
Mid-Term Review Report

May 2010

by

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Mid-Term Review Report

Commissioned by UNDP Vietnam on behalf of Project Partners

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Acknowledgments

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This report reflects the perspective of the consultants and does not necessarily represent the views and opinions of the UN agencies UNDP, UNFPA and UNICEF, nor those of the GOV.

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Frank Noij and Thanh Hang
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Acronyms & Abbreviations

AECID ................ Spanish Agency for International Development Cooperation
CEM .................. Committee on Ethnic Minorities
DAC .................. Development Assistance Committee of the Organisation for Economic Cooperation and Development
DARD ................. Department of Agriculture and Rural Development
DOET ................. Department of Education and Training
DOF .................. Department of Finance
DOH .................. Department of Health
DOLISA .............. Department of Labour, War Invalids and Social Affairs
DPI .................. Department of Planning and Investment
DPO .................. Detailed Project Outline
EU .................. European Union
GOV .................. Government of Vietnam
GSO .................. General Statistics Office
JICA ................ Japanese International Cooperation Agency
MDG ................. Millennium Development Goal
MIC .................. Middle Income Country
MPI .................. Ministry of Planning and Investment
M&E .................. Monitoring and Evaluation
NEX .................. National Execution
NTP .................. National Target Programme (GOV)
OECD/DAC ...... Organisation for Economic Cooperation and Development / Development Assistance Committee
PMB .................. Project Management Board
PPC .................. Provincial People’s Committee
PCG .................. Programme Coordination Group (One UN)
PO .................. Programme Officer
PSC .................. Project Steering Committee
SEDPS ............... Socio-Economic Development Plan
SLGP ................. Strengthening Local Government Capacities for Planning, Budgeting and Managing Public Resources Project
SPIU ................. Sub-Project Implementation Unit
TMR ................ Tu Mo Rong District
TOR ................ Termined of Reference
UN .................. United Nations
UNDP ................. United Nations Development Programme
UNICEF ............. United Nations Children’s Fund
UNFPA ............... United Nations Population Fund
USD ................ United States Dollar
VDG ................ Vietnam Development Goal
Executive Summary

i. The Strengthening Capacity in socio-Economic Development Planning, Implementation and Provision of Basic Social Services in Kon Tum project (referred to as the Kon Tum Joint Project) is a partnership between the People’s Committee of Kon Tum Province in Vietnam, UNDP, UNICEF, and UNFPA. Assistance has been provided by three United Nations Agencies cooperating under this project, i.e. UNDP, UNICEF and UNFPA within the context of efforts to achieve the Millennium Declaration and Millennium Development Goals. Support has been geared towards strengthening capacities of sub-national authorities on provincial, district and local level to plan and manage their development agenda effectively and to provide support in the delivery of quality basic social services to local people in Kon Tum province. This in response to the on-going process of decentralisation, with provinces and districts taking up delegated responsibilities and the need to build capacities on sub-national levels.

ii. As mentioned in the M&E paragraph of the Detailed Project Outline of the Kon Tum Joint Project a mid-term review is to be conducted in 2009. The purpose of the MTR is to provide inputs for GOV, UN Agencies and Implementing Partners on learnings so far, constraints that need to be overcome and plausible redirections required as well as possible future directions of the project.

iii. The objectives of the review centre on the OECD/DAC Evaluation Criteria of relevance, effectiveness, efficiency, impact and sustainability. Given the stage of the project at mid-term the focus of the review is in particular on effectiveness of the project and its various components. The review further looks at process issues, including project and financial management as well as at the issue of aid effectiveness, linked with the joint approach of the UN agencies concerned.

iv. The review team consisted of an international evaluator / team leader and a national consultant. In terms of methodology, the review conducted consisted of six stages in which existing documentation was reviewed, briefing and de-briefing meetings were conducted, data was gathered from various stakeholders concerned and results were reported upon. The team met with key stakeholders on national, provincial, district, commune and hamlet level, with field visits to Dak Ha and Tu Mo Rong districts. For the review use was made of the project results matrix as a guiding framework. Use of multiple tools allowed for triangulation of findings.

v. Overall the project and its components can be considered to be relevant. This in terms of alignment with GOV policies and reform agendas as well as in terms of mandates of the UN agencies involved and the One UN plan. Also when considering response to local needs the relevance can be considered high, both in terms of local authorities who can obtain the means for improving planning and budgeting and capacities concerning basic service delivery as well as in terms of local populations, who can enhance their voice in prioritisation of investment funds and can obtain improved access to quality basic services.

vi. The project has been poverty oriented with Kon Tum as one of the poorest provinces at the time of project design. With the fast economic development in the province this is changing and the poverty focus of the projects will need to be increasingly realised within the province itself. As the first joint UN project the Kon Tum project is pioneering both in terms of financial and administrative management as well as in programmatic terms. On both fronts important experiences have been obtained and lessons learned. The model chosen for this joint project, basically around coordination, can be considered suited for the outcomes that the project tries to achieve.

vii. The Evaluation Criterion of Effectiveness was considered for each of the outcome areas that the project focuses on.
viii. In terms of **Strengthened SEDP Planning and Budgeting** large part of the outputs could be realised in particular those on the assessment of existing capacities in SED planning, improvement of knowledge and skills regarding local level planning and budgeting and improved capacity of people’s Council members. Piloting of local level planning has been conducted in particular in terms of developing capacities for commune level planning and development of plans that better reflect local needs and priorities. The improved plans are expected to be implemented in selected communes in 2010 and 2011. In this way the implementation of the plans will get included as part of the piloting of the project and the planning process can be further institutionalised.

ix. Three of the five outcome level indicators for this component could be partially realised. Several local leaders did have a clear vision on mid and longer term development of their district and province. Moreover, selected communes proved capable of preparing their own SED plans, and overall the quality of the SEDP development process has been improved. Decentralisation of investments institutionalised and investment capital utilised effectively, the remaining two outcome level indicators, have not been realised so far. These can be addressed through the actual implementation of the newly developed commune level SEDPs, which is planned for the second part of project implementation. More work will be needed in the second part of the project on addressing enabling aspects of local level planning and budgeting, in particular the legal aspects around the commune plans and their implementation.

x. Regarding the outcome of **Improved Quality of Health Care Services** outputs so far have been partially reached. Knowledge and skills of health professionals on provincial, district and commune levels have improved. Ambulances and medical equipment provided and local referral systems put in place have been important in making health facilities more accessible to people in remote areas. Access to higher quality local health services and midwives has improved, with an increasing number of deliveries made in health centres, in particular for ethnic minority women, who beforehand used to prefer to deliver at home.

xi. In various instances medical equipment provided was not yet used as timing of delivery did not coincide with the availability of rooms in district hospitals and commune health centers which were being built or renovated with GOV resources. These and other constraints identified have limited the extent of improved quality of services delivered in the area of reproductive health, and child and adolescent health. Partly this is for reasons beyond the control of the project and its management board. The project nonetheless needs to identify these kind of constraints through its monitoring system and work on the organisational level and/or the level of the enabling environment to address key constraints directly or indirectly.

xii. In terms of the **Child friendly Primary and Early Childhood Education** outcome area of the project, outputs could be partly realised. Knowledge and skills of teachers, school management and parents were found to have increased in the target area and there is much more of a focus on child-oriented learning. Also the school environment has been improved in selected schools in the target area, and injury prevention promoted. Issues of management and maintenance of sanitary facilities need to be improved in order for the outputs concerned to be fully realised. In terms of the outcomes the project is starting to realise increased enrolment rates in particular amongst ethnic children in targeted schools in the selected communes in which the project works. Focused effort will be needed in the second part of the project in terms of monitoring of behavioural changes of teachers, school management and parents in order to see the extent to which outcomes are being realized and to inform additional activities to further enhance the outputs and outcomes in this respect. Moreover, the efforts to advocate a child-friendly school focus in current regular GOV spending can be reinforced.

xiii. Regarding **Child Protection** a relatively comprehensive child protection network and system has been developed and is implemented in pilot communes which can serve as a model to be expanded in other parts of the province. Capacity of child protection workers on provincial, district and commune level has been improved, including hamlet level volunteers. Networks have been strengthened and the system is operational. As the Provincial SEDP...
was not yet finalized at the time of the field mission, it was not clear to what extent child protection issues are incorporated into this plan.

xiv. On outcome level, the child protection system has started to identify children at risk and has managed to protect and support multiple cases. A comprehensive monitoring system has been put in place to track children that receive support. The reach of the child protection activities is still relatively limited in geographical coverage. The system developed can serve as a model to be expanded in other parts of the province and to inform other child protection initiatives in Vietnam. For this to happen it will be important to capture experiences and learning so far as well as of the further development and expansion of the system and document these.

xv. Regarding Integrated Behavioural Change Communication capacities of Women’s Union, Youth Union and Farmers’ Union and of the Centre of Health Education Communication have been enhanced to carry out IBCC activities, with a focus on the community level. In particular capacities were increased through training, support in the development and use of communication materials and the provision of dissemination equipment. A variety of dissemination materials have been developed. Women’s Union and Youth Union have cooperated in various instances and combine training events. There appears to be opportunity to enhance cooperation with the FU, who have their own specific entry point. As a result of the activities awareness has started to be raised in the various communities that have been targeted in the project area including issues of maternal health, education and child protection. Attitudes of ethnic minority women and men are changing. There is a need to monitor these changes in a systematic way in order to inform project work planning and decision-making.

xvi. Learning and Sharing: In the various outcome areas that the project focuses on a range of experiences has been obtained based on implementation of the various project activities. The various implementing agencies do provide regular reports, which at times do include the identification of lessons learned. Project information is regularly shared and updated in the province’s website. There is a need for more systematic documentation and dissemination of experiences and lessons learned within the project itself and to relevant identified audiences. The development of models has been limited and child protection seems to be in the best position to show results in this respect. The lack of monitoring of outcome level changes hampers the opportunities for learning and means that identification of what works cannot be based on a solid set of performance information so far.

xvii. In terms of Overall Effectiveness the project has started to produce important outputs in the various outcome areas that the project works on. Moreover, some of the outcomes start to be realised across the various outcome areas. Given the timing of the review at mid-term of the project, outcomes cannot yet be expected to have been fully realized. Emphasis of the project in terms of building capacities so far has been on individual and organizational level changes with less focus on aspects of an enabling environment, the wider level changes beyond the participating organizations that need to enable the outcomes that the project wants to achieve to be realized. Moreover, the project so far has focused more on putting requirements in place for changes to happen and has put less emphasis on providing support to the transition process itself for stakeholders concerned, supporting the change process from the present to the required stage. The project will need to enhance its focus in these areas in the second part of the project period, in order to facilitate change processes and to capitalize on the work done so far.

xviii. In order to enhance effectiveness, in particular on outcome level changes, there is a need to establish a results based monitoring system which includes regular assessment of outcome level changes in the various outcome areas of the project. This information needs to be used to inform project decision-making as well as inform the approach on capacity development, in particular the balance between the various levels of capacity development interventions and various aspects of change management.
Efficiency: On average 66% of planned expenses within the province have been disbursed so far (excluding expenses directly through UN agencies headquarters). A comparison of disbursements with the budget shows that on average so far 45% of the project budget has been spent. Lowest burning rate concerns Counterpart fund with 31%. Highest proportion of budget is spent by UNICEF, which has disbursed 50% of allocated funds so far. The lack of breakdown of the project expenses for main expense categories makes it difficult to link financial management with aspects of managing for results.

Transaction costs. With the UN agencies working jointly there is an enhanced attention to avoid overlap and duplication of activities, making use of agencies’ comparative advantage in deciding who is responsible for which activities and outputs. Over time there has been an increase in joint aspects, including harmonized financial and administrative procedures, joint monitoring and other missions as well as joint work planning. The joint character of the project has overall resulted in reduced transaction costs, which has enhanced efficiency.

For UN agencies though the process of harmonization of financial and administrative requirements and procedures did in the short term increase their transaction costs, given the need for more coordination and meetings amongst parties concerned. Nonetheless over time transaction cost have also reduced for them substantially. A remaining issue is that decision-making processes in the joint project often turn out to be more time consuming. With a reduction in overlap and duplication the joint project has enhanced efficiency and effectiveness, though there is room to further improve the synergies across the various outcome areas of the project.

Impact: With the three UN agencies joining their efforts in this Joint Project, issues in multiple sectors are dealt with at the same time in the same areas. The province recognizes this added value of putting the various project components together as this is addressing multiple needs relevant at the local level. The convergence of support starts to take effect locally and is likely to enhance impact for project participants.

With the lack of indicators on the level of the goal of the project as well as on most of the outcomes it is difficult to assess to impact achieved so far as well as the contribution of the project. It is also relatively early to look at impact level changes after a period of two year. There is a need to address the lack of indicators in particular on the level of most of the project outcomes. This needs to go hand in hand with revisiting the results framework of the project and increasing M&E capacities of the PMB and the implementing agencies, building on existing capacities. In this way the evaluability of the project would also be enhanced.

Sustainability: Capacity development has focused in particular on building individual staff capacities and to a more limited extent on organisational level changes. It has so far focused much less on creating an enabling environment beyond the implementing agencies participating in the project. This has limited aspects of sustainability so far and there is a need for the project to focus more on aspects of an enabling environment and selected organisational level issues in order to enhance sustainability in the second part of project implementation.

Process Issues: For management of the project a Project Management Board was established which was supported on project and financial management. In November 2009 a Project coordinator was recruited to provide ongoing technical support to the PMB. Till then this was done through short term consultancies. With the resignation of the Project Coordinator there is a gap in terms of technical support which, given the complexity of the project, needs to be addressed urgently both in the short as well as the longer term. The organisation of the PMB and project components replicates the compartmentalization of GOV on provincial and District levels. There is a need for horizontal cooperation and learning across the project components in order to enhance synergy. The Project Steering Committee was installed in June 2008 and met only once internally. There is a need to enhance the functioning of the PSC in particular at the mid-term implementation of the project.
Key Recommendations include (full set presented in report):

For the Project Steering Committee

- To extend the implementation of the Joint KonTum project into the second part of the project period and to ensure a process for getting the requirements in place for the project to reach its outcomes and goals, including: on-going high quality technical support to the PMB; putting in place a results based monitoring system; and adapting and enhancing the project results framework
- Support the project to move towards addressing organisational issues and aspects of an enabling environment in terms of capacity development
- To play an active role in the strategy development of the project in the second part of the project period

For the Project Management Board

- Urgently fill the technical support gap that results from the resignation of the Project coordinator, in order to enhance the technical capacity of the PMB on a sustained basis. In the short run this could be done by hiring a consultant while actions are undertaken for a longer term solution.
- Further enhance the capacity of the PMB in project management, coordination amongst stakeholders, implementing partners and project components, progress monitoring and implementation of the Harmonised Program and Project Management Guidelines
- Manage and support the process of review of the project results framework and support data gathering process with the development of a central project data base
- Plan for an impact assessment to take place at the end of the pilot project period and enhance evaluability of the project

For the UN Agencies and Implementing Partners

- Develop capacity development strategies that include a better balance of individual, organisational and enabling environment aspects for each of the project outcome areas, increasing the focus on the latter two levels
- Identify a concise set of outcome level indicators for each outcome area concerned
- Pro-active management of the change process in each of the outcome areas
- Enhance likeliness of learnings from training to be used by trainees in their daily work

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1 The Vietnam UN Harmonized Program and Project Management Guidelines (HPPMG) are to guide the management and implementation of UN-supported programmes/ projects under the National Implementation Modality (NIM) conform the decision of the Prime Minister on March 18, 2010.
Map: Location of Dak Hring and Dak Ha Communes in Kon Tum Province *

* Commune Boundaries are indicative only (Tu Mo Rong district was split off from Dak To district)
1 INTRODUCTION

1.1 The Strengthening Capacity in socio-Economic Development Planning, Implementation and Provision of Basic Social Services in Kon Tum project (referred to as the Kon Tum Joint Project) is a partnership between UNDP, UNICEF, UNFPA and the People’s Committee of Kon Tum Province (PPC) in Vietnam. As such it is the first project jointly undertaken by multiple UN agencies. Through the project assistance has been provided by three United Nations Agencies, i.e. UNDP, UNICEF and UNFPA within the context of efforts to achieve the Millennium Declaration and Millennium Development Goals. Support has been geared towards strengthening capacities of sub-national authorities on provincial, district and local level to plan and manage their development agenda effectively and to provide support in the delivery of quality basic social services to local people in Kon Tum province. The project started operating in May 2007. As part of the M&E plan of the project document of the Kon Tum Joint Project a mid-term review is to be conducted in 2009.

Purpose of the MTR Mission

1.2 The Mid-Term Review is meant to provide inputs for GOV, UN agencies and the implementing partners in Kon Tum Province, on learning so far, constraints that need to be overcome in order to reach the goal of the project, plausible adjustments and/or redirections required at this stage and on possible future directions of the project in a next cycle. It is, moreover, meant to provide recommendations for the remaining project period and beyond, including need for expansion, new issues to be considered, updating risks, implementation arrangements and suggestions for corrective action.

Mission Objectives / Scope

1.3 Effectiveness: the extent to which the project has been able to realize the outputs as planned in the annual work plans and to what extent this has resulted in achievement of the project goal and related outcomes. Project synergies across the components.

1.4 Efficiency: how economically project resources and inputs are converted to results

1.5 Relevance: the extent to which the project responds to the actual needs of the Provincial, District and Commune Authorities, to the needs of people in communes and to the changing development context in Vietnam. The extent to which the project is aligned with GOV policies as well as with One UN Plan and UNDP, UNICEF and UNFPA policies and priorities.

1.6 Impact: the extent to which and the ways in which activities on planning and service delivery improvements are resulting in changes in the lives of people in communities in targeted districts. Given the Mid-term character this will focus on the expectation / likeliness for impact to be realised.

1.7 Sustainability: the extent to which changes realized from the interventions can be expected to result in long-term benefits

1.8 Process Issues: The project’s partnership with GOV agencies, amongst the participating UN agencies and with the wider donor community. The extent to which the project has developed a model for UN Joint Programming in Vietnam; Management arrangements and mechanisms, in particular the extent to which
1.9 **Constraints**: Identification of constraints faced in project implementation and assessment of ways in which these constraints have been dealt with.

1.10 **Lessons Learnt and good practice**: identify and document lessons learned and good practices including issues of harmonization, models built in different components and project implementation for ethnic minority groups.

**Context**

1.11 The project is implemented in Kon tum province, located in the North of the Central Highland region of Vietnam. Administratively, there are eight districts and one provincial city with a total 97 communes/wards. Kon Tum’s population in 2008 amounted to 404,470 people, of which 53% is of ethnic minority. Kon Tum is one of the poorer provinces in Vietnam. By 2008, the poverty rate of Kon Tum was 21.8%. Compared to 14.8% for the country as a whole. Poverty is more prevalent under ethnic minority households. Among ethnic minority groups, 38.4% of households are poor. When looking at the group of poor household in the province, 91.6% of them are from ethnic minorities.

1.12 Kontum has a high forest coverage with an overall rate of 67%. In terms of economic development, forest and agriculture is the largest sector of the province’s economy (48% in 2008), followed by commerce-services (33%) and industry and construction (18%). During the last five years, the province has experienced a very high economic growth rate of close to 15%, and in 2008 this growth rate surpassed 15% (in comparison with 6.5% for the whole of the country). Notwithstanding this recent growth, the province lags behind the national average. By 2008, the average income was around 573 USD in comparison with the national average of USD 1005 and the national target of US$1,100.

1.13 For project implementation Dak Ha and Tu Mo Rong districts are target areas. In Dak Ha district ethnic minorities constitute about 54% of the population. The largest ethnic minority group is the Xedang with small numbers of Bana, Sera, RMong and B’row. In Tu Mo Rong district almost the entire population consists of Xedang ethnicity. The Xedang are usually farming households that conduct hill side cultivation, small husbandry and sometimes practice forestry. Some households have received support in vegetable cultivation and kept on doing this. Tu Mo Rong district is geographically more isolated and has communities that are difficult to reach, in particular in the rainy season.

1.14 Tu Mo Rong district was split off from Dak To district to form its own administrative unit. Tu Mo Rong district is part of the 62 poorest districts in Vietnam and as such receives support from the National Target Programme 30A. Moreover, the NTP 135 is active in TMR district. Dak Ha district is located closer to Kon tum city along the national highway. Dak Ha is better off in socio-economic terms.

1.15 The storm number Nine of October 2009 hit Kon Tum hard, and about 50 casualties were recorded in the province in relation with the storm. TMR district was particularly affected and the road to the district got blocked through landslides.

1.16 The Kon Tum joint project is the first UN joint project in Vietnam at local level. It is a cooperation between UNDP, UNICEF and UNFPA with the PPC in Kon Tum, with...
the province as project owner and Department of Planning and Investment (DPI) as nodal agency. There have since been developed other joint programmes, including the Avian and Human Influenza Pandemic and the Gender Equality programme. The latter is a cooperation among many more UN agencies with gender as cross cutting theme in UN organisations.

1.17 The project is responding to the on-going process of decentralisation, with provinces and districts taking up delegated responsibilities, and the resulting need to build capacities on sub-national level in terms of SEDP planning and implementation as well as on integrated basic service delivery.

The Kon Tum Joint Project

1.18 One component of the Kon Tum Joint project is geared towards strengthening the capacity of Kon Tum province’s local authorities to plan and manage their development agenda effectively. It focuses on support to sub-national authorities on all aspects of the planning process including the preparation, implementation and monitoring of socio-economic development plans. A second component of the project, is concerned with raising capacities on sub-national levels in provision of high quality basic social services to local people. These basic social services are expected to be improved via support to updating technical knowledge and skills of professional service providers, provision of essential equipment, drugs, infrastructure upgrading, and on-going technical support.

1.19 The project is funded partly through the One UN budget and has received financial support from AECID. One UN funds amount to 2/5 of total donor funding while AECID contributes about 3/5. The total project budget for the four year period amounts to $5.5 million USD, which also includes the GOV contribution of 0.5 million USD.

1.20 Large part of the support is directly provided to the province where it is managed by the Provincial People’s Committee (PPC) with day to day management by the Project Management Board led by DPI. While the capacity building on local SEDP planning and budgeting targets a wider range of stakeholders in the province, more focused support to multi-sectoral interventions for both planning and service delivery improvement are provided in two selected districts of Dak Ha and Tu Mo Rong, where models of integrated services are implemented.

Table 1: Focus Areas of the UN organizations in the Kon Tum Joint Project

<table>
<thead>
<tr>
<th>UNDP</th>
<th>UNICEF</th>
<th>UNFPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sub-national level participatory evidence-based, and pro-poor planning, budgeting and public resource management (including administrative levels of commune, district, provincial and sector level)</td>
<td>Child friendly Schools including upgrading of school fences and yards, training of teachers and management staff</td>
<td>Safe Motherhood through Reproductive health including village birth attendance system</td>
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<td></td>
<td>School water and sanitation</td>
<td>Maternal and child health care including community based referral system</td>
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<td>Integrated Behavioral Change Communication</td>
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<td></td>
<td>Child malnutrition</td>
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<td></td>
<td>Out of School Youth Clubs</td>
<td></td>
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<tr>
<td></td>
<td>Early Childhood development</td>
<td></td>
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<tr>
<td></td>
<td>Child safety and injury prevention</td>
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<tr>
<td></td>
<td>Community based child protection</td>
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IOD PARC / Frank Noij & Thi Thanh Hang / Final Report 22 December 2011 / P442
1.21 As part of the joint project agencies have coordinated their activities, making use of the relative strengths of each of the agencies, avoiding overlaps and duplication, and thus maximizing resource use. For UNFPA this means that in the Joint Kon Tum project, with UNICEF as a partner, they focus on Reproductive and Maternal Health with UNICEF taking up amongst others the nutritional aspects. Without UNICEF, UNFPA would normally include nutrition as part of their programme. Also iron tablets provision which UNFPA often implements, is in Kon Tum Province implemented by UNICEF as their system to do so is considered more sophisticated. UNFPA on the other hand takes the lead in support to mass media in Kon Tum, including issues on education and children. UNFPA and UNICEF working together in the same geographical areas leads to a more comprehensive approach, such as taking care of mothers (UNFPA) and also of their young children (UNICEF). As to UNDP, in their component on capacity building on multiple levels, UNDP includes capacity building to staff members of Department of Education and Training (DOET) and Department of Health (DOH) and Department of Labour, War Invalids and Social Affairs (DOLISA), which means that partners make use of UNDPs comparative advantage in this respect.

