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.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2.1.3 National Code of marketing of breast milk substitutes revised</th>
<th>No data available</th>
<th>National Code revised</th>
</tr>
</thead>
<tbody>
<tr>
<td>- 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 and national celebration event on CODE/BF and WBW are planned from 1-3 Aug.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.1.4 Increase by 25% the number of businesses providing the right to and capacity for continuing breastfeeding upon return to work in the pilot counties by Year 3.</td>
<td>No data available</td>
<td>National policies and legislation, and enterprise practices on maternity protection reviewed and improved.</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Research Report on Maternity Protection in Wuding County was finalized. Some suggestions of this report have been reflected in the newly issued National Regulation on Labour Protection for Women Workers, P.R of China;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The ILO Maternity Protection Resource Package has been translated into Chinese and shared with Chinese counterparts, as well as other UN agencies.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Wuding Trade Unions has developed brochure and video on maternity protection and distributed in Wuding enterprises.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The baseline survey and supplementary baseline survey completed;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The number of enterprises providing the right to and capacity for continuing breastfeeding upon return to work has increased from 4 to 16 after the intervention of the project.</td>
</tr>
</tbody>
</table>
### 2.2 Household dietary intake of micronutrient-rich, locally-available food increased in 3 pilot counties

<table>
<thead>
<tr>
<th>Proportion of diet made up by locally available micronutrient-rich foods in pilot areas.</th>
<th>As per baseline survey reports</th>
<th>Target: increase 30% by Year 3.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Comprehensive intervention strategy of “vegetable farms + animal husbandry + training on agricultural techniques + nutrition education” developed.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Proportion of diet in rural households made up by micronutrient-rich foods increased by 41.3% (higher than established goal) as compared to baseline.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Significant improvement in household dietary diversification (HDD): 4%~24%; in women dietary diversification (WDD): 29%~89%. Average increase in production of vegetables rich in vitamin A: 32.5%; significant expansion of family-based animal husbandry.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) Nutrition knowledge, attitudes and practices (KAP) on nutrition significantly improved among rural household, as compared to baseline.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 2.3 National plan for food fortification in place and implemented

<table>
<thead>
<tr>
<th>2.3.1 In-home food fortification plan developed and approved. Plan developed</th>
<th>There is currently no plan on food fortification</th>
<th>A plan for addressing micronutrients in high risk groups developed and costed</th>
</tr>
</thead>
<tbody>
<tr>
<td>One working group meeting held, to be expanded to include relevant sectors. The nutrition intervention technical guidelines finalized.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**JP Outcome 3** Food-related illness reduced through safer food production and preparation for children
<table>
<thead>
<tr>
<th>3.1 Food production for children made safer in pilot areas</th>
<th>3.1.1 Pilot enterprises trained in HACCP process by Year 3</th>
<th>0 Enterprises Trained</th>
<th>5 Enterprises Trained</th>
<th>Training materials compiled. 100% HACCP training by CNIS and UNIDO completed in coordination with ILO and SAWS. 4 of 5 enterprises received HACCP certification.</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1.2 Increase in the capacity of pilot laboratories to perform food safety monitoring via ISO 17025 accreditation training by Year 3.</td>
<td>0 Laboratories</td>
<td>4 Laboratories</td>
<td>Training materials compiled</td>
<td>100% training completed. 3 of 4 inspection centres received accreditation. (Dali, Zunyi and Anshun). Yuxi plans to apply next year after moving facilities.</td>
</tr>
<tr>
<td>3.1.3 Increase in the capacity of food safety/quality inspectors to carry out food safety monitoring by Year 2</td>
<td>0 Inspectors trained</td>
<td>30 Inspectors trained</td>
<td>Training materials compiled 100% training completed. 6 trainees attended overseas study tour in Austria, including visits to Austrian Standards Institute and the Austrian Agency for Health and Food Safety.</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>3.1.4 Guidelines on safety and health at work including the safe use of chemicals in industries producing child nutrition products developed and 8 businesses applying them by Year 3. 50 OSH inspectors trained to provide quality services to the businesses</td>
<td>0</td>
<td>4</td>
<td>The Guide on work safety standardization for food enterprises has been finalized and shared with OSH officials, inspectors, and pilot enterprises; The training manualson work safety have been finalized and shared with OSH inspectors and food-processing enterprises in pilot provinces; More than 100 OSH inspectors and more than 400 managers and technical personnel in food enterprises have been trained; Four pilot food enterprises have their potential workplace hazard and risks identified and corrected, and regulations on work safety developed.</td>
<td></td>
</tr>
</tbody>
</table>
### 3.1.5 Management plans and policy advice developed for target sectors in pilot areas in Year 3

