

MANAGEMENT RESPONSE TO TIMOR-LESTE STRATEGIC NUTRITION REVIEW

Activity summary

Despite ongoing efforts to improve nutritional status, undernutrition remains one of Timor- Leste's most pressing development challenges, with rates of stunting amongst the highest in the world, and wasting levels representing a serious public health problem. Responding to this challenge, Australia has shaped its investments over the years to contribute to addressing malnutrition in an increasingly deliberate manner. The current draft Australian Embassy Nutrition Strategy (2017-2020) was developed to articulate the nutrition-related outcomes expected from existing activities developed under the 2015-2019 Aid Investment Plan (AIP). These are:

- support to the **President's Nutrition Program (2014-2017)**, initially designed to raise awareness about the nutrition situation and reward community effort in seeking solutions;
- **technical assistance** to the National Council for Food Security, Sovereignty and Nutrition in Timor-Leste (KONSSANTIL);
- **Hamutuk (2016-2019)**, a collective action program, developing targeted, multi-sectoral behaviour change messages and delivery methods, and researching their effectiveness;
- **TOMAK (2016-2020)** (To'os Ba Moris Diak - Farming for Prosperity), a nutrition-sensitive agriculture program; and
- **Nutrition-sensitive programming** through the **Australia Timor-Leste Partnership for Human Development (PHD) (2016-2020)** in the sectors of health, education, water and sanitation, nutrition, gender, disability and social protection.

The draft Nutrition Strategy's long-term objective is to support the Government of Timor- Leste to reduce the prevalence of stunting in children aged 0-23 months.

Evaluation Summary

The Department of Foreign Affairs and Trade (DFAT) commissioned this Strategic Review to determine whether the Australian development program has the right approaches and strategy in place to contribute to reducing malnutrition in Timor-Leste, and to identify broad opportunities for improvements. It addressed the following key questions:

Relevance: To what extent are existing initiatives relevant to the current context of undernutrition and the development priorities of the governments of Australia and Timor-Leste?

Strategy: Does Australia have the right objectives and strategies? Which approaches and outcomes to improving nutrition-related indicators are most appropriate to the needs and capacity of Timor-Leste?

The review team methods included an initial document review, followed by a 16-day in-country visit (13-30 August) to: conduct interviews with more than 70 key stakeholders engaged in the sector; visit sites in Baucau and Manufahi to meet with recipients of the President's National Healthy Families Nutrition Award, TOMAK partners, Hamutuk partners and community-based nutrition activities; and present preliminary findings and recommendations and receive initial feedback and comments.

Main Findings

Relevance: DFAT's current nutrition program in Timor-Leste is highly relevant to Australian development program priorities, and to the Government of Timor-Leste's commitments to achieve Sustainable Development Goal (SDG) 2: *End hunger, achieve food security and improved nutrition, and promote sustainable agriculture*. The Government of Timor-Leste's renewed focus on nutrition under SDG 2 presents a timely opportunity for Australia, as a trusted leader in the area, to build on its responsive and valued support in future programming.

Strategy: The current DFAT portfolio of investments under the draft Nutrition Strategy does not yet adequately reflect an effective multi-sectoral approach. The two key limitations are a lack of geographic convergence that would enable nutrition-specific and nutrition-sensitive activities to complement and strengthen each other, and an inadequate balance of nutrition-specific and nutrition-sensitive interventions.

Summary of management response

The recommendations provide a valuable opportunity to reflect on Australia's work to improve nutrition in Timor-Leste across several programs in the development cooperation program. Australia's Department of Foreign Affairs and Trade (DFAT) agrees, at least in part, to all of the eight recommendations made by the review team.

DFAT notes that some recommendations require the Timor-Leste Government's agreement and guidance. There is some political uncertainty in the Government of Timor-Leste at the end of 2017, so this will likely delay detailed consideration and implementation of many of the recommendations.

