

Equity-focused systematic review of Viet Nam's One Plan (2012-2016)

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Abbreviations and acronyms

ASEAN	Association of Southeast Asian Nations
ATS	Amphetamine Type Stimulant
ARV	Anti-retroviral
CBDRM	Community Based Disaster Risk Management
CEDAW	Convention for the Elimination of all forms of Discrimination Against Women
CEMA	Committee on Ethnic Minority Affairs
CFSC	Committee for Flood and Storm Control
CHS	Commune Health Station
DMC	Disaster Management Center
DOET	Department of Education and Training
DOH	Department of Health
DOLISA	Department of Labour, Invalids and Social Affairs
DV	Domestic Violence
EM	Ethnic Minority
FACG	Focus Area Coordination Group
FAO	Food and Agriculture Organization
GBV	Gender-based Violence
GII	Gender Inequality Index
GIEWS	Global Information and Early Warning System on Food Security and Agriculture
GMS	Greater Mekong Subregion
GoV	Government of Viet Nam
GSO	General Statistics Office
HCMC	Ho Chi Minh City
HDI	Human Development Index
HIV	Human Immunodeficiency Virus
HTC	HIV Testing and Counseling
IDU	Intravenous Drug User
IMAM	Integrated Management of Acute Malnutrition
IMEP	Integrated Monitoring and Evaluation Plan
ILO	International Labour Organization
IOM	International Organization for Migration
IP	Implementing Partner
ISHC	Inter-generational Self-Help-Club
IYCF	Infant and Young Child Feeding
ITC	International Trade Centre
JP	Joint Programme
JPG	Joint Programme Group
KAP	Knowledge, Attitude and Practice
LFS	Labour Force Survey
LGBT	Lesbian, Gay, Bisexual and Transgender
M&E	Monitoring and Evaluation
MARD	Ministry of Agriculture and Rural Development
MDGs	Millennium Development Goals
MEWG	Monitoring and Evaluation Working Group
MICS	Multiple Indicator Cluster Survey
MIP	Minimum Intervention Package
MNCH	Maternal, Newborn and Child Health
MOCST	Ministry of Culture, Sport and Tourism
MOD	Ministry of Defense
MOET	Ministry of Education and Training
MOH	Ministry of Health
MOIT	Ministry of Industry and Trade
MOJ	Ministry of Justice
MOLISA	Ministry of Labour, Invalids and Social Affairs
MPI	Ministry of Planning and Investment

MPS	Ministry of Public Security
MTBBE-AR	Mother Tongue Based Bi-lingual Education Action Research
MUAC	Mid-Upper Arm Circumference
NA	National Assembly
NGO	Non-Government Organization
NSIS	National Statistical Indicators System
NTP	National Target Programme
NTP-PR	National Target Programme for Poverty Reduction
OP	One Plan
OSH	Occupational Safety and Health
PAR	Public Administrative Reform
PLHIV	People Living With HIV
POC	Point of Care
PPC	Provincial People's Council/Committee
PROPEL	Promote the Rights and Opportunities for Persons with Disabilities: Equality through Legislation
PSPMOs	Political, Social, Professional and Mass Organizations
PWU	Provincial Women's Union
PYU	Provincial Youth Union
RBM	Results-Based Management
RCO	Resident Coordinator Office
RUTF	Ready to Use Therapeutic Food
SAVY	Survey Assessment of Viet Nam Youth
SEDP	Socio-Economic Development Plan
SEDS	Socio-Economic Development Strategy
SMEs	Small and Medium Enterprises
SRB	Sex Ratio at Birth
TRIANGLE	Tripartite Action to Protect Migrants within and from the GMS from Labour Exploitation Project
UHC	Universal Health Coverage
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNIAP	United Nations Inter-Agency Trafficking Project
UNICEF	United Nations Children's Fund
UNIDO	United Nations Industrial Development Organization
UNODC	United Nations Office on Drugs and Crime
UNTOC	United Nations Convention Against Transnational Organized Crime
UNWOMEN	United Nations Entity for Gender Equality and the Empowerment of Women
VAAC	Viet Nam Administration of HIV/AIDS Control
VAMAS	Viet Nam Association of Manpower Supply
VDGs	Viet Nam Development Goals
VHLSS	Viet Nam Household Living Standards Survey
VLA	Vietnamese Lawyers' Association
VWU	Viet Nam Women's Union
WHO	World Health Organization

Executive summary

In the context of a lower middle-income country, with a widening gap between rich and poor¹, and a change in the landscape of the development cooperation, the One Plan 2012-2016 between the Government of the Socialist Republic of Viet Nam and the United Nations (UN) aims to contribute to “*reduce the disparities of wealth, access to opportunities and services, and between regions and socio-economic groups, focusing on the most vulnerable and disadvantaged groups*”.

Ahead of the One Plan evaluation in 2015 this assessment, framed as an “Equity-focused systematic review of Viet Nam’s One Plan”, seeks to provide a comprehensive understanding of how UN in Viet Nam, based on the country’s priorities, pursues, monitors and evaluates its contribution to reduce the inequalities and disparities between the best off and the worst off groups.

The Socio-Economic Development Strategy and Plan (SEDS and SEDP), which set the main development objectives for Viet Nam, integrating the localized Millennium Development Goals (MDGs), known as the Vietnam Development Goals, (VDGs), include the reduction of disparities among its main orientations. Most of their targets are however, defined as national average progress as distinct from attention to social disparities between best-off and worst-off. Some sectoral strategies, plans and national targeted programs, pay particular to and define specific objectives related to the improvement of development outcomes and opportunities for vulnerable and disadvantaged groups.

Viet Nam’s MDGs/VDGs and SEDP target monitoring system has been strengthened in the last years with the approval of the Vietnam Statistics Development Strategy (VSDS) and the 2013 Prime Minister Decision on principles and mandates for MDG reporting in Viet Nam. Nevertheless, Viet Nam still lacks of a comprehensive and consistent SEDP reporting mechanism and continues facing some difficulties to collect, analyze and use comprehensive, reliable, regular and disaggregated data². This represents a challenge for the identification of vulnerable populations, the definition of interventions and the tracking of the progress on equity goals.

The objective to reduce inequalities and disparities is reflected in the three One Plan focus areas: **(1)** Inclusive, equitable and sustainable growth; **(2)** Access to quality essential services and social protection, and **(3)** Enhanced Governance and Participation. 27 out of 43 One Plan outputs include a specific reference to most vulnerable and disadvantaged groups.

UN in Viet Nam mainly pursues this objective through changes in the legal and policy framework and in the institutional performance that contribute to create level playing field for the most vulnerable and disadvantaged groups. To achieve those changes, the UN combines several strategies: a) works directly with those in power to make decisions or influence decision-making and strengthen their awareness and capacities for upstream policy changes that benefit disadvantaged groups; b) support the building of national capacities to produce, use and disseminate quality disaggregated data and the development or strengthening of the monitoring and evaluation systems; c) works with service providers to pilot services or to improve the quality of the services delivered to disadvantaged groups; and to a lesser extent, d) by strengthening vulnerable and disadvantaged groups or PSPMOs advocacy capacities and by providing them with opportunities to raise their voice.

In addition to that, although less prominently, the UN in Viet Nam works directly with vulnerable groups to provide them with services, assets and skills and collaborates with other actors, such as the private sector, so they participate in the reduction of disparities.

To jointly monitor and evaluate the progress in the One Plan objectives, the United Nations in Viet Nam defined a range of mechanisms in the results-based management strategy, including a

¹ According to the data from the Vietnamese General Statistics Office (GSO), the “rich-poor gap”, the ratio of means per capita incomes of the top 20 percent income group and the bottom 20 percent income group has increased from 7 to 8.5 between 2004 and 2010. The GSO data also show that for rural areas, the rate of growth in the 10 percent poorest households was less than half of the income growth rate among the 10 percent richest households. The difference in income between these two groups in rural areas has increased by 25 percent from 2004 to 2010. The Gini coefficient of income inequality in rural areas also rose from 0.365 to 0.413 in 2010. Sources: Socialist Republic of Viet Nam (2013), *Millennium Development Goals Full report 2013. Achievements and challenges in the progress of reaching Millennium Development Goals*; and World Bank (2013)’s report, “Well begun, not yet done”

² Some of these difficulties are mentioned in the latest MDG report. See Socialist Republic of Viet Nam (2013), *Millennium Development Goals Full report 2013. Achievements and challenges in the progress of reaching Millennium Development Goals*.

comprehensive set of indicators at the outcome and output level, annual results reports, three formative evaluations and one evaluation of the One Plan. In addition to that, the individual UN agencies carry out mid-term and final evaluations of their interventions.

By the end of this consultancy review, and ahead of the 2015 One Plan evaluation, the United Nations in Viet Nam counts with several advantages to show its contribution to reduce inequalities and disparities with a focus on most vulnerable groups: **a)** An outcomes and outputs chain based on a reasonable theory of change; **b)** a selection of 47 outcome and output indicators to measure the contribution of UN to build a level playing field; **c)** 13 evaluations have provided or 12 have the potential to provide independent evidence of UN contributions in the three focus areas regarding the UN work in benefit of most vulnerable and disadvantaged groups; **d)** Contribution stories from the UN annual reports that build the bridge between some equity-focused outputs and outcomes.

However, the UN also faces several challenges: **a)** The vulnerable and disadvantaged groups are only defined for some One Plan outcomes and outputs; **b)** For some outcomes, there is a gap between the concrete results at the output level and the higher level indicators at the outcome level, and therefore UN may struggle to justify a significant contribution to outcome changes; **c)** Information on indicators related to VHLSS may come from 2012 as VHLSS 2014 is likely not to be available at that time; **d)** the evaluative evidence on the contributions of UN to the One Plan outcomes and outputs is still scarce; there are only few additional evaluations planned to be conducted before mid 2015 and the independent cases studies at outcome level recommended by in the RBM strategy have not been carried out ; **e)** the explanation of the effect of UN actions for vulnerable and disadvantaged groups is not always explicit in the available evaluations and contribution stories; **f)** Several evaluations are mostly based on secondary data without triangulation of information with different stakeholders, which reduces the robustness of the evidence collected.

Based on these opportunities and limitations and the interactions with the UN team during the consultancy, the following recommendations include a number of actions for the United Nations in Viet Nam to be better prepared to the next year One Plan evaluation as well as to strengthening the implementation of the equity approach of the current Plan and to take into account for the development of the new One Plan if, in line with the current proposal of Sustainable Goals, the UN moves forward on responding to the needs of the most vulnerable groups in middle-income country Viet Nam.

Specifically, ahead of the evaluation in 2015, the UN should:

- Consider using an approach that allows to show a comprehensive picture of UN work in Viet Nam and which does not necessarily require the level of data disaggregation that would be most suitable in using the equity approach.
- Due to the risk of not having updated data from a key source such as VHLSS and the lack of clear indicators that bridge the gap between outputs and outcomes and that support the measurement of UN contribution to the different outcomes, an outcome level focused evaluation is not recommended.
- Early 2015, update the IMEP, reviewing carefully with each UN agencies the evaluative evidence available (including those not shared during this consultancy) and identify evaluation gaps on UN contributions to development results. Mid term reviews of UN agencies and other project evaluations are also expected to expand the existing evaluative evidence.
- Due to the limited evaluative evidence available, the evaluation should not be exclusively based on secondary data. It is recommended to include the development of impartial cases studies that collect the opinion of several (external and internal) stakeholders on selected interventions and that will allow to bridge the gap between the outcome and output level. Specifically on those areas where evaluations are not available or planned to be carried out prior to the evaluation should be prioritized.

In order to select the interventions for the cases studies, it is recommended to ask JPGs for suggestions based on a number of criteria such as: a) joint UN initiative; b) result for which UN is a main actor and has provided a clear added value in comparison to other development actors; c) for which there are Government representatives and other actors willing to discuss openly the UN contribution.

- Early 2015, explore with each responsible agency the possibility of bringing forward some of the evaluations planned for the second semester of 2015.

In order to strengthen the implementation, monitoring and evaluation of the equity approach of the current One Plan, the UN should:

- Be more proactive in questioning internally and in providing directions to counterparts on “how does this activity support most vulnerable and disadvantaged groups?”
- Make a better balance between the actions targeting duty bearers and rights holders. More attention should be given to building the advocacy capacities and giving voice to vulnerable groups so they are prepared to claim their policy changes to promote and protect their rights by themselves without donors' support.
- Training and capacity development of UN staff on policy monitoring and evaluation techniques (i.e. process tracing, the most significant change, comparative case study analysis) should be resumed. Options to be explored include synergies with UNFPA regional process on building indicators for measuring UN policy work.
- Enhance knowledge management on how to design equity-focused analysis, interventions and evaluations among UN agencies. Using the expertise available at the national and headquarters levels, joint UN activities should be further explored. For example, lessons learned in using bottleneck analysis or baseline surveys on knowledge, attitudes and practices (KAP) could be better shared among teams to foster learning about and use of those techniques.

Some of these activities could be organized together with Government partners interested (i.e. GSO interest on surveys targeting hard to reach populations).

In moving forward on this approach for the new One Plan:

- Continue the support to Government institutions to create well defined, equity sensitive indicators-linked to relevant data sources. They are necessary to design policies that give opportunities to vulnerable groups for improved development outcomes. In particular, support the Government to ensure that the new SEDP for 2016-2020 and the Viet Nam SDG are accompanied by a robust monitoring and evaluation framework with disaggregated indicators and targets that guide national planning.
- Strengthen the analysis of inequities across the different dimensions of UN work. The nuances of marginalization should be better understood and quantified by United Nations in order to design adequate responses.

A similar methodology to the Common country assessment (CCA) “with a human face”, conducted in Nepal could bring valuable information such as: Which groups have been left behind by recent development gains?; Which groups do not experience a ‘level playing field’ in today’s Viet Nam?; Are there groups who, being subject to particular vulnerabilities or future shocks could substantially reverse the development gains they have achieved in recent years?

- Strive for clearer common conceptual framework and a comprehensive and robust theory of change.
- More emphasis should be given to the development of baselines and solid M&E frameworks for the One Plan and for agencies interventions. In particular, attention should be paid to the integration of alternative monitoring tools on policy advocacy (logs, process tracing, the most significant change, etc) and to a more systematic approach to the evaluation of capacity development³.

Expanding initiatives such as UNDP trainings to implementing partners on results reporting and communication would also contribute to strengthen the joint monitoring and evaluation of development efforts to reduce disparities and inequalities.

³ See for example recommended actions in UNDP (2009): Supporting capacity development, at http://www.undp.org/content/dam/aplaws/publication/en/publications/capacity-development/support-capacity-development-the-undp-approach/CDG_Brochure_2009.pdf

1. Introduction

The One Plan (2012-2016) is the common programmatic framework for United Nations (UN) agencies in Viet Nam responding to the country's priorities, as outlined in the 2011-2020 Socio-Economic Development Strategy (SEDS) and the 2011-2015 Socio-Economic Development Plan (SEDP), and taking as its basis the *“unique role of the UN in supporting and monitoring implementation of basic normative standards and agreement such as the Universal Declaration of Human Rights, the Millennium Declaration and its goals, and the outcomes of international conferences, summits and UN Conventions”*⁴.

In the context of a lower middle-income country with a widening gap between rich and poor⁵ and a change in the landscape of the development cooperation, the One Plan pays specific attention to supporting the Government of Viet Nam in the reduction of inequalities and disparities from a rights-based approach. For the period 2012-2016, the UN aims to contribute to *“reduce disparities of wealth, access to opportunities and services, and between regions and socio-economic groups, focusing on the most vulnerable and disadvantaged groups”*.

Upon the signature of the One Plan 2012-2016, the Government of Viet Nam and the United Nations committed to conduct an evaluation of the One Plan in 2015 in order *“to assess the relevance, efficiency, effectiveness, impact and sustainability of the UN's contributions to the One Programme development outcomes”*. Given the strong focus of the Plan to the reduction of disparities and inequalities, the measurement of the changes in the opportunities and access of vulnerable and disadvantaged groups will be given particular attention in the upcoming evaluation.

Under these premises, UN in Viet Nam commissioned an “Equity-focused systematic review of the One Plan” with the overall purpose of improving development results particularly for most vulnerable and disadvantaged groups through evidence-based learning. The review has two-fold objectives:

- To help define a manageable scope for the evaluation in 2015 by reconstructing the One Plan's theory of change and identifying existing and anticipated limitations in terms of One Plan's conceptual design and data availability.
- To enhance learning on what works and what does not for achieving equity-focused development results by analyzing the effectiveness to date of UN and partner's efforts to reduce disparities, with special emphasis on reaching vulnerable and disadvantaged groups, on each of the three One Plan's Focus Areas.

Specifically this systematic review aims to answer the following six questions:

- What is the One Plan theory of change on equity? To what extent are the One Plan results framework coherently articulated?
- What are the systems and practices currently in place to promote equity-focused monitoring and evaluation within the UN system? And within national systems? What are the challenges and/or enabling factors?
- What are the most promising areas for collaboration among national partners and the UN system on equity-focused monitoring and evaluation? What are untapped opportunities?
- What have been the contributions to equity-focused development results achieved to date by UN agencies and partners on the three Focus Areas?

⁴ *One Plan 2012-2016 between the Government of the Socialist Republic of Viet Nam and the United Nations in Viet Nam.*

⁵ See footnote 1 for data 2004-2010. Recent reports, such as the World Bank's Taking Stock (July 2014), recognize that inequality is a rising concern among Vietnamese citizens and that inequalities persist in areas such as in access to sanitation facilities and learning outcomes. According to the World Bank report, access to sanitation facilities “shows a substantial grade by socioeconomic status. In learning the report refers to a survey conducted by the Ministry of Education and Training to measure the development of children across 5 domains (physical health and well-being; social knowledge and competence; emotional health/maturity; language and cognitive development; and general knowledge and communication skills. Children who scored in the lowest decile in one or more of the domains were considered “vulnerable” in terms of school readiness. Children from poor households in Vietnam are more likely to be vulnerable in each of the five developmental domains. Over four out of ten children from households in the bottom income quintile are vulnerable in at least one domain, which is double the rate for children in the top quintile. The social concern about inequality in income has been reflected in recent Communist Party leaders' interventions. “Vietnam's wealth gap is only widening and poses the most worrying threat to the survival of the political regime, said Communist Party chief Nguyen Phu Trong”, in his wrap-up speech at a regular meeting of the Party Central Committee in October 9 2013. Source: <http://www.thanhniennews.com/society/vietnams-party-chief-warns-against-growing-economic-divide-again-966.html>

- What is the relevance of these results for national commitments to development results?
- How are these results being achieved? What were key enabling factors, constraining factors, lessons learned and good practices identified at this point?

In accordance with the terms of reference, this review was primarily envisioned as an analysis of available documentation. The desk review, which included a broad range of Government and UN documentary sources (see full list in annex), was complemented with a few interviews with selected Government and UN representatives. It was consultancy was conducted from the beginning of October to mid December 2014.

This report answers the above questions in the following sections. After the introduction, section two explains key concepts for this review. Section three describes the main national development commitments and their current monitoring system, analyzing their equity dimensions. Section four turns the attention to the One Plan equity-focused results and reconstructs the theories of change used by United Nations to reduce disparities and inequalities in Viet Nam. Section five relates how the UN in Viet Nam measures the progress achieved against those results and evaluates its work. Section six synthesizes the independent evidence available of the UN's contributions to equity results and the main lessons learned. Section seven assesses the potential of the planned evaluations of UN interventions to provide additional evidence on equity results to feed into the upcoming One Plan evaluation. Finally, section eight and nine conclude the review by providing a set of conclusions and recommendations.

2. Conceptual framework

This assessment is framed as an “Equity-focused systematic review of Viet Nam’s One Plan”. During the consultancy it was observed that the use of the term “equity” generated misunderstandings and therefore this section looks at the definition of equity and equity related concepts and justifies the connection between this term and the focus of the One Plan on the reduction of disparities.