| 3.1.5 Management plans and policy advice developed for target sectors in pilot areas in Year 3 | No such management plans or policy advice. | Create management plans and disseminate policy advice for two pilot provinces | Policy advice to strengthen food safety management and oversight developed from participating organizations, CNIS and UNIDO and delivered to local counterparts and Governments: 21 policies adopted at various Government levels in Guizhou; 33 policies adopted at various Government levels in Yunnan (21 in Dali, 12 in Yuxi). |

### 3.2 Handling and preparation of food for infants and children made safer

| 3.2.1 Selected primary and secondary schools, hospitals/departments of gynaecology obstetrics and paediatrics, and women’s association in the six counties trained or made aware of WHO’s Five Keys to Safer Food, by Year 3. | 0 | primary and secondary schools, hospitals and women’s association groups in the six counties trained by Year 3. | Nearly 2000 women and nearly 2000 children participated in various IEC (information, education and communication) activities on WHO’s five key points to safer food, knowledge on purchasing and identifying safe food, preventing food poisoning, and complaining about the food problem. |

| 3.2.2 At least 15 schools in each selected target counties will integrate nutrition and food safety into school health education curriculum with 100% | Nutrition and food safety education not systematically planned and included in school teaching and learning | 1 To train principals and science/health teachers from 50 schools of each project counties in the use of supplementary materials in classroom; 2 To support 15 schools | Policy analysis and needs assessment on nutrition and food safety education conducted, supplementary teaching and learning materials developed. Piloting of integration of nutrition and food safety education in school teaching and learning conducted in the two project |
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)

| 3.3 New national food safety law successfully implemented | 3.3.1 300 government officials, 500 legal personnel and 500 employees will be trained in the new food safety law. | N.A. | 1) To promote the improvement of China's food safety law and its supportive regulations, rules and judicial interpretations. 2) To strengthen legal awareness, legal knowledge and the ability of applying laws of the food safety law enforcement agencies, operators and consumers as well. |

Research Center for China Food Safety Law was launched in Aug. 2010. Expert consultation seminar on food safety law was convened and suggestions of adding two crimes endangering food safety were incorporated to the 8th Amendments to the Criminal Law; China Food Safety Law website (www.foodlaw.cn) was established and regularly updated; China's Food Safety Law magazine (bi-monthly) was launched and published 15 editions. New English table of contents and executive summary for each paper published have been added; the first national knowledge 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 of 2012, the following was achieved. 280 Judges were trained in the first year and 240 senior judges were trained on ‘Criminal Regulation of Food Safety Issues’ on 6 March 2012. 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; In addition, 200 legal personnel were trained in food safety law implementation.

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 drafted the Supervision System of Manufacturers of Infant Formula Milk Powder.

<table>
<thead>
<tr>
<th>3.3.2 New food safety law promoted and disseminated in partnership with civil society, especially to women’s groups and local communities in pilot counties by Year 3</th>
<th>0</th>
<th>Women’s groups (100 female cadres) will be trained and awareness on food safety raised among at least 1000 residents in the selected communities by year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Desk review of the new Food Safety Law, and policy documents/publications on food safety and security conducted; 2) Needs assessment and baseline survey conducted to examine women’s awareness about the new food safety law, knowledge about nutrition and their need for food safety services/support; 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; 4) Trainings on new food safety law and rights protection undertaken for local communities and women’s group;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>JP Outcome 4</td>
<td>National child nutrition and food safety policies, guidelines, regulations and standards are revised according to results of the pilots and lessons learned are scaled up nation-wide</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td></td>
</tr>
</tbody>
</table>

### 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

<table>
<thead>
<tr>
<th>0</th>
<th>Target: Systems in place and operational at county-level by Year 3.</th>
</tr>
</thead>
</table>

Based on WHO guidelines on food safety emergency response system and food complaint system and China’s national law and regulations as well as the pilot counties’ situation, the plan for systems improvement were developed and the drill exercise were completed to test the plans. Policy advice was made to improve the local food safety emergency response system and food complaint system.