Acronym list

AIP	Aid Investment Plan
BMI	Body Mass Index
CMAM	Community-based management of acute malnutrition
CSO	Civil Society Organisation
DFAT	Australia's Department of Foreign Affairs and Trade
FAO	Food and Agriculture Organisation
INGO	International non-government organisations
IYCF	Infant and young child feeding
KONSSANTIL	National Council for Food Security, Sovereignty and Nutrition in Timor-Leste
LBW	Low birth weight
MCH	Maternal and Child Health
MoH	Ministry of Health
NSA	Nutrition Sensitive Agriculture
PHD	Partnership for Human Development
PNP	President's Nutrition Program
SAM	severe acute malnutrition
SDG	Sustainable Development Goal
SNIP	Specific Nutrition Intervention Package
TOMAK	To'os ba Moris Di'ak (Farming for Prosperity)
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	The United States Agency for International Development
WFP	World Food Program
WHO	World Health Organization
WRA	Women of reproductive age

Management responses to the recommendations – December 2018

Recommendation	Response	Action plan	Timeframe
<p>Recommendation 1: The emphasis of the DFAT Timor-Leste Country Program in supporting the nutrition aspirations of the Government of Timor-Leste is relevant to the priorities of the Australian Government; addresses an urgent country need; is well aligned with Government of Timor-Leste priorities; is timely; and is broadly very well received. Addressing malnutrition should continue to be a high priority of the overall aid program in Timor-Leste.</p>	Agree	DFAT will continue to support Government of Timor-Leste in its efforts to address malnutrition. Addressing malnutrition will continue to be a high priority of the overall aid program in Timor-Leste.	Ongoing
<p>Recommendation 2: DFAT needs to increase its emphasis on nutrition within its overall portfolio – whether mainstreaming (as a loosely defined cross-cutting issue) or adopting a more fully realised multi-sectoral approach. In order to demonstrate current good practice in nutrition programming, and in line with Australia’s status as the largest bilateral donor to Timor-Leste, the Review team recommends that DFAT consider adopting <i>a more deliberate, multi-sectoral strategy with a converged geographic focus in a single municipality</i>.</p> <p>Converging the nutrition-sensitive sector activities of PHD and TOMAK, and including key nutrition-specific interventions in a single municipality – starting in a single suco and progressively scaling out – has several benefits. It will provide a scale which is sufficiently broad to align all the required sectors; provide significant learning on cross program and cross ministry cooperation; enable greater attribution of real nutrition outcomes; and is within DFAT’s financial capacity to support. Selection of the municipality should ideally preference Bobonaro, Manufahi and Baucau, where KONSSANTIL currently plans to trial a converged approach at a suco level. Additional selection considerations should include:</p>	Partially agree	<p>DFAT agrees that it should continue to emphasise nutrition across its development programs, both through nutrition-sensitive approaches and through nutrition-specific activities.</p> <p>DFAT acknowledges the value of considering a standalone multi-sectoral nutrition investment focused on one municipality that could then be rolled out across other municipalities. DFAT will further consider this, noting that any such investment would require significant financial and staffing resources and a reprioritisation of other development programs. Any consideration would also have to be undertaken in close consultation with the Government of Timor-Leste.</p> <p>DFAT is implementing activities in a multi-sectoral way in two locations: Hamutuk in</p>	6-12 months

