

ASEAN HEALTH COOPERATION CONCEPT NOTE ¹

I. PROJECT TITLE: Workshop on experience sharing of Nutrition Surveillance in ASEAN

II. BRIEF PROJECT DESCRIPTION:

Nutrition Surveillance is an essential tool for detecting nutrition and nutrition-related health problems and monitoring implementation of policy with evaluation for modifying interventions. This workshop will serve as a platform for ASEAN Member States (AMS) to share their recent, both successful and unsuccessful interventions, for instances, best practices, lessons learnt, as well as latest development in Nutrition Surveillance System in their respective countries, which will be useful for other AMS to develop and strengthen their activities at the regional and national levels. The activity is undertaken to provide useful information about supporting, improving and guiding nutrition interventions in the population that can be implemented in AMS in accordance with relevant Sustainable Development Goals (SDGs) and ASEAN Socio-Cultural Community (ASCC) blueprint provisions.

Each AMS is expected to share their country information in the workshop including:

1. National Nutrition Surveillance System: indicators, tools, data collection and frequency, data collector, procedures/activities, reporting, data analysis, application and utilization of data.
2. Community Nutrition Surveillance System: indicators, tools, data collection and frequency, population, framework/activities, reporting, data analysis, application and utilization of data.
3. Plans for the ASEAN Nutrition Surveillance System considering earlier outputs of the past Three (3) ASEAN Nutrition Surveillance Workshops in 2008, 2015 and the last one in 2017 held in Manila

III. PROJECT CLASSIFICATION: ASCC BLUEPRINT:

ASCC Blueprint

(a) Characteristics:

- a.1. Empowered people and strengthened institutions
- a.2. Add also other provisions relevant to health, inclusivity, etc.

(b) Action line/strategic measures:

Strategic measures:

- i. Increase competencies and resilience of relevant stakeholders with advanced technological and manage skills to improve institutional capacity to address current challenges and emerge trends, such as double malnutrition, micronutrient deficiency;
- ii. Harness the use of information and communication technologies across different age groups as means to connect with the regional and global community;
- iii. Promote participation of local governments/authorities, provinces, townships, municipalities and cities through the central government in the development of ASEAN capacity building programmes that benefit their respective communities;

SDGs

(c) Goal:

- SDG 2. End hunger, achieve food security, improve nutrition and promote sustainable agriculture.
- Six Global Nutrition Targets (endorsed in 2018 by WHO Member States) and 2 of 9 voluntary global Non Communicable Diseases (NCDs) targets (adopted by the World Health Assembly in 2011).

¹ This concept note is based on the ASEAN Cooperation Project Proposal as of 2017 approved by the Committee of Permanent Representatives (CPR) to ASEAN

(d)Target: To achieve SDG 2 by 2030, end or reduce all forms of malnutritions in all age groups including achieving Six Global Nutrition Targets.

IV. PROPOSED PROJECT COMMENCEMENT & COMPLETION DATES:

Project Action Plan consists of preparation phase during 2017-2018, pre-conference workshop in early March 2019 and post-conference phase.

Before the workshop, all AMS are requested to prepare information on their respective Nutrition Surveillance Systems to share with other participants attending the workshop.

Project duration: 3 days (Approximately)

Proposed commencement date: 1st week of March, 2019 / 6 – 8 March, 2019

V. PROPONENT'S (MINISTRY OF HEALTH) NAME AND ADDRESS & IMPLEMENTING AGENCY'S (RELEVANT DIVISION WITHIN MOH THAT WILL ORGANISE THE PROJECT ACTIVITIES)

NAME AND ADDRESS:

Proponent's name and address:

- Dr. Panpimol Wipulakorn, Director General of Department of Health, MoPH, Thailand
- Dr. Amporn Benjaponpitak, Deputy Director General of Department of Health, MoPH, Thailand

Implementing agency:

- Dr. Saipin Chotivichien, Director of Bureau of Nutrition, Department of Health, MoPH, Thailand
- Ms. Naiyana Chaitiemwong, Director of Center of International Cooperation, Department of Health, MoPH, Thailand

Co-lead Country – Ministry of Health, Indonesia and Philippines

- Ms. Maria-Bernardita T. Flores, Assistant Secretary of Health and Executive Director, National Nutrition Council, Department of Health, Philippines
- Ms. Hygeia Ceres Catalina B. Gawe, Chief, Nutrition Surveillance Division, National Nutrition Council, Philippines
- Dr. Hera Nutrlita, Directorate of Nutrition, Ministry of Health, Indonesia

VI. PROPOSED BUDGET & FUNDING SOURCE:

Estimated Budget: USD 30,000

Participants and Secretariat: (Approximately 40 persons)

- Twenty (20) delegates from the Ministries of Public Health and other relevant Ministries
- Two (2) representatives from the ASEAN Secretariat
- Three (3) resource persons from UNICEF, WHO, World Bank
- Fifteen (15) Committee staff Members of Thailand, Institute of Nutrition and other academic institutions of Thailand