1.22 The programme implemented by the three agencies reflects the same kind of work that the agencies support in other provinces. UNDP has been implementing participatory planning in other areas in Vietnam through the SLGP project, in four provinces, Thua Thien Hue and Ho Chi Minh City. UNFPA implements its reproductive and maternal health programme in six other provinces and UNICEF implements strengthening local planning in four provinces including Kon Tum. In Ninh Thuan Province UNICEF and UNFPA each supports their own projects without a joint set-up but with coordination of planning of their work. but in Kon Tum this takes place in a joint UN set-up. In Kon Tum the activities of each of the agencies are put together in one project, which is meant to result in multiple capacities being built with multiple results at the local level and enhanced synergies across the project components.

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**ONE UN Pilot in Vietnam**

The UN in Viet Nam is changing the way it works to better support Viet Nam to meet the challenges that lie ahead. Through the One UN Initiative, the UN is transforming itself to deliver better results for the benefit of the people of Viet Nam through greater unity of purpose, coherence in management and efficiency and effectiveness in operations. In line with the Ha Noi Core Statement on Aid Effectiveness, UN reform in Viet Nam is a three-party undertaking by the Government of Viet Nam, the UN Country Team and the donor community. Where deemed useful and considered as an added value for the One UN process, UN organizations in Viet Nam have formalized the implementation framework in legally binding joint programmes. The Joint Project in Kon Tum was the first Joint UN Programme in Vietnam. Currently, there is a total of five joint programmes established within the overall framework of the One Plan.
2 METHODOLOGY

2.1 The review conducted consisted of six stages in which existing documentation was reviewed, briefing and de-briefing meetings were conducted, data were gathered from various stakeholders concerned in Hanoi as well as in Kon Tum province and results were reported upon. An overview of the various stages and methodologies applied is presented in Table 2 below. The review team consisted of an international evaluator/team leader and a national consultant.

Table 2: Key Stages of the Review Process and Methodologies used

<table>
<thead>
<tr>
<th>Stage</th>
<th>Description</th>
<th>Methodology used</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 1</td>
<td>Review of Existing Documentation</td>
<td>Desk Review of available written information and documentation6</td>
</tr>
<tr>
<td>Stage 2</td>
<td>Briefing with key staff of UNDP, UNICEF and UNFPA</td>
<td>Briefing meeting with key UNDP, UNICEF and UNFPA staff</td>
</tr>
<tr>
<td>Stage 3</td>
<td>Data gathering from key stakeholders</td>
<td>➢ Departments, Mass organisations and Agencies on Provincial level in Kon Tum</td>
</tr>
<tr>
<td></td>
<td></td>
<td>➢ Departments, Mass organisations and Agencies on District and commune level in</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Dak Ha and Tu Mo Rong districts</td>
</tr>
<tr>
<td></td>
<td></td>
<td>➢ Selected officials MPI in Hanoi</td>
</tr>
<tr>
<td></td>
<td></td>
<td>➢ Selected staff members of senior management of UNDP, UNICEF and UNFPA in Hanoi</td>
</tr>
<tr>
<td></td>
<td></td>
<td>➢ Selected staff member of AECID in Hanoi</td>
</tr>
<tr>
<td></td>
<td></td>
<td>➢ De-briefing meeting with stakeholders in Kon Tum Province</td>
</tr>
<tr>
<td>Stage 4</td>
<td>Reporting</td>
<td>Analysis and Report writing</td>
</tr>
<tr>
<td>Stage 5</td>
<td>Multi-Stakeholder Workshop</td>
<td>Presentation and Discussion of Draft Evaluation Report</td>
</tr>
<tr>
<td>Stage 6</td>
<td>Final Report</td>
<td>Inclusion of comments into the Final MTR Report</td>
</tr>
</tbody>
</table>

Evaluation Framework

2.2 For the review of the project use was made of the logical framework as presented in the Detailed Project Outline. The overview of the framework is presented in table 3 below, while the complete framework is presented in annex 2. In its work the evaluation team focused in particular on the level of outputs and outcomes as with the project being mid-term in terms of its implementation, those are the levels at which change can be expected to have occurred.

Field Visits

2.3 Important part of the Mid-term Review process consisted of field visits and discussions with key stakeholders on national level, including UN agencies and MPI, Provincial stakeholders including PPC, DPI, DoH, DOET, Department of Agriculture and Rural Development (DARD), Department of Finance (DOF), Department of Ethnic Minorities Affairs (DEMA), Mass organisations and the Project Management Board (PMB), district level stakeholders for the project targeted districts of Dak Ha and Tu Mo Rong. In consultation with the PMB Dak Hring Commune was selected in Dak Ha district and Dak Ha commune in Tu Mo Rong district for discussion on the level of the commune and hamlet. A variety of stakeholders on commune level was included in the discussions. In the plan of the team a short visit to a non-pilot

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6 For an overview of materials consulted see annex 5.
commune had been included. When the commune selected, i.e. Dac La commune, was visited it appeared that the project actually had started project activities in this commune. Though the information added to the whole, it could not be used in terms of comparing targeted and non-targeted areas.

2.4 Due to the aftermath of the storm no 9 that hit in particular Tu Mo Rong district hard, the field visit to this district was postponed till the end of November at which time the district proved accessible again by road and officials were able to meet with the team members. In the two districts the team visited selected schools and health clinics and discussed with senior management and staff members. During the visits informants were provided with the background of the MTR and the focus of the mission. They were informed about the confidentiality of the information that they would provide to the mission team. For the details of the work plan of the review mission see annex 3, for an overview of persons met see annex 4.

Methods/Tools

2.5 During field visits, use was made of a variety of methods and tools. This allowed for triangulation of findings. Methods used include the following:

- Desk review of key documents and reports
- Analysis of the Logical Framework of the project
- Semi-structured interviews with selected key informants
- Focus group discussions with selected stakeholders (in particular used for discussions in joint meetings of representatives of Mass Organisations)
- SWOT analysis (in joint meetings of representatives on district / commune level)

| Project Results | Contribute to realize the principles of Millennium Declaration and Millennium Development Goals  
Provincial SEDP will be in place that is pro-poor, evidence based and participatory  
Replicable models developed and evaluated for integrated programming that demonstrate approached for sustainable development results |
<table>
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<tbody>
<tr>
<td>Project Sub-Results</td>
<td>Models of integrated services is in place in Dak Ha and Tu Mo Rong districts of Kon Tum province that are tested and evaluated and if appropriate ready for replication in other parts of the province as well in other provinces; Provincial SEDP Planning &amp; Budgeting Strengthened; Learning and sharing enhanced</td>
</tr>
<tr>
<td>Outcome 1</td>
<td>Enhanced Capacity of local authorities on evidence-based, pro-poor and participatory SECP Planning and budgeting ensuring decentralized management of investment, linkage of resource with local priority/needs and better management of provincial statistics related to socio-economic data</td>
</tr>
<tr>
<td>Outcome 2</td>
<td>Improved quality of health care services available, in general, for mothers, children and adolescents as well as pre-pregnant and pregnant women in the province with focus on ethnic minority and access to better quality health services including injury prevention and improved environment in health centers increased in the selected two districts of the province.</td>
</tr>
<tr>
<td>Outcome 3</td>
<td>Child-Friendly Primary Education and Early Childhood Education promoted in general in the province; and children and young people from the project districts and communes have access to quality education and learning opportunities in child-safe schools, kindergartens and safe communities having better environment with regard to access by safe water &amp; sanitation and injury prevention.</td>
</tr>
<tr>
<td>Outcome 4</td>
<td>System developed and network strengthened to tackle issues related to child protection, especially children in need of special protection and provincial capacity enhanced to address Children and AIDS issues</td>
</tr>
<tr>
<td>Outcome 5</td>
<td>Capacity enhanced among service providers at the provincial, district and commune level on Integrated Behavioural Change Communication (IBCC) skills and awareness raised among community, in general, and parents and caretakers, in particular, from the project districts on Early Childhood Education, Reproductive and Child Health, Sanitation and Hygiene, injury prevention and protection including HIV/AIDS</td>
</tr>
<tr>
<td>Outcome 6</td>
<td>Experiences/lessons learned from the project implementation shared with relevant audience; models of integrated services in projects areas evaluated and documented for wider dissemination and replication within and outside Kon Tum province.</td>
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</tbody>
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7 Source: Strengthening Capacity in Socio-Economic Development Planning, Implementation and Provision of Basic Social Services in Kon Tum. A Joint UN Project with People’s Committee of Kon Tum Province. Detailed Project Outline.
3 FINDINGS

3.1 In presenting the findings use will be made of the OECD DAC Evaluation criteria, which are also part and parcel of the TOR, i.e. relevance, effectiveness, efficiency, impact and sustainability. Much of the focus will be on the criterion of effectiveness. For this criterion the evaluation framework will be used which was presented as part of the methodology (see table 3 above and annex 2). In such a framework the output level is closest to the activities. In order to relate to the level of implementation of the various components of the initiative, the discussion of effectiveness will thus start with the level of the outputs after which the level of the various outcomes will be discussed. In addition to the OECD/DAC Evaluation criteria process issues will be presented including project and financial management issues.

RELEVANCE

Alignment with GOV policies and Mandate of UN Agencies

3.2 The project aims at enhancement of capacities for pro-poor planning and budgeting in Kon Tum province and to enhance capacities for basic service delivery. This aligns with the GOV policies on decentralisation and grass roots participation in which more responsibilities are shifted to provincial and district levels. Decentralization requires an enhanced capacity for planning and service delivery at provincial and district levels. Capacity development for pro-poor planning and budgeting and for basic service delivery is in line with Government policies related to the public sector. These include the Central Resolution at Central Conference N X in 2008 on Public Administration Reform, which aims to bring local government closer to citizens and the new Civil Service Law (issued by 13/11/2008 and in effect from 1/1/2010) which includes a competence and performance based rewards and promotion system for public servants.

3.3 The ultimate goal of the project is to enhance the realisation of the MDGs which is in line with the GOV objectives. Project goals and objectives align with the mandates and policies of the respective UN agencies as well as with the One Plan through which the project has been receiving its funding in the latter part of the period under review.

3.4 A provincial decision on decentralization of the decision-making and management on investment projects with a cost of 5 billion VND or less to the district level was made by Kon Tum Province on 10 June 2009. This shows a commitment of the province to the process of decentralization and the need to build capacities required on sub-national level.

Responding to Local Needs

3.5 The project relevance also needs to be put in the light of the extent to which it responds to local needs, both of local authorities as well as those of local people. The participatory planning component fills a need in terms of local authorities, providing officials at commune, district and provincial levels with the tools for more objective oriented, better informed and more participatory planning processes and management of their implementation. In the commune selected for the review, the participatory process had resulted in a plan that better reflected the needs of the residents.

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8 Government Resolution N 08, dated 30 August, 2004 which seeks continued decentralisation of cities under authority of central government. Resolution No. 17-NQ-TW confirmed the move towards decentralization on 1 August 2007, as did Resolution No. 53/2007/ND-CP on 7 November 2007.
9 Ordinance of Democracy at grassroots level, N 34, National Assembly, dated April 2007.
10 i.e. about USD 270,000 at the rate of VND 18,000 against the US dollar
11 Kontum PPC decision N. /QD-UBDN, date June 10,2009
local population, including the poor as well as in more means to manage and monitor the implementation of the plan. Participatory processes resulted in an enhanced influence of the local population in the prioritisation of investments in the development plans, something that had been lacking in the top-down approach to planning practiced beforehand. It also means that implementation can be better managed, based on processes and responsibilities identified in the plan. Full relevance of the new approach for local people will only be realised when the new plans are implemented in practice, something that was not yet realised at the time of the review in the communes visited but is planned to take place in 2010 in Dak Hring, Dak Mar and Ngoc Reo communes.

3.6 Activities related to improving the quality of health care services for mothers, children and adolescents and child-friendly primary and early childhood education proved relevant for local communities, in particular in the poorer and more remote areas. The health interventions were informed by a needs assessment conducted in Kon Tum Province in 2006. Project interventions in health and education were found to link with GOV programme investments in these areas, complementing one another. The work done on strengthening of systems and networks to tackle child protection issues was found to be relevant across the board, with a high level of community support.

**Poverty Focus**

3.7 Located in the Central Highland region of the country, at the time of project formulation Kon Tum was one of the poorest provinces in Vietnam as well as one in which large ethnic minority populations reside. Out of the total population of 404,470 in 2008, approximately 53% belongs to various ethnic groups (Bana, Xedang, Gie Chieng, G’rai, B’rou, R’mam etc.) The 2004 Vietnam Household Living Standards Survey showed that 32.7 percent of the population in Kon Tum lived below the international poverty line. Average per capita income in 2005 was only US$ 285 compared with the national average of US$ 640. By 2008, the average income had increased to about 573 USD. This level lags far behind in comparison with the national average of USD 1005 and the national target of US$1,100. Kon Tum remains a province with substantial poverty.

3.8 On the other hand with a relatively high economic growth rate poverty rates have been reduced over the last years and declined from 31.2 % in 2006 to 26.6 % in 2008. This means that over time, assuming that the economic development trend in Kon Tum will continue, a poverty focus will need to be sought increasingly within the province itself, targeting poorer and remote areas and minority population groups and promoting pro-poor planning, in addition to selection of Kon Tum as one of the poorer provinces. The project has this approach at its base, though could make this orientation more explicit in terms of seeking pro-poor economic development and putting a monitoring system in place to assess outcome level changes concerned, disaggregating data by gender and socio-economic groupings.

3.9 The selection of Dak Ha and Tu Mo Rong districts means the inclusion of one of the more well to do district, i.e. Dak Ha, as well as one of the poorer districts in the province, i.e. Tu Mo Rong which is part of the 62 poorest districts in Vietnam. Though the selection of Dak Ha district is relevant in terms of piloting the planning approach in different socio-economic settings, with the project aiming to enhance pro-poorness of planning, on the other hand it does limit the direct poverty focus of the project. In Tu Mo Rong district the project started working in more remote as well

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12 Decision No: 51/ TCKH – TH Dac Ha Distric People’s Committee, dated 22 June 2009.
as relatively less remote communes of the district. Recently, the project has expanded its supports regarding planning reform to Kon Plong as well as Tu Mo Rong district concerning the formulation of the support plan to the Poorest Districts in Vietnam (NTP 30A) linked with the formulation of the annual and 5-year district SEDP. Therefore, overall the project has a clear poverty focus, though it will be important for project management to keep in mind this focus in key decision-making processes.

**Development of Models**

3.10 Another important rationale for the project is the development of models as the project sub-result reads: “Models of integrated services is in place in Dak Ha and Tu Mo Rong districts of Kon Tum province that are tested and evaluated and if appropriate ready for replication in other parts of the province as well in other provinces”. Though the role of models and their replication proved less clear when one looks at the details of the various project components.

3.11 In the project component on Strengthening Provincial SEDP planning and Budgeting UNDP uses the model that it has developed with the SLGP project which focused on capacity building of local government in planning, budgeting and managing public resources and was implemented in five provinces of Vietnam. In the Child-friendly primary education part of the project, UNICEF makes use of its child friendly school model that has been used in various parts of the world. For sanitation use is made of the total sanitation concept, while in Integrated Behavioural Change Communication, use is made of existing materials on child survival and development and on clean water and environment and sanitation and use is made of UNFPA experiences among others in Phu Tho and Tien Giang provinces.

3.12 The use of experiences from elsewhere as such is encouraging. It does at the same time show that the “models in place” do not concern necessarily new models but are much more about making use of existing models in the context of Kon Tum and the One UN project, in which multiple support efforts are brought together on local level. And thus it is this process of adaptation of the models and their contextualisation and learnings concerned that could be used to inform similar change processes elsewhere. With the project being owned by the province, piloting would likely focus on learning for application in other parts of the province, or in other comparable parts of the Central Highlands and eventually other parts of Vietnam.

**National Target Programmes in the two districts**

3.13 In both the districts in which the planning and budgeting component is implemented there are NTPs operating. In Dak Ha this concerns the second phase of the 135 programme and in Tu Mo Rong the 135 II, the 30A program for the 62 poorest districts, 168 in providing salt, programme of price subsidies and, 33 program for concentrated residence. The funds of the National Target Programmes are usually much larger than the investment funds of the respective districts. The manual of the project on participatory planning prescribes the inclusion of resources outside of the state budget, including funds of NTPs and other resources, in the process. In practice though the participative planning process in one of the communes visited for 2009 focus had been on the district investment funds and the process was reported as not including allocation of the NTP funds. It is clear that this would limit the scope of the participatory planning process as large part of local level funding would still be made use of a top-down approach.

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16 Kon Plong and Tu Mo Rong district are the two poorest districts in the province and both get support from NTP 30A.

17 In addition, there are two government projects on providing support to ethnic minority people of RoMan and Brau in Kontum with a budget for 2008 of about USD 400 000. Support focuses on agriculture, health, education, culture and construction investments.
One UN Project Model in Vietnam

3.14 Another rationale for the project is the jointness of the project in terms of the participating UN agencies that try to “deliver as one”. Though not an aim in itself, it is clear that the project as the first joint UN project in Vietnam has a pioneering function. On the one hand this concerns managerial aspects of the project and the three agencies have put considerable effort in harmonizing their management mechanisms including financial and administrative procedures and requirements, reducing considerably the transaction costs for Kon Tum province and the implementing agencies.

3.15 The project started off with a model of parallel and pass through funding to the use of one fund/one budget and one set of management practices (HACT), which has simplified procedures and has benefitted project implementation. Over time, quite a number of Joint UN agency missions from UN agencies have been conducted rather than each agency planning its own missions. These aspects of harmonisation amongst agencies have resulted in a reduction of transaction costs for implementing agencies. However, as mentioned, this “delivery as one” is still in a piloting process and quite a numbers of issues will need to be tackled including the different type of form faces and mode of money transfers that are still different for each of the three UN agencies. Moreover, the roles of UNICEF as coordinating agency and UNDP as administrative agency need to be further clarified. Harmonisation has come at a cost, in particular to the three UN agencies themselves that had to invest considerably in terms of human resources to reach the present level of harmonisation.

3.16 Delivering as One also refers to programmatic aspects of the project. The level of cooperation between the three UN agencies in programmatic terms can be characterised as coordination, with the three agencies agreeing on their respective comparative advantages and dividing roles and tasks accordingly. Activities are then carried out by each of the UN agencies through selected implementing agencies. In this way duplication and overlap are avoided and through work in one project area inputs come together at the local level, thus providing multiple benefits for targeted populations. Joint work planning and joint monitoring missions have further enhanced and fine tuned coordination amongst the UN agencies as well as cooperation with the PPC and the PMB.

3.17 The modality that the project embodies proved to be relatively well suited for the task at hand and the outcomes and the goal that the project tries to achieve and contribute towards.

Conclusion

3.18 Overall the project and its consistent components can be considered as relevant. This in terms of alignment with GOV policies and reform agendas as well as in terms of mandates of the UN agencies involved and the One UN plan. Also when considering response to local needs the relevance can be considered high, both in terms of local authorities who can obtain the means for improving planning and budgeting and capacities concerning basic service delivery as well as in terms of local populations, who can enhance their say in prioritisation of investment funds and can obtain improved access to quality basic services.

3.19 The project has been poverty oriented with Kon Tum as one of the poorest provinces at the time of project design. With the fast economic development in the province this is changing and the poverty focus of the projects needs to be increasingly realised within the province itself, to which the project needs to further

18 Planning Guideline for Annual SEDP at Commune Level, (internal use), June 2006, UN Vietnam and Kon Tum Province, June 2009
adapt. Relevance of the improved planning and budgeting component of the project can be enhanced by ensuring that the resources for NTPs are included in the planning process as prescribed in the planning manual. As the first joint UN project the project is pioneering both in terms of financial and administrative management as well as in programmatic terms. On both fronts important experiences have been obtained and lessons learned. The model chosen for the joint project, basically around coordination, is suited for the outcomes that the project tries to achieve.
EFFECTIVENESS

3.20 In presenting the findings on effectiveness use will be made of the logical framework presented as part of the methodology (see table 3 above and annex 2). The discussion on effectiveness will focus on the level of project outputs and outcomes. Issues of contribution to the goal of the project will be discussed separately below under the Evaluation Criterion of Impact.

3.21 In the presentation of the findings in terms of the evaluation criterion of effectiveness first the details for each of the project outcome areas will be presented: Strengthened Provincial SEDP Planning and Budgeting; Improved Quality of Health Care Services; Child Friendly Primary and Early Childhood Education; Enhanced Child Protection; Integrated Behavioural Change Communication and Learning and Sharing. At the end the overall aspects of effectiveness will be dealt with.

Outcome 1: Strengthened Provincial SEDP Planning & Budgeting

<table>
<thead>
<tr>
<th>Strengthened Provincial SEDP Planning &amp; Budgeting</th>
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<tbody>
<tr>
<td><strong>Outcome</strong></td>
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</table>
| **Outcome level Indicators** | $
\begin{itemize}
  \item Local leaders have a clear vision of mid- and long-term development of their province
  \item Communes are capable to prepare their own SED plans and are the owners of small investment projects
  \item Improved SEDP processes (preparation, implementation and M&E)
  \item Investment decentralisation institutionalised in Kon Tum
  \item Investment capital utilised effectively and efficiently, and reflects local priority/need
\end{itemize}$ |
| **Outputs** | $
\begin{itemize}
  \item Local capacity in SED planning, budgeting and M&E as well as in other project areas (Reproductive Health, Education etc.) defined together with analysis and assessment
  \item Improved knowledge and skills of provincial, districts and commune level planners & decision makers in evidence-based and participatory planning and budgeting ensuring linkages of resource allocation with local priorities and needs
  \item Improved capacity of Peoples’ Councils’ members in overseeing the local SEDP process – planning & resource allocation and monitoring the implementation of the plan.
  \item Management of investment projects is gradually & systematically decentralized with increased ownership at the districts and communes
  \item Management of the provincial socio-economic data strengthened with improved system for collection and analyses, management and to increase access to the public in general
\end{itemize}$ |
| **Achievements** | A key component of the project concerns the strengthening of the Social and Economic Planning and budgeting processes$^{20}$.
Renewal of planning processes is supported as the old type of top-down planning is no longer considered to be able to meet the requirements concerned. It is a renovation process that starts on commune level and also includes district and provincial levels where plans are brought together in comprehensive district and province level plans. This project component focused on public resource management at sub-national level, tries to enhance a variety of aspects of the local planning and budgeting process, including enhancing $^{20}$ The part of the planning process considered concerns the allocation of the investment budget at the local level and does not cover the regular recurring costs of running the local administration. |
local level participation, information by various sources of data, and pro-poorness of results.

3.23 Focus so far has been on the development of socio-economic plans and budgets at commune and district level, enhancing the ways in which these are informed by local needs and priorities. Before project intervention, the planning and budgeting process had been characterised by a top-down approach, in which priorities and related budgets were identified on a national and provincial level for the district and commune and in which there was no direct grassroots participation. This meant that planning did relate to overall needs, but was not adapted to the specific needs and requirements on commune and district levels, and it did not inform and involve local authorities and community members in the planning process. The newly introduced planning approach takes a bottom up approach, in which planning and budgeting is done at the local level, by commune authorities and representatives of commune members, which plans in tum are sent to the district level, for aggregation in a district level plan. In this way the commune and district plans are better informed by local needs and priorities.

