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Symposium Report on Social and Behaviour Change Communication for Better Nutrition and Health in Timor-Leste

12-13 December 2018, Ministry of Health
Dili, Timor-Leste



Acknowledgements

The Social Behaviour Change Communication (SBCC) Symposium held on 12th and 13th December 2018 was organized by the United Nations World Food Programme (WFP) Timor-Leste and the Ministry of Health (Ministry of Health) of Timor-Leste, with the financial support from the Korean International Cooperation Agency (KOICA).

Ministry of Health led the symposium organization, under the overall coordination of Mr. Pedro Canisio da C. Amaral (National Director of Public Health, Ministry of Health), Dra. Olinda dos Reis Albino (Chief Department of Nutrition, Ministry of Health), and representatives from the Department of Health Promotion, Ministry of Health.

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Special gratitude goes to National Director of Public Health Mr. Pedro Canisio da C. Amaral, KOICA Country Director Mr. Sikhyon Kim, and WFP Country Director Mr. Dageng Liu for their inspiring and informative speeches during the opening and closing remarks of the Symposium.

List of Abbreviations

CHC	Community Health Centre
DFAT	Department of Foreign Affairs and Trade
DHS	Demographic and Health Survey
INS	National Health Institute
JSI	John Snow International
KOICA	Korean International Cooperation Agency
KONSSANTIL	Konselho Nasional Seguransa Aihan no Nutrisaun Timor Leste
LISIO	Livrinho Saúde Inan ho Oan
MAF	Ministry of Agriculture and Fisheries
M&E	Monitoring and Evaluation
MoE	Ministry of Education
MoH	Ministry of Health
MSTL	Marie Stopes Timor – Leste
NSA	Nutrition Sensitive Agriculture
PHC	Primary Health Centre
PHD	Partnership for Human Development
PLW	Pregnant and Lactating Women
JSI	John Snow International
SBCC	Social and Behavior Change Communication
SDGs	Sustainable Development Goals
SFP	School Feeding Program
SISCa	Servisu Integradu Saude Comunitaria
SSM	Servisu Saude Municipio
TAIS	Timor - Leste Health Improvement Project
TOMAK	To'os ba Moris Di'ak / Farming for Prosperity
UNICEF	United Nations Children's Fund
UNTL	Universidade Nacional Timor Lorosa'e (National University Timor-Leste)
WFP	World Food Programme

Contents

Acknowledgements	2
List of Abbreviations	3
Introduction	5
Opening Remarks.....	6
Setting Objectives.....	8
Session 1. Overview of SBCC – presented by WFP Regional SBCC Specialist.....	9
Session 2. Nutrition SBCC Symposium in the Context of the Multisectoral Approach to Promote Good Nutrition for All under KONSSANTIL – presented by Ministry of Health	10
Session 3. Highlights from Formative Research on Adolescent Nutrition and Health – presented by WFP and TOMAK	10
Session 4. SBCC in Maternal and Child Health – presented by UNICEF	12
Session 5. Mother Support Group – presented by Alola Foundation	12
Session 6. Edutainment Encourages Pregnant Women to Prepare for Birth in Timor-Leste ‘Bemvinda Angela’–presented by John Snow International	12
Session 7. National Youth Hotline (Liña Foin-sa’e) –presented by Marie Stopes Timor-Leste	13
Session 8. <i>Liga Inan</i> Program – presented by Health Alliance International and Catalpa International	14
Session 9. HAMUTUK: Innovative ICTs for SBCC Monitoring and Evaluation–presented by Catalpa	15
Session 10. Examining Successes and Failures in SBCC – presented by Ba Futuru (‘For the Future’)	15
Session 11. Adolescent Nutrition Research 2017 - presented by National Health Institute	16
Common Issues and Lessons Learned from the Presentations.....	17
Highlights from the Discussion facilitated by Ministry of Health	19
Highlights from Group Work for Better Nutrition and Health in Timor-Leste	19
Conclusion and Way Forward	22
Closing Remarks	23
Appendix 1. Agenda	24
Appendix 2. List of Participants	26
Appendix 3. Survey Template for SBCC Mapping Exercise.....	29
Appendix 4. Adolescents Trusted Sources for Health and Nutrition Information	30

Introduction

A diverse group of nutrition stakeholders representing national and international development partners and Ministry of Health convened in Dili on 12th and 13th December 2018 for a symposium organized by the Ministry of Health (MoH), in partnership with WFP Timor-Leste, to explore how to utilize the transformational power of social and behaviour change communication (SBCC) to address nutrition challenges facing the country, exchange best practices and consider how SBCC can contribute to the realization of national development goals and the Sustainable Development Goals (SDGs). The one-and-a-half-day symposium was organized to guide the development of a National SBCC strategy based on the results of the formative research on adolescent health and nutrition behaviours conducted in 2018 and other best practices of ongoing work in the country.

Timor-Leste, has one of the youngest populations in the Asia-Pacific Region (UNDP, 2018), and where adolescents constitute one of every four citizens (Census, 2015). Critical levels of under-five malnutrition exist with 50% stunting and 11% wasting rates among 0-59 months (FNS, 2013). This is an impetus for adolescence malnutrition. The nutritional status of adolescents is not optimal, as despite the lack of trend data for both girls and boys 10-19 years old, Timor-Leste counts with a school-based survey representative for students 13-17 years old (WHO-SERA0, 2017). This 2015 study shows that 21.8% were underweight –with a much higher prevalence among boys 28.0% than girls 16.3%; and 4.4% overweight or 0.8% obese, very low compared to other Low- and Middle-Income Countries (LMIC). Others cite 33.4% underweight for girls aged 15-19, with 21.5% suffering from anaemia (MoH, 2015). Longitudinal research in two communities found that growth curves of rural Timorese children are also poorer for adolescent boys than that of girls, and that relative to the WHO standards, children show early-life growth faltering and stunting throughout childhood and adolescence (Spenser et al, 2017).