“Equity” is in fact an elusive term. It means different things to different people⁶. The World Health Organization defines “health equity” as the *“absence of unfair and avoidable or remediable differences in health services and outcomes among groups of people”*⁷. For UNICEF “equity” means that *all children have an opportunity to survive, develop and reach their full potential without discrimination, bias or favoritism*⁸. According to UNICEF pro-equity interventions are those that prioritize worst-off groups with the aim of achieving universal rights.

The UNDP Human Development Report 2011 “Sustainability and Equity: A better future for all”, explains that equity has been used interchangeably with fairness, and that “equity has come to refer primarily to distributive justice—that is, unjust inequalities between people”. According to UNIDO’s new vision on Inclusive and Sustainable Industrial Development (ISID) “equity” is understood as *“no one is left behind in benefiting from industrial growth, and prosperity is shared among women and men in all countries”*⁸.

The United Nations Plan for 2012-2016 does not specifically mention “equity” as a principle. The Plan however, constantly refers to “disparities” and “equality” and prioritizes the *“reduction of disparities of wealth, access to opportunities and services, and between regions and socio-economic groups, focusing on the most vulnerable and disadvantaged groups”*⁹.

There are conceptual differences in the terms “equity”, “equality” and “disparities”. The Plan does however not include definitions of each of these terms. Indeed the terms “equity” and “equality” are often used interchangeably in the development literature because, as explained in the above-mentioned Human Development Report, inequity and inequality in outcomes, despite conceptual

6 For more information see World Bank (2005), *World Bank Development Report 2006: Equity and development*

7 See definition at http://www.who.int/gho/health_equity/about/en/

8 See the vision at http://www.unido.org/fileadmin/user_media_upgrade/Who_we_are/Mission/ISID-Brochure-LowRes1_EN.pdf

9 See section on “Partnerships, values and principles” and paragraph 47

differences are closely linked in practice—because inequalities in outcomes are largely the product of unequal access to capabilities.

Based on the terms of reference (see annex 1) and the One Plan results-based management strategy, this review approaches equity from the One Plan's priority on the reduction of avoidable and unfair differences in the access to opportunities, services and wealth for the most vulnerable and disadvantaged groups so they fulfill their rights and share the benefits of development.

This review refers to “*equity focused interventions*” as those programs or projects that meet all or most of the following criteria:

- The intervention theory of change has clearly considered equity issues. Equity is also clearly reflected in the intervention design (logframe, indicators, activities, M&E systems, reporting mechanisms)
- The intervention design benefits from a strong and inclusive stakeholders analysis, which included worst-off groups
- Stakeholders (including most vulnerable groups) participate in the various activities of the intervention in an active, meaningful and free manner
- Data is collected in a disaggregated manner (by gender, race, ethnicity, age, etc) during the implementation of the intervention.
- Reports of implementation and activity require information on how equity was addressed.

Finally, an “*equity- focused evaluation*” is seen as “a judgment made of the relevance, effectiveness, efficiency, impact and sustainability of policies, programmes and projects concerned with achieving equitable development results. This type of evaluation provides assessment of what works and what does not work to reduce inequity and it highlights intended and unintended results for worst-off groups as well as the gaps between best-off, average and worst-off groups¹⁰.

3. Viet Nam national development framework: equity goals and M&E system.

Viet Nam’s development goals are stated in the Socio-Economic Development Strategy (SEDS) 2011-2020, the Socio-Economic Development Plan (SEDP) 2011-2015, development strategies and 16 national targeted programmes for 2011-2015 in multiple areas such as economic growth, sustainable poverty reduction, clean water and rural sanitation, economical and effective energy use, response to climate change and combatting HIV/AIDS. These documents translate and institutionalize the Millennium Development Goals (MDG) into the national framework.

This section describes the main development targets adopted by Viet Nam and looks at to what extent those targets focus on reducing disparities and inequalities for most vulnerable and disadvantaged groups. From there, it describes how the Government monitors the progress towards those objectives.

3.1 Millennium Development Goals and Equity

The values of equality and solidarity, following the principle of equity, are enshrined in the United Nations Millennium Declaration. Equality is understood as no individual or nation being denied the chance to benefit from development, and solidarity, where global challenges are managed in a way that distributes the costs and benefits fairly.

To help track progress on the commitment made in the year 2000 in the [United Nations Millennium Declaration](#), a set of indicators was defined to assess progress over the period from 1990 to 2015 (see table below). Countries are requested to disaggregate data by sex and urban and rural as far as possible.

¹⁰ Segone, M (2011) How to design and manage “Equity-focused evaluations”, UNICEF

Given their design international experts argue that the Millennium Development Goals (MDGs) lack attention to social disparities, as distinct from national average progress¹¹, and that the goals can be achieved without addressing disparities or improving the lives of the very poorest people¹². For that reason, they recommend the strengthening of the equity focus of the next global development goals to ensure that the worst-off groups see the benefit of aggregate gains in sectors such as health, education and others.

Other experts think that, on the one hand, if the poor do not participate in and benefit from national progress, it will be impossible to reach the global MDG-targets by 2015. And, on the other hand, if policies ensure reductions in inequity, progress on the MDGs can be accelerated, even at this late stage.

The MDGs well localized with the approval of the Viet Nam Development Goals (VDGs). By 2014, Viet Nam had submitted six MDGs/VDGs reports. The reports describe and provide data on the significant progress against the targets. However, they also show the inequalities that still persist especially at sub-national level.

To address those gaps, the Government of Viet Nam, with UN support, has approved the Prime Minister Resolution on realization of health-focused MDGs. Furthermore, it is working in the development of an Ethnic Minority MDG Action Plan, using the MDG Acceleration Framework methodology, which provides a systematic way for countries to develop their own action plan based on existing plans and processes to pursue their MDG priorities. These actions are expected to help Viet Nam to focus on disparities and inequalities to ensure further progress in the millennium goals.

¹¹ For example, “by 2015, reduce maternal mortality ratio by $\frac{3}{4}$ (current MDG goal number 4) versus “by 2015 reduce by $\frac{3}{4}$ the maternal mortality ration, ensuring that marginalized groups progress at the same or better rate as the population as a whole (equity-sensitive MGD goal number 4).

¹² ODI (2010), briefing paper The MDG fundamentals: improving equity for development. Closing the gap between the haves and the have-nots. See also Watkins, K (2014), Leaving no-one behind: an equity agenda for the post-2015 goals.

Table 1. Progress and disparities reported in Viet Nam's 2013 MDG report

Goals and Targets	Indicators	Progress	Disparities
Goal 1: Eradicate extreme poverty and hunger			
Target 1.A: Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day	1.1 Proportion of population below \$1.25 (PPP) per day 1.2 Poverty gap ratio 1.3 Share of poorest quintile in national consumption	1.1) 9.6% (2012, using Gov poverty line) 1.2) 5.9% (2010) 1.3) 16.8% (2011)	The pace of reduction is not equal across regions and population groups. A high, often chronic poverty rate persists particularly among ethnic minorities and vulnerable groups, as well as in disadvantaged areas. Female-headed households are over represented among the poor and qualitative evidence suggests that women and children are more vulnerable to reductions in household income.
Target 1.B: Achieve full and productive employment and decent work for all, including women and young people	1.4 Growth rate of GDP per person employed 1.5 Employment-to-population ratio 1.6 Proportion of employed people living below \$1.25 (PPP) per day 1.7 Proportion of own-account and contributing family workers in total employment	Urban unemployment in 2013 was 3.6 per cent and rural unemployment 1.5 per cent	The share of vulnerable employment remained steady at 62 per cent. In urban areas women working in the informal sector struggle to cope with rising living costs and have few social protection or employment benefits.
Target 1.C: Halve, between 1990 and 2015, the proportion of people who suffer from hunger	1.8 Prevalence of underweight children under-five years of age 1.9 Proportion of population below minimum level of dietary energy consumption	Viet Nam reached by 2010 the target to reduce the underweight rate in children aged less than - five years.	
Goal 2. Achieve universal primary education			
Target 2.A: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling	2.1 Net enrolment ratio in primary education 2.2 Proportion of pupils starting grade 1 who reach last grade of primary 2.3 Literacy rate of 15-24 year-olds, women and men	2.1) 97.67% (2012) 2.2) 92.08 % (2012) 2.3) 87.24% (2012)	Primary and secondary completion rates are up to 20 per cent lower in some remote areas, such as the Mekong Delta and for children from ethnic minorities. The rate of illiteracy among ethnic minority people is much higher than Kinh people. Inequality in access to education and the quality of education is a concern for different ethnic minorities, but also for other poor and vulnerable groups who have to spend a large share of their household income on formal and informal education-related expenditure
Goal 3: Promote gender equality and empower women			
Target 3.A: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015	3.1 Ratios of girls to boys in primary, secondary and tertiary education 3.2 Share of women in wage employment in the non-agricultural sector 3.3 Proportion of seats held by women in national parliament	3.1) Achieved. 3.2) In 2012, women accounted for 48.7 per cent of the national labour force and women took up 48 per cent of newly created jobs. 3.3) The percentage of women in government agencies is still relatively high (24.2 per cent).	While gender parity has been reached in education, there are large disparities between urban and rural areas and between ethnic groups and the majority Kinh. Furthermore, there is still inequality in advanced education levels and in access to decent work. Violence against women and girls remains a critical problem. In 2012, 85.1 per cent of domestic violence victims were women and girls. Sexual harassment of women in the workplace is also widespread and the majority of cases go unreported. The sex-ratio-at birth has increased from 111.2 boys per

			100 girls in 2010 to 112.3 boys per 100 girls in 2012. This phenomenon is the manifestation of serious gender inequality, which exists in families and the wider community.
Goal 4. Reduce child mortality			
Target 4.A: Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate	4.1 Under-five mortality rate 4.2 Infant mortality rate 4.3 Proportion of 1 year-old children immunized against measles	4.1) 22.8 per 1000 lives (2012) 4.2) 15.2 per 1000 lives	Newborn deaths represent a growing proportion of deaths in children under five years old and children from ethnic minorities are three to four times more likely to die in the first year of life. Disparities also remain in access to healthcare services among different ethnicities and provinces. In 2011, the under-five mortality rate for ethnic minority children was three times higher than that of children from the Kinh ethnic majority group. The under-one mortality rate in rural areas was 1.6 times higher than that in urban areas.
Goal 5: Improve maternal health			
Target 5.A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio	5.1 Maternal mortality ratio 5.2 Proportion of births attended by skilled health personnel	5.1) 64 per 100,000 live births in 2012. 5.2) 96.7 per cent in 2011	Maternal deaths in the 62 poorest districts are five times the national average and five times higher for women who deliver at home. Large disparities in maternal health indicators remain also among ethnic groups. The maternal mortality rate among ethnic minorities is four times higher than the national average. Although the rate of births attended by a skilled health worker has risen in most provinces, a few areas are witnessing a decline. For example, the proportion of such births in northern Viet Nam's Lai Chau province decreased from 68 per cent in 2008 to 52 per cent in 2011
Target 5.B: Achieve, by 2015, universal access to reproductive health	5.3 Contraceptive prevalence rate 5.4 Adolescent birth rate 5.5 Antenatal care coverage (at least one visit and at least four visits) 5.6 Unmet need for family planning	5.3) Average increase in the annual rate of 0.9 per cent during 2001-2011. 5.4) In 2011, 46 per 1,000 births. 5.5) By 2011, 86.5 per cent	The unmet need for family planning among young unmarried people is still very high (34.3 per cent in 2012).
Goal 6: Combat HIV/AIDS, malaria and other diseases			
Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS	6.1 HIV prevalence among population aged 15-24 years 6.2 Condom use at last high-risk sex 6.3 Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS 6.4 Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years	In 2013, the HIV prevalence rate is stable at 0.3 per cent of the whole population. In 2012, the number of newly identified HIV infection cases reduced by 22 percentage points compared to 2011, and by 31.5 percentage points compared to 2001.	There are still many challenges however, especially in remote and disadvantaged areas. The rate of sexually transmitted HIV has been rising, reaching 45.3 per cent of all newly identified cases in the last six months of 2013. While there is a reduction in newly identified infections, there is a slow but steady rise in infections among women who in 2012 accounted for 31.5 percent of people living with HIV.
Target 6.B: Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it	6.5 Proportion of population with advanced HIV infection with access to antiretroviral drugs	The proportion of HIV patients receiving antiretroviral (ARV) drugs in 2011 was 22-fold higher than in 2005 and 1.5 times higher than in 2009.	
Target 6.C: Have halted	6.6 Incidence and death rates associated	MDG targets on malaria and	

by 2015 and begun to reverse the incidence of malaria and other major diseases	with malaria 6.7 Proportion of children under 5 sleeping under insecticide-treated bed nets 6.8 Proportion of children under 5 with fever who are treated with appropriate anti-malarial drugs 6.9 Incidence, prevalence and death rates associated with tuberculosis 6.10 Proportion of tuberculosis cases detected and cured under directly observed treatment short course	tuberculosis were achieved by 2011. Between 2000-2013, confirmed cases of and deaths caused by malaria dropped by 77 and 96 per cent, respectively.	
Goal 7: Ensure environmental sustainability			
Target 7.A: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources	7.1 Proportion of land area covered by forest 7.2 CO2 emissions, total, per capita and per \$1 GDP (PPP) 7.3 Consumption of ozone-depleting substances	By 2011, the proportion of land covered by forest reached 39.7 per cent. In 2012, the protected terrestrial and marine area increased by 4.7 per cent compared to 2010.	
Target 7.B: Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss	7.4 Proportion of fish stocks within safe biological limits 7.5 Proportion of total water resources used 7.6 Proportion of terrestrial and marine areas protected 7.7 Proportion of species threatened with extinction		
Target 7.C: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation	7.8 Proportion of population using an improved drinking water source 7.9 Proportion of population using an improved sanitation facilities	By 2010, 80 per cent of the rural population had access to clean water and 77 per cent had sanitary latrines.	The three regions with the lowest use of sanitary toilets are the Mekong Delta, Central Highlands and Northern mountainous region.
Target 7.D: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers	7.10 Proportion of urban population living in slums	The proportion of temporary houses decreased by 5.6 per cent in 2010	
Goal 8: Develop a global partnership for development			
Target 8.E: In cooperation with pharmaceutical companies, provide access to affordable essential drugs	8.13 Proportion of population with access to affordable essential drugs on a sustainable basis	The domestic pharmaceutical market is more tightly regulated and prices remain high, making it difficult for the public to access medicines at affordable prices.	

The proposal of the Open Working Group on the next global development goals, known as “Sustainable Development Goals”¹³, ambitions, among others, the “eradication of extreme poverty” or the “universal access to sexual and reproductive health”. Furthermore, the proposal recognizes the need for urgent action to “*improve the quality, coverage and availability of disaggregated data to ensure that no one is left behind*” and underlines the importance of the availability and access to disaggregated data by “*income, gender, age, race, ethnicity, migratory status, disability, geographic location and other characteristics relevant in national contexts*”. If the proposal is adopted by the United Nations General Assembly, the realization of those goals will require countries, including Viet Nam, focus the attention on the improvement of the living standards and the access to services of most vulnerable and disadvantaged groups as well as to the generation and access to additional disaggregated data.

3.2 Viet Nam socio-economic priorities & Equity

“Viet Nam’s development strategy is towards sustainability, including three mainstays: economic development accompanied with ensuring social equity and environmental protection”. Prime Minister Nguyen Tan Dung, 2010¹⁴

The Socio Economic Development Strategy (SEDS) 2011-2020 identifies as key components: the structural reforms, environmental sustainability, social equity, and emerging issues of macroeconomic stability.

The Socio-Economic Development Plan (SEDP) 2011-2015, which elaborates the objectives of the first five years of the SEDS, refers to “eliminating hunger and reducing poverty and narrowing the gap between the rich and the poor”. Among its priorities it includes the improvement of the living standards of “those living in remote mountainous areas, islands, areas stricken by extreme difficulties and ethnic minority-inhabited areas”. In particular, it refers to ensuring secure residence for people in mountainous, ethnic minority and border areas and islands and balance residential and production land sources for residents in the areas regularly affected by natural calamities”. Furthermore, it seeks to increase expenses for health care, “focusing on supporting disadvantaged people to secure health insurance and increase support level for poor and near-poor households and those working in the agricultural, forestry, fishery and salt making sectors to afford health insurance”¹⁵.

For other objectives such as employment creation or social insurance coverage, the SEDP targets the general population or “various subjects” without further specification on a particular group¹⁶.

The SEDP includes a range of economic, social and environmental targets (see table 2 below). An ambitious and specific goal in poverty reduction for poor districts and communes with special difficulties is defined. Other targets of particular importance for vulnerable and disadvantaged groups in Viet Nam such as housing use average measures.

Table 2. Socio-economic development plan targets

Main targets of the five year socio-economic development plan 2011 - 2015	
Economy	▪ On average, gross domestic product (GDP) in 5-year will increase 6.5% -7% annually.
	▪ Total social investment in 5 years of 2011-2015 will be approximately 33.5% -35% of GDP.
	▪ Trade deficit is attempted to gradually decline from 2012 and will be at less than 10% of export turnover in 2015.
	▪ State budget deficit will be below 4.5% in 2015 (including government bonds).
	▪ Energy consumption per GDP will reduce from 2.5% to 3%/year.
	▪ High-tech products will make up about 30% of the total industrial output value; technological innovation rate will obtain 13%/year.

¹³ <http://sustainabledevelopment.un.org/sdgsproposal.html>

¹⁴ http://www.cpv.org.vn/cpv/Modules/News_English/News_Detail_E.aspx?CN_ID=396692&CO_ID=30113

¹⁵ Orientations on tasks and solutions for 2011-2015 socio-economic development.

<http://www.chinhphu.vn/portal/page/portal/English/strategies/strategiesdetails%3FcategoryId%3D30%26articleId%3D10052505>

¹⁶ “Develop a diverse social insurance system open to various subjects to use social and health insurance services”, same source as above

	<ul style="list-style-type: none"> ▪ Social labor productivity in 2015 will increase by 29% -32% compared to 2010. ▪ Tax and fee mobilization to the budget will not exceed 22% -23% of GDP/year. ▪ In 2015, public debt must not exceed 65% of GDP, government debt must not exceed 50% of GDP, the national debt must not exceed 50% of GDP. ▪ The consumer price index will rise about 5% -7% in 2015.
Social	<ul style="list-style-type: none"> ▪ Number of new jobs created in 5 year will reach 8 million. ▪ The unemployment rate of workers in working age in urban areas by 2015 will be less than 4%. ▪ Proportion of trained workers in the total labor force working in the economy will reach 55% by 2015. ▪ Real income of the population in 2015 will be 2-2.5 times higher than that in 2010. ▪ The poverty rate will be reduced quickly and sustainably with an average reduction rate of 2%/year for the whole country and of 4%/year for the poor districts, communes with special difficulties. ▪ The average housing area by 2015 will reach 22 m2/person, in which: the average housing area in urban areas will have reached 26 m2/person. ▪ The population growth rate by 2015 will be about 1%. ▪ There will be 8 doctors and 23 beds (excluding beds in village health stations) per 10 thousand people by 2015.
Environment	<ul style="list-style-type: none"> ▪ Forest coverage by 2015 will be about 42% -43%. ▪ Proportion of enterprises causing serious environmental pollution treated will reach 85% by 2015.

3.3 Other development targets and Equity

At a local and ministerial level, development strategies, master plans and targeted programmes are also designed and implemented to pursue development goals.

Among the targets defined for the next period, the following table lists those that refer to vulnerable and disadvantaged groups¹⁷. As it can be observed, the greatest attention is given to ethnic minorities for whom specific targets have been established in a number of sectors. Attention is also given to other vulnerable and disadvantaged groups, such as the victims of domestic violence or trafficking, for whom some concrete targets are included in the sectoral documents. However, the needs of other vulnerable or disadvantaged groups, such as LGBT, are not specifically or clearly addressed (i.e. “access to reproductive health of some peculiar population groups”).