3.24 As part of the project existing capacities for planning and budgeting were assessed, making use of capacity assessment of local government in Kon Tum. A training package was developed and a manual on local level planning was published. A number of trainings and workshops was conducted in order to enhance knowledge and skills on SED planning and budgeting. Training included provincial, district and commune level staff members from selected Departments and Mass Organizations. Trainees were a combination of leaders from the various departments as well as technical staff on planning and finance from the same departments and organizations. The local level planning process was implemented in selected communes with the support of a facilitator, based on a model for pro-poor, objective based planning and budgeting.

Views on how Commune Level Plans differ from Plans developed beforehand

- Based on the local need and demand of people concerned
- The planning process means more participation of line agencies on district, commune and village level
- Plan based on more as well as more adequate data and information
- Plan more feasible
- Responsibilities for follow-up made explicit as part of the plan
- More transparency in the way in which priorities are identified and public resource spending prioritized
- People concerned see their own role and responsibilities in the formulation as well as implementation of the plan
- Input required for investment in terms of labor and material made clear

(Source: Interviews on provincial, district, commune and hamlet level in Kon Tum province and reports from selected communes)

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21 Institute of Economy and CSDP and UNDP, Report on Capacity Assessment of Local government of KonTum on planning development, 2007
22 This manual does include tools and techniques for mobilising people in the planning process mainly PRA (Planning Rapid Assessment) techniques which is used for supporting planners to mobilise collective opinions as well as common agreement of the different stakeholders on the plan content
3.25 In discussions with planners and decision-makers there proved to be substantial improvements in terms of knowledge and skills on provincial, district and commune levels concerned. Most of the staff showed an appreciation of the learning and in particular on commune and district level there was a high level of recognition amongst officials that the local level planning process had lead to better grounded plans, compared to the planning process beforehand.

3.26 Discussions with commune level authorities and members and analysis of one of the commune level plans developed through the new process showed that the new plan stood out from previous planning exercises in a variety of ways. The locally developed plan was considered to better reflect the actual needs and priorities of the commune. It also included responsibilities for implementation and follow-up as well as timing, which makes the plan a more useful tool for management. Moreover, the plan better reflects the full picture of potential resources available (including financial, human resources together with those from public administration reform).

3.27 Dak Hring, Dak Mar and Ngoc Reo communes have been requested by Dak Ha district People Committee to develop the commune SED plan for 2010 using the project supported commune level approach. The communes have sent their plans to the district's People’s Committee. As a result of the better awareness of cadres at the district as well as the commune levels, the relationships between both levels in SEDP planning and budgeting have been improved. District authorities were found to be more open to commune level planning processes which feed into district level plans, rather than providing them with fixed priorities from district level.

3.28 As part of the local SED planning and budgeting processes, management capacity of commune leaders and officials have been improved, including aspect of managing meetings at commune level, ways of prioritizing local needs and mobilising community resources.

3.29 DPI plans to issue a letter asking all communes of the two pilot districts to develop their SEDP 2011 according to the new methodology. This will be a means to pilot on commune as well as district level and will thus bring the process within the province on a new level. However, monitoring of the implementation would be required from PMB and UNDP as well as provision of support to address key constraints that would be identified.

3.30 When reviewing the newly developed commune plans with key cadres of the communes concerned, staff was not always able to explain the details of the plan, in particular the various tables that are included in the plans. With the plans being based on and containing a substantial amount of quantitative data, they are not always easy for local level staff, including commune cadres and village heads to understand and implement. Therefore it can be expected that support will be required from the project in this respect. This will need to be factored into the workplan for 2010.

3.31 Regarding strengthening provincial socio-economic data collection and analysis for informing socio-economic planning processes (the last output of the planning and budgeting component of the project) the activity on assessment of updating socio economic data for informing the provincial annual plan, which was planned for the third quarter of 2009, was delayed. In 2008 an M&E framework and guideline for the Kon Tum SEDP was developed. Moreover, two studies were conducted. One concerning a survey of business environment in Kon Tum province and the other meant to support the province in development of the Socio-Economic development strategy 2011-2020. At the time of the mission though the two studies were unfinished yet.

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23 The development plan for Dak Mar commune was approved on 25 Dec 2009.
Role of People Council

3.32 Staff members of the provincial level People’s Council attended training courses in 2007 which concerned planning and budgeting, budget allocation, review and appraisal. They learned ways to consult people in budget monitoring and decision-making as well as ways to allocate budget in a more detailed way, looking at results that need to be achieved through funds allocated. They were also taught to recognize the difference between expected and actual results, and learned to prioritize based on agreed objectives, and expected results, rather than spreading resources thinly as they used to do in the past, giving everyone a bit of ‘the pie’. Most of the Council members work part time and their qualifications are relatively low. With the limited resources for local investment some of them indicated that they have found it difficult to put their learning into practice.

Constraints faced

3.33 There have been certain limitations to the process of local level investment plans and budgets so far. Key weakness of the commune socio-economic plan for 2009 developed in a participatory way in Dak Hṛing commune of Dak Ha district was that so far it has actually not been implemented. The plan was shelved due to legal uncertainties about its status. This notwithstanding DPI's decision on application of the new planning procedures in the two project districts. Instead a plan developed making use of a top-down approach was used for implementation, which did not differ much from the plans beforehand. In this way the results achieved in Dak Hṛing were not used in practice and thus the considerable extra investment in terms of time and effort provided did not deliver results. On the one hand this is linked to the pilot character of the plan and the related uncertainty of its status. On the other hand the piloting should obviously not be limited to the development of the plan and include its implementation. This is though planned to happen in 2010 and 2011.

3.34 In certain respects building capacities without implementing the plan that was produced proved counterproductive, as commune level officials proved reluctant to develop the plan for the upcoming fiscal year, as they feared that the extra investment to be made might again not bear any practical results. Also in terms of credibility of local level planning, non-implementation of plans can have detrimental effects.

3.35 In Dak Ha commune of Tu Mo Rong district the situation was quite different. Here the plan developed concerned the coming 2010 fiscal year. On district level local officials had decided to include an additional two communes in the participatory

Commune Level Planning Process Technical Support Groups in Dak Ha District

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process. This showed a high level of commitment of the officials concerned to the local level planning and budgeting approach.

3.36 In Dak Mar commune of Dak Ha district, the commune also applied the new planning method for the formulation of their 2010 development plan. Though the process took considerably more time than usual, the result was considered substantially better compared to the past development plans. Dak Mar commune received an official letter from the district people committee which required it to apply the new method in the 2010 SED planning. The Commune Peoples’ Committee identified constraints faced in the process, including the lack of staff with planning capacities at the local level, the fact that not all relevant staff at the commune level received training and the limited participation of local people. 24 For an overview of constraints see the box below.

3.37 The planning process in communes visited focused on the district investment fund and did not necessarily include the funds from National Target Programmes spent within the district. The use of NTPs resources is included though in the participatory planning guidelines. Given that the budgets of NTPs on district level are usually much larger than the district investment funds, this would mean a substantial limitation to the effects that one can expect from the new planning process.

3.38 Another issue of concern includes the financial information used for the planning process. On district level half the budget is stable (recurrent costs) and half of it is based on ‘ask and receive’. The investment budget comes from the latter half and it is thus unclear at the start of the process which amount of financial resources will be available for investments. That can easily result in an unbalanced approach towards felt needs and priorities.

### Constraints regarding participatory planning and budgeting at local level

| i) | uncertainty about the legal aspects of the plans leading to non-implementation |
| ii) | limited financial resources for investment available in comparison with level of needs, amount of total available financial resources is not know at the time of the planning and budgeting process |
| iii) | lack of planning staff at commune level |
| iv) | not all commune relevant staffs got trained in the new methodology |
| v) | time available in practice for planning is short, about 1 month, which is not sufficient for implementing the new planning method in the right way |
| vi) | number and scope of meetings re. planning are limited, and participation from local residents is limited; |
| vii) | cost of implementing the methodology is relatively high, in terms of time as well as funds required |
| viii) | turn-over of staff members at the commune level |

Source: Discussion with stakeholders on commune level and report from Dak Mar commune

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3.39 Till now some pilot communes have been selected in each of the participating districts. With the local level plans forming the basis for a district level socio-economic development plan, this means that a district will not be able to take full advantage of commune level planning unless all communes participate and the results can be fed into a comprehensive district level plan, based on a planning process in all communes concerned. This would be the next level of piloting to include and the project is planning for this in its 2010 workplan. Moreover, actual implementation of newly developed plans needs to be included in the piloting process.

3.40 With the limitations in terms of implementation of the commune level plans it is too early a stage to say whether investment projects are gradually and systematically decentralized with increased ownership at district and commune levels. The local level planning process is a means to accomplish that objective, but it is not a sufficient condition and there appears to be a need to address other aspects, including the judicial aspects around the legal status of new local level plans that need to be tackled in order to realise this.

3.41 The new planning approach has its costs as it involves more human resources in the process. This also means that the actual planning process takes more time compared to the situation beforehand.

3.42 In addition to the work on commune and district level, the project has worked on provincial level, including the development of the new upcoming five year Socio-Economic development plan. This plan though was not yet available at the time of the review.

Monitoring

3.43 Monitoring activities of the enhanced planning and budgeting component of the project proved to be ad hoc and primarily focused on activities and their immediate outputs as well as the financial aspects of project implementation. Monitoring and quality control by the UN agencies is carried out through technical ‘spot check’ visits, through annual and quarterly work planning and reviews, TOR reviews, recruitment monitoring, closely working with related local partners and direct communication/discussion with national consultants/sub-contractors. Most of the monitoring appears to be focused on quality control and audit functions.

3.44 The credit to this outcome area of the project is that indicators have been formulated on outcome level, which is lacking in the other components of the project. Downside is though that there is no systematic data gathering in place concerning the outcome level indicators. Thus the project is not able to systematically assess whether outputs achieved are actually resulting in the outcome level changes that are desired at the end of the project. Thus for example the attendance of trainees is monitored while there is no systematic means in place to monitor whether trainees are actually applying their learnings. This leaves an important gap in terms of results based management and limits the data available to inform results based management of the component.

Options for Expansion

3.45 There would be multiple ways for expansion of the process of local level planning and budgeting; one in which the emphasis would be put on inclusion of all communes within the participating districts before scaling up to more districts within the province. Another way to go about it would be to include first all of the districts within the province with one or two communes per district, after which scaling up within each of the districts could take place. Given the importance of putting commune plans, that all have been developed applying the new approach, together on a district level, the first option of expansion seems preferable. Applying this approach in at least one district would allow to start applying the plans on commune
and district level in at least one district and thus to start piloting the actual development results of participatory planning on district as well as commune level.

3.46 The project seems to opt for a third approach with expansion to all communes in the two districts that the project is presently working in and to one commune of each of the remaining districts. In order for such a piloting approach to generate the required learning, monitoring systems need to be put in place that start capturing outcome level changes on commune and district levels.

Conclusion

3.47 Large part of the outputs of the enhanced planning and budgeting component of the project could be realised in particular those on the assessment of existing capacities in SED planning, improvement of knowledge and skills and improved capacity of people’s Councils’ members. Piloting of a new planning approach has been conducted in particular in terms of developing capacities for planning and budgeting resulting in plans that better reflect local needs and priorities. The improved plans are expected to be implemented in selected communes in 2010 and 2011. In this way the implementation of the plans will get included as part of the piloting of the project.

3.48 Three of the five outcome level indicators for this component could be partially realised. Several local leaders did have a clear vision on mid and longer term development of their district and province. Moreover, selected communes proved capable of preparing their own SED plans, though with substantial technical outside support. Overall the quality of the SEDP development process has been improved. Participation of local people in planning and budgeting on local level has remained limited. Two of the outcome level indicators, i.e. decentralisation of investments institutionalised and investment capital utilised effectively, have not been realised so far. These can be expected to be addressed through the actual implementation of the participatory developed SEDPs on various levels, which is planned for the second part of project implementation.

3.49 More work will be needed in the second part of the project on addressing enabling aspects of local level planning and budgeting, in particular the legal aspects around the developed plans and their implementation. Moreover, there is a need to enhance the monitoring of the project, in particular monitoring of outcome level indicators, which needs to be linked with monitoring of outputs. In this way, information on realisation of outputs and outcomes can be analysed and inform project management, an essential part of the pilot character of the project. It would be useful to seek linkage between enhancing project M&E systems with the work on strengthening provincial socio-economic data collection and analysis, which is meant to inform socio-economic planning processes.
Outcome 2: Improved Quality of Health Care Services

**Improved Quality of Health Care Services**

**Outcome**
Improved quality of health care services available, in general, for mothers, children and adolescents as well as pre-pregnant and pregnant women in the province with focus on ethnic minority and access to better quality health services including injury prevention and improved environment in health centers increased in the selected two districts of the province.

**Outputs**
- Improved knowledge and skills of provincial, districts and commune health professionals/workers to ensure provision of quality services and response in the area of reproductive health including maternal, child and adolescent health and injury prevention
- Improved services in the area of reproductive health, child health and nutrition as well as first aids, trauma care, emergency transportation and better environment in local health facilities available for access by mothers and pregnant women, children and adolescents from the project areas.

**Achievements**

3.50 The health component of the project includes training in reproductive and maternal health and child health care issues to health staff and training of health managers on service management on the level of the province, selected districts and communes. Moreover, training was provided to provincial level staff to provide technical assistance to lower levels. One of the trainings concerned village level health staff being trained in referral skills as to recognize risk signals in pregnant women. This in order to establish and maintain community-based referral teams that can help women to get quicker and safer access to health services in the nearest health facilities. A total of 15 mid-wives from minority background were trained in an 18 months programme, which was implemented partly in Tu Du maternal hospital in Ho Chi Minh City, and provided with on the job follow-up training in the district hospital. This in order to enhance access to safe motherhood services in remote areas in the relatively short term. Teachers in extracurricular activities were trained in Reproductive Health issues in order for them to include these issues in their extracurricular activities.

3.51 In addition, technical assistance is provided to health facilities and essential drugs and medical and other equipment is provided to provincial, district and commune level health centers. The provision of equipment included a total of seven ambulances in order to enable transportation from emergency cases from commune health stations to the district health centre and if needed further on to the provincial hospital in Kon Tum city. In terms of amount the medical equipment is considered substantial, covering in some cases up to half of the requirements of the facility. The support provided has been informed by a needs assessment that was conducted in Kon Tum Province, as part of a wider needs assessment in 7 provinces in which UNFPA works in Vietnam\(^{25}\).

3.52 The project is seen as having strengthened the capacity of health professionals and other individual staff members in terms of their knowledge and skills on reproductive, maternal and child health issues, accident prevention and environmental sanitation. Moreover, there has been created a pool of trained health care officers on the level of the province and districts that is involved in the training of health and medical workers on commune and hamlet level. Village level

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emergency units have been established and staff of emergency team in 5 hamlets has been trained. Commune leaders have been trained in reproductive health. There are a total of 200 village volunteers working in the health programme of which 30 from DakHa district have been trained.

3.53 The training approach that was used resulted in an increased attention to reproductive, maternal and child health issues and a more comprehensive approach to these in the project area. The inclusion of the Farmer’s Union in the dissemination of reproductive health issues can be considered a useful approach and the inclusion of men proved to be a relevant aspect.

3.54 Another important part of the health component has been the provision of equipments and to enhance the capacity of commune health stations to provide health care services in remote areas. Most of the equipment provided did fill existing gaps and was as such appreciated by the recipient health centres. Provision of health related equipment meant improvements in health facilities, supplementing the development of infrastructure in terms of clinics and hospitals by GOV.

3.55 One of the issues that the project attempts to address is the relatively high proportion of deliveries at home in the central highlands and to convince women to deliver in the maternity ward. In the new policy of the MoH each district hospital or district health care center is required to have a New born care Unit, in order to reduce the death rate of newly born babies and the project responds to this policy. Access was improved to higher quality local health services and midwives with an increasing number of deliveries made in health centres, in particular for ethnic minority women, who beforehand used to prefer to deliver at home.26

3.56 In some of the project interventions there remains a lack of responding to actual needs. Example is the construction of toilet facilities in Tu Mo Rong district as part of the health clinic, while existing toilets were already available in the immediately adjacent building on the compound of the local government but these were used as storage facilities rather than as toilets.

Constraints

3.57 In Dak Ha district two first aid emergency training was conducted but no emergency team had been established yet on the level of the district. This limited the use made of the knowledge provided. Moreover, there was a need for first aid toolkits. Training of 8 midwives in TMR in one batch instead of gradually left the area with a considerable reduced amount of midwives for an extended period of time.

3.58 In Dak Ha district doctors and nurses were trained but there was still a lack of rooms as the district hospital was under renovation and rooms were not available yet. Also in Tu Mo Rong the same situation was found, in which the district health center was being built / upgraded and the medical equipment provided was stored under less than ideal circumstances. A special medical chair was used as a chair at the meeting room table. Timing of provision of equipment proved less than optimal in these cases. Materials stored were obviously not yet used.

3.59 One of the weaknesses identified in terms of provision of equipment concerned the lack of management arrangements for the newly provided equipment. There were no clear rules for the use of ambulances and motorcycles, two items that are a considerable proportion of the equipment budget. Though the use of ambulances was recorded in a logbook, there was no clear monitoring system in place, through which use could be analyzed on an on-going basis.

3.60 In one of the districts, the newly provided ambulance did not fulfil the requirements of the staff and they therefore kept on using the ambulance that they already had.

26 As reported in meeting with DOH staff.
which provided a seat for a doctor or nurse as well as seating arrangement for relatives, something that the new ambulance lacked. A plastic chair was put in the new ambulance to make up for this lack of seating arrangements. The brancard had been replaced as it was considered too wide, not leaving enough space for health staff and relatives. Health staff mentioned that they had not been involved in the selection of the ambulance which resulted in the type of ambulance provided not fitting with the needs of the health team concerned. With the normal procedure being that the PMU sends a request for procurement to UNFPA the lack of communication in this case seems to be between the PMU and the project staff rather than with UNFPA.

3.61 Tendering process used for the procurement of equipment has not always been according to GOV procedures, an issue which returns in the yearly audit reports that make note of the bid assessment procedures of medical equipment as well as office equipment and motorcycles. This is a recurrent issue in the reports of 2007 and 2008.

3.62 There appears to be a project on herbal medicine by the Ministry of Health but the project does not seem to have established relationships in this respect and assessed what opportunities there are in terms of herbal medicine and its use in particular for ethnic minority groups in the province. This could be a useful option to further explore.

3.63 A variety of donors is active in health in the province including ADB, JICA, and EU. Therefore there is a need to assess overlap and complementarity in programming as well as the absorption capacity of DOH in the province and on local levels.

Conclusion

3.64 Outputs have been partially reached so far. Knowledge and skills of health professionals on provincial, district and commune levels prove to have improved. Ambulances made health facilities more accessible to people in remote areas and local referral systems for women have been put in place. Access to a higher quality local health services and midwives has improved, with an increasing number of deliveries made in health centres, in particular for ethnic minority women, who beforehand used to prefer to deliver at home. Procurement and bidding procedures as well as management arrangements concerning use of equipment need to be improved.

3.65 A variety of constraints as identified above have limited the extent of improved quality of services delivered in the area of reproductive health, and child and adolescent health. Partly this is for reasons beyond the control of the project and its management board, like the hospitals that are being renovated. The project though needs to identify these kind of constraints through its monitoring system and respond to these by means of project management.

3.66 Bid Invitation Document, as well as bid assessment rules and procedures need to be made in accordance with GOV prevailing rules and regulations. Also management arrangements concerning use of equipment can be improved.

3.67 Regarding the outcome level, it can be stated that quality and availability of health care services in particular for mother, children and adolescents and pre-pregnant and pregnant women in the province has been improved though to a limited extent in the targeted districts and communes. Given the constraints mentioned above, some results have remained below expectation though can (partly) be expected to materialize at a later stage.

3.68 Opportunities for the health programming include support to the nutrition survey of the GOV National Target Program on Preventive actions for Children Malnutrition in order to assess aspects of malnutrition in the province and to develop
recommendations to address those. Moreover, GOV has developed a Program for development of a Commune Health Model which includes a garden with traditional medicinal plants, a health related activity which could be considered for support by the project in particular in communes with high level of minority population.
Outcome 3: Child Friendly Primary and Early Childhood Education

Child Friendly Primary and Early Childhood Education

Outcome
Child-Friendly Primary Education and Early Childhood Education promoted in general in the province; and children and young people from the project districts and communes have access to quality education and learning opportunities in child-safe schools, kindergartens and safe communities having better environment with regard to access by safe water & sanitation and injury prevention

Outputs
- Improved knowledge and skills of education officials at provincial & district level as well teachers from the project districts and communes on planning and management of Child-Friendly Learning Environment, Child Safe schools, improve school environment and Early Childhood Education
- Gender equitable child-friendly and child-safe schools and classes established and sustained in the two project districts and safe environment including injury prevention promoted within the catchment community

Achievements
3.69 For the education component the Kon Tum project operates in a total of 10 communes of Dak Ha and Tu Mo Rong districts, i.e. five in each of the selected districts. In total it concerns 10 nursery schools (with 3,051 children), 13 primary schools (with a total of 6,086 schooling children) and 10 secondary schools (with a total of 3,780 schooling children). That makes a total of 33 schools with 12,917 children.

3.70 As part of the project 7 training workshops were conducted for educators on provincial, district and commune levels, 10 for students and parents and another 11 trainings for nursery and primary school teachers. Trainings included the concept of a child friendly school, planning and management of child safe schools, creating a child-friendly learning environment, child centred learning, multi grade teaching, making toys and learning aids from locally available materials, injury prevention, hygiene and sanitation promotion and inclusion of life skills into the curriculum. Training was provided to teachers, school management/education officers as well as parents. As part of the programme a study tour was organized for participants to learn from child friendly schools in other provinces in Vietnam.

3.71 The project moreover supported an improved schooling environment which meant investment in water and sanitation facilities, fencing and gates, improvement of play yards and investment in school kitchens. A total of 9 nursery schools and 4 primary schools have been supported so far in this respect with 7 of the total of 13 completed and the remainder 6 still under implementation. Teaching aids and tools for teachers and students were provided to schools and mobile book shelves provided for nursery and primary schools. Equipment was provided to the Education Department including laptop, LCD Projector and digital camera. There was limited attention to higher education with investment in an IT programme. As part of the IBCC programme there was promotion of school attendance to parents and children, in particular those from ethnic minority groups as well as to community members and local authorities. Community members and local authorities started to take interest in encouraging children to attend classes.

3.72 WATSAN support was delivered through the Provincial Center for Rural Water Supply, Sanitation and Environment. The Centre prepares an annual plan which is submitted to the PMB who in turn submits it to UNICEF. As part of the WATSAN component, 72 officers were trained in water sample analysis and capacity strengthening in planning. Water supply was provided to 6 schools and one clinic.
Office equipment including computers was received in the two districts and the center itself.27 In the beginning, the design for sanitation and water supply to school provided by the Center was not considered appropriate and there has been a lack of communication observed from the Water Centre, though these issues have been addresses.

3.73 The Centre also supports sanitation for communities, Dak Ha and Dak Na communes of TMR district and with development of strategic plan on water supply and rural sanitation for the province till 2015 with orientation to 2020. As model for community based management of the facilities after construction the model of ADB Central region Livelihood Improvement Project is proposed of community based management for water supply facilities in the rural area. It remains unclear why the Center does not integrate this model into the project support activities for maintenance of improved facilities.

3.74 The schools visited by the team had benefitted from the project in terms of teachers and management staff trained, school yards being upgraded and sanitation facilities provided. The primary schools had increased enrollment and retention rates and teachers proved to have benefitted from training, making use of local materials for instruction tools and applying learning on multi-grade teaching. A clear increase in attention to child friendly aspects of schooling by teachers and parents was found in the areas visited by the review team as well as improved knowledge and skills of education officials and teachers regarding child friendly approaches in primary as well as early childhood education.