Malnutrition affects both physical and mental development, with far-reaching consequences for human capital, child mortality, morbidity, and contributes to various health and nutrition-related problems. Timor-Leste, as one of the world's youngest countries, is still struggling to address nutrition-related issues including contextual understanding of its root causes and the extent of the problem. Health and nutrition problems and related behaviours that arise during adolescence shape adult wellbeing, with important public health implications for these future adults as well as the health of their future children. With a youth bulge in Timor-Leste and given the poor nutrition status of Timor-Leste's children and adolescents, it has become imminent to find solutions and address the issues arising due to unhealthy diet, lack of adequate nutrients, physical inactivity leading to developing Non-Communicable Diseases (NCDs) and micronutrient deficiencies.¹

SBCC, is a research-based consultative process that uses interactive communication tools and methodologies to influence behaviours by challenging deep rooted social norms and promoting correct health practices. SBCC uses approaches and tools keeping in mind the audience preferences, thus creating an enabling environment for behaviour change at the individual, household, and community level. In addition to reaching the audience, SBCC helps to create a demand for services, thus engaging in advocacy at the policy level to ensure implementation of health services by Governments. A range of evidence from countries in Asia and Africa, have shared the effectiveness of using SBCC methods to promote nutrition behaviours.

Government and development partners have undertaken a variety of SBCC interventions in their respective areas with the common objective to promote improved health and

¹ Health for World's Adolescents: A Second Chance in the Second Decade, WHO <http://apps.who.int/adolescent/second-decade/section1/page2/reasons-for-growing-attention.html>

nutrition in Timor-Leste. Through presentations and moderated discussions on a variety of SBCC topics, approximately 100 participants from Government, development partners, civil society, the private sector, academia, and international experts showcased their work and emerged more knowledgeable on the landscape of current priorities with commitment to harnessing the potential of communication and improve health and nutritional well-being in the population. The 2018 SBCC symposium is a tipping point for continued collaboration in this space.

Opening Remarks

The Symposium opened with a reflection on the health and nutrition intervention in Timor-Leste and the need to fill the gaps with SBCC integration.

Excerpts from the speech presented:

Mr. Dageng Liu, Country Director of the World Food Programme

Mr. Dageng emphasized SBCC as an essential tool to address malnutrition. "SBCC is now globally recognized as one of the essential actions--used in conjunction with other program components-- to address malnutrition. In recent years, WFP has evolved into an organization providing food assistance and hunger solutions, with an increased emphasis on enabling vulnerable populations to reach both their energy and nutrient needs. Thus, SBCC is now increasingly important to improve behaviours around access, selection, preparation, and consumption of nutritious foods." He continued with hope that "this SBCC symposium could serve as a platform to enhance coordination and evidence sharing among development partners working on nutrition and health. We count on your active participation so that we could learn from each other and help to develop a realistic, sustainable and scalable comprehensive SBCC strategy to address childhood adolescent health and nutrition challenges in Timor-Leste."



KOICA's Country Director of Timor-Leste, Mr. Sikhyon Kim

Mr. Kim highlighted that KOICA supports initiatives contributing to better health and nutrition in Timor-Leste. "KOICA will continue to assist agencies and NGOs with programs and projects on health and nutrition." Mr. Kim also encouraged all partners to "establish an effective SBCC communication with each other— with that coordination we can improve the SBCC interventions in nutrition programs." He assured that "with the symposium, we all can learn and gain knowledge from each other to develop SBCC strategies for better behaviour change and hopefully create a better and healthier Timor-Leste".



Mr. Pedro Canisio, the National Director of Public Health of the Ministry of Health

“Nutrition is complex, where it is interlinked with other health issues and contributes to high mortality in Timor-Leste”. Mr. Canisio is hopeful that, “we can use the symposium as an opportunity to learn together, share ideas and approaches to work together in ending malnutrition; we can hope to develop better strategies and intervention for nutrition”. The National Director also emphasized Ministry of Health’s continued effort towards ending malnutrition. “Ministry of Health will continue with its commitment to end malnutrition. Ministry of Health has already planned for a



food and nutrition survey in 2019 and hopefully with the new survey we can learn more about the status of nutrition in Timor-Leste. In fact, even if we already have programs for malnutrition treatment, there are causes of malnutrition that we have not properly addressed. Therefore, we need to re-evaluate our approaches and intervention methods.”