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<ul style="list-style-type: none"> ▪ municipal government interest and capacity to scale out to municipal coverage in partnership with DFAT; ▪ the relative prevalence of malnutrition; ▪ existing service gaps; and ▪ existing DFAT nutrition-related program coverage. <p>This recommendation forms only the preliminary basis for further talks with KONSSANTIL and the Government of Timor-Leste to agree on the geographic scope and location of a more converged approach.</p>		Manufahi and PHD in Bobonaro. Lessons from these programs will inform consideration of approaches to work in a single municipality.	
<p>Recommendation 3: In the currently crowded policy arena, the 15 priorities that will emerge from the 2nd roundtable process in May 2017 represent a promising agenda for action around which to plan and test a more convergent approach in the selected municipality. Although not yet agreed, it is reasonable to assume that these priorities will be sufficiently broad to align closely with the priorities of the new government, as they have been derived from the recommended actions of the Food and Nutrition Security Policy, the National Nutrition Strategy, and the Zero Hunger Action Plan.</p> <p><i>The 15 priorities from the roundtable process could guide the selection of DFAT's future interventions while also drawing on the existing global evidence base of 'what works'.</i></p>	Agree	The current draft priorities were developed through an extensive consultation process in 2017. If these priorities are accepted and endorsed by the Government of Timor-Leste, Australia will work with stakeholders across government and our implementing partners to determine how Australian programs can best support these priorities.	While advocating for early action, DFAT will respond to Government of Timor-Leste processes and timelines
<p>Recommendation 4: As the current portfolio of activities is weighted in favour of nutrition-sensitive programming, <i>DFAT should undertake a detailed review of options for investing more heavily in nutrition-specific (direct cause) interventions.</i> These could include reducing anaemia and underweight (BMI \leq 18.5) in WRA to interrupt the LBW cycle. Supply chains for supplementary feeding and micronutrients could also be examined to determine whether inadequacy relates to supplies or their distribution.</p>	Partially agree	DFAT acknowledges the value of considering investing in direct cause interventions, while noting that a comprehensive program that addressed nutrition needs across the life cycle, even in a limited geographic area, would require a significant financial and management commitment and a	6-12 months

Recommendation	Response	Action plan	Timeframe
<p>Priority nutrition-specific interventions most aligned with current needs and gaps in lifecycle programming in Timor-Leste could include:</p> <ul style="list-style-type: none"> ▪ intermittent iron and folic acid supplementation for adolescent girls; ▪ supplementary feeding for underweight pregnant women; ▪ multi micronutrient supplements (which should include iron and folic acid) for pregnant women; ▪ supplementary feeding for wasted infants and young children and use of SAM protocols; and ▪ scaling-up of Community-based Moderate Acute Malnutrition (CMAM) for more moderately malnourished infants and young children, including the use of multiple micronutrient powders. <p>It is recommended that DFAT consider giving increased attention to complementing the existing SNIP and other existing packages such as obstetric care. While initially focused on achieving adequate scale in the selected convergence municipality, DFAT could consider exploring the possibility of partnering with other donors already involved in assisting the MoH in order to improve national coverage of these key nutrition-specific interventions (UNICEF, WFP, WHO, EU, UNFPA, etc.). Determination of DFAT's optimal role will require a more thorough joint review of the current need and implementation issues than was possible during this Strategic Review.</p>		<p>reprioritisation of other development programs.</p> <p>Direct intervention will be considered in the context of a limited development budget, competing development priorities also supported by Australia, the range of assistance being provided by other donors, and Government of Timor-Leste priorities and commitments.</p>	
<p>Recommendation 5: Beyond initial convergence of activities in one municipality, DFAT should make available the evidence-based learning from ongoing operational research (such as Hamutuk in Manufahi), applied research (such as TOMAK's NSA innovations) and convergence (i.e. from the convergence municipality) available for application on a larger scale.</p>	Agree	DFAT will share lessons and approaches from Hamutuk and TOMAK with KONSSANTIL and relevant municipal authorities.	Ongoing

Recommendation	Response	Action plan	Timeframe
<p><i>Support should also be provided for progressive rollout of ‘proven’ approaches to the other two municipalities where KONSSANTIL has selected vulnerable sucos for trialling approaches, depending on progress, available resourcing and KONSSANTIL’s interest and capacity.</i></p>			
<p>Recommendation 6: Assuming a more converged multi-sector approach with an increased focus on nutrition-specific interventions, DFAT should consider the inclusion of more specific nutritional status outcomes for their converged Nutrition Strategy, and systematically monitor and report on them. These could include committing to the Government of Timor-Leste’s SDG 2.2 targets, which are that by 2025, Timor-Leste will achieve:</p> <ul style="list-style-type: none"> ▪ a 40% reduction in stunting in children aged under 5 years [Current rate of 50% to 30% - a 20% reduction in 9 years]; ▪ less than 5% wasting prevalence in children aged under 5 years [Current rate of 11%]; ▪ a 30% reduction in low birthweight; and ▪ a 50% reduction in anaemia in WRA aged 15-49 years [Current rate of 39% to 19%]. <p>DFAT should work with KONSSANTIL to estimate the achievable percentage reduction in the selected convergence municipality within the timeframe, adjusted to be accommodated within the next AIP benchmarks. Other medium-term, intermediate outcomes relating to aspects of behaviour change across sectors and workforce capacity outcomes (for example) would also need to be progressively developed under each sector as each program defines more nutrition-focused programming outcomes.</p>	Agree	DFAT will consider how to adopt specific nutritional status outcomes in our programs, once we have considered our response to recommendations 2 and 4. Regardless of our programming response, DFAT will adopt more defined nutrition targets in the next AIP and monitor progress in the Performance Assessment Framework.	6-12 months