3.75 Trainings and workshops have enhanced the knowledge and skills of teachers and school management in the area. This includes the way that teachers can combine multi level classes in one class room and knowledge on a child centred teaching approach in a child-friendly environment and the ways that teacher could use local materials to make education toys and tools. Parents obtained an enhanced knowledge of education laws and the rights of children. The project moreover paid attention to improving sanitary knowledge of parents and enhanced the sanitary skills of parents and children. Most stakeholders involved consider there to be a positive change in the way in which they look at bringing up children and value school attendance of children.

3.76 Overall participants consider the quality of education services to have been improved with both local authorities and parents taking more interest in education of their children and the importance of it. The support focuses on quality of education, including training in child friendly approaches and creating a safe school environment, which complements other donor and GOV investment and construction programmes. For the school visited the enrollment rates have improved over the project period. Overall the drop-out rates for ethnic minority pupils, though reduced, remains slightly higher than those for other pupils. For Dak Ha district, the enrollment rate of pupils increased to 95% in the previous year to 97% in the present year. For TMR district, on average, the enrollment of pupils increased from 94 to 96 %. However, for ethnic children, during harvest time and traditional festivals, enrolment rates increased from 75 to 85%.28

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27 In the project Audit reports of 2007 and 2008 it is mentioned that some office equipments (notebooks) provided to the Centre were not in use.
Constraints

3.77 During school visits it was observed that in various instances the sanitation facilities were partly broken and not yet repaired and overall they were not well cleaned and maintained and no soap for washing hands was available at any one of them.

3.78 It was found that child friendly principles had not necessarily been taken up beyond the direct project reach, with a school fence in one of the more remotely located schools of Dak Ha commune made of barbed wire. This was done with GOV funds in 2008, i.e. within the project period. Reason for the use of barbed wire was its inexpensiveness. In former days the fence would have been made of bamboo, which was said to be less available at this time.

3.79 Constraints faced include the slow process in which plans submitted by the Schools and DOET were approved. With UNICEF’s regulation that advances need to be returned if not fully spent within 6 months it proved difficult to meet this requirement given the transportation needs to communes in remote areas in particular during the rainy season when unpaved roads become difficult to access with heavy vehicles, which increases total time needed for improvements made. Training courses were conducted by national consultants and their timing depended much on the availability of these consultants. In various cases materials for use by pupils arrived after the start of the school year which was less than optimal in terms of timing.

3.80 The evidence of actual observable changes in class rooms proved limited during the visits of the MTR team. Use of locally available materials was limited and not always directly available in the class room, but in a locker elsewhere in the school. Materials developed by teachers moreover proved all from the same kind of material and little variation was observed. The observations show the need for monitoring of the effects of trainings as these effects cannot necessarily be taken for granted and the project needs to provide additional support if issues are not taken up, addressing the constraints faced and facilitating change processes.

Conclusion

3.81 Outputs could be partly realised in terms of Child friendly primary and early childhood education. Knowledge and skills of teachers, school management and parents was found to have increased in the target area and there is much more of a focus on child-oriented learning on commune, district and provincial levels. Also the school environment has been improved in selected schools in the target areas and injury prevention promoted. Issues of management and maintenance of sanitary facilities needs to be improved in order for them to be functional and for the outputs to be fully realised.

3.82 In terms of the outcome of children having access to quality education, the project is starting to realise this in targeted schools in the selected communes in which the project works. Additional effort though is needed in terms of monitoring of behavioural changes of teachers, school management and parents in order to see the extent to which outcomes are being reached and to inform additional activities to further enhance the outputs and outcomes in this respect. Moreover, the efforts to advocating a child-friendly school focus in regular GOV spending can be reinforced.
Outcome 4: Enhancing Child Protection

**Child Protection**

**Outcome**
System developed and network strengthened to tackle issues related to child protection, especially children in need of special protection and provincial capacity enhanced to address Children and AIDS issues.

**Outputs**
- Child Protection System developed in the province
- Capacity of child protection workers at different levels (provincial, district, commune) and collaborators at village level enhanced and their network strengthened
- Children and AIDS issue incorporated in the Provincial Plan, mapping undertaken and gaps identified for support
- Development of Commune consultation point for Child Protection
- Development of a model for clubs on Child Protection in the commune

**Achievements**

3.83 The work in the child protection outcome area of the project includes the development and enhancement of community based local networks for child protection, supported by a network of child protection officers, clubs managed by WU and YU and a provincial child protection system led by DOLISA. Children and their needs in terms of protection were mapped and gaps identified. The project makes use of trainings in social work and on child protection issues, including awareness raising on issues concerned regarding children with disabilities as well as disadvantaged children and those considered as at risk. Thirteen training courses and workshops for 490 trainees at province, district and commune levels were organized. With the support of Mass Organisations child clubs have been organized. Two counseling places were created. A network of volunteers has been established. The social skills of these volunteers are built in the trainings that the project delivers. The networks effectively cover the various hamlets within a commune. Moreover, the planning capacity on provincial and district level in terms of child protection is enhanced. The child protection unit of DOLISA has been provided with office equipment and with 4 motorbikes for the unit and the two districts. At commune level and for counseling places raincoats, communication bags and materials for communication activities were provided.

3.84 A monitoring system has been set up in which a file is made for each of the children which are taken up as a case for action. Volunteers follow up with the children concerned on a regular basis and the monitoring system is managed by the Commune Board. Reports from hamlet and commune level are sent to DOLISA where data are aggregated on a provincial level. The network does also engage in preventive work, including informing people about risks concerned, regularly training the network staff, providing training in life skills, and club activities including for problematic children that get supported through peer support groups. The volunteers and their networks form an important link between the local communities and the institutions on district and provincial level.

3.85 The network tries to include normal (regular) children, children in special condition (i.e. poor and ‘at risk’ children) and disadvantaged children (ones that have been abused and children that have violated the law). The approach is relatively labour intensive.

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29 Volunteers get a stipend of VND 50,000 per month while staff working on child protection issues at commune level get a stipend of VND 200,000 per month.
intensive in terms of setting up the system, though this is less the case once the system is operational.

3.86 Knowledge and skills of volunteers and of staff of the Department (DOLISA) and of the pilot districts and communes has been enhanced and a network has been created and is being maintained to identify and address issues of child protection on the commune and hamlet level. In the first part of the project period the child protection activities actively managed to protect 30 children and support a further 20 cases. Issues addressed include the high drop-out rate of children, violations of the law by children, child labor (in particular in agriculture, including picking of coffee beans, cassava harvesting and rubber tapping), incidents of rape of children and enhancement of safety around the house including road accidents, drowning and children falling from high levels. The networks are supported and operational in five communes. In two district a steering board for child protection was established with participation of 8 members from different areas and mass origination (including vice chairman of CPC, school heads, police, Women Union, Youth Union)

3.87 It is suggested that in Kon Tum with high level of ethnic minority people, risks for children are relatively high with limitation of awareness and knowledge of adults, children often working as laborers in field and child labor in coffee and rubber farms. Nonetheless in the whole of Kon Tum province there are presently only 5 of total 97 communes that have a board and network supported by the project. It is suggested by DOLISA that this support need to expand in other areas of the province, particularly at districts along the road N 14.

3.88 The network and how it is set-up and maintained and identifies and follows up on concrete issues of child protection is a useful model and will be relevant for further development of child protection issues in Kon Tum province and other areas of Vietnam. There is a need to document the model and the experiences obtained so far as well as the further development of the system and its expansion, in order to enhance learning, to inform project management decision-making around this outcome area and to inform similar initiatives in Vietnam.

Constraints

3.89 The capacity of local level people, including the volunteers is relatively low and training including many of the messages delivered, need to be repeated over time. Coverage is still limited with five out of a total of 97 communes covered so far. The initiative still much depends on the support from the project and cannot yet be considered sustainable. This needs to be addressed in the remainder of the project period and ways need to be identified in which the initiative could be mainstreamed making use of GOV funding

3.90 In this respect there is a need to enhance the work on child protection system through coordination with the GOV pilot programme of MOLISA for child protection in seven pilot provinces. Kon Tum is one of the 7 provinces/cities selected by the Central Government/MOLISA as pilot place for implementing community based child protection network; Different from the other 6 provinces/cities, Kon Tum province is implementing this network under the Kon Tum Joint Project. It is important to feed the experiences from the other 6 provinces/cities in the pilot activities on child protection in Kon Tum province as well as to use the Kon Tum experience to inform other initiatives as mentioned above.

3.91 The issues of child protection and the support required still needs to be incorporated into the provincial plan that is being developed. At the same time, DOLISA is proposing a plan/project on protection and caring for children in special difficulties in the Province for 2010-215 to the Kon Tum Joint project. This proposal covers the whole of the province but with a specific focus in 6 geographical areas i.e. Kon Tum,
Kon Plong, Tu Mo Rong, Dak Glei, Dak To, and Ngoc Hoi. The proposed project period is 6 years with budget of around USD 320 000.30

Conclusions

3.92 A relatively comprehensive child protection system has been developed in pilot communes with links to district and provincial levels and clubs managed by WU and YU, which was informed by an assessment undertaken and gaps identified. Capacity of child protection workers on provincial, district and commune level has been improved, including hamlet level volunteers. Networks have been strengthened and the system is operational. As the Provincial SEDP was not yet finalized at the time of the field mission, it was not clear to what extent child protection issues are incorporated into this plan.

3.93 The child protection system has started to identify children at risk and has managed to protect and support multiple cases. A comprehensive monitoring system has been put in place to track children that receive support. The reach of the child protection activities is still relatively limited. The system developed can serve as a model to be expanded in other parts of the province and to inform other child protection initiatives in Vietnam. For this to happen it will be important to capture experiences and learning so far as well as of the further development and expansion of the system and document these.

30 DOLISA proposal for Protection and Caring to children in Special difficulties of KonTum Province, 2010-2015, dated Sept 2009
Outcome 5: Integrated Behavioural Change Communication

Integrated Behavioural Change Communication (IBCC)

Outcome
Capacity enhanced among service providers at the provincial, district and commune level on Integrated Behavioural Change Communication (IBCC) skills and awareness raised among community, in general, and parents and caretakers, in particular, from the project districts on Early Childhood Education, Reproductive and Child Health, Sanitation and Hygiene, injury prevention and protection including HIV/AIDS.

Outputs
- Knowledge, attitudes and practice (KAP) of communities in the area of health, education, sanitation, protection and prevention assessed.
- Integrated Behavioural Change Communication Plan (IBCC) developed, tested and refined.
- Capacity of service providers, mass organizations and local media enhanced to carry out IBCC related activities at the community level.
- Awareness raised in communities targeting children, adolescents, parents/caretakers, village leaders, teachers, social workers with key messages on Early Childhood Development, health, education, safe water, sanitation, hygiene, protection and injury prevention.

Achievements
3.94 IBCC activities are implemented by Mass organizations including Women’s Union, Youth Union, Farmers’ Union and Centre for Reproductive Health Communication and various media organizations. The staff of these mass organizations is provided with training in communication skills and the organizations are provided with communication and office equipment in order to enhance their capacity to convey messages on a variety of issues to target populations, including reproductive health issues for adolescents and young people, the need for schooling and a child-friendly approach and issues of child protection. Members of senior management of the Mass Organisations have been participating in the training on participatory planning and thus are relatively well aware of those aspects of the project.

3.95 Moreover, on provincial television cartoon films and short movies have been broadcasted with messages on injury prevention amongst children. Messages in ethnic minority languages are shown on provincial television stations quarterly.

3.96 The Women’s Union in Kon tum province organized six clubs for WATSAN in three communes of Dak Ha district and three communes of Tu Mo Rong district. They also established 5 clubs for Healthy Life in 5 communes of Dak Ha District. All these clubs are mixed in terms of ethnicity of the members which are selected from women of child bearing age. The clubs on Healthy Life issues in Tu Mo Rong were organized by the Youth Union. They organize the Healthy Life clubs in TMR district through local volunteers with weekly meetings and other activities. Members here are all from Xedang ethnicity. The membership of the clubs in Tu Mo Rong district is still quite limited, which the leadership of the Youth Union officials consider due to the relative higher level of geographical isolation of communes and hamlets in Tu Mo Rong. WU and YU normally combine the members of the ten clubs for training purposes.

3.97 Clubs of the WU are often related to their Credit and Savings groups and focus on women’s participation. Clubs though organize a larger amount of members in particular young women in reproductive age. Credit groups are smaller entities, focused on credit and savings and income generating activities. At times they invite men to participate in order to call upon their responsibilities regarding issues of women’s health, child health, reproductive health and other social issues. IBCC Materials that the WU develops uses many pictures. In terms of communication they
normally go through group leaders. At the time of the mission visit some materials for reproductive health were being prepared.

3.98 The Women’s Union runs a total of 97 credit and savings groups with women in the province, outside of the project. With the support of UNFPA, they combine activities on small credit and savings with dissemination of information on family related issues including reproductive health and family planning. In this way UNFPA supports the WU to work with existing women credit and savings groups and insert topics on safe motherhood and reproductive and child health into their meetings. This has started to result in raised levels of awareness and commitment to reducing the number of children and aspects of safe motherhood and child protection amongst members concerned.

3.99 Some of the improvements that the Women’s Union sees as a result of its activities in healthy life clubs as part of the project is that an increasing amount of husband’s from ethnic minorities is bringing their wives to health centers for pregnancy examination. More men moreover share in the housework chores, in particular when their wife is pregnant or shortly after delivery. They are in the process of using monitoring tools provided by UNFPA to assess some of the changes that their activities create in people’s lives on a quarterly basis. Till present much of the monitoring depends on verbal and written ad hoc reports.

3.100 In WATSAN clubs organized by WU the members come together monthly and discuss issue of water supply and sanitation including ways to get clean water and how to clean the hamlet. The use of water from fixed water points is promoted rather than use of water from natural sources and the building of latrines is promoted, for which the members can obtain a slab while providing other materials and labor themselves.

3.101 Youth Union makes use of 4 main means including youth cafe, interactive theatre, youth clubs and peer education to get their messages across to male and female youth. The national level of the YU has become skilled in these approaches and trains YU staff at provincial levels. The Youth Cafe consists of a corner with dissemination materials on maternal and reproductive health issues and the organisation of events at which information concerned is disseminated. This form is especially meant to target out of school youth. Youth Union also disseminates information on reproductive health and related issues through bookcases with materials that are placed in selected locations; in particular café’s frequented by youth.

3.102 Both the WU and the YU are using the models learned in the project communes to apply the same models in communes in which the project is not working. In this way there is a multiplier effect. One of the constraints though is that there are fewer resources available in non-project communes to cover the costs involved. This results in the activities in the project communes being more regular than the ones outside the project targeted communes. The WU also makes use of the learning in terms of reproductive health and HIV/AIDS obtained through project activities to inform their larger amount of credit and savings groups with discussion on social issues.

3.103 UNFPA, making use of the same approach they apply to the WU, also supports the Farmer’s Union with information dissemination on reproductive health and family planning to their members. As part of the project they have started to establish groups which gather regularly and work on agricultural, credit extension as well as reproductive health related issues. Through the project they have been able to improve their knowledge and skills in the latter aspects. The FU works in three communes in Dak Ha and in two communes in Tu Mo Rong district. The FU reaches out to men (70%) as well as to women (30%). They pay attention to issues of reproductive health, which has been neglected amongst men in their view in the
past. Previously it was taboo to discuss relationships between men and women, while that has changed now and in the groups use of contraceptives and other issues are discussed. They have to address cultural issues, like the previous prohibition for men to enter the house during labor of their wife. They reported that now more and more men supporting taking their wife to the clinic for delivery. Presentations at meetings are usually conducted in Vietnamese while the discussion after the presentation is done in two languages. Because of the effectiveness of the group work the FU wants to expand the work to other communes.

3.104 The three mass organizations have their own mandate and operate relatively independent of one another. WU and YU do cooperate on specific issues. The WU and YU organized a forum for club members to discuss social issues and to have adolescents provide recommendations in order to have their voice heard on these issues. Due to the storm no 9 that hit the region the forum had to be postponed and was re-scheduled to take place in November. There is no clear coordination or cooperation yet of the FU with the WU and YU. In most instances, the hamlets that the FU covers at the moment are not covered by the WU or YU.

3.105 All clubs are supported by UNICEF. The training activities on reproductive health issues and materials are supported by UNPFA. Additionally, UNPFA partly supports setting up youth communication in Cafe’s with main investment from YU. UNFPA moreover supports the integration of reproductive health issues in women savings and credit groups organized by the WU.

3.106 Staff of the Centre of Reproductive Health Communication has been trained on skills in developing communication materials so that the province is able to adapt/develop communication materials relevant to the local needs in term of knowledge level, value and culture and ethnicity. Moreover, communication equipment and materials were provided to them. Based on the financial and technical support received the staff have learned aspects of IBCC as well as been able to develop their competencies in implementing their learnings. This is regarded as different from the materials that were usually provided by MOH, which were normally photocopied or otherwise multiplied and provided to the communities. At the office level the centre established a task working group including staff from planning, technical and finance divisions in order to support and implement the work. This has moreover led to enhanced interrelation amongst the various parts of the organisation.

3.107 Additionally, UNICEF and UNFPA support the province to develop a comprehensive IBCC plan of Action with a focus on early childhood development, reproductive and child health, sanitation and hygiene, injury prevention and protection including HIV/AIDS. A number of workshops have been conducted which have resulted in the establishment of a strategic plan and action plan on IBCC for DOH for 2009-2010.

Constraints

3.108 One of the constraints mentioned in terms of organizing clubs is the relative isolation of several of the communes in Dak Ha district as well as in several of the communes of Tu Mo Rong district. After the storm no 9 accessibility decreased due to landslides.

3.109 IBCC materials are generic materials as these are considered to be issue rather than user specific. Language in all of the materials is Vietnamese, including those meant for distribution amongst target population. Mixed impression in terms of use of pictures in materials from Kinh and ethnic background, in various instances pictures are adapted to reflect ethnic minority people and situations. The materials are though not adapted to specific ethnic groups.

3.110 Monitoring is mainly based on activities and their outputs, looking at whether activities are implemented and whether these result in the required immediate outputs. This is done on an ad hoc rather than a systematic basis.
Conclusions

3.111 Capacities of Women’s Union, Youth Union and Farmers’ Union and of the Reproductive Health communication centre have been enhanced to carry out IBCC activities, with a focus on the community level. In particular capacities were increased through training, support in the development and use of communication materials and the provision of dissemination equipment. A variety of dissemination materials have been developed. Women’s Union and Youth Union have cooperated in various instances and combine training events. There appears to be opportunity to enhance cooperation with the FU, who have their own specific entry point. As a result of the activities awareness has started to be raised in the various communities that have been targeted in the project area. There is a need to monitor attitudinal as well as behavioural changes in a systematic way in order to inform programme management and decision-making.
### Outcome 6: Learning and Sharing

<table>
<thead>
<tr>
<th>Learning and Sharing</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outcome</strong></td>
</tr>
<tr>
<td>Experiences/lessons learned from the project implementation shared with relevant audience; models of integrated services in projects areas evaluated and documented for wider dissemination and replication within and outside Kon Tum province.</td>
</tr>
<tr>
<td><strong>Outputs</strong></td>
</tr>
<tr>
<td>Project info (implementation results, experiences and lessons learnt, research reports) shared / disseminated to relevant audiences in Vietnam</td>
</tr>
<tr>
<td>Mid-term and end-project evaluations undertaken, documented and shared</td>
</tr>
</tbody>
</table>

### Achievements

3.112 Project information is regularly shared and updated in the province’s website which can be found at [www.ipckontum.gov.vn](http://www.ipckontum.gov.vn), which site at the time of the field work was updated till 26/6/2009. A slide show, video clip and leaflets have been produced to share and disseminate the project’s activities and outputs.

3.113 Though the various implementing agencies do provide regular reports, those are often activity and output oriented and do not necessarily include the documentation of experiences and the identification of lessons learned. This has limited the wider aspects of organisational learning so far. Monitoring of outcome level changes is relatively weak within the project which means that project activities and outputs cannot be linked to outcome level changes as no systematic data on the later are made available. This further limits the learning that the project at present can generate to inform project management as well as future similar programming in the Central Highland or elsewhere in Vietnam.

3.114 As indicted in the Results Framework, replicable models for integrated programming including the delivery of integrated services are expected to be developed through the project. Outcome 6 includes these models, their documentation, evaluation and dissemination and replication within and outside of Kon Tum province. Earlier it was argued that piloting in the project consists of ‘implementation of existing models’ localizing them to the specific context of Kon Tum and the One UN Project. In order to assess results and to generate lessons learned there is a need for a fair amount of reliable M&E data, in particular on outcome level changes. The outcome of the project that proved best set up for learning and development of a model is the work on child protection, in which the community based approach applied and the monitoring system set up provide respectively the approach that underlies the model as well as the means for learning.

3.115 The Results framework refers to models for integrated programming and to models of integrated service delivery. This implies building models around how the various parts of the project interrelate, including the aspects of Integrated Services in Health, Education and Child Protection. In the daily practice of the project the work on the various outcome areas is implemented by different Departments, Mass Organizations and agencies. The various outcome areas that the project deals with are implemented relatively independent from one another. The IBCC work is an exception in this respect, as it is intended to be integrated and relates in its contents to the other outcome areas. Here also the Mass organizations, in particular the WU and YU do work together in implementing part of the project activities.
Conclusions

3.116 In the various outcome areas that the project focuses on a range of experiences has been obtained based on implementation of the various project activities. Though the various implementing agencies do provide regular reports, these do not necessarily include the documentation of experiences and the identification of lessons learned. This has limited the wider aspects of organisational learning so far.

3.117 The development of models has been limited and child protection seems to be in the best position to show results in this respect. The lack of monitoring of outcome level changes hampers the opportunities for learning and means that identification of what works cannot be based on a solid set of performance information.

Overall Aspects of Effectiveness

3.118 When looking at the various outcomes of the project as will be done below for each of the individual outcome areas, it becomes clear many of the project outputs\(^3\), i.e. the changes that result immediately from activities implemented are being realised and that the project has made good progress in this respect. In various instances this is starting to lead to changes on outcome\(^2\) levels in terms of changes in behaviours and systemic level changes. That means that the project is realising important immediate effects of the activities implemented and that this is beginning to resort effect on outcome level changes, i.e. the behavioural and systemic changes, needed to realise the goal of the project.

3.119 On the one hand this pattern of change with many output realised and outcomes starting to be realised, relates to the timing of the review. With the evaluation being mid-term in the life of the project life, one cannot expect all outcomes to be realized yet. On the other hand, during the assessment some constraints were identified that limit the realisation of outcome level changes. Part of these constraints is specific to the various components of the projects and outcomes concerned and will be discussed in the review of each of the main project outcome areas below. Another part of these constraints run across the various project outcome areas. These constraints relate to the approach to capacity development applied in the project, in particular the relative importance of targeting changes on individual, organisational and enabling environment level over the course of the project (see box below for a description of these three levels).

<table>
<thead>
<tr>
<th>Individual Capacity</th>
<th>Organizational Capacity</th>
<th>Enabling Environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refers to the skills, experience and knowledge that are vested in people.</td>
<td>Comprises the internal policies, arrangements, procedures and frameworks that allow an organization to operate and deliver on its mandate, and that enable the coming together of individual capacities to work together and achieve goals.</td>
<td>Describes the broader system within which individuals and organizations function and that facilitates or hampers their existence and performance.</td>
</tr>
</tbody>
</table>

Three Levels of Capacity Development


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\(^3\) The OECD DAC defines outputs as “Products, capital goods and services which result from a development intervention”. OECD DAC Glossary of Key Terms in Evaluation and Results Based Management. Paris, 2002.