Setting Objectives

Presented by Ministry of Health/ Health Promotion Department - Ms. Augusta Amaral

Ms. Amaral, an officer from the Health Promotion Department, took participants through the workshop objectives. She shared the Ministry of Health's interest to coordinate a multisectoral response to the challenge of malnutrition especially following the momentum generated by the International SBCC Summit in Bali in April 2018. She further added that the SBCC Symposium in Timor-Leste aimed to:

- Review existing SBCC approaches as a mechanism of delivering nutrition key messages about the health and nutrition in Timor-Leste with a focus on the vulnerable population groups of children under 5, adolescents and pregnant and lactating women (PLW).
- Learn about innovations in the field of SBCC, understand trends and influencers and scope potential areas of collaboration and areas of potential scale-up (geographic and thematic) to initiate the development of a realistic, sustainable, scalable comprehensive SBCC strategy to address health and nutrition issues in Timor-Leste.
- Summarize the key findings of formative research conducted by WFP, TOMAK, and Ministry of Health on adolescent health and nutrition behaviours in Timor-Leste.
- Highlight and collectively learn from past and on-going projects for consideration in the development of a coordinated SBCC strategy.
- Deliberate on a plan to develop a comprehensive multi-sectoral SBCC approach/ package of programs addressing child, adolescent, and maternal health and nutrition.
- Create momentum for the development of a national SBCC strategy and action plan focusing on for a national level strategy on SBCC for childhood adolescent health and nutrition intervention.



Session 1. Overview of SBCC – presented by WFP Regional SBCC Specialist

To kick off the technical component of the workshop, WFP's regional SBCC specialist provided an overview of SBCC. The session was intended to provide an overview on the essential elements required to undertake an SBCC intervention. It highlighted the difference between an IEC approach and an SBCC approach- and how SBCC promotes a more cohesive environment to work with the community. Furthermore, the presentation provided the key steps in undertaking an SBCC intervention, how to make it more effective, and importance of knowing the audience and the need to identify local solutions to be more effective. The information also included the understanding on the steps of SBCC, the 7Cs to keep in mind while designing the communication tools.

The presentation further elaborated on the importance of research and utilizing the results in developing the tools for audience. It emphasized the need for a comprehensive approach in the planning and implementation of the desired programs with a program design, which includes a well-developed monitoring and evaluation plan.

Seven C's


Command Attention

Cater to the heart and head

Create Trust

Clarify Message

Communicate a benefit

Call to Action

Consistency Counts

Session 2. Nutrition SBCC Symposium in the Context of the Multisectoral Approach to Promote Good Nutrition for All under KONSSANTIL – presented by Ministry of Health Nutrition Department

Ministry of Health discussed the complexities of an SBCC approach in the context of a multi-sectoral effort to promote good nutrition for all under the guidance of KONSSANTIL (the inter-ministerial National Council for Food Security, Sovereignty and Nutrition in Timor-Leste). While each ministry is committed to strengthen their line of coordination and continue to work in their respective areas to support nutrition programs, the coordinating body can play an important role in strengthening the coherence of SBCC materials and approaches undertaken by various stakeholders in the Timor-Leste.



Session 3. Highlights from Formative Research on Adolescent Nutrition and Health – presented by WFP and TOMAK

WFP and TOMAK (Farming for Prosperity or To'os ba Moris Di'ak) undertook formative research with the support of the Ministry of Health, Ministry of Education (MoE) and with approval from National Health Institute (INS) in 2018. The study aimed to understand adolescents' nutrition knowledge, attitudes and practices as well as their perceptions and priorities, describe social and gender norms influencing nutrition-related behaviours, and the behavioural determinants of optimal adolescent nutrition.

TOMAK is an agricultural livelihoods program supported by Australian Government in Timor-Leste to engage with the communities in 66 villages in 3 municipalities (Bobonaro, Baucau and Viqueque) by establishing a foundation of food security and good nutrition for targeted rural household and building household capacity to engage in agricultural markets by promoting development of selected agricultural value chains.

WFP is transitioning to provide capacity support for malnutrition prevention and awareness-raising for behaviour change which requires a thorough understanding of barriers to behaviour change and enabling factors to maintain or adopt healthy behaviours related to malnutrition prevention. WFP's Nutrition's policy emphasizes that addressing the nutritional needs of adolescent boys and girls as an integral requirement to help them meet the social and economic roles they need to perform.



As part of evidence building for an appropriately designed SBCC strategy, the two agencies conducted formative research to understand from adolescent health behaviours – capturing the prevailing knowledge, attitudes and practices, and perceptions. The research found that approximately 80 percent of adolescents skip breakfast, eat less protein – and iron-rich foods, consume less traditional foods, and eat more unhealthy snacks. The decision on these food practices and choices are influenced by three categories – price, taste, and availability. These findings will inform the design of culturally appropriate and effective social and behaviour change strategies for improved adolescent health and nutrition. The study recommends a multi-pronged innovative SBCC strategy according to trusted channels (see Appendix 4) to promote healthy behaviours and understanding the importance of healthy diets, the need for a comprehensive approach to working with adolescents, which should include issues indirectly and directly affecting their nutrition intake and collaboration with partners, government stakeholders to promote healthy lifestyle by ensuring inclusivity and equality. ²

² Data source: Formative Research on Adolescent health and nutrition in Timor Leste, WFP and Tomak, 2018

Session 4. SBCC in Maternal and Child Health – presented by UNICEF

UNICEF, as a United Nations agency focused on promoting and protecting the rights and wellbeing of all children, establishes partnerships with Government, private sector and civil society organization to ensure the rights of all girls and boys to survival, development, protection and participation are being met. UNICEF has developed some IEC materials targeting at children and family, especially for mothers. UNICEF's IEC materials include 8 flip chart that address the importance of care for mothers, babies, hygiene, growth; UNICEF also developed a story book addressing the crucial time of first 1000 Day; as well as games and nutritional flyers. UNICEF has also provided activities at Health Facilities four times a month, to provide key messages to mothers. UNICEF also provide posters at HF with sign of pregnancy, new born baby, and feedings.



