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Photo: Huy Tran, Alive & Thrive

ADDRESSING MALNUTRITION OF THE FURTHEST BEHIND IN CAMBODIA, LAOS, AND VIET NAM:

Scaling up and improving quality and coverage of evidence-based
nutrition interventions

Reaching the most vulnerable

With support from the Government of Ireland, Alive and Thrive is working to tackle malnutrition and reach global nutrition targets in the Mekong Sub-Region with a priority on the furthest behind in each context. In Cambodia, Laos, and Viet Nam, small and sick newborns, mothers and children infected with or impacted by COVID-19, families in ethnic minority communities, and those affected by climate change are among the most vulnerable to poor nutrition and adverse health outcomes.

Tackling malnutrition remains a priority

Despite improvements in recent years, poor nutrition remains a critical public health issue in Southeast Asia. The most recent estimates of malnutrition in Cambodia, Laos, and Viet Nam indicate that progress is too slow to meet the 2025 Global Nutrition Targets and Sustainable Development Goals linked to nutrition.¹ Furthermore, the COVID-19 pandemic has exacerbated all forms of malnutrition due to the disruption of economic, food, and health systems, a crisis that disproportionately affects vulnerable groups.² Recognized as one of the world's most vulnerable areas to climate change, the lower Mekong Basin is affected by increasing temperatures, more frequent and intense storms and flooding, as well as rising sea levels.³

Uneven progress is a barrier to achieving targets

While everyone has the right to adequate food and nutrition, substantial disparities persist in the Mekong Sub Region, especially for vulnerable and underserved mothers, infants, and children.



Photo: Giacomo Pirozzi | Alive & Thrive

Drivers of vulnerability to poor nutrition in Cambodia, Laos, and Viet Nam



Poverty

Children living in households with the highest socioeconomic status are considerably less likely to be stunted or wasted than those in the poorest households.⁴



Ethnicity

In Viet Nam, the prevalence of stunting among ethnic minority populations (32%) is more than double the prevalence among the Kinh, ethnic majority population (17%).⁵ In Cambodia and Laos, provinces with the highest concentration of indigenous and ethnic minority communities have the highest rates of stunting and infant and child mortality.



Infant health status

While preterm, low-birth weight and otherwise at-risk newborns have an even greater need for early essential newborn care including timely breastfeeding support, they are often the least likely to be protected from these interventions, often due to a lack of health worker confidence and capacity as well as unsupportive facility environments.⁶



Mode of birth

Babies born via caesarean section are less likely than babies born vaginally to start breastfeeding within the first hour and breastfeed exclusively when they leave the health facility.⁷



Lack of resiliency to health epidemics, climate change

Families that have limited capacity and resources to adapt to rapidly changing ecosystems and associated loss of livelihoods are particularly vulnerable to climate change and disease outbreaks.



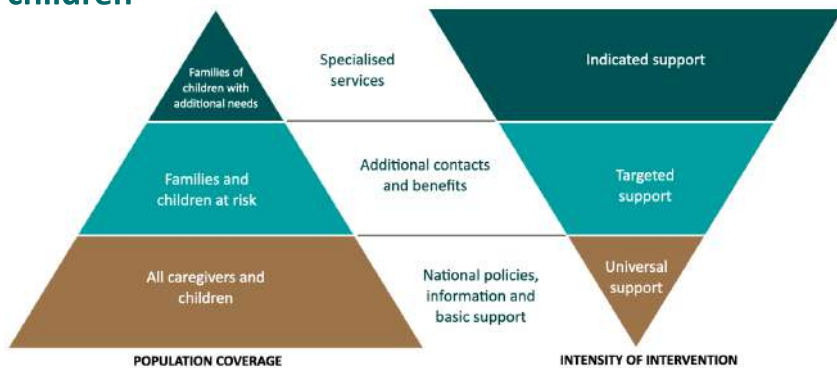
Maternal malnutrition

High rates of maternal malnutrition in Cambodia, Laos, and Viet Nam pose serious risks for both mothers and children in these contexts. An undernourished woman is at greater risk of obstructed labor, more likely to die as a result of postpartum hemorrhage, and more susceptible to disease.⁸

Meeting the needs of families and children⁹

Not all children and families need the same intensity and scope of interventions and services, and the most vulnerable families may need more support, through tailored referrals, resources, and services.