\(^2\) The OECD DAC defines outcomes as “The likely or achieved short-term and medium-term effects of an intervention’s outputs”. Ibid.

\(^3\) Details in this respect are presented in each of the outcome areas discussed below.
Developing individual capacities through training

3.120 Training has been an important means to develop capacity in the project. For an overview of trainings conducted see annex 8. Training approach was characterized by active participation in group discussions, making presentations, and with the clear objective to improve daily work. This approach was appreciated by many trainees across the project components and many felt that they had learned from the training on an individual level. In selecting participants, many of the trainings have included staff on a variety of levels involved in the change process. For example for child-friendly schooling in addition to teachers, school management and parents were included. In health trainings, health practitioners as well as managers of health facilities and health officials on provincial and district level have been included in the trainings. This means that a variety of actors related to the change process in the various project components have been made aware of the change needed and have been able to enhance their knowledge regarding the issues concerned.

3.121 Overall there is a recognition amongst the various stakeholders that training has resulted in improved knowledge and skills within the various outcome areas that the project has been working on. In various instances training also resulted in changes in how trainees went about their work. Just to mention a few examples: the learnings from the training on participatory planning were practiced in the development of participatory commune level development plans, which were substantially better in terms of quality compared to previous plans. Training on child-friendly schools contributed to much more attention to schooling with a focus on children and their needs and requirements.

3.122 On the other hand there have been limitations to the use of learnings from trainings in the workplace. Some of the trainees reported on their learning to team members and others in their organization, though this was not the case for all trainees. In several of the trainings the relationship between what was learned and how this related to the participants’ work environment after returning to their organization, was not made explicit. In these cases, it was very much left up to the trainee to judge the importance of applying learnings in their daily work and to find out how to do this in practice. For several of the participants following a training course is considered more a personal opportunity and responsibility rather than one of a team, meant to inform change processes within the organization. Some of the trainees preferred trainings for which they would receive certificates in order to improve their career perspective. Though these are legitimate aspirations, it also shows that staff may not necessarily be focused on using learning of training in order to change the way they work and aspects of their present work environment.

Developing Capacities on Organizational level

3.123 In addition to the capacities developed on an individual level through training, a variety of organisational level capacity changes has been included in the project. Training of trainers has resulted in a body of trainers being available. With a relative high staff turn-over though, capacity built is likely to subside gradually. DPI’s/PPC’s planning guidelines and procedures have been established and new tasks and functions have been assigned to staff members. Support has moreover been provided to designing planning procedures and processes applying a local level and evidence based approach to planning and support and advocacy has been provided to policy makers, local leaders, people councils in districts and communes as well as to local people to agree on implementation of piloting the new planning and budgeting process. Regarding Strengthening Provincial SEDP Planning and Budgeting, a planning Task Force is intended to be established by the Provincial People committee which include officials from the province’s relevant offices; the Task Force will be assigned with specific responsibilities and tasks concerning the development of planning and budgeting capacity in the province.
3.124 In the health outcome area of the project training was provided to provincial staff in order for them to be able to provide technical support to district level staff that is trained as part of the project. Also the provision of essential drugs and medical equipment and the establishment of community based health referral teams can be considered as part of enhancing the organisational capacity level.

3.125 As part of the education outcome area various aspects around child-friendly schools were put into place. In addition, the Provincial Centre for Rural Water Supply also supported the development of a strategic plan on water supply and rural sanitation for the province till 2015. In the work on child protection a network of village level volunteers was established focusing on issues of child protection and the network was coordinated and supported by DOLISA who set up a comprehensive monitoring system.

**Developing an Enabling Environment**

3.126 A third type of activities concerns creating an enabling environment for change. Various study tours were conducted in order to introduce the leadership of the Province and the various Departments to aspects of participatory, pro-poor and results based planning and related aspects of socio-economic development. Several persons commented that the participation in these study tours had changed the attitudes of the officials participating and had enhanced project implementation. In the health outcome area village leaders were trained in reproductive health issues, in particular to get their support for the project activities in this respect.

3.127 When comparing the balance regarding the relative importance that the project has put on the various levels for capacity development it is clear that most emphasis has been put on the individual staff level, and least at the enabling environment level.

**Analysis**

3.128 Important results could be realised in terms of staff of a variety of agencies on commune, district and provincial level being trained with trained staff starting to apply their learnings. The effort of the project in this respect is substantial. Results have also been achieved on organisational level, with several systemic changes across the outcome areas of the project. Nonetheless, overall there has been less attention to this level of change compared to the individual level trainings. Least of the project activities have focused on the third level of capacity development, the enabling environment i.e. the elements beyond the participating agencies that can facilitate or hamper their performance. Though some achievements have been recorded on this level, this level has been the least addressed so far in the project.

3.129 Despite the training conducted and some of the organisational changes implemented, in various instances outcome level changes met with a variety of constraints. Examples of this are the people council members who indicated that budget allocation in practice did not change yet dramatically towards objective oriented planning as they had learned in their training course, because the resources remained the same and the incentive system was not changed to trigger a change in allocation of funds, resulting in spreading resources thin like before. Maternal health issues learned during the training by doctors and the delivery of maternal health related equipment did not necessarily result in better access to maternal health as some of the clinics and hospitals did not have sufficient rooms to treat patients and materials were temporarily stored until more space would be made available in the clinic. Teachers had started implementing the learnings on child friendly schools, including the use of local materials for instruction though did this in quite a limited way, with most of them using only the examples provided in the training and with limited results in terms of changes in the classroom.

3.130 All these examples show that learnings could not necessarily be applied in practice. Constraints concerned include the lack of incentives to apply learnings and the
absence of systems that reward persons that do change their behavior and take up new ways of doing their work. Constraints also relate to the wider organisational culture including types of behaviour valued within organisations. Constraints include the lack of changes in the wider enabling environment that would allow and support to implement what one has learned. These latter include for instance the participatory planning process for which there appeared to be no sufficient legal status yet in the province. The process is seen to need to be either made compulsory, or as others imply, there is a need for a legal framework for the process. Thus, though activities as such might have been relevant they could not necessarily make the expected outcome level change happen so far due to a variety of constraints.

3.131 In order to address these constraints there is a need for the project in the second part of its implementation to work more on organisational and enabling environment levels of capacity development in order to address the issues faced in reaching outcomes in the various outcome areas on which the project works.

Aspects of Change Management

3.132 In processes of capacity development two parts of the change management process usually need to be in place. On the one hand this concerns putting the required pieces and processes in place to make the system work in a new way. The project has worked considerably on this aspect in terms of for example putting a manual in place to inform the participatory planning and budgeting process, providing equipment for provincial, district and commune clinics and improving school yards and providing water and sanitation facilities in several schools in the project area. The project also conducted training, putting in place the required knowledge and skills in individual staff members in the various outcome areas concerned.

Ways to support Change Management

- Putting pieces and processes in place to make a system work in a new way
- Providing support to the transition process for stakeholders concerned.

3.133 A second aspect of support in change processes concerns support to the transition process itself, supporting an organization in the management of the changes to get from the present to the aspired state of the organization. This also concerns how the various parts that need to be in place are interrelated and how changes required need to be phased time wise in order to be realistic and do-able, making use of human, financial as well as technical resources.

3.134 An overview of the support that the project has provided so far in terms of the levels of capacity development addressed and aspects of change management included is provided in table 4 below. Support so far has focused much on individual level support with additional attention to organizational aspects. It has supported much more getting the requirements in place and has paid much less attention to supporting the change process itself in the various organizations. In order for capacity development to succeed all these aspects need to be in place. Thus the project will need to pay more attention to aspects of an enabling environment and to the transition process on the individual, organizational and enabling environment levels.
Table 4: Types of support provided by project on various levels of Capacity Development

<table>
<thead>
<tr>
<th></th>
<th>Pieces and processes put in place to make the system work</th>
<th>Support provided to the Transition Process for stakeholders concerned</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>Substantially provided</td>
<td>Partly provided</td>
</tr>
<tr>
<td>Organisational</td>
<td>Substantially provided</td>
<td>Hardly provided</td>
</tr>
<tr>
<td>Enabling Environment</td>
<td>Partly provided</td>
<td>Hardly provided</td>
</tr>
</tbody>
</table>

**Monitoring of Change**

3.135 With the lack of indicators on the level of most of the outcome areas in the project results framework, project monitoring has focused mostly on activities and their immediate outputs. It has moreover fulfilled more of a control and audit function. The annual work planning is thus informed by the execution of activities and realisation of outputs rather than by information concerning the extent to which outcomes have been reached. This means that the PMB and the UN agencies lack robust means to make a realistic assessment regarding what type of capacity building activities is required regarding each of the outcome areas that the project focuses on. There is a need to put such a system in place to inform management decision making concerning the approach on capacity development to take in the second part of the project in each of the outcome areas concerned.
EFFICIENCY

Project Budget and Expenditures

3.136 The total budget of the project amounts to 5.5 million USD. Details on the project budget are provided in table 5 below. The expected expenditure includes 50% on equipment and supplies, 25% on capacity building including workshops, trainings and exchange visits, 15% on technical support and 10% on management and operational costs (see table 6 below).

Table 5: Details on Project Budget

<table>
<thead>
<tr>
<th>Agency/Funds</th>
<th>Counter Part Fund (US$)</th>
<th>UN Regular / Core Fund (US$)</th>
<th>*UN Other / Non-Core Fund (US$)</th>
<th>Total Funds per Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>GOV</td>
<td>500,000</td>
<td>-</td>
<td>-</td>
<td>500,000</td>
</tr>
<tr>
<td>UNDP</td>
<td>-</td>
<td>700,000</td>
<td>400,000</td>
<td>1,100,000</td>
</tr>
<tr>
<td>UNFPA</td>
<td>-</td>
<td>1,000,100</td>
<td>478,900</td>
<td>1,479,000</td>
</tr>
<tr>
<td>UNICEF</td>
<td>-</td>
<td>215,000</td>
<td>2,206,000</td>
<td>2,421,000</td>
</tr>
<tr>
<td>Total</td>
<td>500,000</td>
<td>1,915,100</td>
<td>3,084,900</td>
<td>5,500,000</td>
</tr>
</tbody>
</table>

3.137 Most of the project expenses within the province are made on advances received through the PMB, based on annual and quarterly work planning for which the UN agencies, implementing partners and the PMB work closely together. When actual expenditures are compared to planned expenses on average 45% has been spent. The percentages vary for the agencies, with UNDP at 52% (lowest) and UNICEF at 84% (highest). A comparison of disbursement against the budget shows that on average so far 45% of the budget has been spent. Lowest burning rate concerns Counterpart funds with 31%. Highest proportion of budget is spent by UNICEF, which has spent 50% so far. For details see table 7 below.

Table 6: Breakdown of Project Budget into different Categories/Types of Support

<table>
<thead>
<tr>
<th>Kind of Support</th>
<th>Approximate Percentage of Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>Technical Support</td>
<td>15%</td>
</tr>
<tr>
<td>Supplies/Equipment/Facility</td>
<td>50%</td>
</tr>
<tr>
<td>Staff Capacity Building : Training, Workshops, Exchange Visits</td>
<td>25%</td>
</tr>
<tr>
<td>Management/Operational Costs (Project Staffing, M&amp;E, GMS etc)</td>
<td>10%</td>
</tr>
</tbody>
</table>


3.138 The MTR team tried to make a breakdown of actual project expenses so far per main expense categories like those presented in table 2. This information though was not readily available. Therefore the team tried to prepare an overview itself
which only partly proved successful due to lack of data available to the team. In
annex 7 an overview per expense categories is included for the quarters two and
three of year 2009. Though incomplete the overview shows the relevance of making
such a table in terms of disbursement, which gives the opportunity to further analyse
expenses made so far. Together with performance data on output and outcome
level results and change processes concerned these will provide important means to
inform on-going project management from a results-based perspective.

Table 7: Budget, Receipts and Disbursements of Agencies Concerned in USD* till end 2009

<table>
<thead>
<tr>
<th>Items</th>
<th>Counterpart fund</th>
<th>UNDP</th>
<th>UNICEF</th>
<th>UNFPA</th>
<th>Accumulated Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Budget</td>
<td>500,000</td>
<td>1,100,000</td>
<td>2,421,000</td>
<td>1,479,000</td>
<td>5,500,000</td>
</tr>
<tr>
<td>Planned Expenses</td>
<td>255,556</td>
<td>885,000</td>
<td>1,442,200</td>
<td>1,125,463</td>
<td>3,708,219</td>
</tr>
<tr>
<td>Disbursement</td>
<td>155,757</td>
<td>457,509</td>
<td>1,205,570</td>
<td>637,293</td>
<td>2,456,129</td>
</tr>
<tr>
<td>Disbursement/Planned (%)</td>
<td>61</td>
<td>52</td>
<td>84</td>
<td>57</td>
<td>66</td>
</tr>
<tr>
<td>Disbursement/Budget (%)</td>
<td>31</td>
<td>42</td>
<td>50</td>
<td>43</td>
<td>45</td>
</tr>
</tbody>
</table>

* For calculations in this table use has been made of an exchange rate of VND 18,000 per USD
Source: Figures are obtained from the Project Financial System

Transaction Costs

3.139 Important aspect of enhancing aid effectiveness is a reduction of transaction cost.
With an increased effectiveness as an important driver of the One UN initiative in
Vietnam, it is relevant to look at transaction costs in the Kon Tum Joint Project.

3.140 For UN agencies the picture is mixed. In the short term costs have increased. This
concerns the coordination required amongst the partners in the implementation of
the project. It has been a substantial effort to harmonise project implementation
systems including financial systems and procedures. For this to happen each of the
organisations senior management needed to be involved in the approval, meaning a
substantial effort for one project34. All these issues have increased the required
number of meetings for the three agencies concerned for the project and its
operation. As one of the staff members involved said: “it takes always more time in
the joint project to decide on something”. For a comparison of recruitment of a staff
member in one of the UNFPA supported projects with recruitment for the UN Joint
Project in Kon Tum see the box below.

3.141 However, in the longer term for the UN agencies transaction costs have been
reduced especially with the agencies taking up more joint ways of working, including
joint audit, joint spot-checks, joint monitoring, and joint annual planning.

34 In this respect the effort that staff put into this kind of efforts regarding the One UN initiative need to be rewarded within
their respective organisations. Management of human resources though is considered to be lagging behind the larger
One UN reform in Vietnam. UNFPA is one of the agencies that has incorporated efforts of UN integration in its staff
2009).
3.142 The picture regarding transaction costs for the province is more positive. Transaction costs of the Joint Project are overall reduced. In the joint project the province needed to establish a single Project Management Board, while with three parties working separately they would usually have installed three PMBs or alternatively one PMB that was responsible for three separate projects. With the UN agencies increasingly working together and implementing joint visits and missions, the transaction costs for the province have further reduced over the project implementation period.

3.143 On the other hand though, there is also a ‘price’ to be paid. With the three UN agencies in one single project decision-making processes take considerably longer than when the province would deal with just a single agency. In practice, moreover, they still at times need to deal with three agencies as the financial procedures of each agency though harmonized, still differ to a certain degree. Also in terms of reporting there are still differences across the three agencies.

3.144 From a provincial perspective a pooled fund of the start of the Joint Project would have been much more cost saving. The UN agencies did not choose for this option as they feared that constraints in the regulations of the selected management organization could, if applied to other organizations, mean constraints in implementation and they did not want to run this risk. Funding through the One UN fund and the use of the HACT modality has resolved various of the financial issues.

Conclusions

3.145 On average 51% of planned expenses have actually been spent. The figures show an increase when disbursement is compared with the funds received. Compared to receipts 70 % of funds were disbursed. A comparison with the budget shows that on average so far 30% of the budget has been spent. Lowest burning rate concerns UNDP with a rate of 25%. Highest proportion of budget is spent by UNICEF, which has disbursed 50 % so far. The lack of breakdown of the project expenses for main expense categories means that it is difficult to link financial management with aspects of managing for results.

3.146 With the UN agencies implementing a joint project there is increased attention to issues of replication and overlap, in particular those between UNICEF and UNFPA. The organisations have agreed on a work division in the Kon Tum Joint project making use of agencies’ comparative advantage in deciding who takes on what roles, which has resulted in avoidance of duplication and has enhanced efficiency. Thus there is added efficiency in terms of more coordination and reduced level of overlap and duplication.

3.147 In terms of transaction costs the joint UN character of the project has resulted in a substantial reduction in the costs concerned. This in the first place for the province, that has established one rather than three project management boards. With many missions conducted jointly also in this respect transaction costs have been reduced.
For the UN agencies transaction costs have been reduced over the longer term of the project, with an additional raisin of costs at the start of the project when they needed to harmonize their financial and administrative procedures.

3.148 In the project an on the Job training and coaching model and Training of Trainers approach was used in which staff on various levels were trained that in turn conducted training within their department or organization. This training approach proved an efficient way of working though with the high level of staff turnover in many government agencies capacity can be expected to dissipate relatively fast.
IMPACT

3.149 With the three UN agencies joining their efforts in this Joint Project gain for the province is that multiple sectors are served at the same time in the same project areas. Moreover, there is a reduction in overlap amongst the agencies in the joint project, and they are able to make more use of their respective comparative advantages. The province recognizes this added value of putting the various project components lead by the various UN agencies together as this is the kind of multiple needs that is relevant at the local level. Though synergy as such is not necessarily optimal and cross sector initiatives are limited, in terms of effects the support does come together on local levels. There is nonetheless room to further improve the synergies across the various components of the project.

3.150 With the lack of outcome level indicators in five of the six outcome areas and systematic collection of data concerned it is difficult to assess the extent to which outcomes achieved have contributed, or are likely to contribute towards more longer term impact level changes. Moreover, there are no indicators formulated on the level of the goal of the project, which also limit the way in which impact can be assessed. Though one could take for example the MDIs to fill this role, even then, with a lack of systematic outcome level measurements it is difficult to clearly establish the contribution of the project towards achievement of the MDIs in Kon Tum province.

3.151 There is an urgent need to agree on outcome level indicators for five of the total of six outcome areas of the project. Once these indicators have been agreed, the project will need to start gathering systematically data on these indicators as soon as possible. This will enable to have a view on the extent to which outcome level changes are occurring in order to inform project management decision making throughout the remainder of the project cycle and thus enable managing for results within the project. Moreover, this will enhance the evaluability of the project at the end of the project period. In order to enable monitoring to happen, existing M&E capacities will need to be assessed in the various implementing agencies and gaps in capacities will need to be addressed through implementation of an M&E capacity building plan.

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Outcome level indicators are only provided for the outcome area of Strengthened Provincial SEDP Planning and Budgeting. No systematic data gathering has though taken place for these indicators.
SUSTAINABILITY

Capacity development

3.152 Capacity development activities have focused much on the building of individual staff member capacities and to a lesser extent on organisational levels. Organisational aspects that have been less addressed include incentive and reward systems within the various participating agencies. On the other hand not many of the project activities so far have focused on enhancing an enabling environment for the project outcomes to be realised. This has limited the results achieved so far and also limits the sustainability of changes. The enabling environment will need to be more of a focus in the second part of the project, based on identification of key constraints through output and outcome level monitoring.

3.153 The use of existing credit groups by the women’s union in its dissemination activities on safe motherhood and reproductive health enhanced aspects of sustainability. Given that these groups are likely to continue beyond the life of the project, also the discussion of safe motherhood and reproductive health related issues is likely to sustain. These groups though would need to seek their own technical inputs beyond the life of the project in terms of reproductive health and safe motherhood issues.

3.154 Models used in the various outcome areas are relatively high cost. The participatory planning and budgeting work for example requires substantial human resource inputs from a variety of stakeholders concerned. Also the work on child protection is relatively time consuming, requiring high amounts of human resources. These issues limit the chance of sustainability of changes after the project will phase out in particular in poor and remote communities and will need to be addressed in the remainder of the project period.

3.155 In the project budget allocation, there is quite a large portion of budget for equipment. This could potentially raise issues of maintenance, ones equipment has been transferred as there is often a lack of budget in the various Departments on Provincial and District level for maintenance of equipment and there is usually no special line item on maintenance and repair. Without this issue tackled much of the equipment once transferred will run the risk of not being functional within a short time span.

3.156 Children protection network at commune and levels and clubs from WU, YU and FU cannot be sustained without the monthly financial support provided in terms of a bonus of about 80,000 VND/month for village and 220,000 VND for commune level volunteers.
PROCESS ISSUES

Project Management

3.157 A project management board (PMB) was set up for the management of the Kon Tum Joint project by the People's Committee of Kon Tum province in their decision no 770 dated 05/05/2007. The PMB was set up with one Project Director, two Vice-Directors and one Project Manager, a project accountant and a project assistant. Moreover Temporary Advisers were hired for specific technical support issues. Originally there was one project accountant but given the workload of financial accounting in the project and the differences in procedures amongst the three participating UN agencies, two additional accountants were hired in April 2009. In November 2009 a Project Coordinator was hired in order to provide on-going technical support to the project. In February 2010 however, the Project Coordinator resigned, which leaves the project without continuous internal technical support. (see figure 1 for an overview of staffing structure of the PMB).

Figure 1: Staffing Structure of Project Management Board

3.158 PMB and implementing agencies got support on financial management matters. HACT training and procurement law training have been provided to the PMB and relevant staff at implementing agencies and SPIU level at the beginning of the project. Moreover, training was provided in financial management making use of the new EU/UN cost norm at the beginning of 2009.

3.159 The situation at the start of the project was not an easy one, with the PMB having relatively little experience with international projects and having to deal with the first UN joint project in Vietnam. This has led to a steep learning curve in various respects and at times still proves a challenge. Agreement on standard procedures amongst UN agencies and PMB was reached in 2008. What is not yet there though is a manual for management and the PMB regards this as a most urgent issue.
3.160 In the first project year UN agencies have at times implemented activities without notifying the PMB. On the other hand, for advice on health and education related issues some of the project implementing agencies have gone directly to the Project Officers of UNFPA and UNICEF rather than to the Management Board, as they did not have the sector specific technical expertise. Agencies concerned agree that informing the PMB has increased in the last year and with the newly appointed project coordinator the capacity of the PMB is expanded in order for them to play their coordinating role.

3.161 A Project Steering Committee was set up by the Provincial People’s Committee through decision no 619 dated 26/06/08. The Steering Committee consists of a total of ten members, headed by the Vice Chair of the PPC and with representation the DPC chairpersons of the two target districts and the following technical Departments: DPI, DARD, DOET, DOF, DOH, DOHA, and DOLISA. The PSC has convened only once as a whole committee. The requirements are for six monthly Steering Committee meetings to be held, according to the PMB regulations.

3.162 Each of the participating UN agencies has a Programme Officer based in Hanoi who manages the project on a day to day basis for each of the agencies concerned. The Programme Officers travel regularly to the province for annual and quarterly planning meetings and for project monitoring purposes. Each of them has also other projects to manage for its organisation. In terms of daily communication with the PMB the POs heavily rely on telephone and e-mails. Following up on project activities and their implementation prove quite a challenge from a distance. POs have in practice been involved a lot in implementation with much less attention to bigger picture issues. Relations between UN agencies and province / PMB are felt to have improved substantially since mid-2008.

3.163 The financial and technical support flows between UN agencies, PMB and Implementing Partners are shown in figure 2 below. Funds flow through the Project Management Board, but technical support can go directly from each of the UN agencies to the project implementing partners. That also goes for the layer beneath the implementing partners, where there are various Sub-Project Implementing Units. On the one hand this concerns SPIUs on the level of the district. These units are multi-sectoral and district specific and depend for their funding on the PMB while they can get direct technical support from UN agencies as well as from implementing partners. Other SPIUs are Department specific and manage project activities of the Department concerned.