### 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.

<table>
<thead>
<tr>
<th>0</th>
<th>Training of trainers conducted at provincial-level by Year 1 and at county level by Year 3.</th>
</tr>
</thead>
</table>

Training manual for food safety inspectors and training manual for food production and operation enterprises managers have been developed on food safety law and food safety knowledge. Nearly 250 food safety inspectors and 250 food production and operation enterprises managers were trained using the training manuals.
| 4.1 Development and printing of advocacy package for in-home food fortification | The advocacy package for in-home food fortification developed. | None | Advocacy package for food fortification especially covering high risk groups | Advocacy package for in-home food fortification developed. A video showcased the outcomes and achievements under the MDG-FundedCFSN joint project and policy recommendations developed and submitted to relevant government ministries. |

| 4.2 Media training of at least 100 journalists in pilot counties | At least 10% increase in articles on food security, safety and nutrition in target areas by Year 3 (Baseline: Media review through sampling in selected pilot counties) | Baseline assessment and training needs analysis conducted, | 100 journalists from target areas trained and the impact assessed. | Baseline survey on media situation conducted, analysis of journalists’ needs for training on reporting issues related to nutrition, food safety and security conducted, a journalist manual developed with information on nutrition, food safety and security as well as reporting skills. 100 journalists from six pilot counties and provincial capitals in Guizhou, Yunnan and Shaanxi provinces trained. News reports on food safety and nutrition collected and final assessment developed. Media coverage on food safety and nutrition increased by 46.67% in the pilot areas. Together with UNICEF, developed a multimedia presentation to showcase project achievements and provide policy recommendations. Provincial and |
Local trained journalists in Yunnan province have been visited to review the media training and provide feedbacks and suggestions.
The Chinese Government (more than ten government agencies) with the support of the United Nations (eight UN agencies) and the Spanish government launched joint efforts aimed at Improving Nutrition, Food Safety and Food Security for China’s Most Vulnerable Women and Children (CFSN). These efforts focused on six of China’s poorest counties: Pan and Zheng’an (Guizhou Province); Huize and Wuding (Yunnan Province); and Luonan and Zhen’an (Shaanxi Province). This policy brief draws from the results of the CSFN programme and provides evidence-based recommendations for the improvement of maternal and child nutrition and food safety in China.

I. The Challenges of Maternal and Child Nutrition and Food Safety in China

China has achieved phenomenal progress in the Millennium Development Goals (MDGs), particularly in reducing poverty, improving child health and achieving universal primary education and youth literacy. However, challenges remain in the areas of maternal and child nutrition and food safety.

Food and nutrition security exists only when all people at all times have physical, social and economic access to sufficient, safe and quality food to meet their dietary needs and food preferences. Food and nutrition security is supported by an environment of adequate sanitation, health services and care, allowing for a healthy and active life.


The rate of early initiation of breastfeeding is just 41% and the exclusive breastfeeding rate in children below six months is only 28%. The low proportion of exclusive breastfeeding is related to the aggressive marketing of breastmilk substitutes, inappropriate hospital practices, misconceptions among mothers, home environment, short maternity leave and unsupportive workplaces.

In China, the average rate of anemia is 20% in women of childbearing age and 29% in pregnant women. There is a need for specific policies or programmes for the distribution of multiple micronutrient or iron-folic acid supplements during pregnancy, which could address the situation.
Food-borne illnesses and unsafe food have far-reaching effects on maternal and child health. In 2007, nearly 15% of food meant for domestic consumption was substandard. More than 50,000 children were hospitalized and almost 300,000 suffered adverse health consequences following the scandal in which infant formula was contaminated with melamine.