VII. PROJECT JUSTIFICATION, REGIONALITY AND BENEFICIARIES:

(a) Current Problem

Regional Report on Nutrition Security in ASEAN Volume 2 shows that prevalence of stunting and wasting in children under five years of age remains high in many AMS. Stunting is a severe public health problem in half of AMS, and wasting is above the threshold of public health significance (5%) in eight out of 10 AMS. An estimated 5.4 million children suffer from wasting and 17.9 million are stunted. Anemia is a moderate or severe public health problem in all Member States, and is especially high in children ages 6–59 months, women of reproductive age and pregnant and lactating women. On the other hand, some ASEAN Member States have rates of overweight/obesity in children under five of over 10%, and the trend is up. The daily consumption of sodium in ASEAN Member States is about twice as high as the WHO recommendations, which is associated with higher prevalence of hypertension. Despite efforts to protect, promote and support breastfeeding through communication and counseling, legislation based on the International Code of Marketing of Breast Milk Substitutes and the

implementation of maternity protection policies, the percentage of infants 0–5 months who are exclusively breastfed remains low in many countries.

Although the trend of under-nutrition in ASEAN is reducing, but the prevalence of over-nutrition is high in many countries in ASEAN. The effective Nutrition Surveillance System will be used to define and develop policies, measures and interventions cascade according to action plan, risk and problem management and research.

(b) Regionality

Same as current problem stated above.

(c) Project History

The 2nd Nutrition Surveillance System in the ASEAN Workshop Conference was conducted in 2015 in Philippines. For this workshop, the AMS identifies five strategic policies and recommendations for improving nutrition status in ASEAN.

1. Establish the harmonized ASEAN Nutrition Surveillance System (ANSS) in line with global directions.
2. Mainstream and elevate the ANSS to existing relevant ASEAN bodies for the regional and national development of policy and program plans
3. Establish an operating mechanism to follow through with the implementation of the ANSS
4. Establish communication and advocacy strategies for an effective and timely completion of ANSS
5. Enhance human resource capacities on NSS for ASEAN Member State

in the region, including the establishment of ASEAN Nutrition Surveillance System. Through organizing this workshop on experience sharing on Nutrition Surveillance System in ASEAN, Thailand, as lead country, will be providing a platform for AMS to share their experiences on Nutrition Surveillance Systems. Prospective participants will also have an opportunity to visit areas in Thailand where Nutrition Surveillance System has succeeded in building capacities to monitor nutritional status of Thai population in relation to strengthening the effectiveness of Nutrition Surveillance System.

(d) The Beneficiaries

All AMS would get benefit from attending this Workshop on experience sharing on Nutrition Surveillance System in ASEAN, that they can implement afterwards in their respective AMS.

I. PROJECT RESULT

Objectives	Results/ Outputs	Indicators	Means of Verification	Main Activities	Indicators	Means of Verification
1.To share and learn experiences on interventions that worked and did not work in AMS as well as best practices, lessons learnt while implementing Nutrition Surveillance System	Final report	Number of countries to share knowledge & experiences	Completed report	This Workshop will be conducted by Lead Country, Thailand and Co-Lead Countries, Indonesia and Philippines	Number of participants from AMS, e.g. Ministry of Public Health, academics, And other relevant officials	Completed Registration Form -Lists of participants
2. Building capacity of public health offices in each AMS	Formulate country level re-entry plan for establishing or strengthening the National Nutrition Surveillance System	Number of countries with re-entry plans	Can be implemented in AMS	Set up the framework or chalk out the relevant issues for sharing	Report the status of their activities to SOMHD	Summary Report on Sharing

PROJECT MANAGEMENT ARRANGEMENT:

(a) Management Arrangements

Thailand is the lead country, and Indonesia and Philippines are co-lead countries to organize this Workshop on experience sharing of Nutrition Surveillance System in ASEAN. A working group will be set up to organize the meeting.

(b) Human Resource Inputs

- AMS focal point on Nutrition : Dr. Saipin Chotivichien
- Technical officers : Dr. Ponlekha Bunhansupawat, Mrs. Nuttawan Chaovalitkul and Mrs.Saisom sookjai
- Public health staff : Ms. Narttaya Ungkanavin and Ms. Kulratida Rakglud
- Other relevant official : Mr. Pasin Piriyaaphan

(c) Engagement with Potential Partners

- The National Food Committee (comprising representatives from relevant ministries)
- Institute of Nutrition and other academic institutions

(d) Monitoring and Evaluation Arrangements

- Report / document the workshop on experience sharing of Nutrition Surveillance System in ASEAN
- After completion of the workshop, all AMS are requested to send their progress activities to SOMHD

It might be effective to have a controlling and coordinating body, like an AMS focal point, to integrate/consolidate respective AMS progress report. The AMS can discuss and agree on the template about what each AMS shall report on. The AMS focal point can be rotated among member states every 2 or 3 years to give all AMS a chance to lead this cooperation project.

II. PROJECT SUSTAINABILITY

After completion of this workshop, All AMS can improve their Nutrition Surveillance System in relation to developing policies and promoting interventions to ensure and sustain healthy population in ASEAN. In addition, a system of reporting back to relevant communities is crucial for close collaboration and coordination among government, private sector and civil society.

III. GENDER AND OTHER CROSS CUTTING ISSUES

Population of all age groups must be included in Nutrition Surveillance System

IV. POTENTIAL RISK

Risk/Threat	Mitigation Strategy
To secure required budget	ASEAN cooperation funds or financial support from other national or international organizations