

# PHILIPPINES

## Ensuring Food Security and Nutrition for Children 0-2 Years Old in the Philippines (MDGF-2030)



### Children, Food Security and Nutrition

<b>Total Budget:</b>	<b>USD 3,500,000</b>		
<b>Budget by Agency:</b>	FAO: 222,757	WHO: 941,498	
	UNICEF: 1,620,413	WFP: 428,000	
	ILO: 287,332		
<b>Participating Gov. Entities:</b>	National Economic and Development Authority, Department of Labor and Employment (DOLE), National Nutrition Council (NNC), Department of Health (DOH)		
<b>Start Date:</b>	24 November 2009		
<b>End Date:</b>	24 November 2012		
<b>Extension:</b>	Not yet requested		
<b>Disbursements:</b>	First Disbursement:	24 November 2009	USD 1,433,963
	Second Disbursement:	29 March 2011	USD 1,227,107
	Third Disbursement:		
<b>In Brief:</b>	Recent energy, food and financial crisis add to the challenge of reducing underweight in children in the Philippines from 24.6% to 17.25% in 2015. The National Nutrition Council, the national coordinating body, has refocused its efforts on children 0-2 years of age, to improve breastfeeding and complementary feeding practices. This joint programme aims to influence the reduction and complements government's efforts through social marketing strategies to support exclusive breastfeeding including behaviour change communication; and at the local level, to galvanize multi-sectoral duty bearers to create an enabling environment for pregnant and lactating women where the rights of the child to appropriate infant feeding are supported and protected. To strengthen the nutrition information system, the quality of data reported through the system from the local through to the national level will be reviewed and a district level early warning nutrition and food security system will be initiated.		

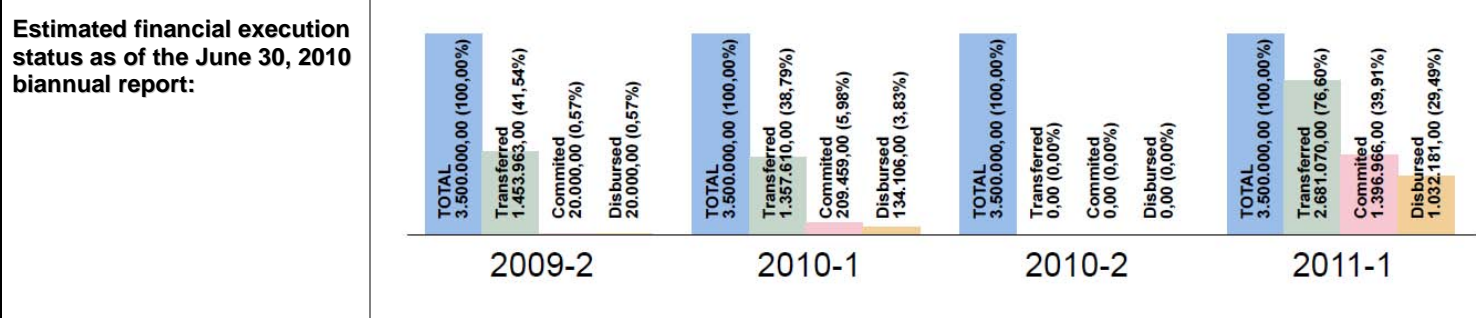
#### Outcomes:

- Increased exclusive breastfeeding (EBF) rate, by at least 20% annually;
- Reduced prevalence of under-nutrition in six JP areas, by at least 3%, in children 6-24 months old, by 2011; and
- Improved capacities of national and local government and stakeholders to formulate, promote and implement policies and programs on Infant and Young Child Feeding (IYCF).



<b>Regions of Intervention:</b>	• Naga City, Pasacao, Camarines Sur, Region 5; Carles, Iloilo & Iloilo City, Region 6, and Zamboanga City and Aurora, Zamboanga del Sur, Region 9, referred to as 6 JP areas		
<b>MDGs</b>	MDG1, MDG4		
<b>Beneficiaries</b>	<b>Direct</b>	<b>Indirect</b>	
	• No. Institutions	43	11
	• No. Women	61,821	90,258
	• No. Men	200	
	• No. ethnic groups		

**Status** The programme had a long inception phase, which has resulted in delays in the implementation of activities.



**Main Achievements:**

The marketing brand and communication logo for EBF has been developed and approved by the relevant government agencies. The brand is now widely used in official events at the national and local levels; and the MTE was able to establish that there is a high level of recognition of the brand both at the community level and among local health workers. The MTE also found the brand to be easy to remember as it uses an easy acronym 'TSEK', which is local language for Tama, Sapat, Eksklusibo; which is translated as "breastfeeding is right (both in the context of being correct and a child right), it is sufficient, and exclusive (i.e. no complementary food needed, not even water).

The JP significantly progressed in recruiting and training IYCF peer counsellors, with advocacy initiatives at national and local levels implemented. Milk Code monitoring trainings were completed, while significant advances on IYCF communication for development component led to the onset of national IYCF communication strategy development. The Early Warning System on food security and nutrition was launched and now piloted, with reports used as basis in designing appropriate responses.

Does the JP incorporate gender considerations in the **activities/outputs/outcomes**?