Table 3. Specific official targets for vulnerable and disadvantaged groups

Gender Equality and Women Empowerment indicators	
Proportion of rural women workers below 45 years old receiving professional and technical training (%)	50
Proportion of women in poor rural and ethnic minority areas having the demand to receive loans from job creation and poverty reduction programs and official credit sources (%)	100
Literacy rate of males and females from 15 to 40 years old in remote areas, ethnic minority and extremely difficult areas (%)	95
Proportion of domestic violence victims identified and receiving legal and health consultation, support and care at supporting centers (%)	50
Proportion of trafficking victims returned and rescued (%)	100 (period 2015-2020)
Health Sector Indicators	
Access to reproductive health of some peculiar population groups	50
Increase in the number of district health care centers for the elderly (%)	50
Elderly having access to community-based health care (%)	50
To reduce new HIV infections among the IDU group (%)	80
HIV infected people receiving ARV treatment (%)	80
Environmental indicators	

¹⁷ All the indicators but the ones on disabilities have been extracted from the 2013 Millennium Development Goals report. The indicators regarding people with disabilities are a selection of those included in the Decision No. 4039/QĐ-BYT dated 06/10/2014 regarding the Approval of National Plan on Rehabilitation Development for period of 2014-2020 of Viet Nam

Number of poor households (according to new poverty standards) living in rural areas, having supports to improve housing condition	about 500,000 households
Ethnic minority indicators by 2020	
Proportion of ethnic minority labor receiving education and training (%)	Over 50, of which 20 % receives prof training
Proportion of school age children going to school (%)	95
Number of university and college EM students per 10,000 habitants	300
Proportion of EM agriculture labors among the labor force (%)	50
Proportion of EM commune officials receiving training (%)	100
Proportion of EM commune officials having college and university degrees or higher (%)	70
Ethnic minority annual poverty reduction rate in the Northwest, Central Highlands, Southwest, Central Coast, East Truong Son, the revolutionary base areas (%)	4-5
Eliminate dilapidated housing, the proportion of houses meeting the standard (%)	70
Average income per capita in ethnic minority areas	4 times compared to the current level
Infrastructure in ethnic minority areas	
Proportion of inter-communal roads is asphalt or concrete (%)	100
Proportion of inter-hamlet, inter-village roads is harden complying with the technical standards stated in New rural development program (%)	Above 50
Proportion of households using electricity regularly	Above 95
Proportion of households using clean water (%)	100
Communes have postal, telecommunications, internet service	Most villages
Culture and society in ethnic minority areas	
Conserve and promote traditional cultural identities	
Proportion of households watching television (%)	100
Develop human resources fully in terms of intellectual, moral, physical, spiritual, citizenship and law-abiding aspects	
Proportion of health stations meeting national standards and having doctors (%)	100
Implement health insurance policy for ethnic minorities	
Living environment in ethnic minority areas	
Minimize the damage caused by environmental and natural disasters	
Rearrange the livestock, poultry and toilet areas to ensure hygienic rural environment	
Disability people indicators by 2020	
Proportion of commune health stations having staff in charge of rehabilitation services with basic training on it (%)	90
Proportion of district hospitals having the department/division/team specialized in rehabilitation with doctors/health technicians trained in rehabilitation (%)	90
Proportion of Rehabilitation Institutions having communication activities on disability prevention, rehabilitation and community-based rehabilitation (%)	100
Proportion of provinces and cities under central level implements and maintains the community-based rehabilitation programme in at least 40% of number of communes/wards/townships under that province/city	100
Proportion of children from infant to 6 year olds having the screening to early detect the birth disability and developmental disorder, and having the early intervention	70
Proportion of disability people in needs which have an access to suitable rehabilitation services for them to be able to integrate with community	80

3.4 Results- based monitoring and evaluation framework in Viet Nam

According to Decision 488/QĐ-BKH of 2009, the Department of National Economic Issues, under the Ministry of Planning and Investment is responsible for the monitoring and evaluation of the SEDP. Specifically, the department is assigned to a) coordinate with relevant departments/units to define the indicator system as well as the methods to collect information on the planned indicators; b) to coordinate with external and internal relevant departments/units to regularly monitor its implementation and provide the recommendations and solutions for improving the direction and execution of plan implementation.

GSO is the Government agency responsible to support the Department on collecting the information on the indicators under the national socio-economic plan and strategy.

The monitoring of Viet Nam's progress against the MDGs and SEDP targets has been strengthened in the last years. However, there are still some significant challenges such as the lack of a comprehensive and consistent reporting mechanism for the SEDP.

To overcome those obstacles the Government of Viet Nam approved the Strategy for Statistics Development for the period 2011-2020 and vision till 2030. The Strategy sets out a specific action plan to build up a complete national database system including a database for MDG/VDG to assist the planning, monitoring and evaluation activities for implementation of the national Socio-Economic Development Plan. However, the development and update of this database system are still in progress.

Furthermore, in September 2013 the Prime Minister approved a Decision (No.1755/QD-TTg) on the principles and mandates for MDG reporting in Viet Nam. This decision (art.1) provides for the collection of data and MDG reporting “in accordance to international practices and Viet Nam specific conditions based on the MDG indicators set”, which is attached to the Decision. It also requires to integrate MDG reporting in annual and 5 year SEDP annual reports.

The indicator system consists of 75 indicators to measure progress against the 8 MDGs (44 out of the 75 from the National Statistics Indicator System, NSIS) and 35 indicators that assess the progress on the additional Viet Nam targets (with 5 corresponding to indicators included in the NSIS)

Table 4. Viet Nam MDG's indicators framework

Goal/ Indicator	Periodicity	Responsible agency	Dissaggregation	(Codes in Dec No. 43, 2010)
Goal 1: Eradicate extreme poverty and hunger				
Poverty rate (national standard)	Annually	GSO	Total; urban – rural; province, city; ethnic group of household head.	1905 - NSIS
Rate of famine households, people	Annually	MOLISA	Total; province, city	1906 - NSIS
Poverty gap rate	Annually	GSO	Total; urban – rural; province, city; sex; ethnic group of household head.	1907 - NSIS
GDP growth rate per labor head	Annually	GSO	Total; province, city	0603 - NSIS
Difference of average income per person between the household groups with highest and lowest income	Annually	GSO	Total; urban – rural; province, city; ethnic group of household head.	1903 - NSIS
Under 5 malnutrition rate	Annually	MoH	Total; urban – rural; province, city; sex;	1711 - NSIS
General poverty rate (international standard)	Every 2 years	GSO	Total; urban – rural; sex;	
Expenditure proportion of 20% poorest group in comparison with total national consumption expenditure	Every 2 years	GSO	Total; urban – rural; sex; ethnic group of household head.	
Labor rate since 15 years old and above in comparison to total population since 15 years old and above	Annually	GSO	Total; urban – rural; province, city; sex.	
Labor rate of self-employment and family employment among total labor	Annually	GSO	Total; urban – rural; province, city; sex, ethnic groups.	

Note: unofficial consultants' translation

At the sectoral level, with a few exceptions, such as the framework to monitor and evaluate the results based on the implementation of the agriculture and rural development sector five-year plan or the National Monitoring and Evaluation Framework of the HIV/AIDS Prevention and Control Strategy, there are no comprehensive M&E plans and the monitoring of most plans still emphasizes inputs and outputs, rather than outcomes and impacts.

Up to now the data is obtained from two main sources: the line ministries' data sets obtained under the centralized statistical system model or sub-national population-based survey data produced by General Statistics Office (GSO), such as the Viet Nam Household Living Standards Survey (VHLSS), the Labour Force Survey or the Survey Assessment of Vietnamese Youth (SAVY).

The information (indicator and level of disaggregation) to be collected as well as the responsible agencies are detailed in the National Statistics Indicators System (NSIS). As shown in annex 2, Viet Nam regularly gathers disaggregated information on a broad range of indicators. For example, GSO through VHLSS collects information about household income and expenditure and as well as non-monetary indicators (education, health, housing, participation in poverty programs, etc), using identifiers for stratification such as income, location or ethnic group for some dimensions. This information is critical to measure disparities in Viet Nam not only regarding income level (i.e. calculation of gini coefficient) but also in access to services and programs.

Recently, the Government has made efforts to obtain information from other vulnerable groups. For example, GSO in the last VHLSS rounds changed the sample criteria to cover groups of internal migrant population.

However, the NSIS does still not capture important information on disparities in Viet Nam. For example, while information is collected on enrolment rate of basic education by age, level, sex, ethnic group and province/city, the repetition and dropout rate is only collected by education level, sex and province/city. Therefore, decision-makers lack key information regarding disparities in education outcomes for ethnic minorities groups.

In addition to the above, GSO recognizes other challenges in the collection of equity related data, including: i) VHLSS falls short on further disaggregation such as for example intra-household inequalities; ii) lack of experience in the design and implementation of the time use survey and iii) lack of knowledge on specific surveys or interviews methodologies targeting most marginalized or hard to reach groups.

Finally, the frequency of data availability is still not high and creates difficulties to prove updated data about development results. For instance, the VHLSS 2012 data were publicly shared in March 2014.

Donors support the Government to collect additional disaggregated information on a regular or ad hoc basis. For example, GSO gets the support from UNICEF and UNFPA to conduct the Viet Nam Multiple Indicator Cluster Survey (MICS) in a number of regions. MICS provides up-to-date information on the situation of children and women and measures key indicators that allow countries to monitor progress towards the Millennium Development Goals (MDGs) and other internationally agreed upon commitments. The survey presents data from an equity perspective by indicating disparities by sex, region, area, ethnicity, living standards and other characteristics.

Box 1. Global inequality indexes and Viet Nam

In addition to the well-known Gini and Atkinson coefficients, which measure income inequality, there are other indexes used at the global level that measure inequalities in several dimensions. The inequality human development index and the gender inequality index are two of these indexes for which data for Viet Nam is available.

Inequality Human Development Index (IHDI)¹⁸

The IHDI was introduced globally in the 2010 Human Development Report. It takes into account inequality in all three dimensions of the HDI (a long and healthy life, being knowledgeable and have a decent standard of living) by 'discounting' each dimension's average value according to its level of inequality. The IHDI relies on data on income/consumption and years of schooling from major publicly available databases.

Viet Nam's HDI for 2013 is 0.638. When the value is discounted for inequality, the HDI falls to 0.543, a loss of 14.9 percent due to inequality in the distribution of the dimension indices. The average loss due to inequality for medium HDI countries is 25.6 percent and for East Asia and the Pacific it is 19.7 percent.

One of the limitations of this index in measuring inequality in Viet Nam is that because of the use of average measures for each dimension it does not inform about inequalities among regions or ethnic groups.

¹⁸ UNDP (2014) Explanatory note on the 2014 Human Development Report composite indices, http://hdr.undp.org/sites/all/themes/hdr_theme/country-notes/VNM.pdf

Gender Inequality Index (GII)

The Gender Inequality Index (GII) reflects gender-based inequalities in three dimensions –reproductive health, empowerment, and economic activity. Reproductive health is measured by maternal mortality and adolescent birth rates; empowerment is measured by the share of parliamentary seats held by women and attainment in secondary and higher education by each gender; and economic activity is measured by the labour market participation rate for women and men.

The GII can be interpreted as the loss in human development due to inequality between female and male achievements in the three GII dimensions. Viet Nam has a GII value of 0.322, ranking it 58 out of 149 countries in the 2013 index

4. Equity and the One Plan 2012-2016: equity goals and theory of change

4.1 Equity focus of the One UN Plan

The OP recognizes inequalities in the distribution of assets, income and access to services as well as inequalities in terms of voice and power, due to geographical, social, economic and political constraints.

The objective to reduce inequalities and disparities, focusing on most vulnerable and disadvantaged groups is reflected in the three focus areas of the One Plan: (1) Inclusive, equitable and sustainable growth, (2) Access to quality essential services and social protection, and (3) Enhanced governance and participation.

Out of the 43 outputs to be achieved by 2016, 27 outputs refer explicitly to most vulnerable and disadvantaged groups as rights holders and aim to reduce disparities and inequalities between them and other population groups¹⁹. These 27 outputs constitute the sample for this review.

Table 4. One Plan equity-focused outputs

Outcomes with equity focus	Outputs with equity focus
FOCUS AREA 1	
Outcome 1.1: By 2016, key national institutions formulate and monitor people-centred, green and evidence-based socio-economic development policies to ensure quality of growth as a middle-income country	▪ Output 1.1.2: Strategic options for development policies defined and considered by policy-makers to promote inclusive, people-centred and equitable development
	▪ Output 1.1.3: A multi-dimensional and human development approach is adopted in the poverty reduction components of SEDPs at national and sub-national level to effectively address chronic and emerging forms of poverty
Outcome 1.2: Institutions create opportunities for decent work for people of working age, particularly the most vulnerable and disadvantaged, to benefit in the process of socioeconomic transformation;	▪ Output 1.2.1: Inclusive policies and support programmes for sustainable enterprise development are formulated and implemented with particular focus on micro and small enterprises, for decent job creation and progressive formalization of the informal sector
	▪ Output 1.2.2: Vocational training and specialized skills development policies and support programmes of a high standard are formulated in response to market needs and accessible in particular to vulnerable groups and the informal economy
	▪ Output 1.2.4: Employment policies are strengthened to prevent and address discrimination and exploitation of internal and external migrant workers, and other disadvantaged groups in the labour market due to their sex, HIV status or disability
Outcome 1.3: By 2016, key national and sub-national Agencies, in partnership with the private sector and	▪ Output 1.3.1: Planning and investment processes are climate proofed and specific programmes have been formulated and operationalized ¹ for long term adaptation to reduce climate change vulnerabilities
	▪ Output 1.3.2: Resilience of at-risk and vulnerable groups to natural hazards is enhanced,

¹⁹ The One UN RBM Strategy 2012-2016 refers to 8 out of 12 outcomes and 11 out of 43 outputs focused on “most vulnerable and disadvantaged groups”. For this report, the consultants selected a higher number of “equity-focused” outputs and classified as “equity-focused” all those that included reference to vulnerable and disadvantaged groups not only in the text of the output but also in the indicators and rationale described in the One Plan.

communities, have established and monitor multi-sectoral strategies, mechanisms and resources to support implementation of relevant multilateral agreements and effectively address climate change adaptation, mitigation and disaster risk management	and nationally relevant aspects of international agreements on disaster risk management are implemented
Outcome 1.4: By 2016, key national and sub-national Agencies, in partnership with the private sector and communities, implement and monitor laws, policies and programmes for more efficient use of natural resources and environmental management, and implement commitments under international conventions	<ul style="list-style-type: none"> ▪ Output 1.4.4: Regulations and fiscal tools formulated and operationalized to enhance rights of the land holders, improve land use and water resources management, and enhance access to decent and social housing by the poor and vulnerable groups

FOCUS AREA 2

Outcome 2.1: A more effective national social protection system provides increased coverage, quality, and equitable access for the most vulnerable and disadvantaged groups;	▪ Output 2.1.1: High quality evidence is available for use by decision-makers to inform the formulation, monitoring and evaluation of social protection related legislation and policy
	▪ Output 2.1.3: Alternative legal, policy, targeting and financing options are available and considered by the Government for the expansion of integrated and adequate social assistance, social insurance and social welfare and protection services
	▪ Output 2.1.4: Institutional and human resource capacity strengthened to design and deliver social assistance, social insurance, and social welfare and protection services
Outcome 2.2: Increased quality and effective management of a comprehensive national health system, including health promotion and health protection, with a focus on ensuring more equitable access for the most vulnerable and disadvantaged groups;	▪ Output 2.2.1: Policy advice and technical support provided to strengthen the building blocks of human and animal health systems, including information systems and the generation of evidence, at national and sub-national levels
	▪ Output 2.2.3: National and sub-national capacities enhanced to improve evidence about, prevent and control communicable diseases of humans and animals
	▪ Output 2.2.4: National and sub-national capacities enhanced to strengthen evidence, improve universal access to, and utilization of, a quality and gender-sensitive package of nutrition and sexual, reproductive, adolescent, maternal, neonatal, and child health care and services
	▪ Output 2.2.5: National and sub-national capacities enhanced to improve evidence and the equitable access to and demand for quality and sustainable water supply and hygienic sanitation
Outcome 2.3: Increased quality and effective management of education and training systems, and increased access to pre-primary, primary, and continuing education, particularly for the most vulnerable and disadvantaged groups;	▪ Output 2.3.1: Improved evidence is available to ensure education policies are inclusive, relevant and learner-friendly with a special focus on vulnerable and disadvantaged groups
	▪ Output 2.3.2: Educational institutions have enhanced capacities to improve learning outcomes and literacy for all, in particular for vulnerable and disadvantaged groups
	▪ Output 2.3.3: Education institutions and managers at national, provincial and district levels have enhanced capacities to develop, implement and monitor evidence-based policies and programmes for improved quality of teaching and learning for all
Outcome 2.4: National and sub-national institutions, in partnership with communities, more actively address inequalities through implementation and	▪ Output 2.4.1: National HIV legal and policy frameworks strengthened to guide evidence-informed responses that effectively address stigma, discrimination, inequality and inequity
	▪ Output 2.4.3: Gender-related legal and policy frameworks, programmes and practices strengthened to effectively address gender inequality and inequity, gender discrimination

<p>monitoring of laws, policies and programmes that promote gender equality and women's empowerment, and an effective and sustainable response to HIV, reducing stigma and discrimination.</p>	<p>and gender-based violence</p> <ul style="list-style-type: none"> ▪ Output 2.4.4: Multi-sectoral coordination mechanisms effectively guide comprehensive evidence-based planning, budgeting, M&E for a sustainable response to gender inequality, inequity, discrimination and gender-based violence
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FOCUS AREA 3

<p>Outcome 3.1: Elected bodies are better able to formulate laws and oversee the performance of State agencies and represent the aspirations of the Vietnamese people, especially women, ethnic minorities and other vulnerable and disadvantaged groups;</p>	<ul style="list-style-type: none"> ▪ Output 3.1.2: Elected officials and bodies have improved capacities to interact and consult with citizens, especially vulnerable and disadvantaged groups
<p>Outcome 3.2: All citizens, particularly the most vulnerable and disadvantaged groups, benefit from strengthened legal and judicial reform and increased access to justice, enhanced capacity of legal and judicial professionals, and strengthened national legal frameworks to support the implementation of international conventions ratified by Viet Nam;</p>	<ul style="list-style-type: none"> ▪ Output 3.2.1: Policy, legal and regulatory framework strengthened to better reflect the rights of the most vulnerable groups and increase their access to justice ▪ Output 3.2.2: Law enforcement and judicial institutions strengthened to better protect rights, and provide increased access to justice to all people, particularly the most vulnerable groups ▪ Output 3.2.4: Awareness-raising programmes and legal support services developed and effectively implemented to enable all people, particularly vulnerable groups, to be aware of, and claim their rights
<p>Outcome 3.3: Improved performance of the public sector institutions at national and sub-national levels, through enhanced coordination, accountability, transparency and anti-corruption efforts, will reduce disparities and ensure access to public services for the most vulnerable and disadvantaged groups;</p>	<ul style="list-style-type: none"> ▪ Output 3.3.1: Government Agencies at the national and sub-national level are able to apply participatory, evidence-based and cross-sectoral approaches in planning, implementation of and monitoring the public services delivery for the most vulnerable and disadvantaged groups
<p>Outcome 3.4: Political, social, professional and mass organizations participate effectively in policy discussion and decision-making processes for the benefit of the most vulnerable and disadvantaged groups.</p>	<ul style="list-style-type: none"> ▪ Output 3.4.2: PSPMOs' human resources and organisation capacities strengthened to provide significant contributions in the development of policies in the best interests of the most vulnerable groups

4.2 One Plan theories of change on equity results

A theory of change articulates how and why a given interventions will lead to specific changes. The One Plan lacks of a written theory of change describing the assumptions and the evidence behind the outputs and outcomes. This consultancy built it (them) ex-post based on the review of available documentation.

The complexity of the One Plan with 12 outcomes and 43 outputs was the first challenge encountered in reconstructing its theory of change. A single theory of change would not show the richness of the One Plan and, at the same time, there was not enough time to build theories of change for all the UN interventions under the current One Plan. It was therefore agreed that the consultants would build several theories of change following the JPG structure, using as the main sources of information the One Plan results matrix, and the key actions and contributions expected in 2012, 2013 and 2014 combined with a few interviews with UN agencies. This review recognizes the limitations of this approach, as the development of comprehensive theories of change would require significant interaction and discussion with key stakeholders engaged in the design and implementation of the One Plan. Furthermore, although it creates a good basis for analysis it also anticipates that further work by JPG may be necessary to conclude the theories of change attached to the report.