Session 5. Mother Support Group – presented by Alola Foundation

Alola Foundation, founded in 2001, seeks to nurture women leaders and advocate for the rights of women, increases women leadership capacity, improve health status of women and children, increase access and quality education for women and children, and strengthen women's small enterprise at the grassroots level. ALOLA's Maternal and Child Health (MCH) program focuses on breastfeeding, increasing access to safe birthing, birth preparedness planning, raising community awareness on nutrition, and mother support group. Alola in collaboration with Ministry of Health established mother support groups (MSG) to provide activities that lead mothers to become the leaders of health in the community. MSG also focuses on capacity building to mothers through workshops and share information on nutritive food. With the MSG, ALOLA provides counselling and referral information in rural areas. MSG is a collective work, implemented together through collaboration with community leaders.

Session 6. Edutainment Encourages Pregnant Women to Prepare for Birth in Timor-Leste 'Bemvinda Angela'– presented by John Snow International

John Snow International (JSI), has been operating in the health sector in Timor-Leste since 2005. Aside from *Bemvinda Angela*, JSI has implemented health assistance projects include Timor-Leste Integrated Assistance – TAIS I & II (2008 - 2011) funded by USAID;

Timor-Leste Health Improvement Project (TL-HIP). JSI continue with technical support to the Ministry of Health to improve integrated and health services including immunization, nutrition, maternal, new-born care, child health family planning, quality improvement processes, health promotion, use of data, and facility readiness to increase health status.

JSI presented their SBCC approach to support expectant mothers and raise their knowledge about health during pregnancy through short film. With the local knowledge and traditional beliefs, home births are still practiced (usually performed by experienced elders) in rural communities across the country due to female modesty issues—many prefer familiar family members to perform traditional deliveries versus unfamiliar health staff. Nationally, unsafe delivery (43% of births are by unskilled birth attendants) has resulted in a maternal mortality rate of 215 maternal deaths per 100,000 lives birth nationally.

JSI's short film *Bemvinda Angela* highlights the issues around pregnancy and aims to break some traditional barriers and encourage community involvement, particularly expectant parents (and extended family) to use health facilities and trained birth assistant for safe delivery.



Session 7. National Youth Hotline (Liña Foin-sa'e) – presented by Marie Stopes Timor-Leste

Since 2005, Marie Stopes Timor-Leste (MSTL) has work to support Timor-Leste communities through a wide range of health services, including family planning and sexual and reproductive health. MSTL have reached more than 250,000 clients all across 13 Municipalities since inception. Aside from Liña Foin-sa'e (youth hotline), MSTL also proved their services through community outreach and mobile tents in rural, as well as family health clinics. Liña Foin-sa'e works toward providing better health information to young people in the region on youth reproductive health, puberty, family planning, pregnancy and infertility, sexual transmitted diseases, sexual relationships, and menstruation. The objective of Liña Foin-sa'e is to share information and knowledge to young people about their rights of reproductive health, in a confidential and professional manner, assisted by health professionals.

Session 8. *Liga Inan* Program – presented by Health Alliance International and Catalpa International

Liga Inan is a Ministry of Health program supported in partnership by Health Alliance International and Catalpa International that focuses on improving the relationship between midwives and mothers in order to increase the number of safe births in Timor-Leste. Liga Inan began in Manufahi in 2013 and is now operational in 12 municipalities with a roll out in Dili (Metinaro and Atauro) in 2019. The program has already handed over management in nine municipalities. Health Alliance International (HAI) has been operating in Timor-Leste since 1999 with the government to rebuild the health system, promote policies and support programs that strengthen government primary health care and foster social, economic, and health equity for all. Catalpa International integrates technology and behavioural insights with locally-driven solutions to create lasting change.



**Programa Liga Inan haforsa ligasaun
entre inan isin rua no parteira sira**

For the symposium, HAI and Catalpa provided insight on how Liga Inan is cutting across geographical barriers by using mobile phones to connect expectant mothers with health providers in Timor-Leste to improve the likelihood of a healthy pregnancy, skilled birth and post-natal care. Health providers use a mobile phone to register expectant mothers and track their progress. The program also nudges midwives to keep in contact with mothers as they get closer to their due date in order make arrangements for attending the delivery. Liga Inan also sends automated promotional health information via SMS to all registered pregnant mothers throughout their pregnancy and for six months after delivery to help them make better decisions about their pregnancy and link them with regular pre and post-natal care. Liga Inan recognises that a simple text message can often make the biggest difference.

Session 9. HAMUTUK: Innovative ICTs for SBCC Monitoring and Evaluation–presented by Catalpa

Hamutuk is an innovative, multi-sector program that brings more than 20 organisations together to improve nutrition in Timor-Leste. Hamutuk's goal is to reduce the prevalence of stunting in children under two to create human, social and economic benefits for present and future generations. The pilot project is in Holarua, Manufahi, with partners in WASH, agriculture, health, education, family planning and social inclusion.

The Hamutuk program includes a mobile app and online platform for partners to monitor activities, increase collaboration and enhance the effectiveness of existing SBCC approaches. Community-based partners can use the mobile app to record information, share behaviour change content and evaluate household uptake of nutrition-promoting behaviours without duplication of efforts. It seeks to support data collection to help partners measure the impact of their work and understand collective impact on nutrition.