3.164 The Audit reports of consecutive years, the project progress reports and discussions with key stakeholders have shown pertinent issues that still need to be addressed. The most important ones include:

- Supply of equipment, materials and office inputs are usually not in time and no notice is provided to implementing agencies (in particular for DOH equipment)
- Procedures of plan approvals and advance transfers for quarterly activities are often late
- From the viewpoint of the implementing parties there is no clear financial management regulation in existence between focal agency (Department level) and lower level implementing agencies (under the management of a Department), which is considered to be an important reason for the slow process of approval of workplans and transfer of advances, which affects project implementation.
- Mistakes in bidding procedures as in hiring of consultants and procurement of equipment.

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36 Decision 108, dated 19/11/2008 by the Project Director
37 Project Report for first six months of 2009, date 29 June 2009
UNICEF staff sometimes worked directly with implementing agencies on work plan and budget adjustments without information to the PMB. There is also mention of transference of goods directly to implementing agencies without notice to the PMB. Parties have started to address this issue and the coordination is considered to have improved over time.

**Figure 2: Relationships between UN agencies, PMB and Implementing Partners**

![Relationships Diagram]

3.165 The management set-up of the project with the project director from DPI and the project vice-directors from DOET and DOH respectively has created a situation in which the three main outcome areas targeted by the project are implemented separately, without much horizontal coordination or learning across the Departments involved. Project management is further compartmentalised through the SPIUs, which follow the division along the Departmental and agency boundaries of the GOV on provincial and district level. In this way the existing division amongst Departments and agencies on provincial and district levels is replicated within the project. This does not leave much space for horizontal learning across the various Departments and agencies on integrated development aspects. This is a major disadvantage for a project with a focus on models for integrated service-delivery. There is a need for a focused horizontal approach within the project. The district level SPIU as well as the Mass Organizations could provide a useful entry-point for this and the PMB would need to play an enabling role in this respect.

**Monitoring using the Project Results Framework**

3.166 The design of the project has been relatively flexible and open with the Detailed Project Outline that does not provide a lot of specifics compared to the complexity of the project. That means that the detailed planning needs to take place during the implementation of the project in terms work planning. In practice this has been done in the annual and quarterly work plan meetings.

3.167 The Detailed Project Outline of the Kon Tum Joint Project contains a results framework. This framework identifies the overall project results as well as six outcomes that contribute to this overall result. For each of the outcomes a series of

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38 Project Report for first six months of 2009, dated 29 June 2009
39 Audit Report 2008
outputs have been identified. Only for the first outcome have outcome level indicators been identified. The other five outcomes in the framework lack indicators on the level of the outcome. The indicators that are present in the results framework are mostly on output level. In practice the results framework of the project was found not to be used to inform project management decision-making and most of the project staff proved not familiar with the framework and its application.

3.168 With the lack of indicators on the level of most of the outcome areas, project monitoring has focused mostly on activities and their immediate outputs. This has been done in a decentralised way and dependant much on the existing information gathering within the implementing agencies. This means that monitoring data relate to what the various implementing agencies were recording already and are not necessarily tailored to the project’s needs. Data that are being gathered by various stakeholders have not been brought together on the level of the project. There was no Management Information System with the monitoring data of the project so far available. This means that data available in the various agencies have not been analyzed on the level of the project. In terms of M&E much has depended on existing capacities in monitoring of the various implementing agencies and opportunities for M&E capacity enhancement were not taken up in any substantial way. This has amongst others resulted in a lack of performance information on outcome level available in a timely way to PMB to inform annual and quarterly planning processes. This limits the opportunities to assess what works and what does not work in terms of activities and outputs leading to outcome level changes, measured systematically through assessment of selected indicators. It also limits the extent to which the project will be able to draw conclusions on its piloting aspects and support learnings with robust data on outcome level changes.

3.169 Partly UN agencies, including UNFPA have been integrating their activities in Kon Tum in their wider M&E framework. This has not necessarily helped the project in terms of building its M&E system based on enhanced capacities of the participating implementing agencies. Much of the reporting follows the line of the UN agencies and the components of the project. There is a lack of cross-sectoral data on the level of the districts concerned. In general, there is a lack of monitoring data, even on the level of whether water systems installed still work and whether equipment is being used, let alone on the level of more systemic outcomes being realised.

Financial Management

3.170 For its financial management the project makes use of the Vietnamese administrative Accounting Policy40. Due to the fact that the project is funded by UN agencies the project management board can also make use of other forms of accounting documents to match up with the UN agencies management requirements. These latter were quite different for the different UN agencies though over the life of the project so far, UNDP, UNICEF and UNFPA have been working on harmonization of their financial management procedures in the project. This has resulted in a much more harmonized system, though differences between the agencies remain.

3.171 The governing mechanism for the project has been the Memorandum of Understanding between the three agencies, signed in March 2007. Under this MoU a mixed funding modality was agreed between the parties, in which pass through and parallel funding were combined. By March 2008 though, when the One Plan fund Mobilization and Allocation Committee became operational within the wider One UN initiative in Vietnam, the three agencies agreed to make use of the One UN Fund for financing the Joint Project in Kon Tum. The old MoU was dissolved and

40 As issued in Decision No. 19 / 2006 / QD-BTC dated 30/03/2006 by the Minister of Finance.
from then onwards only parallel funding was applied with the funds following the Harmonized Cash Transfer (HACT) modality.

Conclusions

3.172 A Project Management Board was set up and members of the Board received training and support to perform their functions. Over time various consultants have provided support to the PMB. Given the complexity of the project and its implementation, in November 2009 a full time project coordinator was appointed, meant to provide on-going technical support to the project. With the resignation of the coordinator a gap in technical support emerges, which needs to be filled in the short as well as the longer term. This is essential to ascertain that the project does not only produce its outputs, but will be able to reach its outcomes in the various outcome areas concerned.

3.173 A project Steering Committee was set-up headed by the Provincial People Committee. The Steering Committee convened once. With the project entering its second phase and a variety of critical decisions to be made it would be useful for the Committee to meet and to address the issues concerned.

3.174 Some of the pertinent issues of audit reports that recur in several of the project audits will need to be addressed including procedures for supply of equipment, procedures for plan approvals and advance transfers, the lack of a clear financial management regulation between focal agencies and lower level implementing agencies and following guidelines in bidding procedures.

3.175 With the organization of the project following the division of Provincial Departments there is a need for horizontal learning across the various Departments on provincial and district level and across the various project outcome areas.

3.176 The results framework of the project lacks indicators on the level of the outcomes in five of the six outcome areas that the project addresses. There is a need to update the results framework and to include indicators on outcome level and through the use of a participatory approach enhance the ownership of the framework by stakeholders concerned. Though monitoring is taking place, much of it is activity and output oriented. Outcome level monitoring data from various Departments are not brought together on the level of the project and are thus not available in a useful way to the project. To ensure the realisation of outcomes in the second part of the project period a results based monitoring systems needs to be put in place, making use of existing capacities and bringing information together on the level of the project in a timely manner.

3.177 Financial management has been ruled by both the Vietnamese administrative Accounting policy and the UN accounting system. Over time the UN agencies have harmonized their requirements and procedures for financial management, which has enhanced efficiency of project implementation.
4 CONCLUSIONS

4.1 **Relevance:** Overall the project and its components can be considered as relevant. This in terms of alignment with GOV policies and reform agendas as well as in terms of mandates of the UN agencies involved and the One UN plan. Also when considering response to local needs the relevance was found to be high, both in terms of local authorities who can obtain the means for improving planning and budgeting and capacities concerning basic service delivery as well as in terms of local populations, who can enhance their say in prioritisation of investment funds and can obtain improved access to quality basic services.

4.2 The project has been poverty oriented with Kon Tum as one of the poorest provinces at the time of project design. With the fast economic development in the province this is changing and the poverty focus of the project will need to be realised increasingly within the province itself, to which the project needs to further adapt.

4.3 Relevance of the project can be further increased through geographical focus of the project to poor and remote areas, and ensuring that the resources for NTPs are included in the planning process as prescribed in the planning manual. As the first joint UN project, the project is pioneering both in terms of financial and administrative management as well as in programmatic terms. On both fronts important experiences have been obtained and lessons learned. The model chosen for the joint project, basically around coordination, is suited for the outcomes that the project tries to achieve.

**Effectiveness**

4.4 **Outcome 1: Strengthened Provincial SEDP Planning and Budgeting.** Large part of the outputs of this outcome area could be realised in particular those on the assessment of existing capacities in SED planning, improvement of knowledge and skills and improved capacity of people’s Councils’ members. Piloting of local level planning has been conducted in particular in terms of developing capacities for commune level planning and budgeting. Plans using the new methodology are expected to be implemented in 2010 and 2011.

4.5 Three of the five outcome level indicators for this component could be partially realised. Several local leaders did have a clear vision on mid and longer term development of their district and province. Moreover, communes proved capable of preparing their own SED plans, though with technical outside support. Overall the quality of the SEDP development process on local level has been improved. The remaining two outcome level indicators, i.e. decentralisation of investments institutionalised and investment capital utilised effectively, have not been realised so far. These can be addressed through the actual implementation of the local developed SEDPs on commune and district levels, which is planned for the second part of project implementation.

4.6 More work will be needed in the second part of the project on addressing enabling aspects of local level planning and budgeting, in particular the legal aspects around the commune level plans and their implementation. Moreover, there is a need to enhance the monitoring of the project, in particular monitoring of outcome level indicators. When linked to monitoring data of outputs, information on realisation of both outputs and outcomes can be analysed to inform project management. It would be useful to seek linkage between enhancing project M&E systems with the work on strengthening provincial socio-economic data collection and analysis which is meant to inform socio-economic planning processes.
4.7 **Outcome 2: Improved Quality of Health Care Services.** Outputs in this outcome area have been partially achieved. Knowledge and skills of health professionals on provincial, district and commune levels have improved. Given the constraints mentioned this has not yet always resulted in improved quality of services delivered in the area of reproductive health, and child and adolescent health. Improved services have become available to a limited extent.

4.8 Regarding the outcome it can be stated that quality and availability of health care services in particular for mother, children and adolescents and pre-pregnant and pregnant women in the province has been improved to a limited extent in the targeted districts and communes. Constraints faced are partly beyond the control of the project and the PMB. The project though needs to identify these kind of constraints through its monitoring system and work on organisational issues and aspects of an enabling environment to attempt to address these issues directly or indirectly.

4.9 **Outcome 3: Child Friendly Primary and Early Childhood Education.** Outputs for this outcome area could be partly realised in terms of Child friendly primary and early childhood education. Knowledge and skills of teachers, school management and parents have increased in the target area and there is much more of a focus on child-oriented learning on commune, district and provincial levels. Also the school environment has been improved in selected schools in the target areas and injury prevention promoted. Issues of maintenance and cleaning of sanitary facilities needs to be improved in order for them to be functional and for the outputs to be fully realised. Monitoring needs to include these kind of output level issues.

4.10 In terms of the outcome of children having access to quality education, the project is starting to realise this in targeted schools in the selected communes in which the project works. Additional effort though is needed in terms of monitoring of behavioural changes of teachers, school management and parents in order to see the extent to which outcomes are being realised and to inform additional activities to further enhance the outputs and outcomes in this respect. Moreover, the efforts to advocate a child-friendly school focus in regular GOV spending can be reinforced.

4.11 **Outcome 4: Enhancing Child Protection.** A relatively comprehensive child protection system has been developed in pilot communes with links to district and provincial levels which was informed by an assessment undertaken and gaps identified. Capacity of child protection workers on provincial, district and commune level has been improved, including hamlet level volunteers. Networks have been strengthened and the system is operational. As the Provincial SEDP was not yet finalized at the time of the field mission, it was not clear to what extent child protection issues are incorporated into this plan.

4.12 The child protection system has started to identify children at risk and has managed to protect and support multiple cases. A comprehensive monitoring system has been put in place to track children that receive support. The reach of the child protection activities is still relatively limited. The system developed can serve as a model to be expanded in other parts of the province and to inform other child protection initiatives in Vietnam. For this to happen it will be important to capture experiences and learning so far as well as of the further development and expansion of the system and document these.

4.13 **Outcome 5: Integrated Behavioural Change Communication.** Capacities of Women's Union, Youth Union and Farmers' Union and of the Reproductive Health communication centre have been enhanced to carry out IBCC activities, with a focus on the community level. In particular capacities were increased through training, support in the development and use of communication materials and the provision of dissemination equipment. A variety of dissemination materials have been developed. Women’s Union and Youth Union have cooperated in various instances
and combine training events. There appears to be opportunity to enhance cooperation with the FU, who have their own specific entry point. As a result of the activities awareness has started to be raised in the various communities that have been targeted in the project area. There is a need to monitor these changes in a systematic way in order to inform programming decision-making.

4.14 **Outcome 6: Learning and Sharing.** In the various outcome areas that the project focuses on a range of experiences has been obtained based on implementation of the various project activities. Though the various implementing agencies do provide regular reports, these do not necessarily include the documentation of experiences and the identification of lessons learned. This has limited the wider aspects of organisational learning so far.

4.15 The development of models has been limited and child protection seems to be in the best position to show results in this respect. The lack of monitoring of outcome level changes hampers the opportunities for learning and means that identification of what works cannot be based on a solid set of performance information.

4.16 In terms of **overall effectiveness** the project has started to produce important outputs in the various outcome areas that the project works on. Moreover, some of the outcomes start to be realised across the various outcome areas. Given the timing of the review at mid-term of the project, outcomes cannot yet be expected to have been fully reached. Emphasis of the project in terms of building capacities so far has been on individual and organizational level changes with less focus on aspects of an enabling environment, the wider level changes beyond the participating organizations that need to enable the outcomes that the project wants to achieve. Moreover, the project so far has focused more on putting requirements in place for changes to happen and has put less emphasis on providing support to the transition process itself for stakeholders concerned, supporting the change process from the present to the new stage. The project will need to enhance its focus in these areas in the second part of the project period, in order to facilitate change processes and to capitalize on the work done so far.

4.17 **M&E:** There is a lack of systematic monitoring taking place on the realisation of outcome level changes concerned and data so far are not brought together on the level of the project. Thus there is a lack of robust information on results that can inform project management and that can enable the various stakeholders to manage for results, assessing whether outcome level changes are occurring and using this information to guide project implementation. Management of the project therefore remains merely activity and output orientated. The lack of monitoring of outcome level indicators moreover limits the capacity of the project to pilot and develop models for integrated service delivery. With the lack of data on outcome level it will be difficult to show what kind of interventions work better and the extent to which interventions are successful. This will seriously limit the amount of learning that can be drawn from the project. There is a need to put a light but robust M&E system in place to inform management decision making on the level of realisation of outcome level changes. This system needs to inform the approach on capacity development to take in the second part of the project in each of the outcome areas concerned.

4.18 **Efficiency:** On average 66% of planned expenses have actually been realised on average. A comparison of disbursements with the budget shows that on average so far 45% of the project budget has been spent. Lowest burning rate concerns Counterpart fund with 31%. Highest proportion of budget spent is from UNICEF, which has disbursed 50% of budget so far. The lack of breakdown of the project expenses for main expense categories means that it is difficult to link financial management with aspects of managing for development results.

4.19 **Transaction Costs:** The Kon Tum Joint Project is part of the One UN initiative which aims to support Vietnam in a more effective and efficient way to address its
present and future challenges. The jointness of the project, with three UN agencies cooperating in a single project has overall reduced transaction costs for the province. On the other hand, transaction costs for UN agencies have been initially enhanced though reduced over time. Decision-making processes have normally taken much more time than usual. Increased harmonization of financial and project management requirements and procedures have enhanced UN capacity in Vietnam to deliver as one. In terms of synergy between the project activities of the three agencies there is room for improvement.

1.1 **Impact**: With the three UN agencies joining their efforts in this Joint Project benefit for the province is that multiple sectors are served at the same time in the same project areas. The province recognizes this added value of putting the various project components together as this is addressing multiple needs relevant at the local level. The convergence of support starts to take effect locally and is likely to enhance impact for project participants.

4.20 With the lack of indicators on the level of the goal of the project as well as on most of the outcomes it is difficult to assess to impact achieved so far as well as the contribution of the project. It is also relatively early to look at impact level changes after a period of two year. There is a need to address the lack of indicators in particular on the level of most of the project outcomes. This needs to go hand in hand with revisiting the results framework of the project and increasing M&E capacities of the PMB and the implementing agencies, building on existing capacities. In this way the evaluability of the project would also be enhanced.

4.21 **Sustainability**: Capacity development has focused in particular on building individual staff capacities and be it to a lesser extent, on organisational level changes. It has focused much less on creating an enabling environment beyond the implementing agencies participating in the project. This focus of the project has limited aspects of sustainability so far and there is a need to focus more on aspects of an enabling environment and selected organisational level issues in order to enhance sustainability in the second part of project implementation. Issues concerned could include formal and informal incentive and reward systems, in order to bring those in line with the outcomes that the project tries to achieve and advocating for standards and systems in place to monitor adherence to these. Such issues would need to be informed by assessments of institutional capacities of organisations concerned.

4.22 **Process**: A Project Management Board was set-up which was supported considerably in terms of financial and project management. On-going technical support to the PMB has been more limited and has mostly been provided through short term consultancies. Though this has supported implementation of the various project components, the implementation of the project requires on-going technical management support. It was expected that this role would be fulfilled by the full time project coordinator that was recruited in November 2009. The gap in technical support that results from the resignation of the coordinator, will need to be filled as soon as possible. The complexity of the project and the need for results oriented management in the second phase of the project require on-going technical support. Without a strong results based management approach to the project, it is not to be taken for granted that the project will reach the outcomes identified across the various outcome areas that the project works on.

4.23 **Steering Committee**: A steering committee was installed, but this was done only in June 2009, with the committee effectively only meeting once so far. There is a need to reinforce the functioning of the steering committee and to have it play a more active role in the second half of project implementation. This is particularly important given the strategic decisions that will need to be made for the project to be effective in reaching its outcomes.
4.24 **Project Structure**: The structure of the project replicates to a large extent the sectoral divisions in the GOV system on provincial and district levels. This reinforces the distinctions between the various outcome areas of the project. There is a need to enhance horizontal aspects that cut across the various outcome areas and to reinforce the ways in which the outcome areas can enhance one another, in particular in the way in which they affect households at local level.
5 RECOMMENDATIONS

These recommendations concern recommended actions for the various participating agencies in the project. A set of activities to be included in the workplan for Fiscal Year 2010 is presented in Annex 6.

**Project Steering Committee**

5.1 To extend the implementation of the Joint KonTum project into the second part of the project period and to reinforce the requirements for the project to reach its outcomes and goals, including:

- An enhanced project management board with on-going high level technical support to the management board, enabling the board to actively manage for obtaining of outcome level changes
- Putting in place a results based monitoring system in each of the outcome areas of the project that can provide project management with information on the attainment of results in addition to outputs and activities
- An adapted and enhanced project results framework with indicators on the level of the outcomes of the various outcome areas

5.2 Support the project to move towards increasingly addressing organisational issues and issues of the enabling environment as part of the wider capacity development process, including the institutionalisation of the local level planning process within the province and legal aspects concerned on provincial and/or national level.

5.3 To play an active role in the strategy development of the project in the second phase of the project, including redefining the role of piloting within the project, models to be developed and to enhance horizontal exchanges and learning within the project and thus to create synergy amongst the various outcome areas concerned

**Project management Board**

5.4 Urgently fill the technical support gap that results from the resignation of the Project coordinator, in order to enhance the technical capacity of the PMB on a sustained basis. In the short run this could be done by hiring a consultant while actions are undertaken for a longer term solution.

5.5 Further enhance the capacity of the PMB including project cycle management, coordination amongst stakeholders, implementing partners and project components, progress monitoring, implementation of the Harmonised Program and Project Management Guidelines41 and English language ability.

5.6 Manage and support the process of review of the project results framework and identification of outcome level indicators by UN agencies and implementing partners for their respective outcome areas based on the need for outcome data of the various stakeholders for project management.

5.7 Enhance the project capacity in M&E through dedicated M&E support, including making explicit the responsibilities for M&E at the various levels within the project, building capacities of implementing partners of the various project components based on existing levels of capacity and support data gathering processes with the development of a central project data base using simple database software.

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41 The Vietnam UN Harmonized Program and Project Management Guidelines (HPPMG) are to guide the management and implementation of UN-supported programmes/ projects under the National Implementation Modality (NIM) conform the decision of the Prime Minister on March 18, 2010.
5.8 In order to assess the results of the pilot project and its constituent components to plan for an impact assessment to take place at the end of the project period and enhance evaluability of the project by supporting UN agencies and implementing partners in their M&E activities in the remainder of the project period, playing a supporting and coordinating role.

5.9 Address issues of maintenance and repair within the project and project budget as well as more widely in GOV provincial budget in terms of sustainability of project outcomes.

**UN Agencies and Implementing partners**

5.10 Develop capacity development strategies for the remainder of the project period that include a better balance amongst individual, organisational and enabling environment levels of capacity development in each outcome area. Making use of capacity assessments of key organizations to inform what issues to address. These assessments can in turn be used as reference for monitoring and evaluation.

5.11 Identify a concise set of Outcome level indicators for each of the outcome areas concerned (except for enhanced planning and budgeting component in which these are in place already) as well as means of verification and start as soon as possible with gathering of data. Include gathering of outcome level data for the start of the project as far as possible and feasible in order to recreate a baseline and enhance the evaluability of the project.

5.12 Pro-active management of the change process in each of the outcome areas concerned, including monitoring of output and outcome level data, informing management decision-making with monitoring information in order to heighten the likeliness that outcome level changes are being achieved through the project.

5.13 Systematic documentation of relevant aspects of implemented models so far, including work done in development of community based networks for child protection, which in effect could serve as an example of how documenting of pilot activities can be undertaken and inform project implementation.

5.14 Enhance the likeliness of learnings from training to be used by trainees through

- inclusion of trainee responsibility for dissemination of learning to colleagues as part of the training process
- include the development of trainee action plans (how the trainee plans to use learning in the workplace) as part of the training and include this in the TOR for the trainer
- ensure the availability of budget for implementation of learnings from training
- monitor and address constraints concerned, provide follow-up training when needed

5.15 For UN agencies that are moving ‘upstream’ in their approach, it is useful to see what this can mean for the work done in Kon Tum and how advocacy work can inform as well as be informed by the work in Kon Tum

5.16 For UN agencies to further harmonize the financial and administrative requirements and procedures

5.17 For implementing partners to incorporate project activities within their mainstream work planning rather than treating them as stand-alone activities. To relate the identification of outcome level indicators with M&E that is on-going already in the respective outcome areas and to use this opportunity to build agencies’ overall M&E capacity for their regular use as well as to feed into the project level M&E system.
Annex 1

TERMS OF REFERENCE

FOR THE INTERNATIONAL CONSULTANT

TITLE: Mid-term Review “STRENGTHENING CAPACITY IN SOCIO-ECONOMIC DEVELOPMENT PLANNING, IMPLEMENTION AND PROVISION OF BASIC SOCIAL SERVICES IN KON TUM”

COUNTRY OF ASSIGNMENT: Viet Nam

1) GENERAL BACKGROUND

As part of the M&E plan specified in the program document of the UN Joint Program “STRENGTHENING CAPACITY IN SOCIO-ECONOMIC DEVELOPMENT PLANNING, IMPLEMENTION AND PROVISION OF BASIC SOCIAL SERVICES IN KON TUM” (hereinafter referred to as Kon Tum JP), a mid-term review is to be conducted in 2009. Assistance of the three United Nations Agencies under this program (UNDP, UNICEF, UNFPA) has been provided within the context of efforts to achieve the Millennium Declaration and Millennium Development Goals (MDGs). This proposed initiative adopts a rights-based approach while being aligned directly with the targets and priorities of Viet Nam’s Socio-Economic Development Plan (SEDP) 2006-2010, the United Nations Development Assistance Framework (UNDAF), national targeted programmes and provincial socio-economic development plans.