A second challenge for this task was the absence of definitions of important terms for the purpose of this review. For instance, the terms “inclusive growth” or “participatory planning process” are often used without clarifying to what extent these terms refer to vulnerable and disadvantaged groups.

This document presents 13 graphic representations of theories of change related to the One Plan equity outcomes and outputs (Please refer to the theories of change diagrams included in annexes to this report). Furthermore, it includes an explanation of the overall UN theory of change on equity based on the identification of common elements among the reconstructed theories of change.

The United Nations for the period 2012-2016 seeks to contribute to the reduction of disparities in income, decent work, access to services (health, education, justice, labour) and voice. To achieve those results the UN promotes at the policy level an universal approach in the provision of social services (health, education, nutrition, housing, water and sanitation) as well as supports the Government of Viet Nam to identify and remove the obstacles that prevent the most vulnerable and disadvantaged groups to access those services provided under an universal approach. The UN also promotes an effective social protection system that ensures basic income security for the most vulnerable and disadvantaged groups. Furthermore, the UN in Viet Nam support the creation of decent work opportunities and the investment in education and training for those groups. Finally, the UN also promotes the most vulnerable and disadvantaged groups contribute and participate in local and national governance.

Equity development results, such as the improvement in the access of ethnic minority groups to quality education or the access of victims of domestic violence to justice services, are most frequently pursued through changes in the legal and policy framework that contribute to build a level playing field and through changes in institutional performance so those enabling regulations can be effectively implemented.

To achieve those changes the United Nations in Viet Nam:

- i) Works directly with those with power to make decisions or influence decision-making at the national and local level and strengthens their awareness and capacities for upstream equity focus policy changes.

UN in Viet Nam builds the awareness on equity issues, such as the barriers faced by ethnic minority women to access public health services at the commune level, through advocacy and policy advice. This frequently takes the form of engagement in national policy dialogue, policy briefs or policy oriented studies that bring evidence on inequities and suggest policy options to address them. For example, the UN has supported CEMA to organize high level policy dialogues on ethnic minority development, raising the attention to important equity concerns.

This is then often accompanied by technical assistance and trainings to strengthen the capacity

of policy makers to carry out those policy changes. For example, the UN supports the Ministry of Health to cost policy options to expand health insurance so more vulnerable groups are covered and the financial barrier in access to health services is removed.

ii) Supports the building of national capacities to produce and disseminate quality disaggregated data on vulnerable populations that allows for mapping of demographic disparities and socioeconomic inequalities. These data are necessary to build the base for equity-oriented interventions. For example, several UN agencies support the Government of Viet Nam to conduct the multiple indicator cluster survey (MICS) that provide comprehensive information on the situation of vulnerable women and children.

iii) Strengthen policymakers' capacities for using data and evidence on vulnerable groups to monitor and evaluate national policies and programmes. At the same time UN also supports Government institutions to build or improve their monitoring and evaluation systems so the progress on the implementation of key policies for vulnerable groups can be better tracked. An example is the support to establish the monitoring and evaluation systems for Resolution 80 and the NTP-SPR.

iv) Supports the Government to pilot new services targeting vulnerable groups, such as the migration resource centers in 6 provinces.

v) Strengthens the awareness and capacities of service providers/ law enforcement actors so they can play an effective role in improving the access to and quality of the services delivered to protect vulnerable and disadvantaged groups.

For example, United Nations in Viet Nam, through the pilot treatment 2.0 support the capacity building of community health workers to provide HIV services at the commune level. UN also enhances the capacities of border guard to combat human trafficking and child sex tourism.

vi) Works with vulnerable and disadvantaged groups to strengthen their advocacy capacities and providing them with opportunities to raise their voice so they can advocate the Government to solve the inequities they face.

For example, United Nations in Viet Nam supports people living with HIV to improve their skills to advocate for affordable HIV treatment. Another example is the support given to vulnerable groups to participate in community-based disaster risk management (CBDRM) decision-making processes.

viii) Strengthen the awareness and knowledge of social actors on equity issues so they can advocate for policy and institutional changes in support of vulnerable and disadvantaged groups. For example, the UN enhances the knowledge of the Women Union and NGOs on gender equality and gender justice or the civil society organizations supporting LBGT and people with disabilities.

vii) Fosters coordinated policy dialogue among Government and other development actors. One example is the support to the task force on sectoral agricultural restructuring proposal.

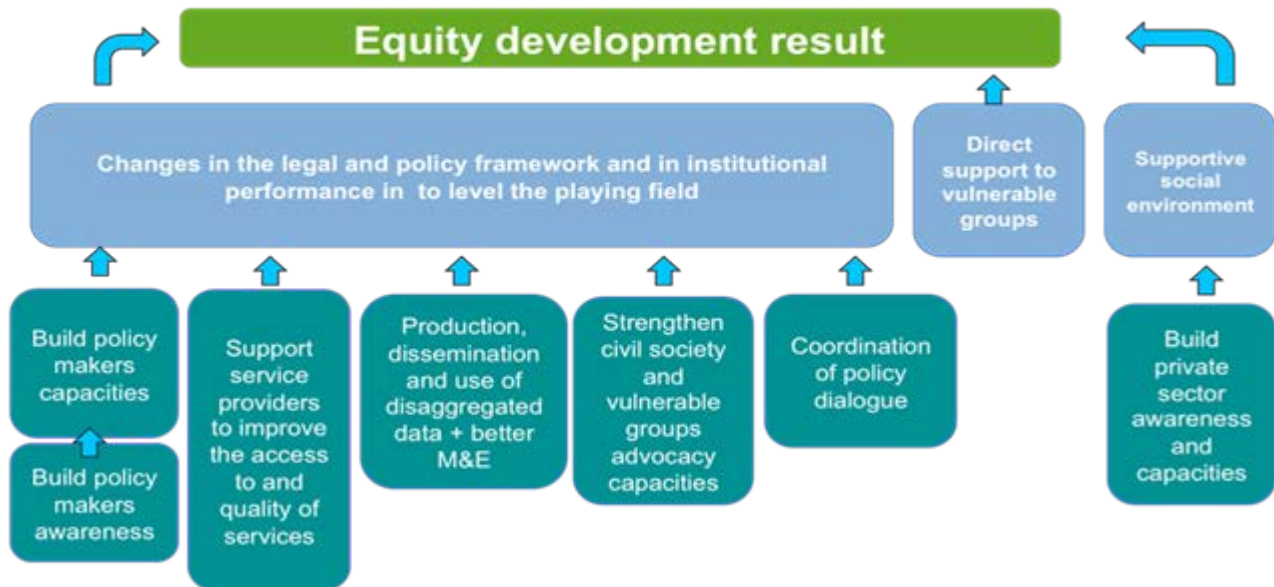
Equity development results are also pursued, although less frequently, by working directly with vulnerable groups to strengthen their skills or knowledge, to provide them with assets or services they may need.

The Joint Programme on Green Trade and Growth is an example of the direct support to vulnerable groups by providing them with training on market development or production of high quality products accompanied by facilitation of opportunities in access to external markets.

Another example is the provision of investment to establish new water connections and improve treatment of household water and storage as well as sanitary latrines.

Finally, the United Nations also contributes to reduce disparities by working with other actors, such as the private sector, so they participate in the elimination or reduction of disparities. For example, the United Nations enhances the knowledge of licensed recruitment companies on international migration laws and human rights so they can better promote decent labour opportunities.

OP Equity Theory of Change



The Health JPG is at the forefront in the development of a solid theory of change on equity. In the 2013 annual report, the JPG included a sound narrative on how United Nations in Viet Nam works to reduce inequities in health (see box below).

Box 2. Health JPG and Equity

Significant disparities persist across socio-economic groups that prevent some vulnerable and disadvantaged groups from enjoying quality essential education and health services. Furthermore, disparities remain in access to HIV prevention, treatment care and support and women continue to face inequality in a number of areas.

Vulnerable and disadvantaged groups need access to public goods and services to achieve equality of capabilities. The UN supports the Government of Viet Nam to adopt an universal approach to social protection paying particular attention to those most at risk of being left behind, including boys and girls in persistent poverty, those from ethnic minority groups, informal sector workers, people living with HIV and older persons.

To reduce inequities in health, the UN supports the Universal Health Coverage (UCH) agenda, which includes focused attention to accelerate the MDG's, strengthen the country financing system and reform the grassroots health network.

The UHC implies that all people have access to basic health services and essential, safe, affordable, effective and quality medicines, while ensuring that users will not incur financial hardship, and giving special emphasis on the poor, vulnerable and marginalized segments of the populations (Health PCG report)

To accelerate the health MDG agenda, a joint MOH-UN group was established to undertake MDG equity analysis and develop a resolution for accelerating the achievement of the health MDG's. The equity analysis led to the development of the Resolution for Accelerating the Health MDG's, which was approved by the Prime Minister on January 2014. Among the key recommended actions include: 1) better analysis and use of disaggregated data to better identify and understand hard to reach vulnerable populations; 2) funding and agreement of an integrated package for women and children reproductive, maternal and child health, nutrition and WASH as well as some aspects of HIV; 3) scaling up access to vulnerable populations using a Reach Every Community approach; 4) improving treatment and care and strengthening prevention and control of HIV/AIDS; 5) interventions to prevent and control other non-communicable diseases.

Under the support to the Government on strengthening the country financing, the UN aims to expand the health insurance coverage to other vulnerable groups (i.e. informal workers). To achieve this aim, the UN enhances the capacity of policymakers on health costing.

Through building a better understanding of the barriers from the demand side in the use of services, the UN supports policymakers in designing health services that are appropriate to the situation of the poor, the ethnic minorities and the

hard to reach areas, and therefore, the access and use of health services among those groups is improved.

Furthermore, UN supports the development of National Health Indicators to enable the Government to consistently monitor health outcomes and better inform planning. Through the inclusion of some indicators on reproductive health, gender-based violence and HIV relating to reproductive health the UN supports the Government to collect evidence on important health issues among vulnerable groups.

The analysis of the reconstructed theories of change and of the results frameworks matrixes from 2012, 2013 and 2014 brings the following observations regarding the logic of the chain results:

- Equity focus outputs track well to each outcome and in most cases equity is reflected in both outcome and output levels.

In few cases, however, the equity focus of the output is then absent or not made explicit in the annual expected results. For example, while output 1.1.2 refers to “inclusive, people-centred and equitable development”, the results planned for 2012 or 2013 (i.e. “packages of policy oriented studies and policy papers, including restructure of State owned enterprises and banking system”) do not show the integration of an equity dimension.

- The articulation between results and outputs is adequate to the greatest extent. Nevertheless, the results matrixes include some results that do not display a strong connection to the outputs under which they are planned.

For example, output 1.1.3 regarding the adoption of multi-dimensional human development approach includes in 2014 the following result: “policy studies on reducing risks from market and natural disasters and cooperative development in order to enhance smallholders farmers links to the market”. A clear connection cannot be established between the result and the output.

- Results on some areas such as land, trafficking, HIV or occupational safety and health are planned and double reported under several outcomes and outputs.

5. UN monitoring and evaluation systems and practices.

5.1 One UN M&E system

Results-based management is an essential component of the One Plan 2012-2016. To track progress against the OP outcomes and outputs the United Nations in Viet Nam defined 119 indicators. Every year, the JPGs are requested to provide updated information on the changes in quantitative and qualitative indicators for every One Plan outcome and output. A web-based tool consolidates all this information.

Additionally, JPGs produce annual results-based reports that describe the actual outputs or major activities delivered against the One Plan outputs and outcomes. The reports also include “contribution stories” that tell how outputs are contributing to outcomes. These stories, which are prepared by the Joint Programming Groups, provide powerful examples of UN policy engagement to reach vulnerable and disadvantaged groups.

Recognizing the attention given in the One Plan to vulnerable and disadvantaged groups, the challenge of reaching those groups programmatically and their frequent aversion to being “measured”, the RBM strategy included a number of measures for UN to improve its monitoring and evaluation of the related One Plan results. The implementation of most of these measures has been limited up-to-now as explained in the following table:

Table 5. Progress against the RBM Strategy actions related to the UN work on reaching vulnerable and disadvantaged groups

Measures	Progress	Explanation
JPGs to define the different vulnerable and disadvantaged groups expected to reach	Partial	Most JPG continue without a detailed definition of different vulnerable and disadvantaged groups. Outcome 1.1 includes as vulnerable groups “ethnic minorities, migrants, elderly and disable people, poor people and those least well-off in the informal economy”. In the context of outcome 1.3 vulnerable groups are “poor and disadvantaged women, ethnic minorities and migrants, as well as children, elderly and disabled people who are particularly vulnerable to natural disasters and especially climatic stresses and shocks. Other outcomes such as 2.3 or 2.4 mention some vulnerable groups but the list is not exhaustive. Finally, for the rest, the reference to vulnerable groups is made in general terms
JPGs to re-assess indicators and data gathering methods annually to gauge their utility to capture change among these groups. Greater reliance on qualitative indicators and data gathering methods based on rapid surveys and perceptions of key informants.	Partial	<p>JPGs received the advice from the consultant who designed the RBM strategy to make some adjustments in order to reflect better the UN’s contribution and to include more qualitative data. The uptake of his recommendations was partial. A few JPGs revised the indicators to measure better the contribution of UN to reducing disparities for vulnerable and disadvantaged groups.</p> <p>At the moment, the One Plan database includes 25 indicators at the outcome level and 22 indicators at the output level that relate to vulnerable and disadvantaged groups (see list in annex). This set of indicators, which offers a good basis for the UN monitoring of its contribution to reduce disparities, presents however some deficiencies as explained in the text below this table.</p> <p>Finally, the use of gathering methods based on rapid surveys and perception of key informants has been barely used by the UN in Viet Nam up to now.</p>
Review progress and constraints at the Focus Area level during FACG reviews.	Partial	<p>In 2013 based on the information shared to the consultants, the three focus areas incorporated analysis on disparities and inequalities for vulnerable and disadvantaged groups. This aspect was more prominent in the agenda of FACG2 included discussions about recommendations and solutions to solve the disparities and unequal access to education and health between regions (rural and urban areas, remote and mountainous areas), between rich and poor, between Kinh and ethnic minority groups. Government partners recognized the role of UN in supporting them to reach disadvantaged groups.</p> <p>In 2014 the FACG meetings have been cancelled. This is a missed opportunity for UN to discuss with implementing partners about disparities from a broader perspective and beyond the regular interaction under the framework of the joint initiatives.</p>
A formative evaluation to better understand the effectiveness of UN-supported programming in reaching these groups and creating a basis for change	On-going	Regarding the evaluation of the effectiveness of UN-supported programming in reaching vulnerable and disadvantaged groups, the UNCT agreed to conduct a meta-analysis of the evaluative evidence available from existing evaluations.
IMEP to be used to rationalise data collection efforts with vulnerable and disadvantaged groups	No progress	IMEP is currently not used as a tool to rationalize data collection efforts with vulnerable and disadvantaged groups.
The RBM working group to provide technical advice about methods and tools to measure the results of UN-supported work, with a special emphasis on, among others, measures to reach vulnerable and disadvantaged groups	No progress	The RBM working group has not played this role and tools such as the ToR template included in the annexes of the RBM strategy does not contain particular reference or guidance on how to consider equity issues for the evaluations.

The 47 equity-focused One Plan indicators (see annex 4) offer a reasonable basis for the measurement of the contribution of United Nations to the reduction of disparities in Viet Nam.

However, some limitations have been identified:

a) Lack of intermediate outcome indicators that bridge the distance between the tangible, concrete results and output level and the higher level indicators at the outcome level. Across the One Plan outputs indicators such as “number of policy advice/options paper on (...) submitted to the Government” are used and not accompanied by intermediate level indicator such as the extent of the change in the design or implementation of policies based on this advice. From a combination of outputs of this nature, the One Plan moves to outcome level indicators referring to impact on people’s lives.

b) Indicators that measures changes for vulnerable and disadvantaged groups were not defined for some equity-focused outputs. Some examples are as follows:

- *Output 1.2.1: Inclusive policies and support programmes for sustainable enterprise development are formulated and implemented with particular focus on micro and small enterprises, for decent job creation and progressive formalization of the informal sector*
 - *Indicator: Number of newly registered Business in National Business Registration System in selected provinces*
- *Output 3.4.2: PSPMOs’ human resources and organisation capacities strengthened to provide significant contributions in the development of policies in the best interests of the most vulnerable groups*
 - *Indicator 1: Number of new reports with recommendations on laws and policies that are developed by PSMPOs and submitted to legislative or executive agencies.*
 - *Indicator 2. Number of new institutional capacity development activities targeting PSPMOs supported by UN.*

c) Outcome indicators provide information on disparities. However, in certain cases they are not adequate to report on disparities affecting the most vulnerable groups. For example, outcome 2.1 indicator (“share of workers covered by social insurance”) in Viet Nam would not provide relevant information on the situation of the worst-off groups as social insurance does mostly covers formal workers. However, the disaggregation included by sex, urban/rural, sector, industry, migratory status and occupational level), may show other relevant disparities.

5.2 UN Agencies in Viet Nam M&E frameworks

In order to identify the main elements that contribute or hampered the implementation of equity-focused evaluations in UN in Viet Nam, in addition to looking at the One UN M&E system, the consultant team reviewed the M&E frameworks of 10 agencies (list of documents reviewed included in annex 6) and interviewed a few UN representatives. Several opportunities and challenges were identified, which are described as follows:

Opportunities:

- UNICEF equity-focused programming. In 2010, UNICEF launched a refocus on equity for its programming. Since this launch, UNICEF has systematically supported a number of key steps to translate the equity vision into practice. As a result of this institutional process, new tools for planning, programming, implementation, monitoring and managing for results (MoRes, Equity tracker, equity marker, CUP) have been designed and implemented to ensure its programmes contribute to outcomes that benefit the most disadvantaged children²⁰. UNICEF can share with other agencies not only the tools but also the lessons learned through their implementation process.
- The UNWOMEN regional evaluation strategy 2014-2017 aims to promote UN coordination on

²⁰ The Equity Tracker and Equity Marker are new tools intended to capture experiences, track how country offices are adjusting their strategies, interventions and budgetary allocations in line with a sharpened focus on equity as well as to facilitate reporting. A monitoring framework represented by a —CUP has been adopted to highlight levels of strategic monitoring in support of UNICEF’s enhanced focus on achieving results for children with equity. The monitoring framework is based on the notion that certain bottlenecks and barriers prevent women and children from benefitting from essential interventions and services. MoRes is a conceptual framework for effective planning, programming, implementation, monitoring and managing for results to achieve desired outcomes for the most disadvantaged children. Central to the MoRES approach are three key elements: equity refocus, management for results, and bottleneck and barrier analysis

gender responsive evaluations and to create national capacities for gender responsive M&E systems. The implementation of this strategy in Viet Nam could be used to pay specific attention on most vulnerable and disadvantaged gender disparities within the gender responsive evaluations.

- UNAIDS puts a strong focus on vulnerable groups (access to services, participation) in its results and accountability framework. This is then translated to a focus in its programming and evaluations in Viet Nam, with a strong
- From headquarters to the country level, UNDP has increased the emphasis on supporting programmatic formulation with evidence. As a result of that it is expected that the evaluation work will be stepped up. This increase could be used to promote evaluations that focus on UNDP interventions targeting most vulnerable and disadvantaged groups. Furthermore, since last year UNDP is conducting training for its implementing partners on results-reporting and communication. This can be a good opportunity to create capacities in implementing partners on how to report changes paying attention to the implications of those changes on vulnerable and disadvantaged groups.
- WHO, UNICEF and UNFPA are using bottlenecks analysis to understand the barriers of vulnerable populations in the access to services. The information obtained could be used as a baseline for equity focused indicators.
- UNFPA (Asia-Pacific regional division) is developing a set of indicators to measure UN contribution to policy change. Taking into account that UN in Viet Nam pursues equity results through policy change, UNFPA's work can help the UN in Viet Nam to continue improving their capacities to monitor and evaluate its results on policy changes that benefit vulnerable and disadvantaged groups.