Hamutuk is led by a Technical Support Hub comprised of Catalpa International, PHD, the Australian Embassy and M&E House in partnership with KONSSANTIL, government agencies and international and local NGOs.

Session 10. Examining Successes and Failures in SBCC – presented by Ba Futuru ('For the Future')

Ba Futuru is a national not-for-profit organization, with services include life enhancing programs that specialize in peace building, gender empowerment, child protection education, teaching approaches, and conflict transformation. Ba Futuru's mission is to protect children, reduce violence, empower women and inspire young learners through the creation of a Timor-Leste free of violence for all citizens. Ba Futuru's interactive, collaborative, human rights-based approaches and training tools involve the use of various channels such as arts, drama, theatre, TV broadcasting and utilization of social media as a medium for transformation and tool of engagement.

Ba Futuru's SBCC approaches are through "edutainment" (education through entertainment) including stories, theatre, series of short films, and ensuring the quality of production for better regular engagement. Ba Futuru believes that edutainment engages viewers emotionally and personally, using story lines that relate to audience and can model behaviour on, can help with breaking barriers as it makes sensitive issues become easier to talk about. Ba Futuru's SBCC approaches are more about theatre, tv broadcasting, utilization of social media, viewer groups, comparing to other printing materials. Ba Futuru measures the impacts of their SBCC approach through pre – and post survey and follow up data collection to measure short term changes in knowledge and attitudes, and behaviour change. The challenge Ba Futuru encounter in their work include the budget limitations as short-term project cycles and insufficient consultation. These challenges may arise unforeseen issues, quality production, and difficult to measure long term impact.

Session 11. Adolescent Nutrition Research 2017 - presented by National Health Institute

The National Health Institute (INS) attended a Nutrition and Adolescents Workshop with eleven countries to create academic platform and research, identify the gaps and needs and resource mobilization for achieving SDG2 and zero hunger and SUN. Adolescents are in the period where most crucial part for both mental and physical development, they need to meet nutrition requirements for better development.



Common Issues and Lessons Learned from the Presentations

Over the course of partner presentations, several cross-cutting themes and challenges emerged as documented in the below table:

Issues	Lessons Learned / Techniques and Approaches Used
<ul style="list-style-type: none"> Pregnancy and Delivery – lack of knowledge and traditional beliefs are often seen as the reason for various complications during and after birth. Most women are not aware about unforeseen complications that may affect their delivery. Birth planning is not a common practice, especially for rural women. Birth-related discussion are limited to only among family members. Traditional beliefs discourage facility-based birth. Not many people in rural communities have access to a TV, laptop, or even a mobile phone to watch the film. Therefore, with the community outreach initiatives, it is expected to reach a wider audience and change raise more awareness. 	<ul style="list-style-type: none"> Involving men and extended family is critical to support safe delivery – male involvement in highly encouraged. Community leaders play significant roles around providing support and services e.g. transportation plan for emergency deliveries Community outreach (home visits, meeting with village councils, community discussion group) using tablets and guideline to air the Bemvinda Anjela film improves the effectiveness of the film and the message retention. Share the film to CHC, PHC and with partners to expand its reach. Include skits and dramas
<ul style="list-style-type: none"> The Liga Inan program faces some issues surrounding mobile based communication such as limited network coverage in many areas and family members sharing the same phone, making it difficult for health staff to track and communicate with pregnant mothers. 	<ul style="list-style-type: none"> Encouraging health staff to keep building the relationship with expectant mothers – encourage mothers to register and get in touch.
<ul style="list-style-type: none"> Many communication materials like films, flip charts, posters, flyers, etc. are produced and “kept on the shelf” without a plan for proper utilization. This equals to waste of money and no resulting behavior change. Furthermore, the low literacy rate in the population contributes to the limited utility of paper-based materials. Small budget, short term project cycles often means low quality and difficulty to measure long-term impact. Series are preferable for behavior change but are more expensive than short films or one-off theater performances. 	<ul style="list-style-type: none"> Drama series, theater, TV broadcasting, group works, and movie night/day in remote locations are relevant approaches Ba Futuru recommends promoting SBCC through social media as a cost-effective strategy with lasting value. Edutainment can engage viewers more personally and emotionally to make sensitive issues easier to talk about through characters and plots. The product will not only reach the primary audience, but indirectly reach secondary and tertiary audiences as well. JSI, through Bemvinda Anjela also assures the impact and sustainability of an SBCC approach to reach a low-literacy population through the development of messages using local language to relate to the community and change perceptions of what is socially acceptable.

<ul style="list-style-type: none">• A significant challenge is to understand what SBCC materials already exist across sectors related to nutrition. This is necessary to identify gaps, pursue possible solutions, and inform the design of future research.• Multi-sector collaboration is vital to address nutrition, but managing different agendas, priorities and stages of project cycles is a challenge faced by the Hamutuk program.	<ul style="list-style-type: none">• Coordination can be challenging between government institutions, civil society, community groups and individual community members. Part of the Hamutuk program's approach in Holarua is creating collaborative tools for partners, which promotes dialogue and access to shared information. The aim is to strengthen relationships between all partners working in nutrition, enable more effective evaluation of collective efforts, and make more informed decisions while supporting each other's goals.
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Highlights from the Discussion facilitated by Ministry of Health