II. The CFSN Programme: A multi-stakeholder approach to improve maternal and child nutrition and food safety in China

Over a three-year period, a total of more than 1.2 million high-risk children and women of childbearing age were targeted.

Among the programme results are the integration of global indicators in the national nutrition surveillance system and the certification of model hospitals as Baby Friendly. The State Council’s Special Provisions for the protection of female employees was revised. As a result, maternity leave was extended from 90 to 98 days and a fourfold increase in enterprises offering maternity services was achieved. Farmers received training and support to improve the quantity and variety of local food production in order to increase the consumption of vegetables and other micronutrient-rich foods.

Some 13,055 children aged between six and 23 months received a soy-based micronutrient-fortified food supplement (Ying Yang Bao). The results triggered government investment to scale-up the intervention. Schools piloted educational activities on nutrition and food safety. Four out of five pilot food enterprises were certified for producing safe food1. A proposal to criminalize acts endangering food safety was adopted in the Eighth Amendment to the Criminal Law. Food safety inspectors, producers, lawyers, judges, media and communities received training on the Food Safety Law.

On average, 90% of mothers delivering in the newly-established Baby Friendly hospitals were exclusively breastfeeding at the time of discharge.

Compared with the baseline results, the prevalence of stunting decreased by 35.9%; anemia deficiency decreased by 33.8% and vitamin-A deficiency decreased by 46%.

Production of locally planted vegetables rich in Vitamin A and iron increased by 33%, on average. The average consumption of micronutrient-rich foods increased by 41%.

1HACCP = Hazard Analysis Critical Control Points, for improving food safety practices
The pilot interventions worked, but maternal, infant and young child nutrition and food safety are still matters of national concern. Food security remains a problem in the poorest counties of China.

III. A Call to Action: from Pilot to Results on a bigger scale

To scale up all the successful interventions, the following recommendations are proposed:

1. **Formulate a cooperation and coordination framework among institutions and agencies working on nutrition, food security and food safety to improve the nutritional status of the population:**
   
   - Ensure cooperation and coordination between the National Food and Nutrition Advisory Committee and the State Council Food Safety Commission.

2. **Develop an action plan for the China Food and Nutrition Development Outline (2013-2020) with policy and implementation guidelines to help improve the nutritional status of China’s most vulnerable women and children under two years:**

   - In 2000, China formulated a strategic framework for food and nutrition development (2001-2010). In 2013, a revised framework will be issued. The experiences of the MDG-F programme should be the basis for an action plan for national and sub-national actions.

   - Ensure an evidence-based planning process supported by a periodic review of nutrition surveillance reports.

   - Increase and diversify the production and consumption of micronutrient-rich foods for a balanced diet. Integrate the two-pronged approach of
“combining technical support to farmers with community-based nutrition and health education” into the country’s agricultural and rural development plans.

• Implement a comprehensive maternal, infant and young child nutrition plan with a focus on establishing supportive health facilities, workplaces and communities, and providing a strong legislation for the regulation of the marketing of breastmilk substitutes.

• Include maternal and child health and nutrition strategies in the national development plans (new socialist countryside construction program, poverty alleviation program and agricultural development programs).

• Integrate nutrition and food safety education into primary and secondary education by strengthening the national health education policies and curriculum, and through capacity building for education administrators, school principals and teachers in order to achieve more effective classroom teaching and learning.

3. **Strengthen the enforcement of the Food Safety Law:**

• Improve food safety emergency response and complaints system at the sub-national level by defining roles and responsibilities of different sectors, ensure their coordination, accountability and increase their human and financial resources.

• Promote HACCP certification to manufacturers of food for infants and children

• Strengthen implementation of the “Outline for Food Safety Information, Education and Communication (2011-2015)” in China. Ensure that Food Safety information, educational training and communication efforts become systematic and routine work for the relevant stakeholders and ensure access to information on safe, adequate and nutritious food.

4. **Increase investment in food and nutritional development in poor provinces/counties:**

• Include a separate budget line for nutrition, food safety and food security interventions for central and provincial government.