Challenges:

- Programmatic focus on equity is still uneven. UN stronger attention to equity is recent and not shared by all agencies. Planning tools and processes are still not sufficiently oriented towards the building of equity-focused interventions.
- Limited evaluative practice. Despite the emphasis given in the RBM and M&E strategies to the importance of collecting evidence on UN results, most UN agencies still do not conduct baselines in the beginning of the intervention and/or commission mid-term or final evaluations. One main reason, according to the people interviewed, is the absence of enough human and financial resources dedicated to it. This general limitation therefore constraints the implementation of evaluations with a particular focus on equity.
- Lack of skills and tools to monitor and evaluate policy work and capacity building. As mentioned in the section on the UN theory of change on equity, most UN work in Viet Nam is concentrated in policy advocacy and advice. However, as identified in the RBM strategy, the measurement of the results of this work is a challenge.

As a follow up to the recommendations on this area included in the RBM strategy, in 2012 the UNCT and the LMDG undertook a joint initiative to develop a better understanding of decision-making processes, and of what constitutes successful policy engagement in Viet Nam at national and sub-national, thematic and sector levels. However, the efforts contributed only partially to strengthen the capacity of UN on this front and no additional initiatives have been promoted since then.

- Weak M&E Government systems. Baselines against which the project progress can be measured are scarce. The UN agencies also often face difficulties to obtain sufficient information to verify progress against some of the project indicators. The data collection systems are weak and there is limited data sharing.

6. One Plan available evaluative evidence:

This section describes the available evaluative evidence on the UN's contributions to equity development results through the implementation of projects and programs linked to the One Plan

2012-2016. The information is based on 13 independent evaluations conducted by UN agencies in Viet Nam by November 2014. 11 were listed in the Integrated Monitoring and Evaluation Plan (IMEP) two were regional evaluations shared by UNWOMEN with the consultants but not included in the IMEP.

An early finding from this consultancy was that the number of evaluations available was significantly lower than the expected. The IMEP included 86 interventions evaluated or to be evaluated. This review however covers 11 evaluations from IMEP (plus two not included in IMEP) and project documentation of 14 interventions for which evaluations are planned before the end of 2016. The main factors that explain this difference are: a) the assessment comprehends only those evaluations related to “equity-focused” outputs; b) the assessment focus on independent evaluations. Many documents listed in the IMEP were project documents developed internally by the UN agencies; c) Documents included as evaluations were in fact other types of documents (policy review, documentation, etc); d) A few agencies did not facilitate the documentation because of lack of response or confidentiality issues; e) Some evaluations corresponded to interventions starting under the previous UN Plan. The consultants have selected only those that were closely linked to the outputs of this One Plan and that contain activities beyond monitoring and evaluation within the period 2012-2016²¹.

Table 6. List of evaluations analyzed under the equity systematic review

Focus area 1					
Related output	Agency	Programme or Programme component evaluated	Timeframe	Type of evaluation	Partners
1.2.1 & 1.2.3	ITC	MDG-F- funded Joint Programme on Green Trade and Production	February 2010-June 2013	Final Evaluation	FAO, ILO, UNIDO, UNTACD, MOIT
1.2.3	ILO	Occupational Safety and Health in Hazardous Work in Southeast Asia	Dec 2014	Mid-term self evaluation	MOLISA
1.2.4	ILO	Project to Promote the Rights and Opportunities for Persons with Disabilities: Equality through Legislation (PROPEL) ²²	2012-2015	Midterm	ILO
	ILO	Tripartite Action to Protect Migrants within and from the GMS from Labour Exploitation (TRIANGLE) project ²³	June 2010-June 2015	Midterm	DOLISA (Bac Ninh, Ha Thin, Phu To, Thanh Hoa, Quang Ngai)
Focus area 2					
	UNICEF	MDG-F- funded Joint Programme on Integrated Nutrition and Food Security Strategies for Children and Vulnerable Groups in Viet Nam ²⁴	2010-2013	Impact Evaluation	FAO, WHO
2.2.1	UNODC	VNM/J93 project, Support for developing effective amphetamine type stimulant prevention strategies and measures in East Asia: A pilot in Viet Nam	2009-June 2012	Participatory self-evaluation	MOPS
2.4.1	UNAIDS and WHO	Treatment 2.0 Pilot Programmes in Can Tho and Dien Bien	July 2011-Ongoing	Mid-term evaluation	VAAC (MoH)

Focus area 3

²¹ Despite the efforts, in some cases it was difficult to identify precisely if the activities were conducted prior or after the start of the One Plan.

²² This document is the mid-term evaluation of the programme implemented as a global product and in seven countries (Azerbaijan, Botswana, China, Ethiopia, Indonesia, Viet Nam, and Zambia).

²³ The program and the evaluation cover Cambodia, Lao PDR, Malaysia, Thailand and Viet Nam (Greater Mekong Subregion GMS).

²⁴ The intervention is implemented in the period 2010-2013. Some results reported may be prior to the One UN Plan 2012-2016 but the evaluation does not specify date

Related output	Agency	Programme or Programme component evaluated	Intervention time-frame	Type of evaluation	Partners
3.2.2	UNODC	Support to strengthening of immigration control capacity at the international border gates and international cooperation to prevent and control migrant smuggling and human trafficking	2010-2013	External Project Final Evaluation	MPS, MOD
3.1.1 and 3.1.2	UNDP	Strengthening the Capacities for Budgetary Decision and Oversight of People's Elected Bodies in Viet Nam.”	2008-2012	Project-end Evaluation	MoJ
3.1.1 and 3.1.2	UNDP	Strengthening the Capacity of Representative Bodies in Viet Nam” 25	2008-2012	Project-end Evaluation	MoJ
3.2.1, 3.2.2 and 3.2.3	UNDP	Strengthening access to justice and protection of rights in Viet Nam		Mid term evaluation	MoJ

Not included in IMEP

	UN WOMEN	CEDAW South East Asia Programme II	2011-2016	Mid Term Review ²⁶	
	UN WOMEN	Evaluation of the ASEAN Regional Mechanisms Programme	2010-2014	Final evaluation	

6.1 Evidence of UN contribution to equity development results

Before describing the evidence collected, several factors that limit the quality and quantity of evidence collected on the reduction of disparities and inequalities with a focus on most vulnerable and disadvantaged groups should be mentioned:

- Most evaluations neither provide disaggregated data nor describe the effect of the intervention on vulnerable and marginalized groups. Researching on the impact of those results on vulnerable groups is beyond the consultancy scope. Therefore, it is recommended that UN agencies are given the opportunity to complement the information included in this section (based on the evidence described in independent evaluations) with explanations on other contributions and the link to equity.
- The analysis included in the evaluations of what works and what does not work to reduce inequity and the identification of unintended results for worst-off groups as well as the gaps between best-off, average and worst-off groups is limited.
- Most evaluations do not collect data or collect limited data on the change in knowledge or skills achieved through the implementation of capacity building activities. Therefore, attendance to trainings is the results frequently reported.
- Some evaluations report on progress based exclusively in information provided by the UN agency, without using other evaluation techniques to triangulate the information.
- Finally, most evaluations refer to the difficulty in measuring attribution and contribution. They include results for which UN made a significant contribution as well recognize the role that external factors and other actors played to those positive changes. Therefore, when explaining those results the UN in Viet Nam should take this element into account.

Evidence on the contribution of UN to the reduction of disparities is available in the three focus areas. The interventions with more robust evidence include: a) Joint Programme on Green Trade and production; b) Joint Programme on Nutrition and Food Security; c) Treatment 2.0 and d) Strengthening of the prevention and control of migrant smuggling and human trafficking; e)

²⁵ During 2011 and 2012 the project support mainly focused on documenting and disseminating the accumulated experience and knowledge.

²⁶ Evaluation not included in IMEP

Enhancement of public consultations. Among those five the three first ones were interventions implemented jointly by several UN agencies.

Focus Area 1- Evaluative evidence

Increased access to decent work, better opportunities for higher income and improved food security

- *Increased access to decent work.* The successful development of the SMEs supported by the UN joint program (JP) on Green Production and Trade led to a significant employment increase. In the SMEs in the sample group, the number of jobs on average more than doubled from 41.2-fulltime jobs/SME in 2009 to 87.2 fulltime jobs/SME in 2012. 966 new fulltime jobs were created in the surveyed 21 SMEs supported by the JP. Two-third of the newly created fulltime jobs benefit female employees (665 new fulltime jobs for women). Part-time employment also went up sharply, from 91.9 part-time employees per company in 2009 to 370.8 part-time employees in 2012. The total number of part-time jobs created in the 21 surveyed SME supported by the JP is 5,857.
- *Increase of household income in total:* The average annual household income of JP beneficiaries (“sample group”) increased from 27.7 million VND in 2009 to 58.4 million VND in 2012 (nominal increase of 110.8%), which is equivalent to an inflation-adjusted real overall income increase of 52.4%. The average annual income from surveyed products – i.e. the products of the respective value chains such as bamboo & rattan, sericulture/silk, sea grass, lacquer/lacquer ware and handmade paper - increased from 4.7 million VND in 2009 to 9.2 million VND in 2012 (increase of 97.5%), which is equivalent to a real income increase from surveyed products of 41.5%.
- *Income increase female versus male beneficiaries:* 70% of the main JP beneficiaries in the households were women, but the remaining 30% of male JP beneficiaries indicated a higher income increase.
- *The number of households living below the national poverty line* went down from 88 households in 2009 to 65 households in 2012 in the group of JP beneficiaries (decrease of 26.1%). This means that the poverty rate in the sample group decreased from 16.8% to 12.4%.
- *Food security* of the households increased from 81 to 97%

Creation of an enabling labour policy and programmatic framework for vulnerable and disadvantaged groups

- In April 2013, the People’s Committee of Nghe An Province approved a decision to develop the bamboo/rattan and sericulture value chains. Objectives include the creation of 5,000 permanent and 8,000 part-time jobs by 2015 and 8,000 permanent and 30,000 part-time jobs by 2020. The decision furthermore aims to generate income of VND 3,500,000 per month for regular employees and 2.5 million VND per month for casual labor in 2020.
- 2013 disability annual plan of 7 provinces received funding from Ministry of Labour, Invalids, and Social Affairs, (about 2.5 million USD for each province).
- Adoption of the proposal for the amendment and development of new technical standards for preventing accidents and injuries caused by chemical substances on the basis of the report analysing the chemical safety legal framework and chemical standards in the use and production of chemicals in Viet Nam.
- Development of the intensive inspection plan in quarrying sector, with the inspection sheet, instruction manual for labour officers and the action checklist for managers and workers had been disseminated in 5 target provinces.
- Developed monitoring mechanisms and tools of the Code of Conduct on labour protection for migrants, which is now being followed by the vast majority of recruitment agencies (110 out of the 126 member agencies, according to VAMAS)²⁷.

Enhanced capacities of stakeholders on safe labour migration

- 128 people (53 men, 75 women) attended four training workshops on C-BED (Community based entrepreneurship development) for members of Hanoi association of persons with disabilities.
- 14 DOLISAs with high volumes of migrants trained on issues related to international conventions and Vietnamese regulations, code of conduct and its evaluation mechanism and the role of provincial officers in monitoring recruiting agencies, hence improving labour protection;
- Trade union staff at district and commune levels trained to cooperate with provincial officers in monitoring recruitment agencies.

²⁷ The COC was developed with the support of ILO prior to the launch of TRIANGLE and covers the full range of issues related to migration, including protection of migrant workers and dispute settlements

- DOLAB officials at national and regional level trained on international and regional legal documents on labour migration; labour safe migration and promoted the development of mechanisms for labour protection of migrants.

Improved data on work-related risks faced by vulnerable and disadvantaged groups

- Data on current OSH situation in hazardous industries in Viet Nam available

Improved the knowledge, skills and opportunities of vulnerable and disadvantaged groups to access the market

- 2719 potential migrant workers received counseling on safe labour migration through 4 centers (Quang Ngai, Thanh Hoa, Bac Ninh, Hoa Tinh) established under the umbrella of the local Employment Service Center. Information shared with potential migrants in sending countries is found to be useful and provides the workers planning to work abroad with more confidence.
- Grassroots crafts and furniture producers trained on business skills. Through the participation in trainings such as “Start your own business”, “Get AHEAD” or working improvement, a “change of mindset”, more confidence and stronger negotiation skills with buyers were observed. Technical trainings and skill transfers resulted in higher productivity and product quality for some SME.
- Support to enterprises to participate in trade fairs and matchmaking resulted in significant business opportunities. Another important factor was the improvement in product designs. In 2012, JP companies that participated in the fair reported approximately 200,000 USD worth of orders. Ethnic minority producer groups and cooperatives supported to participate in domestic trade fairs (Nam Dinh, Hanoi) reported USD 6,000 worth of direct sales and about USD 25,000 of direct orders.
- Include Consultation Centre officially established, helped job seekers with disabilities to approach businesses by training staff in job placement skills and by supporting companies to hire people with disabilities

Focus Area 2- Evaluative evidence

NUTRITION AND FOOD SECURITY

Improved food production levels, economic efficiency and environmental protection

- *Improvement of food production and consumption by vulnerable groups.* The application of new techniques in the rice demonstrations (8 districts with the model) contributed farmers to: a) reduce rice seed quantity from 300kg/ha to 200-120kg/ha, saved 50-60% seed quantity; b) reduce the fertilizer and chemical using in demonstration from 30-50% compare with traditional cultivation. The yield increase from 15-20% (from 4.5 ton/ha to 5.0 -6.0 ton/ha). One traditional variety were recovered in Dien Bien, it increased the yield of this variety from 3.0 ton/ha to 4.5 ton/ha.
- 10 demonstration and 38 satellite model and some households in Dien Bien, DakLak and Kon Tum culture fish and contributed to their daily food consumption. Furthermore, they gave fish to their relatives or their neighbors without charge. Some demonstration sold commercial fish in small market to generate money to use to buy other food or household items. Size of commercial fish is usually 2 - 3 fish/1kg and 7 - 10kg for each harvest. An additional US\$ 350/year income was documented by the owner of the fishpond interviewed.
- The chickens in the demonstration grew in only 2 months get 2-2.5kg/head.

Malnourished children detected and treated

- 741 severely malnourished children detected using MUAC and 741 children treated using the ready to use therapeutic food (RUTF), developed and produced locally with UNICEF support

Enabling legal and policy framework on child malnutrition

- Provincial Plan of Actions for maternal Child Health and Nutrition with focus on reduction of child stunting (5 year plan) developed in 2013 in An Giang, Ninh Thuan, Dien Bien, Kon Tum;
- Nutrition is integrated in the Integrated Package of Services for Women and Children developed by UN and MOH to reduce inequities in health and nutrition outcomes in the most vulnerable districts. In Cao Bang all districts have developed a plan to expand the coverage of the Integrated Package for 2013 and 2014.
- The joint program has been instrumental supporting for the first time in the history of Viet Nam the introduction and development of the national guidelines for the Integrated Management of Acute Malnutrition (IMAM).
- Training for the Integrated Management of Acute Malnutrition (IMAM) integrated into the training package by the National Targeted Programme/ Protein-Energy-Malnutrition Control Programme with special focus on vulnerable districts and communes in 22 provinces.

Improved information system on nutrition and food security

- National Nutrition Surveillance strengthened through the integration of infant and young children feeding indicators and micronutrients indicators. Generation of nutrition profiles for all 63 provinces.
- Set up of GIEWS (Global Information and Early Warning System on Food Security and Agriculture) stations at the national and in the participating provinces. Identified as an effective system to monitor the food supply/demand situation and to generate early warnings of impending food crises in individual provinces and districts.
- 25 nutrition rapid assessments at commune level conducted in response to typhoon and flood emergencies in 15 districts and 6 provinces.

Strengthened services to address malnutrition

- 338 local health workers trained in implementing micronutrient deficiency control activities (Vitamin A, iron anaemia and IDD).
- 28 commune health centers and 9 hospitals practicing Integrated Management of Acute Malnutrition. IMAM model further expanded through partner NGO in 8 provinces.

Enhanced breastfeeding practices at the community level

- Knowledge of mothers on the benefits of breastfeeding increased from 70% to 94%, and increase in mothers' breastfeeding from 80% to 92% was recorded. In An Giang, the proportion of mother's breastfeeding after the first hour increased from 52%-to 70% and the proportion of exclusive breastfeeding rates for six months from 0% to 12%. The creation of Village based breastfeeding support groups contributed to important change of breastfeeding knowledge and practices in An Giang.

DOMESTIC VIOLENCE

Data available on the situation of domestic violence victims and women in conflict with the law.

- An assessment of the Situation of Women in the Criminal Justice System in Viet Nam is available to support revision of the Viet Nam penal code and procedures.

HIV

Expanded and faster access to HIV diagnosis and treatment through non-discriminatory primary healthcare services

The Evaluation shows that treatment 2.0 not only relieved over-burdened OPC at district level but also extended HIV services to those living in remote areas who were better able to learn about HIV and transmission risks, as well as accessing free HTC.

- 2,619 women who had HTC at commune received testing during pregnancy optimizing prevention of mother-to-child-transmission.
- Overall, the patients surveyed perceived HIV testing at CHS to be convenient and time-saving and they reported that the health care workers had a friendly attitude. Before the Treatment 2.0 initiative, people had to travel to district or provincial facilities for HIV testing, and had to return a second time to receive their results. During the pilot, it took around 15 minutes to receive an HIV-negative result once the blood had been drawn.
- Nearly 1,000 Point-of-Care (POC) CD4 tests were undertaken at district level. Previously, all CD4 tests required samples to be collected from patients at districts and sent for testing at the Provincial AIDS Centre. Between July 2012 – May 2013, 911 tests (298 in Thot Nhot and 613 in Tuan Giao) were completed with patients receiving on-the-spot results.
- Remarkable improvements have been made in reducing the time between enrolment to care and receiving CD4 count results. Waiting times fell from a median of 109 days in Dien Bien and 14 days in Can Tho to a median of same day-5 days notification between July 2012 and May 2013. Over the two study provinces, the median number of days between diagnosis and linkage to care was 9 for those diagnosed at commune level and 11 for those diagnosed at district level. In Can Tho, the difference was even more pronounced with those diagnosed at commune level linked to care in a median of 5 days, with a median of 18 days for those diagnosed at district level
- During Treatment 2.0 pilot in Dien Bien 276 people diagnosed at district level and 26 people diagnosed at commune level were enrolled in care at outpatient clinic. By May 2013, 62 PLHIV received primary care in Dien Bien, 68 people in Can Tho.
- In Dien Bien 222 people diagnosed at district and 21 people diagnosed at communes initiated ART. The Treatment 2.0 pilot allowed PLHIV to pick up ART. Under Treatment 2.0, the median number of days between eligibility diagnosis and enrolment into ART was 18 in Dien Bien (14 if diagnosed at commune) and 15 for Can Tho, whether diagnosed at district or commune level
- In Can Tho and Dien Bien, some health care workers and patients reported a remarkable reduction in stigma and discrimination of PLHIV. This was largely attributed to past efforts made by health authorities and communities. However, stigma seems one of the major factors for patients' decision to receive care at communes at their own community.

DRUG PREVENTION AND CONTROL

Strengthened the response to Amphetamine Type Stimulant (ATS) in Viet Nam

- Information available on the situation of ATS in 63 provinces in Viet Nam, including on the level of knowledge among young people, high risk groups, police, bar owners, etc.
- Piloted intervention program including the design and delivery of harm reduction information associated with ATS among high-risk groups.

Focus area 3.