- **Clarification on KONSSANTIL:** In response to a question about the role of KONSSANTIL to address malnutrition, Ministry of Health clarified that KONSSANTIL was established to oversee the coordination link at sectoral level among seven ministries in the effort to reduce malnutrition in Timor-Leste and hence does not directly oversee programs and projects but rather serves as a coordinating body.
- **Lack of Monitoring and Evaluation process:** In response to several questions of whether any data can be shared to document the impact or effectiveness of the wide variety of IEC materials which have been developed, Ministry of Health acknowledged that the M&E system is still weak and needs to be improved to ensure that produced materials can benefit users and truly bring behaviour change. In this regard, we need harmonization between agency to avoid duplication in production materials.
- **Need for coordination:** Research about adolescents' health and nutrition requires collaboration between partners and Ministry of Education for an integrated approach. A primary school feeding program (SFP) is not enough in isolation to significantly impact nutrition as evidenced by stagnant national prevalence of key indicators. One way to improve the quality of the SFP is to involving community leaders and include traditional foods as part of school meals, consider fortification, and propose a clear nutrition policy and strategy.
- The **unhealthy food environment in and around schools** was of concern to participants but it needs to be balanced with the consideration that most of the food sold are prepared by mothers to support their family economy so interventions promoting healthy food should prioritize these mothers' income generating efforts.
- It is more appealing, sustainable and impactful to **produce video/short films (with human characters as opposed to cartoons)** for adolescents' nutrition advocacy.
- **Capacity building at community level** is required for quality improvement of community-based programs/projects.

The question and answer session facilitated a clear interest in moving forward with a coordinated SBCC strategy in 2019 for better nutrition and health in Timor-Leste.

Highlights from Group Work for Better Nutrition and Health in Timor-Leste

1. What are focus areas and intervention ideas – target audience and secondary audiences (childhood and adolescent nutrition, PLW)?

- Consider the "lifecycle approach" to addressing malnutrition to identify key population groups
- Focus on specific target group and create relevant messages based on beneficiaries' needs--e.g adolescents in schools or Parlamentu Foinisa'e
- Involve parents or family members in the SFP and school health clubs
- Create IEC materials focus on promoting students eating breakfast and choosing healthy snacks
- Focus SBCC on WASH in school
- Strengthen School Feeding Program (SFP) with local, nutritious foods from the '3 food groups'
- Promote traditional/ local food including healthy modes of preparation among food suppliers and teachers
- MoE to include a Nutrition Education component in the school syllabus
- Strengthen message in exclusive breastfeeding, and complementary food based on age, frequency, food quantity and quality, and feeding practice

<ul style="list-style-type: none"> • Consider night events – support with nutrition movie/video, nutrition drama (e.g from Ba Futuru), storytelling, etc. • Produce nutrition videos and radio programs which are more accessible in rural areas than mobile / internet-based information • Develop SBCC/IEC materials (posters, video) based on community's first language (mother tongue) • Nutrition promotion through TV channels – TVTL, Grupo Media Nacional (GMN), and TV Education
<p>2. What are areas for partnership and collaborations for developing a package and implementation support for childhood and adolescent nutrition, PLW?</p>
<ul style="list-style-type: none"> • MoH to develop a uniform SBCC Strategy as guideline for all entities to used • Establish an SBCC working group led by MoH as an information sharing space between partners, especially for specific gaps that been identified in existing nutrition programs • Ministry of Health, MoE and Ministry of Agriculture and Fisheries (MAF) to work together to develop a joint strategy for SFP that respond to the needs of accessibility to nutritious foods and nutrition education • With approval of Nutrition Sensitive Agriculture (NSA) curriculum by KONSSANTIL, it is an opportunity for health workers and extension workers to together promote production and consumption of nutritious food • Partners should jointly develop materials and information that adequately meets the needs of the community and not just partnering for the sake of ticking the box • Partners can together develop nutrition drama or film targeting at adolescents – e.g. Ba Futuru's <i>Domin Nakloke</i>
<p>3. What are gaps and challenges in working with target audience and secondary audience (childhood and adolescent nutrition, PLW)?</p>
<ul style="list-style-type: none"> • For PLW in rural areas, the practice of food consumption is still strongly linked to the myths about taboo foods which makes consumption of a nutritious diet during pregnancy challenging. Regular nutrition education is the key. • A lack of implementation in rural community resulted in most rural communities still having limited nutrition knowledge meaning while they often produce nutritious food, they in fact consume less of the food. • Lack of consultation with community members and leaders (in some implementation areas) affect our understanding of the context and the effectiveness of a programme. Evaluate existing work to identify gaps to avoid similar issues in future projects. • Lack of nutrition intervention material with specific focus on adolescents. • Geographical challenges – road condition, lack of transportation to reach rural communities.
<p>4. What are support areas from Ministry of Health for developing and implementing nutrition strategy for childhood and adolescent nutrition, PLW)?</p>
<ul style="list-style-type: none"> • A platform of dialogue from MoH could be a useful tool to strengthen partners' collaboration – also to understand what are the gaps MoH feel there is and what available tools that partners have which can be utilised to support filling the gaps • Practical support to Nutrition Students (the National University) – through an internship at MoH, as well as financial support so that students can implement

nutrition activities with communities (e.g. students can submit proposals to Nutrition Department), also support students with organizing World Food Day.

- Regular follow up from the MoH during the implementation programme to see the effectiveness of programme implementation.
- MoH to collaborate with MoE to develop policies for environment in schools and reduce unhealthy foods and drinks.
- Strengthening School Health Programme – incorporate nutritious information/IEC materials, reproductive health information to school children.
- Review the guideline of Mother Support Groups.