Therefore, our program is designed to meet the needs of the most vulnerable and ensure that no one is left behind.



Results-based management to achieve improved outcomes

Alive & Thrive is supporting coordinated actions to create an enabling environment for maternal, infant and young child nutrition (MIYCN) through stronger legislation, increased resource allocation, and improved accountability to achieve nutrition outcomes, with a focus on the most vulnerable groups. To achieve collective impact, Alive & Thrive is working closely with partners at both regional and country levels to achieve the results described in the framework below.

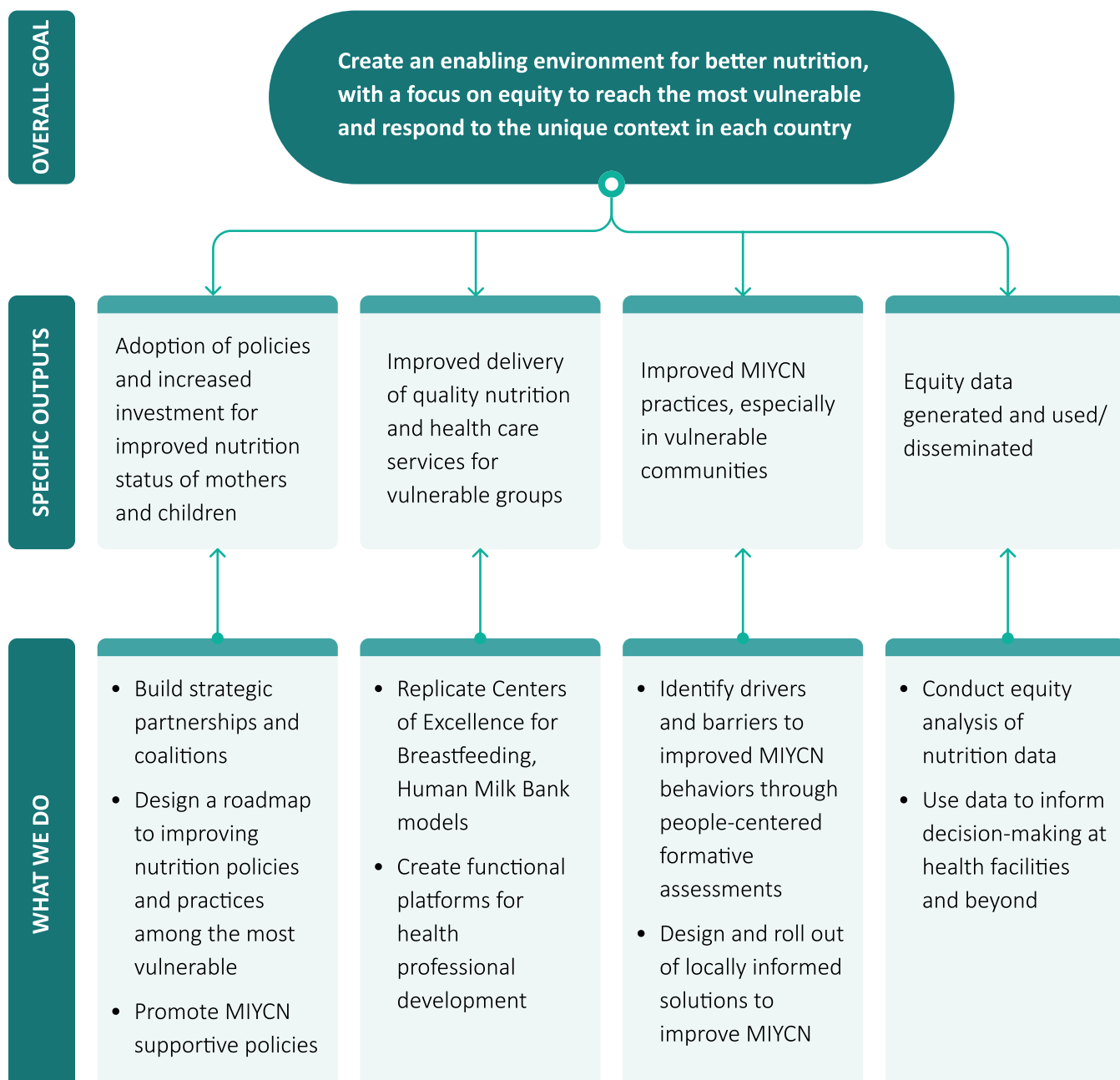




Photo: Vietnam National Children's Hospital

A strong foundation in the Mekong Sub-Region

Alive & Thrive's program design for 2022 and beyond will build upon the foundation already established in the Mekong Sub-Region with the support of Government of Ireland since 2014. Our approach is focused on scaling up and improving quality and coverage of evidence-based MIYCN interventions including: the [Centers of Excellence for Breastfeeding](#) initiative and early essential newborn care for both healthy, term babies and vulnerable, small and sick newborns; [human milk bank services](#) and specialized lactation support for babies unable to access their own mothers' milk; MIYCN counseling and support; and social and behavior change communication.

Alive & Thrive will also continue to support strengthened governance and coordinated advocacy by Scaling Up Nutrition Civil Society Alliances in Cambodia, Laos, and Viet Nam as well as facilitate regional exchanges to foster cross-country learning and experience sharing, bridging the gap between regional programmatic standards and local coverage with equity. As an approved technical assistance provider to the Association of Southeast Asian Nations Health Cluster, Alive & Thrive will contribute to the implementation of newly endorsed [Guidelines and Minimum Standards for the Protection, Promotion and Support of Breastfeeding and Complementary Feeding](#).



Photo: Giacomo Pirozzi | Alive & Thrive

Way forward