HUMAN TRAFFICKING

Enabling framework to prevent and control human trafficking

- Ratification of UNTOC and the Protocol on Human Trafficking by the Government of Viet Nam in June 2012. The legislative support provided by UN has been instrumental in preparing the country for ratification. On 18 April 2013, the Government of Viet Nam approved the Decision to implement the UNTOC and the Palermo Protocol. According to the plan, the Government will consider accession to the Protocol against Smuggling of Migrants by Land, Sea and Air, supplementing UNTOC;
- The UN intervention also at least indirectly contributed to the Approval of the National Target Programme on Crime Prevention and Suppression for the period of 2012-2015, signed August 31 2012; the adoption of the National Plan of Action on Anti-Human Trafficking for the Period 2011-2015; and the adoption of the National Strategy on Crime Prevention and Suppression to 2020 with a vision to 2030, on which it was at least of indirect influence.

Strengthened capacities to detect human trafficking cases

- 203 officer received training on illegal immigration and internal law. Commanders of border stations (including Noi Bai, Da Nang, Tan Son Nhat International Airports; Sai Gon, Da Nang, Hai Phong sea ports; Huu Nghi, Lao Bao, Moc Bai international border gates, and Border Guard Academy) feel that their understanding of procedures has improved and that the provided equipment strengthens their capacities. There is a consensus that detection in general has slightly increased, although this may be due to a higher number of violations as well. In all, it is felt that there is a general better understanding of procedures.

Enhanced partnerships on human trafficking

- Partnerships established with other development partners through the Human Trafficking Working Group, which included representatives of Embassies as well international organizations, and utilized its existing strong network with fellow UN organizations including UNDP, IOM, ILO and the UN Inter-Agency Trafficking Project (UNIAP).

GENDER RESPONSIVE POLICY DEVELOPMENT

Enhanced capacities in gender responsive research

- Institute of Sociology under Ho Chi Minh Political Academy was selected to be a UN Women partner the regional research on women access to justice in plural legal systems. New research method (FPAR) brought about new perception to shift the passive respondents to active respondents. The impact of the research will reach far beyond the findings because Ho Chi Minh Political Academy has function to provide training for potential leaders in Viet Nam. .

PARTICIPATION IN PUBLIC POLICY MAKING

Enabling framework for public consultations in parliamentary Committees and Ethnic Council

- The NA's Resolution 27 of June 21, 2012 explicitly mentions the importance of the "accountability hearing sessions (public hearings) of the Ethnic Council and the Committees of the NA". It is stipulated that "the NA Standing Committee shall be assigned the task to develop a Regulation on processes and procedures of questioning sessions at the NA Standing Committee meeting, and of accountability hearing sessions in the Ethnic Council and NA Committees", and that these Regulations shall be issued before December 31, 2012. The approval of these regulations is a major step forward towards the institutionalization of public consultations.
- The PPCs of six provinces -- Ho Chi Minh, Dong Thap, Binh Thuan, Nghe An, Bac Giang and Lao Cai – issued provincial regulations on public consultations, thus supporting the introduction of public consultation tools in a more sustainable way. All interviewed provinces, and other provinces participating in the project, confirmed their intention and commitment to continue applying public consultation tools in the coming years

Improved legal and policy framework and oversight reports through consultation.

- The policy impact of the public consultations and hearings by the Ethnic Council was exemplified in the development of the housing policy for ethnic minority groups in the Mekong Delta.
- HCMC involved independent research institutes in its public consultation program to provide expert testimony.
- Higher capacity in budget oversight in Quan Nam province reflected in deciding different issues related to poor and near poor people, for example in approving fees for health services and in carrying out research project on "improving oversight skills of Commune PCs in socio economic development activities of the commune".
- Consultative workshop on the Government's draft report of the implementation of the 1992 Constitution

Enhanced the awareness on usefulness of and methodologies on public consultations

- Ethnic Council members feel more confident in their legislative and oversight activities through UN support
- The awareness of PPCs Deputies on the public consultation process and tools has increased. Prior to the project, public consultations rarely took place and had little impact. In the provinces where the project piloted public consultations, the project considerably changed the attitude and appreciation of PPCs Deputies on public consultations

CIVIL SOCIETY ADVOCACY

Strengthened the awareness and capacities of LGBT to claim their rights.

- Advocacy and training on LGBT and human rights contributed to enhance capacity of LGBT people and enable them actively vocalise their legitimate rights in a range of policy dialogues with government on Marriage and Family Law, Civil Status Law

Fostered the coordination with civil society on women and children's rights.

- Network of 100 members from across public and civil society sectors supported to share priorities on women's and children's rights, agree on initiatives, disseminate information to the regional level and share information on key issues.

ACCESS TO JUSTICE

- Research on key issues and recommendations for Constitutional amendment to support the consistency with human rights international commitments
- Strengthened MoJ capacity for aid coordination through legal partnerships forum and thematic law policy dialogues
- Conducted research on law-making process, implementation of law at both central and local level, "due process in administrative sanctions", contradictions of laws with human rights and administrative sanctions for people who use drugs and sex workers in 05/06 centers.
- Assessment of women in justice sector and comparative analysis of judicial systems operations conducted.

The above results contributed to the implementation of national legislation, policies and programs such as the National Nutrition Strategy 2011 to 2020, with a vision toward 2030 and the national target programs (Protein-Energy Deficiency, National Nutrition Strategy, Infant and Young Child Feeding Plan; the National Target Programmes (NTPs) 1: "focusing on job creation and vocational training for rural labor", NTP 13 aiming to support the development of "new rural economy" and NTP 16 (tackling pollution, in particular objective 1 "resolving environmental pollution at handicraft villages"; the Second National Programme on Labour Protection and Occupational Safety and Occupational Health; or the Law on Legal Aid and implementing regulations, the Legal System Development Strategy and the Judicial Reform Strategy.

6.2 Lessons learned

Several lessons learned can be extracted from the current available evaluations. The limited number of assessments available makes challenging the identification of commonalities and the generalization of lessons learned should be carefully considered. The following paragraphs include common lessons learned shared by more than one evaluation as well as lessons learned from individual evaluations:

Engagement of vulnerable and disadvantaged groups

- The close involvement of vulnerable and disadvantaged groups in the intervention remains a vital component of successful interventions. The engagement of key populations and PLHIV for reaching and maintaining people in treatment in Dien Bien or the participation of beneficiaries in the selection and procurement process for equipment are some examples that support this lesson learned.

Capacity building of vulnerable groups

- Due to the limited education, follow-up on training or activities (i.e. group discussions, household visits or refreshing workshops) is particularly important when building capacities among vulnerable groups or smaller enterprises to ensure the integration of the skills into their practice. Some basic knowledge management tools can contribute to continue the learning

process.

- Capacity building activities that integrate activities to change mindsets are important to create a fertile ground for long-term development of rural communities.
- Training tools developed by the interventions are likely to produce a direct impact if their use is extensively promoted by government institutions, or even better enforced.

Engagement of community workers

- Community workers (peer educators, social workers, etc) play a key role in referring vulnerable and disadvantaged groups to social services. They also support care retention. A competent network of community workers using interpersonal communication contributes to the successful implementation of interventions targeting vulnerable and disadvantaged groups. However, community workers have in some cases low education or limited experience. Therefore, it is important that they are frequently provided with capacity building alongside the intervention.

More emphasis on equity issues

- Constant efforts are needed to maximize the opportunities to promote an equity approach in the project activities (i.e, more emphasis on budget allocations for ethnic minority policies during the support to the National Assembly Committees). Mainstreaming and design of specific activities should be combined.

Coordination with others

- Better results can be achieved by creating linkages and synergies with other programs and actors. For example, the value of regional approach in the cross-country case migration referrals and in the provision of end-to-end support proved to have even greater potential. Another example is the creation of synergies between UNICEF and Alive and Thrive in support of the IYCF national and sub-national efforts. The synergy avoided duplications, conflict in policy directions, increased the reach of the strategic interventions provided a stronger platform to engage other local players.
- Similarly, the coordination of Ministries at the national and local level showed positive results. An example is the collaboration between the Ministry of Health and the Ministry of Agriculture and Rural Development in the Identification of agricultural demonstration projects contributing to the improvement of the health and nutrition of women and children as well as the development and production of a locally acceptable Ready to Use Therapeutic Food (RUTF).

Supporting local organizations:

- Viet Nam's civil society sector is still small in size and with only a limited number of organizations with the capacity to develop proposals. Therefore they face difficulties to uptake and manage grants from UN. Close support to those organizations is required when engaging with them.
- Increasing the participation of a broad range of civil society organizations in policy dialogue requires UN to continue advocating official institutions on the extensive interpretation of the term "civil society" and the benefits of an active engagement of different societal actors.

Community- based service delivery:

- With proper training and support, commune health providers are capable of delivering quality HIV services alongside their other duties.
- Community-based service delivery has been well accepted by most patients, particularly in remote areas.

Holistic value chain:

- The holistic value chain strengthening approach was effective and led to tangible results. Important features were (a) the inclusion of all relevant stakeholders, (b) support along the entire value chain, (c) strengthening the supply and demand sides and (d) contributing to

enabling external conditions, such as the policy framework, access to credit and community building.

Working as One UN

- The joint programmes have shown the value added of working as “One UN”, reflecting the different expertise and contributions that each agencies can contribute in a more coordinated, systematic and cost-effective way to achieve results and eventually set outcomes (e.g. passage of legislations, integration of food security and nutrition, value chains). Aligning on a single, clearly defined methodology and a common “programme identity” are key success factors for joint-programmes.

7. UN planned evaluation: assessments of their equity approach

The consultants reviewed the list of evaluations planned for 2015-2016 (25), identified the equity focused interventions (18) and assessed the potential that the future evaluations have to bring relevant information on equity results based on the following criteria:²⁸

- Equity is clearly reflected in the intervention design (logframe, indicators, activities, M&E systems, reporting mechanisms)
- The intervention design benefited from a strong and inclusive stakeholders analysis, which included vulnerable groups
- Reports of implementation and activity contain information on how equity was addressed
- Stakeholders (including most vulnerable groups) have participated in the various activities of the intervention in an active, meaningful and free manner
- Data has been collected in a disaggregated manner (by gender, race, ethnicity, age, etc) during the implementation of the intervention.

Out of 18 interventions identified, the consultants obtained from UN agencies enough information to undertake the assessment of 14.

The table below shows that most planned evaluations have a strong or medium potential to bring evidence on the contribution of UN to equity results. However, only three out of the ones with high potential are planned to be conducted before the One Plan evaluation, scheduled for mid 2015 (see annex 5).

²⁸ Criteria are based on the UNEG paper (2011) “Integrating human rights and gender equality in evaluation” and UNICEF (2011) How to design and manage “Equity-focused evaluations”.

Potential	Agency	Programme or Programme component to be Evaluated in Q4 2014, 2015,2016	Equity reflected in intervention design?	Inclusive stakeholders analysis?	Reports contain info on how equity was addressed	Participation in meaningful manner	Disaggregated data
Focus area 1							
High	UNDP	Support to the implementation of the Resolution 80/NQ-CP on directions of sustainable poverty reduction 2011 - 2020 and the NTP on Sustainable Poverty Reduction 2012 - 2015	Yes ²⁹	Yes ³⁰	Yes ^{31.}	Yes	Yes ³²
Low	UNDP	Promoting Climate Resilient Infrastructure in Northern Mountain Provinces of Viet Nam	Partially ³³	Partially ³⁴	No reports available	No reports available	Partially ^{35.}
Low	UNDP	Strengthening institutional capacity for disaster risk management in Viet Nam, including climate change related disasters-Phase II (SCDM II)	Partially ^{36.}	Yes ^{37,}	No reports available	No reports available	Partially ³⁸
High	UN Women	Strengthening local women's capacity and leadership on disaster risk management and disaster risk reduction ³⁹	Yes. ⁴⁰	Yes ^{41.}	Yes ^{42,}	Yes ^{43.}	Yes ⁴⁴

Focus area 2

29 The attention to most vulnerable and disadvantaged groups is reflected in both the project specific output and in several Indicators (i.e. indicator 1.3: Number of PR policies streamlined/harmonized/mainstreamed into the regular plans and policy framework of line ministries, with the allocated budgets and focus on supporting poorest households/areas with chronic poverty and emerging poverty issues”

30 The stakeholder analysis comprehends a broad range of actors, including targeted poorest people.

31 Reports show that equity is addressed through implementation of poverty reduction policies in the poorest ethnic minority, mountainous and coastal areas

32 The project is expected to collect the following equity related data “Indicator 2.3: Level of reduction of the chronically poor, including poor women, ethnic minority people and impacts of the program on multidimensional poverty reduction.”

33 Identification of vulnerable communities to climate change is one among other components of the project.

34 No direct participation of vulnerable groups but involvement of mass organizations such as the Farmers Association or the Vietnamese Red Cross. Business Units and private sector (provincial, and local branches of national companies), Media organizations and other NGOs participated in addition to Government.

35 The Project could bring some data on vulnerable groups through the vulnerability maps.

36 The project includes one specific output (no.2) that aims to promote the participation of vulnerable groups in the CBDRM programme.

37 Stakeholder analysis includes description of vulnerable groups, mass Organizations, Oxfam, Disaster Management Center (DMC), Committee for Flood and Storm Control (CFSC) under MARD, and UNDP.

38 The Project expects to collect data on the number of vulnerable communes that conduct CBDRM activities.

39 Evaluability assessment available recommending some adjustments to improve the evaluability of the intervention

40 Gender equity in decision making to address climate change is the long-term objective of the project. This equity dimension is reflected in specific objectives and indicators (Indicator 1: Percentage of trained women who report an increase in their capacity on gender issuers in disaster risk reduction.

41 Stakeholder analysis including vulnerable groups, Viet Nam Women's Union, Provincial Women's Union, Red Cross, Committee of Flood and Storm Control (CFSC), media, etc.

42 For example, it reports on the progress made with the decision of having the Women's Union as an official member of CFSC.

43 The project has participation of vulnerable groups in 3 targeted provinces, commune communicators CFSC, Red Cross

44 Indicator 1: Percentage of trained women who report an increase in their capacity on gender issuers in disaster risk reduction; Indicator 2: Number of community gender sensitive preparedness plans and response mechanism for natural disasters at commune level; Indicator 3: Number of women leaders in decision making bodies such as CCFSC.

High	UNFPA	Intervention model of care for the elderly	Yes45	Yes46	Yes47	Yes48	Yes49
High	ILO	Evaluation of "Tripartite actions to protect migrant workers from GMS region from labour exploitation" project (GMS TRIANGLE project)	Yes50	Partially 51.	No reports available	No reports available	Yes52.
High	UNICEF	Evaluation of the Mother Tongue Based Bi-lingual Education Action Research (MTBBE-AR)53	Yes54.	Yes55	Yes56.	Yes	
High	UNODC	Impact evaluation of K16 project on HIV prevention, care, treatment and support in prisons including pre-trial detention centers	Yes57.	Yes	No reports available	No reports available	Yes58
High	UN Women	Project end evaluation on strengthening capacity of staff on implementation, monitoring and evaluation on National programme and National Strategy on gender equality	Yes.	Partially 59.	No reports available	No reports available	Yes60.

45 Attention to vulnerable and disadvantaged groups is integrated into project objective and major indicators. For example, indicator 3: Costed policy options on care and promotion of the role of the elderly at the community level developed and submitted to central level and provincial authorities for consideration and replication.

46 Participation of elderly in addition to PPC, DoH, DOST, DOLISA, Provincial Police, Department of Justice, DOET, PWU, PFU, PYU, PFF and PAE

47 Equity has been addressed through developing, implementing, monitoring and conducting a cost-effectiveness analysis of the intervention model on elderly care and promotion of the role of the elderly that will be a basis for policy advocacy/ development/ finalization and model replication at provincial and national scale.

48 The Project has participation of the main government actor (DOLISA), Provincial Elderly Association and especially of older persons from project communes in Intergeneration Self-Help Clubs (ISHC)

49 The project expected to collect the equity data relating to the elderly

50 Overall objective, specific objectives and outputs aim to improve the protect the rights of vulnerable groups such as women, men and children migrants

51 No direct participation of migrant workers but having participation of worker's organizations and civil society organizations in sending and receiving countries and strong participation of relevant government and employer's institutions

52 It is expected to collect the following equity data: sex- and age-disaggregated data on migration trends and working conditions in risk sectors

53 Equity is reflected in the ToR for the evaluation ("to generate substantive evidence and knowledge to inform national policies on mother tongue bilingual education and the subsequent reduction of education inequities in Viet Nam as well as strengthen the sub-national commitment in implementing the MTBBE approach)

54 Terms of reference for this evaluation are available and contain a strong equity focus.

55 Participation of students from provinces with three respective ethnic minority languages, namely Mong, Jrai and Khmer

56 Reports provide comprehensive information about how equity was addressed through promoting the use and development of ethnic minority languages as a means to improve access, quality and equity of education and other social services

57 The project objective shows the focus on a specific vulnerable group, populations in prisons and other setting (Objective: to reduce the risks of HIV transmission for populations in prisons and other detention settings in Viet Nam.

58 It is expected to collect the following equity data: % of prisons providing the comprehensive package of HIV prevention treatment and care services for prisoners and other detainees.

59 As having participation of government staffs relating the gender mostly such as Gender Equality Department, Department of Overseas Labour under MOLISA, the project beneficiaries will include staff working on women's advancement and gender equality in all the line ministries, and at the provincial levels, NGOs staff working on women's rights..

60 The project expected to gather the following equity data: Electronic information with sex disaggregated data on migrant workers available (Indicator 2)

High	UNFPA	Intervention model of Prevention of Domestic Violence (DV),	Yes61	Yes62,	Yes63	Yes64	Yes65
High	UNFPA	Addressing Imbalanced Sex Ratio at Birth (SRB)	Yes,66	Yes	Yes67	Yes68	Yes69
Focus area 3							
Low	ILO	Support to the development of industrial relations, wage fixing and labour law implementation institutions & capacity in Viet Nam	No70	No.			No
Medium	UNODC	End-of-Project Evaluation of VNM/T28 project on Building capacity of law enforcement and justice sectors to prevent and respond to domestic violence in Viet Nam	Yes71.	No	No reports available	No reports available	No
High	UNDP	Project-end Evaluation “Legal Empowerment through Support to the Viet Nam Lawyers Association (VLA)”	Yes72.	No	No reports available	No reports available	Yes73.

61 Equity reflected in the long term project objective: “improve the capacity of institutions and sectors in Hai Duong province through support for piloting cost-effectiveness models on Domestic Violence, that can be a basis for policy advocacy, policy development, and consideration of provincial and nationwide replication of such models within the framework of sub-national/national programmes.”

62 Stakeholder analysis including the description of victims of domestic violence and gender-based violence

63 Reports describe the implementation of minimum Intervention Package (MIP) on addressing gender-based violence and domestic violence in Hai Duong as pilot model.

64 Communication campaign on GBV/DV has been organized in Ha Duong with the participations of thousands of people showing the message “Ending violence against women and girls”.

65 The project expected to collect the equity data such as gender equality and sex ratio at birth, family violence

66 The project aims to achieve gender equity at birth.

67 Reports shows that equity has been addressed through the implementation of Minimum Intervention Package (MIP) on addressing gender-based violence and domestic violence in Hai Duong as pilot model together strengthen of communication on gender and SRB.

68 Beside the participation of relevant government actors and women union, the project has participation of families giving births of female and male babies, especially families with female babies

69 The project expected to collect the equity data such as sex ratio at birth

70 Project objectives are not focused on most vulnerable and disadvantaged groups

71 The goal of the project is to contribute to effective prevention of domestic violence against women through more responsive law enforcement and justice services. Outcome 3: Legal Aid Agency provides legal assistance and legal support to victims of domestic violence.

72 Equity reflected in outcome 3.2: By 2016, all citizens, particularly the most vulnerable and disadvantaged groups, benefit from strengthened legal and judicial reform and increased access to justice (with outcome Indicator 2: Availability of new victims support service for children victim and witnesses developed with UN support) and in outcome 3.4: By 2016, political, social, professional and mass organisations (PSPMOs) participate effectively in policy discussion and decision-making processes for the benefit of the most vulnerable and disadvantaged groups.

