## Review of DFAT Health Investments to Nauru

## **DFAT Management Response**

## Background

DFAT commissioned an independent review of Australia's support to the Nauru health sector for the period 2018-22. The review was undertaken to satisfy accountability requirements and to investigate and assess the overall performance of Australia's bilateral, regional and global health investments to Nauru. Outcomes and recommendations from the Review will inform the design of Australia's next health partnership with Nauru.

## Management response

DFAT welcomes this timely and important review of Australia's support to the Nauru health sector for the period 2018-22. The review was participatory, consultative, and independent.

DFAT notes the conclusion that all DFAT-supported health investments in Nauru aligned with GoN and Australia's strategic priorities for health improvement. Achievements include:

- DFAT's support to COVID-19 preparedness and response plans, and technical assistance to Nauru's COVID-19 Task Force
- establishment of the Tamanu and Tupaia data management systems (both were used to great effect during the pandemic).

DFAT also notes the review team's conclusion that the overall contribution was diminished because of a slow inception and poor selection of some advisers by the implementing agencies. The overall contribution could have been improved if absences of advisers incountry during COVID-19 were addressed earlier. Furthermore, the lack of a robust monitoring of identified indicators limited the overall contribution of the health investment.

The review affirms the findings in the health investment partner annual reports, feedback and internal informal DFAT reviews regarding the program and challenges. DFAT broadly accepts the recommendations and notes that several initiatives, including efforts to enhance capacity, are already underway.

The following page provides a more detailed response and actions against each of the recommendations from the Strategic Review.

Management response to the individual review recommendations

	commendation	Response	Action plan	Timeframe
1.	Initiate discussions with UN MCO on future Nauru programming (especially WHO, UNICEF and UNDP) and support the new GoN Health Minister to strengthen and prioritise a Health (or Human) Development Partner Coordination mechanism to ensure coherence across sectors and discuss opportunities for a joint approach. This may include tying funding disbursements to implementers' active engagement in coordination activities in future.	Agree in part	DFAT will continue to support the Government of Nauru in leading high-level discussions with other development partners.  DFAT, where it can, will continue to encourage the Government of Nauru to initiate and lead discussions with UN MCO on future Nauru programming.	January 2023 and ongoing
2.	Develop a new DFAT Pacific Health Strategy to address the current Pacific context and challenges, and include specific strategies for the smaller island states.	Agree	Initial scoping on developing a strategy for the Pacific health programs has started in 2022 and will be informed and guided by a new International Development Policy to be developed by DFAT at first.  Any outcomes from broader DFAT discussion and updated relevant policies and strategies will be built into the next phase of support to Nauru, if the timelines align.	January 2023 and ongoing
3.	Develop a Joint Options Paper with SPC, UN and other development partners on meeting health needs of small island states to present at Pacific Health Minister's and other fora.	Agree	Relevant teams within DFAT, mainly the Global Health Division (GHD) and the Office of the Pacific (OTP), will engage with development partners, including SPC and the UN, as well as with PICs governments to formulate options and models for mechanisms of shared support and resources for small island states.  This recommendation will be passed to DFAT's GHD and OTP to raise it in the Pacific Heads of Health and Health Ministers in their future meetings.  Any outcomes from broader discussion will be built into the next phase of support to Nauru, if the timelines align.	January 2023 and ongoing
4.	Improve coherence and consistency between DFAT bilateral and regional programs through revision of communication and coordination protocols and the review of models while DFAT sections and investments (HSI, Office of the Pacific – OTP) are being re-designed or restructured.	Agree	DFAT acknowledges the need for better communication and coordination internally between the bilateral teams (Post, Desk and the OTP), thematic teams and regional programs throughout the design and consultation process. This also need to be extended when sharing performance and progress reports.  DFAT will look at ways and strategies to improve internal communication including additional meetings with relevant areas and alignment of responsibilities.	January 2023 and ongoing
5.	Increase the number of DFAT Scholarships targeted at health and social services (if possible) for the next 3-5 years to continue to build local capacity and future localisation of key senior positions.	Agree in part	DFAT acknowledges that building local capacity is essential for making Nauru's health system sustainable. This will require long-term planning and will be considered as part of the Nauru health design. Retaining trained health workers, supported by DFAT scholarships, is an ongoing challenge for Nauru and will need to be addressed on a broader scale. DFAT will continue to work with the Government of Nauru on updating the Health Workforce and Training Plan and explore modalities for implementing the Plan.	January 2023 and ongoing
6.	Build MHMS capacity to improve support for gender-based violence victims/survivors.	Agree	DFAT acknowledges the health sector plays a critical role in responding to GBV, in terms of providing health services and reporting. DFAT will consider methods to mainstream GBV support as part of the Nauru health design.  DFAT will continue to work with the Government of Nauru on updating the Health Workforce and Training Plan for MHMS staff and explore modalities for implementing the Plan. Future training should focus on increasing awareness about GBV and knowledge to improve use of referral guidelines and SOPs with the aim of improving the quality of care for GBV victims/survivors.	January 2023 and ongoing
7.	Support MHMS to collect and analyse GEDSI data.	Agree	DFAT acknowledges the importance of reviewing and adapting activities and policies through a GEDSI lens that will contribute to improved health care accessibility, appropriateness, and responsiveness.  DFAT will continue to support the Government of Nauru to review existing surveys, health facility and relevant data sources to identify areas where GEDSI can be included in data collection systems and analyses, aligned with the MHMS NHS and priorities of GoN. This may include, for example, support to collect, analyse and report on disaggregated data attention to sex, gender, age and disability through the HMIS systems of Tupaia and Tamanu and in partnership with other stakeholders (including representative organisations).	January 2023 and ongoing