Through the use of monitoring data, formative assessments, and reanalysis of existing data conducted during 2022, Alive & Thrive will grow the evidence base on drivers of vulnerability and design strategies to build resiliency and improve health and nutrition service delivery accordingly. We will continue to support an inclusive COVID-19 response and recovery and further scale-up of evidence-based MIYCN interventions, including the Centers of Excellence for Breastfeeding initiative, to new geographies in Cambodia, Laos, and Viet Nam. This work will contribute to the long-term goal of increasing access to and utilization of essential nutrition interventions and services that meet the unique needs of vulnerable groups and communities in Cambodia, Laos, and Viet Nam and improving nutrition behaviors and mental and physical health outcomes from 2023 to 2026. Local ownership, community empowerment, and system strengthening are key to the project's sustainability.

1. Development Initiatives. (2020). 2020 Global Nutrition Report: Action on equity to end malnutrition. Bristol, UK: Development Initiatives.
2. Headey, D. et al. (2020). Impacts of COVID-19 on childhood malnutrition and nutrition-related mortality. *Lancet* (London, England), 396(10250), 519–521. [https://doi.org/10.1016/S0140-6736\(20\)31647-0](https://doi.org/10.1016/S0140-6736(20)31647-0)
3. Kuntiyawichai, K., Plermkamon, V., Jayakumar, R. & Dau, Q.V. (2015). Climate Change Vulnerability Mapping for the Greater Mekong Sub-region. UNESCO Bangkok.
4. Figure: Prevalence of under-five stunting, wasting, and overweight in Cambodia and Laos by household socioeconomic status (lowest, middle, and highest wealth quintiles)
5. National Institute of Nutrition- Ministry of Health & General Statistics Office – Ministry of Planning and Investment (Viet Nam). (2021). Main Findings of the General Nutrition Survey 2019-2020. Hanoi, Viet Nam: Ministry of Health.
6. Morseth, M. S., Nguyen, T. T., Skui, M., Terragni, L., Ngo, Q. V., Vu, H., Mathisen, R., & Henjum, S. (2020). Health staff experiences with the implementation of early essential newborn care guidelines in Da Nang municipality and Quang Nam province in Viet Nam. *BMC health services research*, 20(1), 585. <https://doi.org/10.1186/s12913-020-05449-2>
7. Statistics on breastfeeding practices in hospitals participating in the Centers of Excellence for Breastfeeding Model in Viet Nam and Laos.
8. Black, R. E., Allen, L. H., Bhutta, Z. A., Caulfield, L. E., de Onis, M., Ezziati, M., Mathers, C., Rivera, J., & Maternal and Child Undernutrition Study Group (2008). Maternal and child undernutrition: global and regional exposures and health consequences. *Lancet* 371(9608), 243–260. [https://doi.org/10.1016/S0140-6736\(07\)61690-0](https://doi.org/10.1016/S0140-6736(07)61690-0)
9. Nurturing Care Framework: <https://nurturing-care.org/>