73 The project intend to collect the following equity data: Number of vulnerable and disadvantaged groups receiving free legal services from UN support (Outcome Indicator 2)

8. Conclusions:

- The Millennium Development Goals (MDGs) and the Socio-Economic Development Strategy and Plan (SEDS and SEDP), which set the main development objectives for Viet Nam, refer to the reduction of disparities among its principles and values. Those principles are however only partially reflected in the definition of the main targets and indicators, as most of them are based on national average progress as distinct from attention to social disparities. The attention to disparities is better translated into some sectoral strategies, plans and national targeted programs, particularly those related to ethnic minorities, and which define a number of specific objectives related to the improvement of the living standards among these groups.
- Up to now the monitoring of Viet Nam's progress against the MDGs and SEDP targets lack of a comprehensive and consistent reporting mechanism. Despite the efforts shown in the development of the National Strategy for Statistics Development, and the significant amount of information collected through population-based surveys, Viet Nam continues facing some difficulties to collect, analyze and use comprehensive, reliable, regular and disaggregated data. This represents a challenge for the identification of vulnerable populations, the definition of interventions and the tracking of the progress on equity goals.
- The One United Nations Plan 2012-2016, developed in line with Government priorities, focuses on the *"reduction of disparities of wealth, access to opportunities and services, and between regions and socio-economic groups, focusing on the most vulnerable and disadvantaged groups"*. 27 outputs out of 43 give explicit attention to "most vulnerable and disadvantaged groups".
- Under the One Plan 2012-2016 the UN aims to contribute to build a level playing field for those groups by creating an enabling legal and policy framework. For that, the UN works to strengthen the awareness and capacities of decision makers through engagement, advice on policy options and technical backstopping, brokering external expertise when needed. To a lesser extent, the United Nations works directly with vulnerable groups and other actors to either strengthen their capacities to advocate for those policy changes. Additionally, but also less prominently the UN in Viet Nam provide those groups with access to opportunities, services or assets and works with other stakeholders, such as the private sector, to create a supportive social environment in the reduction of disparities.
- The One Plan includes indicators at the outcome and output level that measure changes in disparities and the UN contribution to them. These indicators are supplemented by contribution stories included in the annual UN reports that tell how UN works to support vulnerable and disadvantaged groups. Despite these three positive elements, the UN continues facing difficulties to capture in a systematic way the impact of its upstream policy work and the reach to vulnerable groups.
- The available or planned evaluative data shows (or has the potential to show) contributions to reduce disparities in the three focus areas and through joint UN work. While this evidence is valuable, it is still scarce and project-oriented and therefore, it only shows only a partial picture of the United Nations overall contribution to reduce disparities at the country level.

9. Recommendations:

This section is divided in three sets of recommendations. The first one describes actions to be taken in order to be better prepared for the One Plan evaluation. The second and third parts described actions recommended to UN in Viet Nam in moving forward on this equity approach for this and the next One Plan.

Specifically, ahead of the evaluation in 2015, the UN should:

- Consider using an approach that allows to show a comprehensive picture of UN work in Viet Nam and which does not necessarily require the level of data disaggregation that would be

most suitable in using the equity approach.

- Due to the risk of not having updated data from VHLSS and the lack of clear indicators that bridge the gap between outputs and outcomes, to support the measurement of UN contribution to the different outcomes, an outcome level focused evaluation is not recommended.
- Early 2015, update the IMEP, reviewing carefully with each UN agencies the evaluative evidence available (including those not shared during this consultancy) and identify evaluation gaps on UN contributions to development results. Mid term reviews of UN agencies and other project evaluations are also expected to expand the existing evaluative evidence.
- Due to the limited evaluative evidence available, the evaluation should not be exclusively based on secondary data. It is recommended to include, among others, the development of impartial cases studies that collect the opinion of several (external and internal) stakeholders on selected interventions and that will allow to bridge the gap between the outcome and output level. Specifically on those areas where evaluations are not available or planned to be carried out prior to the evaluation should be prioritized.

In order to select the interventions for the cases studies, it is recommended to ask JPGs for suggestions based on a number of criteria such as: a) joint UN initiative; b) result for which UN is a main actor and has provided a clear added value in comparison to other development actors; c) for which there are Government representatives and other actors willing to discuss openly the UN contribution.

- Early 2015, explore with each responsible agency the possibility of bringing forward some of the evaluations planned for the second semester of 2015.

In order to strengthen the implementation, monitoring and evaluation of the equity approach of the current One Plan, the UN should:

- Be more proactive in questioning internally and in providing directions to counterparts on “how does this activity support most vulnerable and disadvantaged groups?”
- Make a better balance between the actions targeting duty bearers and rights holders. More attention should be given to building the advocacy capacities and giving voice to vulnerable groups so they are prepared to claim their policy changes to promote and protect their rights by themselves without donors' support.
- Training and capacity development of UN staff on policy monitoring and evaluation techniques (i.e. process tracing, the most significant change, comparative case study analysis) should be resumed. Options to be explored include synergies with UNFPA regional process on building indicators for measuring UN policy work.
- Enhance knowledge management on how to design equity-focused analysis, interventions and evaluations among UN agencies. Using the expertise available at the national and headquarters levels, joint UN activities should be further explored. For example, lessons learned in using bottleneck analysis or baseline surveys on knowledge, attitudes and practices (KAP) could be better shared among teams to foster learning about and use of those techniques.

Some of these activities could be organized together with Government partners interested (i.e. GSO interest on surveys targeting hard to reach populations).

In moving forward on this approach for the new One Plan:

- Continue the support to Government institutions to create well defined, equity sensitive indicators-linked to relevant data sources. They are necessary to design policies that give opportunities to vulnerable groups for improved development outcomes. In particular, support the Government to ensure that the new SEDP for 2016-2020 and the Viet Nam SDG are accompanied by a robust monitoring and evaluation framework with disaggregated indicators and targets that guide national planning.
- Strengthen the analysis of inequities across the different dimensions of UN work. The nuances of marginalization should be better understood and quantified by United Nations in order to

design adequate responses.

A similar methodology to the Common country assessment (CCA) “with a human face”, conducted in Nepal could bring valuable information such as: Which groups have been left behind by recent development gains?; Which groups do not experience a ‘level playing field’ in today’s Viet Nam?; Are there groups who, being subject to particular vulnerabilities or future shocks could substantially reverse the development gains they have achieved in recent years?

- Strive for clearer common conceptual framework and a comprehensive and robust theory of change.
- More emphasis should be given to the development of baselines and solid M&E frameworks for the One Plan and for agencies interventions. In particular, attention should be paid to the integration of alternative monitoring tools on policy advocacy (logs, process tracing, the most significant change, etc) and to a more systematic approach to the evaluation of capacity development⁷⁴.

Expanding initiatives such as UNDP training to implementing partners on results reporting and communication would also contribute to strengthen the joint monitoring and evaluation of development efforts to reduce disparities and inequalities.

⁷⁴ See for example recommended actions in UNDP (2009): Supporting capacity development, at http://www.undp.org/content/dam/aplaws/publication/en/publications/capacity-development/support-capacity-development-the-undp-approach/CDG_Brochure_2009.pdf

Annexes

Annex I. Consultancy Terms or Reference

TERMS OF REFERENCE

Equity-focused Systematic Review of Viet Nam's One Plan (2012-2016)

1. Background

The [One Plan \(2012-2016\)](#) is the **common programmatic framework** for UN agencies in Viet Nam responding to Viet Nam's priorities as outlined in the 2011-2020 Socio-Economic Development Strategy and the 2011-2015 Socio-Economic Development Plan. Leadership and oversight for the implementation of the One Plan, as well as of the broader Delivering As One (DaO) initiative, adopted back in 2006 following the 2005 Hanoi Core Statement on Aid Effectiveness, has been provided by a **tripartite governance structure** formed by the Government of Viet Nam, the United Nations and the donor community.

The One Plan (2012-2016) incorporates lesson learned during the implementation of the One Plan (2006-2007) and the One Plan (2008-2011) and is therefore designed aiming at even **greater programme coherence and coordination** by the participating UN Agencies in order to achieve better results for the benefit of the people of Viet Nam.

The One Plan is organized around three Focus Areas -(1) Inclusive, equitable and sustainable growth, (2) Access to quality essential services and social protection, and (3) Enhanced governance and participation- and it has a **strong equity-focus**, with eight out of twelve One Plan Outcomes and 11 of 43 Outputs explicitly mentioning 'most vulnerable and disadvantaged' groups as key right holders (Annex A: One Plan overview).

As indicated in the One Plan signed document, an evaluation will be undertaken in the penultimate year of the Plan's implementation (that is 2015) assessing the work accomplished at the country level since 2012 and formulating recommendations to inform the development of the One Plan 2017-2021. In **preparation for the evaluation in 2015**, an equity-focused systematic review of the One Plan will be conducted in 2014 as outlined in the next sections.

2. Purpose, objectives and value added

The equity-focused Systematic Review has two-fold objectives under an overall purpose of improving development results particularly for most vulnerable and disadvantaged groups through evidence-based learning.

First, it is expected to **help define a manageable scope for the evaluation** in 2015 by reconstructing the One Plan's theory of change and identifying existing and anticipated limitations in terms of One Plan's conceptual design and data availability.

Secondly, it is meant to **enhance learning on what works and what does not for achieving equity-focused development results** by analyzing the effectiveness to date of UN and partner's efforts to reduce disparities, with special emphasis on reaching vulnerable and disadvantaged groups, on each of the three One Plan's Focus Areas.

The value added of the proposed approach is its **cost-effectiveness** considering that the systematic review approach:

- a. Is expected to obtain critical information on 'what works' in terms of achieving equity-focused results under the One Plan by taking advantage of UN agencies' relevant evaluation and reviews conducted to date, therefore adding a minimal cost to individual UN agencies.
- b. Is designed as a rigorous and comprehensive form of desk review to be conducted in a resource intensive manner.
- c. Is expected to facilitate the planning and design of the evaluation in 2015 by identifying knowledge gaps and highlighting inconsistencies and weaknesses in the One Plan Focus Areas' theory of change.

3. Key questions

The proposed systematic review will seek to answer the following key questions:

Objective 1:

Assess the quality of the One Plan's conceptual design and the availability and adequacy of progress information and evaluative evidence

- a. To what extent is the One Plan results framework coherently articulated? To what extent do the outcomes, outputs and annual expected results per Focus Area follow results chain logic?
- b. What are the systems and practices currently in place to promote equity-focused monitoring and evaluation within the UN system? And within national systems? What are the challenges and/or enabling factors?
- c. What are the most promising areas for collaboration among national partners and the UN system on equity-focused monitoring and evaluation? What are untapped opportunities?

Objective 2:

Assess the effectiveness to date of UN and partner's efforts to reduce disparities, with special emphasis on reaching vulnerable and disadvantaged groups

- a. What have been the contributions to equity-focused development results achieved to date by UN agencies and partners on the three Focus Areas?
- b. What is the relevance of these results for national commitments to development results?
- c. How are these results being achieved? What were key enabling factors, constraining factors, lessons learned and good practices identified at this point?

4. Scope and Methodology

The systematic review is proposed to be conducted by external independent evaluation/research consultants over a two-month period from October-November 2014. The final report will be organized into two sections aligned to the two objectives and related questions and will be based on secondary data from existing evaluations, reviews and other relevant documents available as well as a selected number of interviews with key stakeholders.

Section 1 will involve an in-depth systematic review and meta-analysis of the findings and lessons learned from the contribution to equity-focused results contained in evaluations and reviews conducted by UN agencies to date. The main, but not exclusive, source of information will be Integrated Monitoring and Evaluation Plan (IMEP), which is a database that has identified around 83 evaluations and 46 reviews of UN agency work in Viet Nam from 2012 until the end of 2016 (See Annex B). The analysis will be organized around the One Plan's Focus Areas. A first screening will determine whether a critical mass of evaluative evidence is available for each Focus Area. Additional sampling criteria will be developed.

Section 2 will require outlining and analyzing the One Plan's theory of change based on the One Plan Results Framework and 2012, 2013 and 2014 Annual Work Plans. It will also consist of a comparative analysis of the monitoring and evaluation systems used by the whole UN, individual UN agencies and national partner in the framework of the One Plan (2012-2016) implementation.

5. Management

Resident Coordinator's Office (RCO) will be responsible for the day-to-day management of the consultant team.

The UN Results Based Management Working Group (RBM WG) who will act as the focal point for this exercise will support the chair of the group in decision-making and provide quality assurance throughout the process and may request revisions of products until quality standards have been achieved. A member from UNEDAP/UNEG will provide advisory support. (see annex C for detailed description of responsibilities).

The draft report will be shared with the UNCT, Government of Viet Nam (specifically Ministry of Planning and Investment) and the One UN Informal Donor Group for comments and findings will be presented to the Delivering as One Steering Committee (DaO SC)

Annex II. Selection of National statistical indicators (2005)75

Code	Group and name of indicators	Main category	Announcement periodicity	Agencies responsible
0209	Average life expectancy at birth	Sex, urban/rural, province/	Every 2 years	GSO
0210	Literacy rate of population aged 15 and above	- Sex, age group, urban/rural, province/city - Ethnic group, sex, age group, urban/rural, province/city	Every 5 years Every 10 years	GSO
2011	Average schooling years of population	- Sex, urban/rural - Ethnic group, sex, urban/rural	Every 5 years Every 10 years	GSO
	03. Labour, employment			
0301	Labour force	Sex, age group, urban/rural, province/city	Annually	GSO
0302	Number of labors working in the economy	Sex, economic sector, ownership, province/city	Annually	GSO
0303	Number of trained labors working in the economy	Sex, age group, professional level, province/city	Annually	GSO
0304	Number of unemployees and unemployment rate in urban area	- Sex, age group, professional level, time of unemployment - Sex, age group, professional level, time of unemployment, province/city	Quarterly Annually	MOLISA
0817	Number of people received health insurance, social insurance	Type of insurance, province/city	Annually	Social Agency Insur
1802	Number of kindergarten teachers	Type, sex, ethnic group, professional level, province/city	Annually	MOET
1803	Number of kindergarten pupils	Type, sex, ethnic group, age group, province/city	Annually	MOET
1804	Number of schools, classes, classrooms of basic education	Type, education level, province/city; solid/demi-solid/temporary room for classroom	Annually	MOET
1805	Number of teachers of basic education	Type of teacher, type of school, level, sex, ethnic group, professional level, province/city	Twice a year	MOET
1806	Number of school pupils	Type of pupil, type of school, level, sex, ethnic group, newly enrolled, repetition, drop-out, province/city	Twice a year	MOET
1807	Enrolment rate of basic education	General/at right age, level, sex, ethnic group, province/city	Annually	GSO

75 http://www.gso.gov.vn/default_en.aspx?tabid=515&idmid=5&ItemID=16033

Code	Group and name of indicators	Main category	Announcement periodicity	Agencies responsible
1808	Number of school pupils complete basic education	Education level, sex, province/city	Annually	MOET
1809	Number of pupils change education levels, number of pupils complete one education level	Education level, sex, province/city	Annually	MOET
1810	Repetition and drop-out rate	Education level, sex, province/city	Annually	MOET
1811	Number of learners escape from illiteracy, number of learners of continuation education	Education level, sex, province/city	Annually	MOET
1812	Number of provinces/cities complete compulsory education	Right age of primary education level, secondary education level	Annually	MOET
1814	Number of vocational teachers	Type, management level, type of center, permanent/temporary teacher, sex, ethnic group, professional level, province/city	Annually	MOLISA
1815	Number of vocational pupils	Type, management level, type of center, number of pupils at new school year, newly-enrolled, completers, sex, ethnic group, educational level, trained job, region, province/city	Annually	MOLISA
1817	Number of teachers of professional secondary school	Type, management level, permanent/temporary, sex, ethnic group, professional level, province/city	Annually	MOET
1818	Number of pupils of professional secondary schools	Type, management level, number of pupils at new school year, newly-enrolled, completers, sex, ethnic group, type of education, educational sector at 2nd stage, province/city	Annually	MOET
1820	Number of teachers of colleges	Type, management level, permanent/temporary, sex, ethnic group, professional level, province/city	Annually	MOET
1821	Number of college students	Type, management level, number of students at new school year, newly-enrolled, completers, sex, ethnic group, type of education, educational sector at 2 nd stage, province/city	Annually	MOET
1823	Number of university teachers	Type, management level, sex, ethnic group, professional level, province/city	Annually	MOET
1824	Number of university students	Type, management level, number of students at new school year, newly-enrolled, completers, sex, ethnic group, type of education, educational sector at 2 nd stage, province/city	Annually	MOET
1825	Number of people received post-graduate education	Educational level, sex, type of education, newly enrolled, completers, domestic/oversea	Annually	MOET
	19. Health, health care			
1902	Number of health workers	Type, professional area, management level, type of establishment, ethnic group, sex, educational level, province/city	Annually	MOH
1903	Number of medical practitioners in general and number of doctors in particular per 10,000 people	Sex, province/city	Annually	GSO
1904	Rate of commune/ward/town clinics having doctors	Province/city	Annually	MOH
1905	Rate of commune/ward/town clinics having	Province/city	Annually	MOH

Code	Group and name of indicators	Main category	Announcement periodicity	Agencies responsible
	midwife or obstetrical physicians			
1906	Rate of infected/death by 10 diseases/leading disease group in 100,000 people	Disease/disease group, sex	Annually	MOH
1907	Rate of children under 1 fully vaccinated	Province/city	Annually	MOH
1908	Number of children under 15 infected with/death by vaccinated diseases	Disease/disease group, sex, age group, province/city	Annually	MOH
1909	Maternal mortality rate		Annually	GSO
1910	Rate of births with weight below 2500 grams	Sex, urban/rural, province/city	Annually	MOH
1911	Under 5 malnutrition rate	Malnutrition level, sex, ethnic group, age in months, urban/rural, province/city	Annually	MOH
1912	Number of people infected with, number of people death by epidemics	Sex, age group, province/city	Monthly, annually	MOH
1914	Number of found drug addicts and prostitutes that have management documents, number of ward/commune without drug addicts	Province/city; for drug addicts: sex, age group, occupation.	Annually	Ministry of Public Security, MOLISA
1915	Number of people infected with HIV, number of people death by AIDS	Sex, age group, occupation, province/city	Monthly, annually	MOH
1916	Number of disable people	- Type of disability, level, cause, age group, sex, region - Type of disability, level, cause, age group, sex, province/city	- Every 2 years - Every 10 years	GSO
1917	Number of disable people received pension	Type of pension, age group, region	Annually	MOLISA, MOH
1918	Expenditure in health activities	Source, item	Annually	MOH
	21. People's living standards			
2101	Human Development Index (HDI)		Every 2 years	GSO
2102	Average monthly income per person	Source, income group, urban/rural, province/city	Every 2 years	GSO
2103	Difference of average income per person between the household groups with highest and lowest income	Income group, urban/rural, province/city	Every 2 years	GSO
2104	Average monthly expenditure per person	Expenditure item, income group, urban/rural, region	Every 2 years	GSO
2105	Poverty rate	Ethnic group, urban/rural, province/city	Every 2 years	GSO
2106	Rate of famine households, people	Famine level, province/city	Monthly	MOLISA, GSO
2107	Index of poverty gap	Urban/rural, region	Every 2 years	GSO
2108	Average monthly consumption level of some main goods per person	Type of goods, income groups, urban/rural, province/city	Every 2 years	GSO
2109	Dwelling structure of household	Ownership, type of dwelling, income group, dwelling area, urban/rural, province/city	Every 2 years	GSO
2110	Average dwelling area per person	Ownership, type of dwelling, income group, urban/rural, province/city	Every 2 years	GSO
2111	Rate of household using electricity, fresh water, hygienic latrine.	Urban/rural, province/city	Every 2 years	GSO

Annex III. Theories of Change (see separate document)

Annex IV. Equity-focused One Plan Indicators

One Plan Indicators	MoV (y/n)	Baseline (y/n) usually 2012	2013 value (y/n)	2016 target (y/n)	MDG or national policy indicators
JPG Economic Growth and Decent Work					
Outcome 1.1 Proportion of people living below the national poverty line	VHLSS	Yes (2011 & 2012)	No	No	Yes (MDG and national policy indicator)
Outcome 1.1 Child poverty rate	VHLSS + MICS	Yes (2011 & 2012)	No	(N/A)	No
Outcome 1.1 Gap between average monthly income per capita of the richest quintile and poorest quintile (disaggregated by sex of household head, urban/rural, region)	VHLSS	Yes (2011), No (2012)	Yes	(N/A)	No
Output 1.1.2. Degree to which a participatory and evidence-based approach is applied in socio-economic development and sectoral planning at central and local levels	UN programmes/project reviews, reports	Yes (2011 & 2012)	Yes	Yes	N/A
Output 1.1.3 Degree to which GoV poverty reduction monitoring and targeting systems include multidimensional poverty approach and methodologies	VHLSS, MDG report, annual and 5 year SEDP evaluation reports at central and local levels	Yes	Yes	Yes	N/A
Output 1.1.3 Degree to which GoV poverty reduction policies are specifically designed to target chronic and newly emerging forms of poverty	VHLSS, MDG report, annual and 5 year SEDP evaluation reports at central and local levels	Yes	Yes	Yes	N/A
Outcome 1.2 Share of vulnerable employment ⁷⁶ 15 years and above in the labour force (disaggregated by sex)	LFS	Yes (2011 & 2012)	No	(N/A)	Yes (MDG)
Outcome 1.2 Female to male average monthly income ratio (disaggregated by sector, industry, occupational level)	LFS	Yes (2011)	No	(N/A)	No
Outcome 1.2 Percentage of the labour force with professional/vocational training (disaggregated by sex and urban/rural)	LFS	Yes (2011)	No	(N/A)	Yes (national policy indicator)

⁷⁶ As indicated in the One UN Plan 2012-2016 (pg. 77), MOLISA, GSO and ILO define vulnerable employment as the sum of own-account workers and contributing family workers (unpaid family workers).