5. What are ideas for strengthening M&E for SBCC interventions?

- Understanding the overall picture of what is already take place – what, when, how, with whom and from whom with a landscape review
- Conduct formative research before project implementation to identify influencers and drivers
- MoH could lead to evaluate the effectiveness of all existing IEC materials – to see the sustainability, impact of the materials and whether or not the materials meet the need of beneficiaries. This way, partners can create more effective materials collectively
- Apply monitoring tools developed by MoH according to an agreed set of indicators
- Identify already SBCC M&E tools and produce additional ones to fill gaps
- Allocate a specific budget for M&E to ensure effectiveness of a program
- Create simple tools for evaluation and monitoring phase should incorporate the seven steps from SBCC to assess the indicators and outcomes
- Conduct M&E quarterly to assess the progress of SBCC interventions
- Pilot and field test for SBCC intervention before scaling up material productions

6. What type of technology and partnership support is required for expanding ideas from pilot to scale?

- Identifying gaps is the starting point
- Use resources and improve resources already available to link, improve and scale up by growing together
- Develop nutrition and health key messages for each target groups that relevant to their context and meet their needs
- Capacity building to health professionals at Municipality level in terms of SBCC approach and implementation
- Family Based Programme – home visit + nutrition education to family members and children. Consider cultural sensitivity.

Conclusion and Way Forward

While partners in attendance at the symposium have undertaken several IEC and limited number of SBCC interventions in their respective thematic and geographic areas of work, the symposium was an opportunity to present some case studies, challenges and best practices. The examples of activities and approaches presented were not intended to be an exhaustive landscape review, but rather provided an example of ongoing efforts to facilitate discussions around best practices and scale up.

The discussions during the sessions and inputs from the development partners, a few critical gaps were identified, and some solutions also emerged towards planning a more collaborative and comprehensive SBCC interventions. The symposium clearly indicated that there is a need for greater collaboration with the Ministry of Health, development partners and district officials for the success of any intervention. Thus, to create a more cohesive approach towards promoting healthy diets for the nutritional well-being of the population, the following points are recommended in planning SBCC interventions in the future:

- Create a repository of communication tools shared during the Symposium as public resource (hard copy versions as well as an online repository) to be maintained by Nutrition and Health Promotion Departments, Ministry of Health.
<https://drive.google.com/drive/folders/16ovlG6z5mDpsv5omBqVDoJivBWer0Uz0>
- Nutrition and Health Promotion Departments, Ministry of Health with support of WFP should conduct a mapping exercise (Appendix 3) to identify areas of SBCC work undertaken by development partners and collate the results of the exercise into a '3W' matrix to be added to the online repository and for an SBCC working group to utilize for planning purposes.
- Establish an SBCC working group under Nutrition and Health Promotion Departments, Ministry of Health to prioritize SBCC within the national nutrition strategy, increase synergies among existing SBCC interventions, identify areas on need, and focus on scale up for greater impact.
- Strengthen collaboration between government entities, development partners, academia and civil society whose areas of work prioritize SBCC interventions under a national SBCC strategy and plan of action.
- Prioritize the promotion of healthy diets through the school meals programme in association with other delivery platforms.
- Strengthen the monitoring and evaluation of SBCC interventions which will be taken forward.
- Work with partners to optimize all available delivery platforms to reach the audience especially the most vulnerable populations.

Closing Remarks

"Thanks to all partners in attendance for their excellent presentations and participation, to KOCIA for financial support and to the Government for its coordination. We know that some form of malnutrition affects the majority of the Timorese community with some individuals suffering from multiple, concurrent forms of malnutrition. A key way to break the intergenerational cycle of malnutrition is through nutrition education using the approaches, activities, and tools of SBCC which clearly aligns within the KONSSANTIL priority framework to improve diets. I would encourage us to consider three priority areas of coordination, documenting impact of our activities, and leveraging new opportunities for collaboration with partners who are interested to address shared challenges as we carry forward the SBCC agenda in 2019." -Christine Klotz, WFP Nutritionist

"Thanks to everyone in here. Through this symposium, we will follow the agenda and strategy of SBCC. We need to capitalize on the many materials we are using that containing informative messages for dissemination of SBCC with partners in house, schools and communities. We need to improve monitoring and coordination with partners and agencies to better achieve the goal with concrete indicators. It is a long process for individuals to change their mindset and behaviour which based on different resources and context. This is not just end of the symposium but start of SBCC in 2019 and this precious message should be delivered in the municipalities. I look forward the further progress and seminars on SBCC." -Mr. Pedro Canisio, National Director of Public Health, Ministry of Health