**Observations**

**Paris Declaration**

**Leadership of national and local governmental institutions:**

- Ownership by government is high, and is open to complementation of efforts and programme resources. For instance since government is investing in capacity building along infant and young child feeding for health workers, capacity building in the JP focuses on community-based workers and the peer counselors (or mothers themselves). Furthermore, government has been willing to front-load some of its activities in the JP areas.
- The JP implementation still relies greatly on the ownership and lead of the national government agency partners. For this reporting period, the trainings implemented were jointly funded by the government and the CFSN, using modules developed by the joint programme.
- Private sector and civil society, including SM Cares, NGOs on breastfeeding such as Breastfeeding Patrol of Mandaluyong City and Latch, continuously participate in the JP with the nationwide expansion of the BF Photo exhibit. NGOs and the academe are now also highly involved especially in Regions 6 and 9. The citizens, especially in the JP areas, are highly involved as they form the community support groups on breastfeeding and complementary feeding.

**Involvement of CSOs and citizens:**

By design, civil society, the private sector and citizens will be mobilized to participate in various phases of the JP, which can result to ownership and a sense of accountability.

**Alignment and Harmonization:**

The JP is very relevant in the context of the development objectives of the Philippines, and is adequately aligned with Government priorities and strategies as well as the overall objectives of the UN.

	<p>The JP leverages on prior and existing government programmes and lessons from past experience.</p> <p><b>Innovative elements in mutual accountability:</b> National Nutrition Council and UNICEF co-chair the PMC.</p> <p>The JP governance and management arrangements are very effective and have strong national ownership and leadership. This was strengthened by the good practice of establishing Technical Working Groups (TWGs) at the national and sub-national levels.</p> <p>With a vision of finally coming up with the IRR reflecting the results of the public consultations, CFSN will continue its active role in advocating with the Health Secretary by sharing the voices of the stakeholders. CFSN focal points will also lead in providing venues where stakeholders will be continuously consulted and included in the decision-making processes relating to actions in finalizing the IRR and consequently in implementing the law.</p>
<b>Delivering as One</b>	<p><b>Innovative elements in harmonization of procedures and managerial practices:</b></p> <p><b>Role of the RCO and synergies with other MDG-F JPs:</b> CFSN has also been actively participating in coordination meetings and activities which gather the other JPs. This resulted in the sharing of good practices and planning of joint advocacy activities to further the advocacy on MDGs and the specific JP themes.</p> <p>RCO provides significant support to the 4 JPs in the country. As a focus country it receives additional support for C&amp;A and M&amp;E programme and country level efforts.</p> <p><b>Inter-agency coordination:</b> Implementation of activities is structured around components, which is a good practice that enables different UN and Government agencies to jointly focus on common results and contributes to reduction of duplication and overlap.</p> <p>TWG established. A sub-group for Outcome 2 also formed since several agencies are involved in the activities</p>
<b>Sustainability</b> (concrete actions and strategic partnerships)	<p><b>Sustainability Plan in place?</b> Ensuring sustainability by leveraging counterpart funds were maintained in year 2, with the JP areas providing almost half of the budget funding the regional annual work plans. National government agencies are still committed to implement initiatives jointly. The coordination groups of the JP at national and local level continuously provide venues for consultative processes and decision-making, ensuring sustainability through joint programming. Components of the JP have been integrated in the EU-UNICEF's Maternal and Young Child Nutrition Security Initiative in Asia, IYCF Strategic Plan for 2011-2016 and in the NNC budgetary forward estimates.</p>
<b>Innovation and Scale-up</b>	
<b>External Factors and mitigation</b>	<p>Delay in the publication of the appropriate Implementing Rules and Regulations of RA 10028 (Expanded Breastfeeding Promotion Act) caused postponement of many of the initiatives along the component on EBF in the workplace. The JP has significantly contributed to the drafting of the IRR, but the resulting version signed by the Secretary of Health included contentious provisions that may undermine the real purpose of the law. Due to the joint statements issued by CFSN and the stakeholders, publication was postponed, awaiting proper reconsideration of the contentious provisions.</p>
<b>Communication and Advocacy</b>	<p><b>C&amp;A plan in place?</b> The JP is still in the process of finalizing the communication plan document, using the communication for development approach (C4D). The document integrated and harmonized all planned communication and advocacy initiatives already identified prior to the development of the communication plan. It will also pursue national IYCF communication strategy development that would help the national government in implementing harmonized communication and advocacy initiatives on exclusive breastfeeding and complementary feeding. Audience include government agencies, LGUs, legislators, media and individual citizens, specifically pregnant and lactating</p>

	women, and families.	
<b>M&amp;E</b>	.	
<b>Missions from MDG-F Secretariat:</b>	<b>Date:</b> April 2009	<b>Members:</b> Sophie de Caen, Paula Pelaez, Sara Ferrer
	<b>Date:</b> March 2010	<b>Members:</b> Sophie de Caen, Paula Pelaez, Adan Ruiz
	<b>Date:</b> March 2011	<b>Members:</b> Layla Saad
<b>Mid Term Evaluation:</b>	<b>Evaluator:</b> Richard Chiwara <b>Period:</b> on-going	