Output 1.2.4 Number of legal documents developed and/or amended with stronger focus on anti-discrimination against disadvantaged and vulnerable groups	National Assembly and Government reports	Yes (2011 & 2012)	Yes	Yes	N/A
JPG Climate Change and Environment					
Output 1.3.2 Percentage of participation of vulnerable groups institutionalized in disaster-related decision-making processes for subnational level preparedness, response, early recovery activities (including gender sensitive risk assessment)	Commune covered under the programme. Monitoring by national CBDRM project	Yes (2012)	No	Yes	N/A
Outcome 1.4. Proportion of population living in non-permanent and temporary dwellings	GSO (MDG indicator)	Yes (2011)	No	No	Yes (MDG and national policy indicator)
JPG Social Protection					
Outcome 2.1 No of beneficiaries receiving benefits from social assistance under Decree 67 and 13 on policy support for social assistance beneficiaries (disaggregated by sex, ethnicity, migratory status, urban/rural, region)	MOLISA data	Yes (2011 & 2012)	No	Yes	No
Outcome 2.1 Share of workers covered by social insurance (disaggregated by sex, urban/rural, sector, industry, migratory status and occupational level)	VSS, LFS	Yes	Yes	Yes	No
Output 2.1.1 The number of major studies, research and surveys available that respond to social protection priorities in Resolution 15	Yes (UN and IP (s) reports 2012-2016)	Yes	Yes	Yes	N/A
Output 2.1.1. Availability of M&E framework for Social Assistance policy reform (in line with Resolution 70 and task distribution appendix).	Yes (JPG3: HIV/AIDs Annual Reports)	No	Yes,	No	N/A
Output 2.1.2. Number of draft policies/laws/decrees in the field of social protection that incorporate data from UN supported studies and studies/pieces of research/surveys	No	No	Yes	Yes	N/A
Output 2.1.3 Extent to which the recommendations for the enhanced and coherent legal framework for the protection of selected vulnerable groups are discusses in the appropriate fora	One Plan Outcome evaluation reports	No	Yes	Yes	No
Output 2.1.4. Number of new systems, tools or processes developed to strengthen delivery of social protection services	Yes (UN and IP (s) reports 2012-2016)	No	Yes	Yes	No
JPG Health					
Outcome 2.2: Proportion of total health expenditure from out-of-pocket payment	National Health Accounts	Yes (2011 & 2012)	No	Yes	Yes (national policy indicator)
Outcome 2.2: Proportion of children under age 1 who are fully immunized against BCG, DPT-HepB-Hib, OPV, measles (disaggregated by sex, age, ethnicity, urban/rural, region, province, district)	Annual report of EPI programme	Yes (2011 & 2012)	No	Yes	Yes (MDG, national policy indicator)
Outcome 2.2: Proportion of deliveries attended by trained health personnel (disaggregated by province and region)	Health Statistics Year Book and MNCH reports (disaggregated by province and region)	Yes (2011 & 2012)	No	Yes	Yes (MDG)
Outcome 2.2: Percentage of rural households with access to hygienic latrines	MARD database	Yes (2011 & 2012)	No	Yes	Yes (MDG, national policy indicator)

Output 2.2.5 Number of policy studies/options developed with UN support in relation to water quality, sanitation and hygiene to support inequity/disparity reduction	Gov and UN reports/documents	Yes (2011 & 2012)	No	Yes	N/A
Output 2.2.5 Percentage of rural households having access in selected localities to improved sanitation latrines	NTP3 of RWSS report	Yes (2011), No (2012)	No	Yes	N/A
JPG Education					
Outcome 2.3: Pre-primary net attendance ratio (disaggregated by wealth index quintile, sex, ethnicity, urban/rural, by provinces)	MICS	Yes (2011)	No	Yes	Yes (national policy indicator)
Outcome 2.3: Performance of students in grade 5 assessments in maths and vietnamese (disaggregated by sex, ethnicity and locality)	MOET assessments	No	No	No	No
Outcome 2.3: Primary school completion rates (by sex, ethnicity, urban/rural, region)	MICS	Yes (2011)	No	No	No
Outcome 2.3: Percentage of household expenditure spent on education and training (disaggregated by boy(girl))	VHLSS and MICS	No	No	No	No
Output 2.3.1 Number of studies on inclusive learner-friendly educational approaches targeting disadvantaged learners, including ethnic minorities conducted and disseminated	Study reports, project reports	Yes (2011 & 2012)	Yes	Yes	N/A
Output 2.3.3 Number of provinces undertaking regular and systematic monitoring of the implementation of education policies for disadvantaged children	Monitoring reports, project and activity reports	Yes (2012)	Yes	Yes	N/A
JPG HIV					
Outcome 2.4. HIV incidence rate by mode of transmission (sexual transmission, injecting drug use) (percent)	Yes (MoH & UNAID EPP 2013)	Yes (2011),	Yes (2013)	Yes	Yes (national policy indicator)
Outcome 2.4. Number of new laws and policies that sustain the HIV response and address stigma and discrimination (number)	Yes (JPG HIV/AIDs Annual Report)	Yes (2011 & 2012)	Yes (2013)	No	No
Outcome 2.4. Number of adults and children currently receiving antiretroviral combination therapy in accordance with the nationally approved treatment protocol (or WHO/UNAIDS standards) at the end of the reporting period (number)	Yes (MoH Report 2012; MoH -VAAC – Global AIDS response global reporting 2012-2016)	Yes (2011 and 2012)	Yes (2013)	Yes	No
Output 2.4.1 No. Of policy advice/options papers covering HIV-related: S&D, inequality, inequity and feedback to improve policy implementation and policy effectiveness developed and submitted for consideration to the Government in the period 2012-2016	OP annual reports	Yes (2011 & 2012)	Yes	Yes	No
JPG Gender					
Outcome 2.4 Sex ratio at birth (disaggregated by ethnicity, income, education and region)	GSO population survey	Yes	Yes	Yes	Yes (national policy indicator)
Outcome 2.4. Proportion of reported cases of domestic violence that receive services and support (protection, legal aid, health care and counselling)	MoH sentinel survey	No	No	Yes	Yes (national policy indicator)
Output 2.4.3 No. Of policy advice papers/policy options covering: a) gender equality and inequity; b) gender based violence, prepared and submitted for consideration to Gov during 2012-2016	Policy advice papers on gender equality and GBV	Yes (2011 & 2012)	Yes	Yes	No

Output 2.4.3 availability of minimum comprehensive GBV package	Reports of MoCST	Yes (2011)	Yes	Yes	No
Output 2.4.4 Availability of a national planning and M&E framework on gender-based violence as part of the multisectoral coordination mechanism	Planning and M&E framework doc available	Yes (2011 & 2012)	Yes	Yes	No
JPG Governance					
Outcome 3.1 Proportion of NA members and Chairs or Vice-Chairs of NA committees who are from an ethnic minority groups	Report of NA elections	Yes (2011 & 2012)	Yes	Yes	Yes (national policy indicator)
Outcome 3.1 Proportion of People's Council members and Chairs or Vice-Chairs of People's Council who are women or from an ethnic minority group	Report of the PPC elections	Yes (2011 & 2012)	No	Yes	Yes (national policy indicator)
Output 3.2.2- Number of new draft laws/policies and monitoring mechanisms that addressed human rights concerns of vulnerable groups	Yes (UN and IP (s) reports 2012-2016)	Yes	Yes	Yes	N/A
Output 3.2.4 Number of groups of vulnerable people receiving free legal support services with UN support	Reports from national legal aid agencies and other service providers, PSPMOs	Yes (2011 & 2012)	Yes	Yes	N/A
Output 3.2.4 Availability of new victim support services for children victims and witnesses developed with UN support	Reports from MOLISA	Yes (2011)	Yes	Yes	N/A
Outcome 3.3 Percentage of the population from the poorest quintile that has access to public services (disaggregated by sex, ethnicity, urban/rural, province)	VHLSS	Yes (2011),	No	Yes	No
Output 3.3.1 Annual Plan of Action for Children and other cross-sectoral plans on key social issues for vulnerable groups developed and being used by provinces	Provincial reports on progress implementation of such plans	Yes	Yes	Yes	N/A

Annex V. Evaluations planned by UN agencies

Evaluations findings planned to be available at the time of the One Plan evaluation (6)

Output	Agency	Pending Evaluation	Type of evaluation	Partners	2014	2015					2016			
					Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
1.1.3	UNDP	Support to the implementation of the Resolution 80/NQ-CP on directions of sustainable poverty reduction 2011 - 2020 and the National Targeted Programme on Sustainable Poverty Reduction 2012 - 2015	Mid term and Final evaluation	MOLISA	X									X

1.3.1	UNDP	"Promoting Climate Resilient Infrastructure in Northern Mountain Provinces of Viet Nam"	Midterm and final evaluation	MARD			X										X
1.3.2	UNDP	Strengthening institutional capacity for disaster risk management in Viet Nam, including climate change related disasters-Phase II (SCDM II)	Midterm and final evaluation	MARD				x									X
1.3.2	UN Women	Strengthening local women's capacity and leadership on disaster risk management and disaster risk reduction	Impact and project end evaluation	VWU					X	X	X	X					
2.1.3	UNFPA	Intervention model of care for the elderly	Early Impact	Hai Duong & Ben Tre					X	X	X						
2.1.4	ILO	"Tripartite actions to protect migrant workers from GMS region from labour exploitation" project (GMS TRIANGLE project)	Final Evaluation	TBD			X	X	X								
2.2.5	WHO	Evaluation of Phase 3 Implementation of Water Safety Plan	Process	MoH, MoC, MARD, VWSA												X	X
2.3.1	UNICEF	Evaluation of the Mother Tongue Based Bi-lingual Education Action Research (MTBBE-AR)	Evaluation		X	X	X										
2.4.1	UNODC	Impact evaluation of K16 project on HIV prevention, care, treatment and support in prisons including pre-trial detention centers	Impact Evaluation	MPS													
2.4.3	UN Women	Project end evaluation on gender mainstreaming in legislation	Impact	PCSA					X	X							
2.4.3	UN Women	Project end evaluation on strengthening capacity of staff on implementation, monitoring and evaluation on National programme and National Strategy on gender equality	Project end evaluation	MOLISA					X	X	X	X					
2.4.3	UNFPA	Intervention model of Prevention of Domestic Violence (DV),	Early Impact	MOCST					X	X	X						
2.4.3	UNFPA	Addressing Imbalanced Sex Ratio at Birth (SRB)	Early impact	MoH					X	X	X						
3.1.1	ILO	Support to the development of industrial relations, wage fixing and labour law implementation institutions and capacity in Viet Nam	Mid term evaluation	MOLISA, SAC, VGCL, VCCI, VCA			X										
3.2.2	UNODC	End-of-Project Evaluation of VNM/T28 project on Building capacity of law enforcement and justice sectors to prevent and respond to domestic violence in Viet Nam	Final Evaluation	MPS													
3.2.1, 3.2.2 & 3.2.3	UNDP	Project-end Evaluation Strengthening Access to Justice and Protection of Rights in VN"	Project-end Evaluation	MOJ												X	X

3.2.4 and 3.4.2	UNDP	Project-end Evaluation "Legal Empowerment through Support to the Viet Nam Lawyers Association (VLA)"	Project-end Evaluation	VLA							x	x
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Annex 6: List of documents reviewed

Document Name	Agency
Monitoring and evaluation framework	
Results Based Management Strategy for Delivering as One in Viet Nam 2012-2016	UN VN
ILO policy guidelines for results-based evaluation	ILO
Programme Policy and Procedure Manual	UNICEF
Evidence-based programming- Guidance note	UNFPA
Policy and Procedure for Country Programme Evaluations	UNFPA
Results based Management Policy	UNFPA
Policy and Procedures for Programme and Financial Monitoring and Reporting	UNFPA
Results Based Management Strategy for UNFPA Viet Nam Country Office	UNFPA
Optimizing Results-Based Management	UNFPA
2014-2017 Regional Evaluation Strategy Asia and the Pacific Region	UN WOMEN
Programme monitoring, reporting and oversight chapter	UN WOMEN
Handbook on Planning, monitoring and evaluation for developments results	UNDP
Standard Operating Procedures (SOP) for Local Project Appraisal Committee (LPAC) process	UNDP
Guide for preparation of M&E components of the Detailed Project Outline and Project Document Annual Work Plan for UNDP projects	UNDP
UNAIDS 2012-2015 Unified Budget, Results and Accountability Framework	UNAIDS
Activity workplan template	UNAIDS
Results-Based Programming, Management and Monitoring (RBM) approach as applied at UNESCO	UNESCO
RBM Monitoring and Reporting Guidelines	UNESCO
Guidelines for the formulation of 37 C/5 (2014-2017 quadrennium) levels (Major Programme to C/5 Result Grouping and CAP Target levels)	UNESCO
Guidelines for the formulation of 37 C/5 (2014-2017 quadrennium) Regular Programme Workplans (Activity/Office)	UNESCO
Viet Nam Country Program 2012-2017	UNODC
Headquarter evaluation policy	UNODC
Regional Programme for Southeast Asia 2014-2017	UNODC
Evaluation Policy	UNIDO
UNIDO Field Office Performance: Generic Assessment Framework	UNIDO
Framework for Assessment of Global Forum Activities	UNIDO
Project handbook	IOM
Project Documents and Evaluation Reports	
Project Document of Support to the implementation of the Resolution 80/NQ-CP on directions of sustainable poverty reduction 2011 - 2020 and the National Targeted Programme on Sustainable Poverty Reduction 2012 - 2015 (PRPP)	UNDP
TOR of Independent Project Mid-term Evaluation of PRPP	UNDP
Annual Project Progress Report of PRPP (2012, 2013 and Q3 2014)	UNDP
Project Document of Promoting Climate Resilient Infrastructure in Northern Mountain Provinces of VN	UNDP
Project Document of Strengthening institutional capacity for disaster risk management in Viet Nam, including climate change related disasters-Phase II (SCDM II)	UNDP
Project Terminal Report "Strengthening national capacities to respond to climate change in Vietnam, reducing vulnerabilities and controlling greenhouse gas emission"	UNDP
Project Document of Legal Empowerment through Support to the Vietnam Lawyers Association (VLA)"	UNDP
Project end Evaluation "Strengthening the Capacities for Budgetary Decision and Oversight of People's Elected Bodies in Vietnam"	UNDP
Project end Evaluation "Strengthening the Capacity of Representative Bodies in Vietnam"	UNDP
Mid-term Review on Strengthening access to justice and protection of rights in Viet Nam	UNDP

Detailed Project Outline on Prevention of Domestic Violence, Addressing Imbalanced Sex Ratio at Birth and Care for the Elderly in Hai Duong Province	UNFPA
Annual Project Performance Report on Prevention of Domestic Violence, Addressing Imbalanced Sex Ratio at Birth and Care for the Elderly in Hai Duong Province (2012)	UNFPA
Annual Project Performance Report on Prevention of Domestic Violence, Addressing Imbalanced Sex Ratio at Birth and Care for the Elderly in Hai Duong Province (2013)	UNFPA
Detailed Project Outline on Prevention of Domestic Violence and Promotion of Care for the Elderly in Ben Tre Province	UNFPA
Review and outline of existing models on domestic violence prevention and control in Vietnam development of a minimum package of interventions for domestic violence prevention and control in Vietnam	UNFPA
Independent Mid-Term Review of the 8 th Country Programme (CP8) Viet Nam (2012-2016)	UNFPA
Programme Brief on the Mother Tongue Based Bi-lingual Education Action Research (MTBBE-AR)	UNICEF
TOR for Evaluation of the Mother Tongue Based Bi-lingual Education Action Research	UNICEF
Impact Evaluation on MDG-F- funded Joint Programme on Integrated Nutrition and Food Security Strategies for Children and Vulnerable Groups in Viet Nam	UNICEF
Documentation of Centre supporting inclusive education for children with disabilities in Vietnam	UNICEF
TOR for Documentation of Centre supporting inclusive education for children with disabilities in Vietnam	UNICEF
Independent Mid-term Review on Tripartite actions to protect migrant workers from GMS region from labour exploitation" project (GMS TRIANGLE project)	ILO
Project Document on Support to the development of industrial relations, wage fixing and labour law implementation institutions & capacity in Viet Nam	ILO
Programme Document "Promote the Rights and Opportunities for Persons with Disabilities: Equality through Legislation (PROPEL)	ILO
Independent Mid-term Review on "Promote the Rights and Opportunities for Persons with Disabilities: Equality through Legislation (PROPEL)	ILO
Mid-term self evaluation "Occupational Safety and Health in Hazardous Work in Southeast Asia"	ILO
Project Document on Strengthening local women's capacity and leadership on disaster risk management and disaster risk reduction	UN Women
Evaluability Assessment on Strengthening local women's capacity and leadership on disaster risk management and disaster risk reduction	UN Women
Project Document on Strengthening capacity of staff on implementation, monitoring and evaluation on National programme and National Strategy on gender equality	UN Women
Mid-term Review of CEDAW South East Asia Programme II	UN Women
Final Evaluation of the ASEAN Regional Mechanisms Programme	UN Women
Project Document of K16 project on HIV prevention, care, treatment and support in prisons including pre-trial detention centers	UNODC
Project Document of VNM/T28 project on Building capacity of law enforcement and justice sectors to prevent and respond to domestic violence in Viet Nam	UNODC
External Project Final Evaluation "Support to strengthening of immigration control capacity at the international border gates and international cooperation to prevent and control migrant smuggling and human trafficking"	UNODC
Participatory Self-Evaluation "VNM/J93 project, Support for developing effective amphetamine type stimulant prevention strategies and measures in East Asia: A pilot in Viet Nam"	UNODC
Final Evaluation on MDG-F- funded Joint Programme on Green Trade and Production	ITC
Mid-term Review on Treatment 2.0 Pilot Programmes in Can Tho and Dien Bien	UNAID and WHO
One Plan documents	
One Plan 2012-2016	
Delivering as One – Annual Results Reports 2012 and 2013	
Joint Programming Matrix Focus Area 1, 2, 3 2012	
Monitoring Tables 2012	
Monitoring Tables 2013	
Monitoring Tables 2014	
Integrated Monitoring and Evaluation Plan (IMEP)	
OP Database	

Report of FACG1 meeting	
Report of FACG2 meeting	
Minute of FACG3 meeting	
Other documents	
MDG Report 2012, 2013	
National Development Indicators by 2020 by sector policies	
National Statistics Indicators System	