Major support under this program is geared towards strengthening the capacity of Kon Tum province’s local authorities to plan and manage their development agenda effectively. It includes support to sub-national authorities on all aspects of the planning process including the preparation, implementation and monitoring of socio-economic development plans, in articulation with raising capacities of concerned sectors in provision of basic social services of highest quality to local people. The focus on capacity building use the foundation of the UN’s experience in Viet Nam and its global expertise in these areas. The basic social services are expected to be improved via updating technical knowledge and skills of professional service providers, provision of essential equipment, drugs, infrastructure upgrading, and continuous technical supervision.

During the four year period, the UN agencies intend to spend $5 million under this program. Support is directly provided to the province where it is managed by the Provincial People’s Committee (PPC) with day to day management by the Program Management Board led by Department of Planning and Investment (DPI). While the capacity building on local SEDP planning and budgeting targets wider range of stakeholders in province, more focused support to multi-sectoral interventions for both planning and service delivery improvement are provided in the two districts of Dak Ha and Tu Mo Rong, where models of integrated services are demonstrated. During the course of implementation, the program also looks into the possibility of including additional district/s, in order to expand the demonstration programs to other parts of the province. Those interventions are in the format of program annual work plans and contributes to annual provincial SEDP. Experience from the models is systematically evaluated and lessons learned are used as a basis for corrective action and for taking to scale as appropriate within and outside the province. Accordingly, the key result of the program that will be achieved by end of the program period is: “Provincial SEDP will be in place that is pro-poor, evidence based and participatory; and replicable models developed and evaluated for integrated programming that demonstrate approaches for sustainable development results and contribute to realize the principles of Millennium Declaration and Millennium Development Goals”.

IOD PARC / Frank Noij & Thi Thanh Hang / Final Report 22 December 2011 / P442
Key Outcomes of the Joint Program:

1. Improved capacity of sub-national authorities in the Kon Tum province for planning, budgeting and public resource management to ensure that (i) the planning and budgeting processes are rights-based, participatory, evidence-based and transparent, (ii) the SEDPs and budgets are pro-poor and gender sensitive and include integrated components for delivery of, access to and demand for and the creation of an enabling environment for quality appropriate social services, in particular for vulnerable groups (children, women, youths, ethnic minorities, migrants).

2. Improved capacity of sub-national authorities in Kon Tum province for (i) implementing and monitoring their own SEDPs in coordinated, participatory, effective and sustainable ways; (ii) improving quality of delivery of, and creating equitable access to social and protection services in the areas of education, health, including reproductive health, nutrition, water and sanitation, protection, injury prevention, with particular attention to vulnerable groups (children, women, youths, ethnic minorities, migrants).

The mid-term review will provide inputs for involved UN agencies, GOV and the implementing partners in Kontum province on the lessons learnt and issues to be overcome to meet these above outcomes. Besides, other intended users of this review results include relevant donors, technical assistant organizations and other UN agencies.

2) OBJECTIVES OF THE ASSIGNMENT

I. Overall objective

The main objective of the program mid-term review is to provide analysis of
(i) relevance and efficiency of the program outputs implementation via changing context verification
(ii) program synergies across the components implementation at national level and local levels
(iii) good practice/models and lessons learnt during program implementation, coordination, success in harmonized approach in the context of One UN.

Recommendations should be made for plausible adjustment or redirection of the program in the remaining of the program life cycle accordingly, and should also shed light on future direction of the program in the next cycle if possible.

II. Specific Objectives and scope of MTR

The specific objectives of the MTR are the following:

1. Relevance and Efficiency:
   a. Review the annual targets and indicative activities set in the program document result framework and the annual workplans.
   b. Identify gaps/weakness in the program design in terms of defined outputs and setting annual targets and provide possible interventions and measures that would help the program to address the issues in the changing context.
   c. Evaluate the progress of the outputs delivered by the program towards achievement of the poverty reduction and local governance outcome as identified in the One Plan and as value-added to the Government’s expected results in respective areas;
      i. Review effectiveness of the overall programme interventions, it’s main achievements, compliance with expanding province’s needs in terms of SEDP plan preparation for better service delivery and more enhanced poverty reduction, as well as needs and overall impact in building national capacity to implement the SEDP and sectoral plans to meet provincial targets in related areas; including but not limited to: Assess the capacity built in SEDP planning and M&E against the baseline capacity assessment report;
      ii. Assess effectiveness of multi-sectoral interventions which include UNFPA and UNICEF components in safe motherhood, child survival and development (nutrition, water and sanitation, child injury prevention), child protection and education. Both basic social services deliveries and capacity building interventions need to be assessed.
d. Review and assess the Program’s partnership with the government agencies, and donor community in the program implementation;
e. Review and assess the efficiency of implementation and management arrangements/mechanism of the Program, particularly in the context of harmonized procedures between Government of Vietnam and UN agencies.

2. Review risks that might hinder the sustainability of the program results synergies:
   a. Assess the articulation of two Program Components against the provincial expected targets and results.
   b. Review the harmonization amongst UN agencies and between UN agencies and the Government agencies during program implementation
   c. Review the cooperation and coordination amongst the local implementing agencies, particularly sector based from province to district/commune level (line ministries/sector-based), and across the agencies at provincial level and district level (SEDP, multi-sector based)
   d. Review the capacity building approach to address local requirement in both SEDP planning/monitoring and service delivery.

3. Lessons learnt and good practice:
   a. Document lessons learnt from harmonization that UN agencies have made to the Kontum JP
   b. Document the models built so far by different components and areas for replication, including communication interventions.
   c. Document lessons learnt from intervention under each components including those from both demand and supply sides
   d. Document lesson learnt from special intervention for ethnic minority groups.

4. Recommendations: Based on the above analysis,
   a. Whether the program can meet its outputs and delivery targets by 2010 as planned? What is the extent of need to expand this phase of the program?
   b. What are the new issues or indicators should be considered in the new context? What are the risks that should be updated in the new context?
   c. How should UN agencies adjust the program interventions, partnership arrangements, resource mobilization strategies, working methods and/or management structures to ensure that the proposed output is fully achieved by the end of the CPAP period?
   d. What corrective actions are recommended to take ahead in the remaining period of the program life?
   e. Provide preliminary recommendations on how the program can do better to most effectively continue to support the Government.

3) SCOPE OF WORK

The consultant team will conduct the following activities:

1. Propose a detailed workplan, and methodology to conduct the study, including guidelines for in-dept interview, focus group discussion, and desk review;
2. Collect relevant documentation with the support of MPI, Kon Tum People’s Committee and 3 UN agencies.
3. Conduct a desk study of the UN CPAPs, One UN context (One UN Plan and the One Plan), key related program documents, annual and quarterly plan, progress reports, annual review minutes, key notes and minutes with Leader of MPI and Kon Tum PPC on the program implementation, as well as other related documents.
4. Conduct in-depth interviews with key informants at central level (MPI and donors) and local level (Kon Tum) to better understand the reasons for identified gaps in relevance and efficiency
5. Facilitate up to two multi-stakeholder workshops to identify the synergies issues during program design and implementation
6. Prepare the draft report to be shared with the 3 UN agencies and Kon Tum PMB for comments from
the key informants and program management units
7. Finalize the report to share with GACA and other program co-implementing partners
8. Present the key results in the MTR presentation workshop.

### 4) DURATION OF ASSIGNMENT, DUTY STATION AND EXPECTED PLACES OF TRAVEL

The mission will commence in July 2009. The duration of the assignment is up to 30 working days for the International consultant and 45 days for the national consultant during August – November 2009.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Estimated number of working days (30-45 days)</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial briefing at program offices, MPI and UN agencies, Desk review, Evaluation design, methodology and detailed work plan, and access to relevant reports</td>
<td>5 days</td>
<td>15 August</td>
</tr>
<tr>
<td>Consultations, meetings/workshops as well as for phone/in-person interviews at national and provincial level (including facilitated workshop with 3 agencies, meeting/interviews with national partners and fieldtrip to Kontum provinces)</td>
<td>10, 20 days for International and National Consultant respectively</td>
<td>5 September</td>
</tr>
<tr>
<td>Preparation of draft MTR report</td>
<td>6 days</td>
<td>20 September</td>
</tr>
<tr>
<td>Presentation of the findings to collect comments from key informants (UN agencies, MPI, Kon Tum PMB)</td>
<td>2 days</td>
<td>30 September</td>
</tr>
<tr>
<td>Second draft submitted to UN agencies for comments and consultation</td>
<td>2, 5 days for National and International Consultant respectively</td>
<td>20 October</td>
</tr>
<tr>
<td>Compile the comments from related parties and final Presentation of final findings</td>
<td>2 days</td>
<td>10 November</td>
</tr>
<tr>
<td>Finalization of evaluation report to send to UN agencies</td>
<td>2, 4 days for National and International Consultant respectively</td>
<td>30 November</td>
</tr>
</tbody>
</table>

### 5) FINAL PRODUCTS

- Inception report, outlining key issues to address based on the above-mentioned objectives, key informants and stakeholders to meet for data collection, tools of data collection and analysis, tentative findings and recommendation, etc in close collaboration with UN staff members.
- Tools for data collection and analysis: summary of desk review, questionnaires/interview guidelines for in-depth interviews, focus group discussion, and check-list for observation.
- A comprehensive analytical full report that highlights the findings, recommendations and lessons learnt. The report should be maximum 30 pages excluding annexes
- A presentation of MTR results and findings is prepared and presented in the MTR workshop.
- Documentation of the key meetings and discussions with relevant stakeholders during the mid-term review at central and provincial level.
6) PROVISION OF MONITORING AND PROGRESS CONTROLS

The Consultants will work closely with three UN Agencies and Kon Tum PMB, with UNDP Head of Poverty and Social Development Cluster and Program Officers of 3 UN agencies as focal points, in order to implement the work and achieve the required results. The team will report directly to three Heads of Unit of the three UN agencies.

The deliverables/reports are submitted according to planned. The findings of the mission should be disaggregated by gender and ethnicity where possible, and should follow the ethical code of conducts for UNDP evaluations as specified in the annex 1. The recommendations of the final report are feasible to be used by the program to improve the program implementations.

7) DEGREE OF EXPERTISE AND QUALIFICATIONS

The Evaluation Team will consist of 2 consultants: one International Team Leader and one national consultant with poverty reduction and social services expertise. Under the overall supervision of UNDP Programme Officer, the Evaluation Team will conduct a participatory program MTR.

Qualification requirements for the team leader:

- Higher education (a degree) in economics, business administration or any other social sciences related to the pro poor economic growth and poverty reduction;
- Extensive experience in conducting evaluations, strong working knowledge of the UN system, the civil society sector and working with state public authorities in the field of pro poor economic growth and poverty reduction.
- Extensive knowledge of result-based management evaluation, UN policies, procedures, as well as participatory monitoring and evaluation methodologies and approaches;
- Extensive knowledge on UN reforms and joint programs;
- Understanding of UNDP capacity development approach is preferred;
- Experience in applying SMART indicators and reconstructing or validating baseline scenarios;
- Minimum 7-10 years professional expertise in international development co-operation, in poverty reduction area, in programme evaluation, impact assessment and strategic recommendations for continued support/development of programming/strategies including strong reporting skills;
- Extensive experience in working with the donors;
- Demonstrated strong analytical, communication and report writing skills;
- Demonstrated good facilitation skills in multi-stakeholders discussions/meetings;
- Knowledge of Vietnam’s socio-economic development context, especially at local levels and Working experience in Vietnam.
- Excellent interviewing, public speaking at high levels;
- Teamwork capacity to work with the target group representatives;
- Fluency in written and spoken English.
The Evaluation Team Leader will have overall responsibility for the quality and timely submission of the final evaluation report to UN agencies. Specifically, the team leader will perform the following tasks:

- Lead and manage the evaluation mission;
- Design the detailed evaluation scope and methodology and approach;
- Ensure efficient division of tasks between the mission members;
- Conduct the outcome evaluation in accordance with the proposed objective and scope of the evaluation;
- Draft and communicate the evaluation report;
- Ensure the finalized evaluation report in both Vietnamese and English and submit it to UN agencies.

Qualification requirements for the national team member:

- University degree in economics, business administration, social sciences or any other relevant disciplines;
- At least 7 years of professional experience with Government agencies and international organizations in the area of pro-poor economic growth in Vietnam;
- Deep knowledge and understanding of pro-poor economic growth concept, SEDP planning and public service delivery in Vietnam;
- Extensive knowledge on UN reforms and joint programs;
- Good knowledge of capacity development approach;
- Experience in conducting researches and other analytical works in the area of pro-poor economic growth;
- Experience in conducting evaluation in development programs/program;
- Good facilitation, communication and presentation skills;
- Knowledge of Vietnam’s socio-economic development context, especially at local levels and Working experience in Vietnam.

S/he will perform the following tasks:

- Review documents;
- Participate in the design of the evaluation methodology;
- Conduct the outcome evaluation in accordance with the proposed objective and scope of the evaluation;
- Facilitate and document multi-stakeholder discussions/meetings;
- Draft related parts of the evaluation report;
- Assist the Team Leader in finalizing the draft evaluation report through incorporating suggestions received.

8) Admin support and reference documents

Admin support:
- Provision of list of key informants at national and provincial level
- Organization of multi-stakeholder workshops
- Correspondence and arrangement for fieldtrip.

Reference documents:
- UN reform related documents (CPAP, One Plan, M&E framework, related PCG key documents)
- Joint Program document, annual work-plans and progress reports
- Local Capacity Assessment report
- M&E mission reports, donor reports
- Documentations of key program activities.
9) REVIEW TIME REQUIRED AND PAYMENT TERM

First installment of 30% of contract value upon receiving detail proposal of methodology, work-plan and related research tools.

Second installment of 70% of contract value upon receiving final report.

10) CONSULTANT PRESENCE REQUIRED ON DUTY STATION/UNDP PREMISES

The consultants will work part-time for the assignment.
## ANNEX 2: Extended Results Framework of Kon Tum Joint Project

| Project Results | Contribute to realize the principles of Millennium Declaration and Millennium Development Goals  
Provincial SEDP will be in place that is pro-poor, evidence based and participatory  
Replicable models developed and evaluated for integrated programming that demonstrate approach for sustainable development results |
|---------------------------------|
| Project Sub-Results | Models of integrated services is in place in Dak Ha and Tu Mo Rong districts of Kon Tum province that are tested and evaluated and if appropriate ready for replication in other parts of the province as well in other provinces  
Provincial SEDP Planning & Budgeting Strengthened  
Learning and sharing enhanced |
| Outcome 1 | Enhanced Capacity of local authorities on evidence-based, pro-poor and participatory SEDP Planning and budgeting ensuring decentralized management of investment, linkage of resource with local priority/needs and better management of provincial statistics related to socio-economic data |
| Outcome Indicators | Local leaders have a clear vision of mid- and long-term development of their province  
Communes are capable to prepare their own SED plans and are the owners of small investment projects  
Improved SEDP processes (preparation, implementation and M&E)  
Investment decentralisation institutionalised in Kon Tum  
Investment capital utilised effectively and efficiently, and reflects local priority/need |
| Outcome 2 | Improved quality of health care services available, in general, for mothers, children and adolescents as well as pre-pregnant and pregnant women in the province with focus on ethnic minority and access to better quality health services including injury prevention and improved environment in health centers increased in the selected two districts of the province. |
| Outputs | Local capacity in SED planning, budgeting and M&E as well as in other project areas (Reproductive Health, Education etc.) defined together with analysis and assessment  
Improved knowledge and skills of provincial, districts and commune level planners & decision makers in evidence-based and participatory planning and budgeting ensuring linkages of resource allocation with local priorities and needs  
Improved capacity of Peoples’ Councils’ members in overseeing the local SED process – planning & resource allocation and monitoring the implementation of the plan  
Management of investment projects is gradually & systematically decentralized with increased ownership at the districts and communes  
Management of the provincial socio-economic data strengthened with improved system for collection and analyses, management and to increase access to the public in general |

42 Source: Strengthening Capacity in Socio-Economic Development Planning, Implementation and Provision of Basic Social Services in Kon Tum. A Joint UN Project with People’s Committee of Kon Tum Province. Detailed Project Outline.
### Outcome 3

Child-Friendly Primary Education and Early Childhood Education promoted in general in the province; and children and young people from the project districts and communes have access to quality education and learning opportunities in child-safe schools, kindergartens and safe communities having better environment with regard to access by safe water & sanitation and injury prevention.

<table>
<thead>
<tr>
<th>Outputs</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Improved knowledge and skills of education officials at provincial &amp; district level as well teachers from the project districts and communes on planning and management of Child-Friendly Learning Environment, Child Safe schools, improve school environment and Early Childhood Education</td>
<td>Gender equitable child-friendly and child-safe schools and classrooms established and sustained in the two project districts and safe environment including injury prevention promoted within the catchment community.</td>
<td></td>
</tr>
</tbody>
</table>

### Outcome 4

System developed and network strengthened to tackle issues related to child protection, especially children in need of special protection and provincial capacity enhanced to address Children and AIDS issues.

<table>
<thead>
<tr>
<th>Outputs</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Protection System developed in the province</td>
<td>Capacity of child protection workers at different levels (provincial, district, commune) and collaborators at village level enhanced and their network strengthened.</td>
<td>Children and AIDS issue incorporated in the Provincial Plan, mapping undertaken and gaps identified for support.</td>
</tr>
</tbody>
</table>

### Outcome 5

Capacity enhanced among service providers at the provincial, district and commune level on Integrated Behavioural Change Communication (IBCC) skills and awareness raised among community, in general, and parents and caretakers, in particular, from the project districts on Early Childhood Education, Reproductive and Child Health, Sanitation and Hygiene, injury prevention and protection including HIV/AIDS.

<table>
<thead>
<tr>
<th>Outputs</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge, attitudes and practice (KAP) of communities in the area of health, education, sanitation, protection and prevention assessed</td>
<td>Integrated Behavioural Change Communication Plan (IBCC) developed, tested and refined</td>
<td>Capacity of service providers, mass organizations and local media enhanced to carry out IBCC related activities in the province with focus at the community level.</td>
</tr>
<tr>
<td>Awareness raised in communities targeting children, adolescents, parents/caretakers, village leaders, teachers, social workers with key messages on Early Childhood Development, health, education, safe water, sanitation, hygiene, protection and injury prevention</td>
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</table>

### Outcome 6

Experiences/lessons learned from the project implementation shared with relevant audience; models of integrated services in projects areas evaluated and documented for wider dissemination and replication within and outside Kon Tum province.

<table>
<thead>
<tr>
<th>Outputs</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Project info (implementation results, experiences and lessons learnt, research reports) shared/disseminated to relevant audiences in Viet Nam</td>
<td>Mid-term and end-project evaluations undertaken, documented and shared.</td>
<td></td>
</tr>
</tbody>
</table>
### Annex 3: Overview of MTR Work Plan

<table>
<thead>
<tr>
<th>No</th>
<th>Period</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>08/10/09 - 18/10/09</td>
<td>Desk Review of project related materials</td>
</tr>
<tr>
<td>2</td>
<td>16/10/09 - 17/10/09</td>
<td>Prepare Methodology</td>
</tr>
<tr>
<td>4</td>
<td>19/10/09 - 20/10/09</td>
<td>Briefing UN agencies, and meetings with UNDP, UNICEF, UNFPA, AECID, POs/PAs and PO SLGP</td>
</tr>
<tr>
<td>5</td>
<td>21/10/09 - 04/11/09</td>
<td>Field Mission Kon Tum&lt;sup&gt;43&lt;/sup&gt;</td>
</tr>
<tr>
<td></td>
<td>05/11/09 - 06/11/09</td>
<td>Meetings with Senior Management staff of UNDP, UNICEF, UNFPA and MPI in Hanoi</td>
</tr>
<tr>
<td>6</td>
<td>18/11/09 - 22/11/09</td>
<td>Second part of Field Work, in Tu Mo Rong and follow-up on key issues emerging from first field mission</td>
</tr>
<tr>
<td>7</td>
<td>23/11/09 - 11/12/09</td>
<td>Preparation of Draft Report - Submission of Key Results of Draft Report (bullet wise listing) to inform Project work plan Preparations for 2010 on 23/11/09</td>
</tr>
<tr>
<td>8</td>
<td>11/12/09</td>
<td>Submission of 1&lt;sup&gt;st&lt;/sup&gt; Draft MTR Report</td>
</tr>
<tr>
<td>9</td>
<td>14/12/09 – 04/01/10</td>
<td>Receipt of comments from all stakeholders and preparation of the 2&lt;sup&gt;nd&lt;/sup&gt; Draft</td>
</tr>
<tr>
<td>10</td>
<td>To be decided</td>
<td>Presentation of MTR results in Workshop</td>
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<td>11</td>
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<tr>
<td>12</td>
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<sup>43</sup> Aspects of the Field Mission are further detailed in Table 2 below
### Overview of Field Work Kon Tum

<table>
<thead>
<tr>
<th>No</th>
<th>Date</th>
<th>Activity</th>
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<tbody>
<tr>
<td>1</td>
<td>21/10/09</td>
<td>Travel from Hanoi to Kon Tum</td>
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<tr>
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<td></td>
<td>14.00 – 15.00 Meeting with PMU for introductory discussion / preparation of logistics</td>
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<td>2</td>
<td>22/10/09</td>
<td>Meetings at Provincial level:</td>
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<tr>
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<td>08.00 – 09.30 PPC</td>
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<tr>
<td></td>
<td></td>
<td>09.30 – 11.00 Provincial People’s Council</td>
</tr>
<tr>
<td></td>
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<td>11.00 – 12.30 Party Committee</td>
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<td></td>
<td></td>
<td>14.00 – 15.30 DPI</td>
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<tr>
<td></td>
<td></td>
<td>15.30 – 17.00 DARD including Centre for Clean Water and Rural Environment</td>
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<tr>
<td>3</td>
<td>23/10/09</td>
<td>Meetings at Provincial level (continued)</td>
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<tr>
<td></td>
<td></td>
<td>08.00 – 09.30 DOF</td>
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<tr>
<td></td>
<td></td>
<td>09.30 – 11.00 DOET</td>
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<tr>
<td></td>
<td></td>
<td>11.00 – 12.30 DOH</td>
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<tr>
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<td>15.30 – 17.00 CEMA</td>
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<td>4</td>
<td>24/10/09</td>
<td>09.00 – 10.30 WU/YU</td>
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<td>5</td>
<td>25/10/09</td>
<td>Team Discussion and Reporting</td>
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<td>6</td>
<td>26/10/09</td>
<td>Meetings in Dak Ha district</td>
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<td>09.30 – 11.00 Party Committee</td>
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<td></td>
<td>14.00 – 15.30 District People’s Council</td>
</tr>
<tr>
<td></td>
<td></td>
<td>15.30 – 17.00 DPF</td>
</tr>
<tr>
<td>No</td>
<td>Date</td>
<td>Activity</td>
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<td>27/10/09</td>
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<td></td>
<td></td>
<td>09.30 – 11.00 DOLISA</td>
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<td>11.00 – 12.30 DOET</td>
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<tr>
<td></td>
<td></td>
<td>14.00 – 15.30 DOH and Preventive Health Centre / DOET (simultaneous meetings)</td>
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<tr>
<td></td>
<td></td>
<td>15.30 – 17.00 WU / YU (joint meeting)</td>
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<td>8</td>
<td>28/10/09</td>
<td>Meetings at commune level in one selected commune of Dak Ha district</td>
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<td>08.00 – 09.30 CPC</td>
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<tr>
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<td></td>
<td>09.30 – 11.00 Party Committee</td>
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<td>14.00 – 15.30 Commune People’s Council</td>
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<td></td>
<td></td>
<td>15.30 – 17.00 Financial Officer</td>
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<td>9</td>
<td>29/10/09</td>
<td>Meetings at commune level in one selected commune of Dak Ha district</td>
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<tr>
<td></td>
<td></td>
<td>(continued)</td>
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<tr>
<td></td>
<td></td>
<td>08.00 – 09.30 Poverty Reduction and Social Affairs Officer</td>
</tr>
<tr>
<td></td>
<td></td>
<td>09.30 – 11.00 Head/staff of school</td>
</tr>
<tr>
<td></td>
<td></td>
<td>12.00 – 14.00 Visit to selected village</td>
</tr>
<tr>
<td></td>
<td></td>
<td>14.00 – 15.30 Head/staff of health centre</td>
</tr>
<tr>
<td></td>
<td></td>
<td>15.30 – 16.15 WU</td>
</tr>
<tr>
<td></td>
<td></td>
<td>16.15 – 17.00 YU</td>
</tr>
<tr>
<td>10</td>
<td>30/11/09</td>
<td>Travel</td>
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44 Communes will be selected in discussions with provincial and district representatives and taking into account poverty as well as socio-economic criteria.
## Second Part of Field Work Kon Tum