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<p>Recommendation 7: Given the near-complete amalgamation of nutrition-related initiatives and sectors under the flagship PHD and TOMAK programs, development of an overarching Nutrition Strategy which captures the synergies of both programs and reports on joint overall outcomes of a converged nutrition program in the selected municipality should be considered. This would require agreement between the respective managing contractors, and would need to take into account resource implications. (TOMAK would also retain its current MELF for overall program monitoring, as would Hamutuk, as a stand-alone, research-focused program.) This strategy would seek to achieve and report on the nutritional status outcomes in Recommendation 6.</p> <p>Once an overarching Nutrition Strategy for a converged municipal program is developed, DFAT should consider the need for an Embassy-wide nutrition strategy as well. The need for such a strategy and the type of outcomes it could expect to achieve will be dependent on the extent to which DFAT finances and implements additional nutrition-related activities beyond PHD and TOMAK's converged program (for example, the nationwide rollout of nutrition-specific interventions in Recommendation 4, support for national KONSSANTIL strengthening in Recommendation 8 below, or whether PNP continues to be financed). If these broader recommendations are actioned, an Embassy-wide nutrition strategy would also need to be developed to articulate and capture expected outcomes.</p>	Agree	DFAT's strategic framework for nutrition will evolve as DFAT implements our response to recommendations 2, 4 and 6.	6-12 months
<p>Recommendation 8: DFAT should focus on strengthening KONSSANTIL at both the national and sub-national levels.</p> <p><i>At the sub-national level, the focus of strengthening KONSSANTIL should be to build its capacity to effectively plan, implement and monitor a converged, multi-sectoral program in the selected convergence municipality.</i> National-level KONSSANTIL should be seen as an integral driver</p>	Agree	DFAT will continue to work with KONSSANTIL. The extent of support to KONSSANTIL will relate to Government commitment and resourcing of KONSSANTIL and consultation with KONSSANTIL on their capacity development needs.	6 months

Recommendation	Response	Action plan	Timeframe
<p>of this process, but as it is not tasked with implementation, its role would be an oversight one in which DFAT and their partners engage with KONSSANTIL through a process of joint learning under the converged municipal program. Applying multi-sectoral planning principles and encouraging practical, joint sectoral planning at sub-national level will offer lessons for strengthening initially municipal, and ultimately national planning approaches, which National level KONSSANTIL might utilise in other municipalities.</p> <p><i>At the national level, DFAT, under Government of Timor-Leste leadership and in close consultation with other stakeholders, should create a useful role and capacity development program which strengthens the national-level KONSSANTIL to carry out its mandate,</i> (managed through the Embassy or by PHD). This would require a strategic capacity review of KONSSANTIL against the extensive expectations of their current role and purpose and the fundamental barriers they face in fulfilling them. It would also take into consideration the priorities of the new government and the support other donors provide. The capacity review could also consider the merits of elevating KONSSANTIL institutionally to empower its coordination capacity, and resourcing a dedicated secretariat. Other areas for support could include strengthening capacity in broader strategic, inter-ministerial planning; nutrition budgeting / finance planning; ongoing advocacy to keep nutrition on the national agenda; the development of a common results framework to facilitate tracking of progress against SDGs; and advocacy for policy changes (including, for example, addressing overweight and obesity rates, and the regulation of breastmilk substitute formula usage).</p>			