Appendix 1. Agenda

Time	Session	Speakers/Facilitators	Duration
Day 1			
8.30 – 9.00	Registration		30'
9.00 – 9.30	Welcome & opening remarks	- Dageng Liu, CD, WFP - Sikhyon Kim, CD, KOICA - Pedro Canisio Amaral, DNSP, Ministry of Health	30'
9.30 – 9.45	Objectives of the Symposium	- Agusta Amaral, Ministry of Health	15'
9.45 – 10.15	1. Overview of SBCC	- Noor Aboobacker, WFP	30'
10.15 – 10.45	2. Multisectoral Approach to Promote Good Nutrition under KONSSANTIL	- Dra. Olinda dos Reis Albino, Ministry of Health	30'
10.45 – 11.00	Morning tea		
11.00 – 11.30	3. Highlights from formative research on adolescents' nutrition & health	- Ninivia da Silva, WFP - Acacio Sarmento, TOMAK - Young researcher	30'
11.30 – 12.00	Q & A for Sessions 1-3	- MC	30'
12.00 – 13.00	Lunch		
13.0 – 13.30	4. SBCC in Maternal Childhood Health (MCH)	- Venancio Pinto, UNICEF	30'
13.30 – 14.00	5. Mother Support Group	- Maria Imaculada, Fundasaun Alola	30'
14.00 – 14.30	6. Edutainment Encourages Pregnant Women to Prepare for Birth in Timor Leste (' <i>Bemvinda Anjela</i> ')	- Julio Gonsalves, JSI	30'
14.30 – 15.00	Q & A for Sessions 4-6	- MC	30'
15.00 – 15.15	Coffee Break		
15.15 – 15.45	7. National Youth Hotline (Liña Foinsa'ê)	- Mariano da Silva Tome, MSTL	30'
15.45 – 16.15	8. Programa Liga Inan	- Paul Vasconselus, HAI	30'
16.15 – 16.45	9. Hamutuk: Innovative ICT for SBCC M&E	- Maria Gama, Catalpa - Ania Soares, Catalpa	30'
16.45– 17.15	Q & A for Sessions 7-9	- MC	30'
Day 2			
8.30 – 9.00	Registration	-	30'
9.00 – 9.15	Reflection of Day 1	- MC	15'
9.15 – 9.45	10. Examining Successes and Failures in SBCC	- Sierra James, Ba Futuru	30'

9.15 – 9.45	11. Adolescents Nutrition Research 2017	- Dirce M. Soares, INS	30'
9.45 – 10.15	Q & A for Sessions 10-11	- MC	30'
10.15 10.30	- Morning tea		
10.30 11.15	- Edutainment	- Ba Futuru	45'
11.15 12.00	- Q & A + Group Work Discussion	- Facilitators	45'
12.00 12.15	- Closing Remarks	- Christine Klotz, Nutritionist, WFP - Pedro Canisio Amaral, DNSP, Ministry of Health	
12.15 13.00	- Lunch		

Appendix 2. List of Participants

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Appendix 3. Survey Template for SBCC Mapping Exercise

Note: The following survey will be circulated by Nutrition and Health Promotion Departments, Ministry of Health with support of WFP as a follow up from the workshop. The responses to the survey will form the basis of the creation of an SBCC working group.

2019 SBCC Partner Mapping Exercise Survey																																													
INSTRUCTIONS: Please fill in the following table for your organization's SBCC Activities. If you have multiple activities, you can add additional lines to accommodate all the activities																																													
Contact Person:		Email:																																											
Position:		Website:																																											
Phone:																																													
No.	Project Title / Description	Project Duration / Timeframe	Municipality	Project Area		GPS Coordinates (if available)	Thematic area (e.g. Nutrition SBCC, IYCF, MCH, etc)	Is this a collaboration with MoH? (Y/N)	Does the project involve capacity building? If yes, please explain	List any other collaborating partners (if any)	Funds	What is the funding source for the project?	Target Audience										Communication Approach				Monitoring & Evaluation																		
				Sub - District (S)/Sub - Distrito	Suco (s)								Target audience (Tick all that apply)										Which communication channels are being covered by the project? (Tick all that apply)				What type of IEC materials or training modules does your organization use or produce? (Tick all that apply)		Is there an M&E component to the project? (If yes, please explain)	Any formative research or evaluation was conducted? If yes, please specify															
												Women of reproductive age	Pregnant and Lactating Women	Women (general)	Men (general)	Adolescent boys	Adolescent girls	Children under 2	Children under 5	Elderly	General Population	Other (please specify)	Community Theater	Clinics	Schools	Interpersonal Communication	SBCCs Activity	Nutrition Counselling	Home Visits	Mobile app	Facebook	Twitter	Website	Other (Please specify)	Nutrition Guideline	IEC user guideline	Nutrition training manual	Posters	Flyers	Video	Nutrition Drama	Nutrition Song	Other (please specify)		
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Do you have any other comment/ information about your agency's SBCC work?																																													

Appendix 4. Adolescents' Trusted Sources for Health and Nutrition Information

This figure is based on the formative research of adolescents' health and nutrition in Timor – Leste, undertaken by WFP and TOMAK, in collaboration with the Ministry of Health, National Institute of Health and the Ministry of Education.

Trusted Channels	Girls (n=19)	Boys (n=17)	Urban Baucau (n=16)	Rural & semi – urban Bobonaro (n=20)	Age 10 -14 (n=18)	Age 15 -19 (n=18)
Health professional	100%	88%	94%	100%	100%	94%
TV	79%	76%	75%	70%	72%	72%
School	79%	41%	44%	65%	61%	50%
Mother, grandmother	79%	12%	63%	35%	39%	56%
Lafaek Magazine	63%	18%	56%	20%	28%	44%
Radio	47%	29%	25%	50%	33%	44%
Peers	53%	24%	38%	40%	33%	44%
SMS	37%	12%	6%	40%	11%	39%
Facebook	53%	18%	38%	25%	22%	39%
Internet	42%	6%	19%	30%	11%	39%
Church	11%	0%	6%	0%	0%	6%
Traditional healer	5%	0%	6%	0%	6%	0%