<table>
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<tr>
<th>No</th>
<th>Time/Date</th>
<th>Activities/Places</th>
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</thead>
<tbody>
<tr>
<td>15/11/2009</td>
<td>Travel to Dakto</td>
<td></td>
</tr>
</tbody>
</table>
| 9  | 16/11/2009 | Field work in District Tu Mo Rong  
08.30 – 10.00 – District People Committee and People Councils, Party member and Leaders  
10.00-11h30- Division of Finance and Planning  
13.30-15.00- DOLISA and staff on child protection  
15.00-17.00- Youth Union, Women Union and Farmer Union |
| 17/11/2009 | 8.30-10.00- DOET  
10.00-11.30- DOH and Preventive Health Center  
Commune DakHa, Tu Mo Rong District  
13.30-15.00- Commune leaders  
15.00-17.00- Youth Union, Women Union and Farmer Union |
| 8  | 18/11/2009 | 08.00 –9:30 –Finance staff  
10.00 – 11.30 – Head of School  
14.00-17.00- Benefiaries and visited some places supported by the project (sanitation, clubs, schools) |
| 9  | 19/11/2009 | 8.00 – 9.30- DOLISA and staff on child protection and Volunteee staff on child protection; Head of Commune Health Center and Villages Nurses  
9.30-11.00- Youth Union, Women Union and Farmer Union  
11.00-13.30 – Back to Dak Ha |
| 10 | Afternoon 19/11/2009 | One member works with DakHring of Dak Ha district  
Other member works with non piloted commune of Dak Ha district  
13.30 -14.30 Commune Leaders  
14.30 -15.30 DPF, DOLISA staffs  
15,30 -16.30 Health staff and Head of School  
16.30 -17.30 Youth Union, Women Union and Farmer Union  
17.30 -18.00 Project beneficiaries and selected places supported by the project visited (sanitation, clubs, schools) |
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<tr>
<th></th>
<th>20/11/09</th>
<th>Provincial agencies</th>
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</thead>
<tbody>
<tr>
<td></td>
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<td>8.30-10.00 Center of Health Communication and Education</td>
</tr>
<tr>
<td></td>
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<td>15.00-17.00 Report first findings to PSC, PMB and others stakeholders</td>
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## ANNEX 4: Overview of Persons Met

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<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Organisation</th>
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</thead>
<tbody>
<tr>
<td><strong>Central level</strong></td>
<td></td>
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</tr>
<tr>
<td>Mr Christophe Bahuet</td>
<td>Deputy Resident Representative</td>
<td>UNDP</td>
</tr>
<tr>
<td>Mr Nguyen Tien Phong</td>
<td>Head</td>
<td>UNDP- Poverty Reduction and Social Unit</td>
</tr>
<tr>
<td>Ms Vo Hoang Nga</td>
<td>PO</td>
<td>UNDP- Poverty Reduction and Social Unit</td>
</tr>
<tr>
<td>Ms Nguyen Bui Linh</td>
<td>PO</td>
<td>UNDP- Poverty Reduction and Social Unit</td>
</tr>
<tr>
<td>Mr Jean Dupraz</td>
<td>Deputy Representative</td>
<td>UNICEF</td>
</tr>
<tr>
<td>Mr Dong Van Thuc</td>
<td>PO</td>
<td>UNICEF</td>
</tr>
<tr>
<td>Mr Bruce Campbell</td>
<td>Representative</td>
<td>UNPFA</td>
</tr>
<tr>
<td>Mr. Rajen Kumar Sharma</td>
<td>Chief, Provincial Child Friendly Program,</td>
<td>UNICEF</td>
</tr>
<tr>
<td>Mr Dao Khanh Tung</td>
<td>PO</td>
<td>UNFPA</td>
</tr>
<tr>
<td>Mr Antonio Pelaez</td>
<td>Multilateral Cooperation and Governance Manager</td>
<td>AECID</td>
</tr>
<tr>
<td>Ms Phan Thu Huong</td>
<td>Senior Project Coordinator</td>
<td>SLGC Project</td>
</tr>
<tr>
<td>Mr. Vu Thuong</td>
<td>Senior Expert</td>
<td>International Economic Cooperation Department of MPI</td>
</tr>
<tr>
<td>Mr Ha Xuan Tu</td>
<td></td>
<td>General Economic Department of MPI</td>
</tr>
<tr>
<td><strong>Provincial level</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mr Nguyen Dinh Bac</td>
<td>Project Director, Vice Director of DPI</td>
<td>PMB</td>
</tr>
<tr>
<td>Mr Luu Cong Cuong</td>
<td>Project Manager</td>
<td>PMB</td>
</tr>
<tr>
<td>Ms Nguyễn Thị Thanh Huyền</td>
<td>Chief Accountant</td>
<td>PMB</td>
</tr>
<tr>
<td>Mr Hoang Trọng Nghia</td>
<td>TA Consultant</td>
<td>PMB</td>
</tr>
<tr>
<td>Mr Lê Xuân Dương</td>
<td>Accountant</td>
<td></td>
</tr>
<tr>
<td><strong>Provincial authorities and Departments</strong></td>
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<td></td>
</tr>
<tr>
<td>Ms Trương Thị Ngọc Anh</td>
<td>Vice Chairman</td>
<td>PPC</td>
</tr>
<tr>
<td>Mr Long</td>
<td>Chief of PPCs Office</td>
<td>PPCs</td>
</tr>
<tr>
<td>Mr Lê Văn Tuan</td>
<td>Head of Economic and Budget Committee</td>
<td>PPCs</td>
</tr>
<tr>
<td>Ms Nguyễn Thị Anh</td>
<td>Head of Culture and Social Affair Committee</td>
<td>PPCs</td>
</tr>
<tr>
<td>Mr Văn Tật Cường</td>
<td>Vice Director</td>
<td>DARD</td>
</tr>
<tr>
<td>Mr Hoa</td>
<td></td>
<td>Planning and Finance Division of DARD</td>
</tr>
<tr>
<td>Name</td>
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<tr>
<td>Mr Ho Van Da</td>
<td>Head</td>
<td>Center of Rural Water Supply and Sanitation and Environment (CRWSSE)</td>
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<tr>
<td>Mr Thuy</td>
<td>Director, Director of subproject</td>
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</tr>
<tr>
<td>Mr Nhi</td>
<td>Accountant</td>
<td></td>
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<tr>
<td>Mr Tho</td>
<td>Planner</td>
<td>DOF</td>
</tr>
<tr>
<td>Mr Chung</td>
<td>Director</td>
<td>Budget Division of DOF</td>
</tr>
<tr>
<td>Mr Su</td>
<td>Head</td>
<td>Investment Division of DOF</td>
</tr>
<tr>
<td>Ms Phạm Thị Trinh</td>
<td>Head</td>
<td>DOET</td>
</tr>
<tr>
<td>Ms Quynh</td>
<td>Vice Director</td>
<td>Pre Primary School Division</td>
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<tr>
<td>Ms Ven</td>
<td>Head</td>
<td>DOH</td>
</tr>
<tr>
<td>Mr Phan De</td>
<td>Director</td>
<td>Provincial General Hospital</td>
</tr>
<tr>
<td>Ms Ngo</td>
<td>Vice Director</td>
<td>Provincial Medical College</td>
</tr>
<tr>
<td>Mr Duc</td>
<td>Director</td>
<td>Provincial Center of Preventive Health</td>
</tr>
<tr>
<td>Ms Huong</td>
<td>Vice Director</td>
<td>DOH</td>
</tr>
<tr>
<td>Mr Toan</td>
<td>Accountant to subproject</td>
<td>Division of Population</td>
</tr>
<tr>
<td>Mr Duc</td>
<td>Expert</td>
<td>Provincial Center of Reproductive Health</td>
</tr>
<tr>
<td>Mr Lan</td>
<td>Director</td>
<td>DOH</td>
</tr>
<tr>
<td>Ms Trần Thị Loan</td>
<td>Expert, Focal Point</td>
<td>Center of Health Education Communication</td>
</tr>
<tr>
<td>Ms Trần Thị Thanh Xuan</td>
<td>Accountant</td>
<td>Center of Health Education Communication</td>
</tr>
<tr>
<td>Mr Nguyễn Ngọc Anh</td>
<td>Expert, Planner</td>
<td>DOLISA</td>
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<tr>
<td>Mr Huynh Kim Lien</td>
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<td>Child Protection Division of DOLISA</td>
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<tr>
<td>Mr Ro Cheng Re</td>
<td>Head</td>
<td>CEMA</td>
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<tr>
<td>Ms Trần Thị Dieu Hang</td>
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<td>Policy Division of CEMA</td>
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<td></td>
<td>Vice Head</td>
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<td>Ms Hoàng Thị Thu Huong</td>
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<tr>
<td>Ms Dinh Thị Hang Nga</td>
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<td>WU</td>
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<tr>
<td>Ms Nguyễn Thị Thu Ha</td>
<td>Planner to sub project</td>
<td>WU</td>
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<tr>
<td>Ms Triệu Thị Linh</td>
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<td>WU</td>
</tr>
<tr>
<td>Mr Nguyễn Trung Thuan</td>
<td>Planner</td>
<td>Youth Union</td>
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<tr>
<td>Ms Nguyễn Thị Anh Tuyệt</td>
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<tr>
<td>Ms Nguyễn Thị Thuy Lan</td>
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<td>Youth Union</td>
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<tr>
<td>Mr A Byot</td>
<td>Assistant to the subproject</td>
<td>Famer Union</td>
</tr>
<tr>
<td>Ms Ngô Thị Cúc</td>
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<td>Head of Propaganda Division</td>
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<td><strong>District DacHa</strong></td>
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<tr>
<td>Mr Nguyễn Thành Trung</td>
<td>Vice Chairman- Sub-PIU Director</td>
<td>District People Committee</td>
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<tr>
<td>Mr Bang</td>
<td>Vice Chief</td>
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<tr>
<td>Mr Nguyễn Hoàng Thích</td>
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</tr>
<tr>
<td>Mr Y Hien</td>
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<td>Mr. Thanh</td>
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<tr>
<td>Mr A Ban</td>
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</tr>
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<tr>
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<tr>
<td>Mr Long</td>
<td>Head</td>
<td>District Planning and Finance Dpt</td>
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<tr>
<td>Mr Đỗ Đình Thao</td>
<td>Head</td>
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<td>Mr A Ton</td>
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<tr>
<td>Ms Y Lan</td>
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<td>Women's Union</td>
</tr>
<tr>
<td>Mr Nguyễn Văn Hay</td>
<td>Chairman</td>
<td>Youth Union</td>
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<tr>
<td>Mr Huỳnh Thanh Nam</td>
<td>Chairman</td>
<td>Farmer's Union</td>
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<tr>
<td>Mr Phong Đà Đức</td>
<td>Director</td>
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<tr>
<td>Mr Lê Văn Hoàng</td>
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<tr>
<td>Mr Lương Thanh Tính</td>
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<tr>
<td>Mr Nguyễn Thanh Thao</td>
<td>Vice-Director</td>
<td>DoH</td>
</tr>
<tr>
<td>Mr Nguyễn Trúc</td>
<td>Vice Chairman</td>
<td>District People’s Council</td>
</tr>
<tr>
<td>Mr Nguyễn Toàn Hòa</td>
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<tr>
<td><strong>Dakha Commune</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mr Hải</td>
<td>Secretary General</td>
<td>Communist Party</td>
</tr>
<tr>
<td>Mr A Phùn</td>
<td>Chairman</td>
<td>Commune People’s Committee</td>
</tr>
<tr>
<td>Mrs Y Hoa</td>
<td>Vice Chairwoman</td>
<td>Commune People’s Committee</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
<td>Organisation</td>
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<td>-----------------------------------------</td>
<td>------------------------------------------------------</td>
</tr>
<tr>
<td>Mr Bach The Hung</td>
<td>Headmaster</td>
<td>Primary School Dak Ha</td>
</tr>
<tr>
<td>Ms Nguyen Thi Nhung</td>
<td>Teacher</td>
<td>Primary School Dak Ha</td>
</tr>
<tr>
<td>Mr A Thuat</td>
<td>Volunteer</td>
<td>Village health care system</td>
</tr>
<tr>
<td>Ms Y Khiem</td>
<td>Member</td>
<td>Child Protection Club</td>
</tr>
<tr>
<td>Mr A Nghea</td>
<td></td>
<td>Village Youth Union</td>
</tr>
<tr>
<td>Ms Y Luc</td>
<td>Vice chairwoman</td>
<td>Village Child protection club</td>
</tr>
<tr>
<td>Ms Y Hinh</td>
<td>Chairwomen WU commune</td>
<td>Chair person commune level child protection club</td>
</tr>
<tr>
<td>Mr A Nhieu</td>
<td></td>
<td>Commune Health care unit</td>
</tr>
<tr>
<td>Mr Nguyen Thanh Ngoc</td>
<td>Health Care Officer</td>
<td>District Health Care Centre</td>
</tr>
<tr>
<td>Mr Duong Van Trung</td>
<td>Director</td>
<td>Health Center Dak Ha</td>
</tr>
<tr>
<td>Mr Du</td>
<td>Doctor</td>
<td>Health Center Dak Ha</td>
</tr>
<tr>
<td><strong>DakLa Commune</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ms. Tran Kim Phung</td>
<td>DakLa Commune</td>
<td>Commune Child protection and Population and Family Planning</td>
</tr>
<tr>
<td>Ms. Y Huong</td>
<td>Commune officer on Population and Family planning and Child Protection</td>
<td>Commune Youth Union</td>
</tr>
<tr>
<td>Mr. Tam</td>
<td>Chairman of Commune People Committee</td>
<td>Commune Leader</td>
</tr>
</tbody>
</table>
Annex 5: Documents Consulted

1. Kon Tum DPI, Kon Tum SEDP 2006-2010, draft version
2. PPC Kon Tum- UN Vietnam, Manual on development of SEDP for commune, June 2009
3. PPC- Un Vietnam, Kon Tum Joint Program, DPO
5. Annual and Quarterly reports of Kon Tum Joint Program in 2007, 2008 and 2009
6. AWP and QWP of of Kon Tum Joint Program in 2007, 2008 and 2009
7. Joint Trip reports by UN Agencies during 2007, 2008 and 2009
8. Minutes of Joint Meetings of KT joint programs, May 2009
9. Reports on work performance and on the sub program implementation of implementing agencies at provincial departments and district agencies, for 2008 and 2009
10. Audit reports for the Joint Program for three UN agencies in 2007 and 2008
12. VASS, UN Vietnam, PPC of Kon Tum, Kon Tum province’s Local capacity assessment in Planning development, 2007
17. UN and GOV, HPPMG, December 2009
18. Different regulations and decisions related to PMB and PSC establishment and working mechanism
19. GOV and UN Vietnam, One Plan One, July 2007
20. UNDP, Overview of UNDP’s capacity Assessment Methodology, 8/2009
21. Noij, Frank. DFID- UNDP Strategic Partnership Initiative
Annex 6:
Recommendations for Joint Project Kon Tum Vietnam on Activities for the year 2010

MTR Team, Frank Noij and Thanh Hang

Generic, across the Project
1. Development of the project monitoring and evaluation system, with a focus on outcomes in addition to inputs, activities and outputs and linking up with data gathering that is taking place already in this respect within GOV departments and agencies
   - Review the project logical framework with key stakeholders
   - Develop indicators on outcome level and review indicators on the level of outputs
   - Identify means and frequency of verification
   - Link with existing monitoring data collection efforts and develop means to gather and analyze data on a regular basis
   - Bringing data together on project level
   - Gathering baseline information
2. Development of a project management manual (starting with the upgrading of the existing regulations including monitoring, coordination of activities, regular meetings and reporting mechanism)
3. Improve the project filing system, including recording information on training activities supported by the three UN agencies. Record information in a way it can be easily analyzed, for example using Forms in excel
4. Training/capacity building of concerned agencies/staff participating in tendering procedures, consultant selection and enhance strict application of rules and regulations in project management, finance and account management, GOV tendering procedures
5. Review the pilot aspects of the project in the various components:
   - What is it that is being piloted, what aspects of the component concerned
   - What monitoring data is needed for assessment of results concerned
   - How is information brought together and the model documented
6. Develop means for sharing of experiences across the various project stakeholders at various levels and build a knowledge base on the models that are being piloted, making use of monitoring and other data
7. Enhance the functioning of the Project Steering Committee and use the steering committee meeting to coincide with visits of senior representatives of the UN agencies involved. Consider project directors quarterly meeting as a means to develop and enhance the overall guidance of project management and implementation
8. Work out a clear job description for the newly recruited Project Coordinator, distinguishing the position from that of the Project Manager. Develop clear lines of reporting while at the same time limiting the number of management layers for the implementing agencies
9. Seek ways to enhance project management, via providing technical support to the Project Director and Project Manager and consider to have an STA position in the second phase of project implementation
10. Further the process of harmonization amongst the three UN agencies in particular regarding financial (face) forms, procedures and requirements, coordination and administrative procedures
11. Diversify the approach of the project more explicitly, with additional attention to organizational and policy level issues of capacity development in addition to individual staff training

**Participatory Planning**

12. Identify constraints for implementing commune level socio-economic development plans developed based on participatory planning, obtain lessons learned and experiences from provinces which already developed participatory planning and work with stakeholders concerned to address issues concerned, including legal issues
13. Connect with DOF at the provincial level in order to connect with provincial resource allocation and with public finance reform (TABMIS training programme and decentralisation of revenue collection and expenditure assignments)
14. Connect with the statistical office on provincial and district level in order to link up with planning and monitoring processes of this agency
15. Work on aspects of participatory approach in sectoral planning linked with SEDP and budgeting concerned

**Health**

16. Put mechanisms in place to consult receivers of equipment and services on local level about their needs and priorities in order to inform decision-making concerned and to enhance the expected effects of provision of such equipment and services
17. Monitor the use of equipment provided and put clear management mechanisms in place (including rules for use) to enhance the expected effects of the provision of such equipment
18. Follow up recommendations mentioned in the Audit report of 2008, particularly concerning equipment and facilities and the need to register and monitor items and concerning tendering procedures
19. Bring data on outcome and output level regarding health component together on the level of health centers targeted by the project, disaggregating data by sex and ethnicity

**Education/water supply and sanitation**

20. Monitor maintenance and use of school sanitation facilities
21. Bring data on enrollment and retention rates and other outcome and outputs related data of the education component together on the level of the schools targeted by the project, disaggregating data by sex and ethnicity
22. Monitor the use of provided equipments, facilities provided in sanitation and water supply and follow up with recommendations in Audit report 2008

**Child Protection**

23. Engage in advocacy to promote the inclusion of child development concerns into the provincial socio-economic development plan
24. Link the child protection component of the project with the GOV pilot programme of MOLISA for seven pilot provinces in order to enhance sustainability of the results achieved so far
25. Bring data on outcome and output levels on child protection issues together on the level of the areas targeted by the project, disaggregating data by sex and ethnicity

**IBCC**

26. Support the development of IBCC plans on the various levels and their implementation
27. Identify the options and related costs for producing materials for dissemination in Sedang language, develop a proposal for adapting and producing dissemination materials
accordingly as well as a plan to make use of the newly developed materials for Sedang target groups

Lesson Learning

28. Document good practices and the experiences gathered so far with the development of 'models' in the various components of the project

29. Develop a learning strategy, including the organization of ways to share learnings and experiences across the various stakeholders and implementation levels within the project and with other project in and outside Vietnam
### Annex 7: Financial Overview Q II and III 2009

Actual Project Expenditures for 3 agencies for quarters II and III in 2009 per categories (grouped by MTR team) in VND

<table>
<thead>
<tr>
<th>Activities grouped according categories</th>
<th>Actual Project Expenditure per II and III quarters of 2009</th>
</tr>
</thead>
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<tr>
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<td>II-09</td>
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<tr>
<td><strong>UNICEF - without VAT</strong></td>
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<tr>
<td>Activities 2.1.8- 2.2.16: Childhood Injury Prevention activities related</td>
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<td>Activities A20y 2.2.11-2.2.19</td>
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<tr>
<td>Activities related to services in water sanitation and health and nutrition</td>
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<td>Activity 2.3.1.- 2.3.9- related to sectoral planning, and collection &amp; management of evidence-based and data for child survival and development</td>
<td>49,147,426</td>
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<tr>
<td>Activities 1.1-3.2.6: --related to Child-Friendly Primary Education and Early Childhood Education promoted in general in the province; and children and young people from the project districts and communes have access to quality education and learning opportunities in child-safe schools and kindergartens having better environment regarding safe water &amp; sanitation system and injury protection</td>
<td>190,994,000</td>
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<td>Activities 4.1- 4.4.- related to Child-Friendly Primary Education and Early Childhood Education promoted in general in the province; and children and young people from the project districts and communes have access to quality education and learning opportunities in child-safe schools and kindergartens having better environment regarding safe water &amp; sanitation system and injury protection</td>
<td></td>
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<tr>
<td>Project Management Support</td>
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<td><strong>UNPFA</strong></td>
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<td>Activities 11- IBCC (5.1.1-5.2.1) and 5.3.8-5.3.12- related to Communication packages, capacity of services delivery agencies in IBCC, earlier childhood development and awareness in communities targeting children, adolescents, parent/caretakers... improved and raised</td>
<td>62,270,000</td>
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<td>Activities 20, 2.1.1-2.1.7 and 2.2.1-2.2.10- related to improved services in areas of reproductive health care and safer motherhood - mostly training activities</td>
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<tr>
<td>Activity 22,- related to improved services in areas of reproductive health care and safer motherhood - mostly training activities</td>
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<td>Activities 16 - Health Facilities</td>
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<td><strong>Project Management Board</strong></td>
<td>53,537,678</td>
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</table>
### Activities grouped according categories

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<th>Activities</th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>II-09</td>
</tr>
<tr>
<td><strong>Activities grouped according categories</strong></td>
<td><strong>UNDP- With VAT</strong></td>
</tr>
<tr>
<td><strong>Activities 1.1.1-1.1.6- Training in SEDP and</strong></td>
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<td><strong>Training in SEDP and Studies</strong></td>
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<td><strong>Activity 1.2.1-1.2.4- related to training and</strong></td>
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<td><strong>workshop, study tours on SEDP planning</strong></td>
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<td><strong>Activity 1.3.1-1.3.6- related to sectoral</strong></td>
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<td><strong>Planning, and collection Related to training</strong></td>
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<td><strong>to SEDP, regulation on community investment</strong></td>
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<td><strong>monitoring, and used of M&amp;E for PPCs</strong></td>
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<td><strong>the province; and children and young people</strong></td>
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<tr>
<td><strong>from the project districts and communes have</strong></td>
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<td><strong>access to quality education and learning</strong></td>
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<td><strong>kindergartens having better environment</strong></td>
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<td><strong>regarding safe water &amp; sanitation system and</strong></td>
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<td><strong>injury protection</strong></td>
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<td><strong>Activities related to Lesson learned and</strong></td>
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<td><strong>Project Management Support</strong></td>
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Annex 8: Trainings Conducted as part of the Project

Insert Excel file or PDF file