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# Evaluation of Timor-Leste WFP Country Strategic Plan 2018-2020

Evaluation Report - Volume II: Annexes

OEV/2019/005



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## Disclaimer

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# Annex I. Terms of Reference

1. Annexes to the TOR are not included here.

## Background

1. The purpose of these Terms of Reference (TOR) is to provide key information to stakeholders about the evaluation, to guide the evaluation team and specify expectations during the various phases of the evaluation. The TOR are structured as follows: section 1 provides information on the context; section 2 presents the rationale, objectives, stakeholders and main users of the evaluation; section 3 presents the WFP portfolio and defines the scope of the evaluation; section 4 identifies the evaluation approach and methodology; section 5 indicates how the evaluation will be organized. The annexes<sup>1</sup> provide additional information.

## Introduction

2. Country Strategic Plan Evaluations (CSPEs) encompass the entirety of WFP activities during a specific period. Their purpose is twofold: 1) to provide evaluation evidence and learning on WFP's performance for country-level strategic decisions, specifically for developing the next Country Strategic Plan (CSP) and 2) to provide accountability for results to WFP stakeholders. These evaluations are mandatory for all CSPs and are carried out in line with the WFP Policy on Country Strategic Plan and WFP Evaluation Policy.

## Country context

### Socio-economic context

3. Timor-Leste is one of the world's youngest countries, having restored full independence in 2002 following more than four centuries of colonial rule by Portugal and a quarter century of occupation by Indonesia. With a population of 1.2 million people, Timor-Leste occupies the eastern half of the island of Timor in the Timor Sea, which connects with the Pacific Ocean to the East, Indian Ocean to the West, and South China Sea to the North via the Java Sea, and includes two additional small islands (Atauro and Jaco) and Oecusse, a small coastal enclave in the western half of the Timor island.

4. The terrain of the country is mountainous, and it has a tropical climate with distinct wet and dry seasons. Timor Leste measures 14,874 square kilometres and has a coastline of 706 kilometres. One quarter of the country is classed as agricultural land and only 2.5 percent is urban land. Forest coverage is 47 percent, and this has fallen by more than 10 percent in the last 15 years. Population density is relatively low, although rapidly increasing. Most Timorese live in the western portion of the country, which includes Dili.<sup>2</sup>

5. Timor-Leste is an oil producing country but whilst progress in poverty reduction has been made since 2007, two in five people still live below the poverty line. Its economic performance has been fragile, characterized by slow-moving investment of aid funds and oil revenues. The country is benefitting from the commercial exploitation of its petroleum and natural gas reserves in the waters southeast of Timor. In June 2005, the National Parliament of Timor-Leste unanimously approved the creation of the Petroleum Fund aimed at effectively managing and investing oil revenue in the country's development after exploitation of these resources. The Petroleum Fund led to a massive scale up of public expenditure, particularly on infrastructure projects and cash transfers and reversed weak economic performance<sup>3</sup> in 2007.<sup>4</sup> However, the perceived wealth coming from the Petroleum Fund may be misleading, as oil reserves are forecast to deplete by 2021 and, according to the law, the government is only allowed to withdraw an Estimate Sustainable Income (ESI), which would ensure that the core funds of the Petroleum Fund would not be spent.

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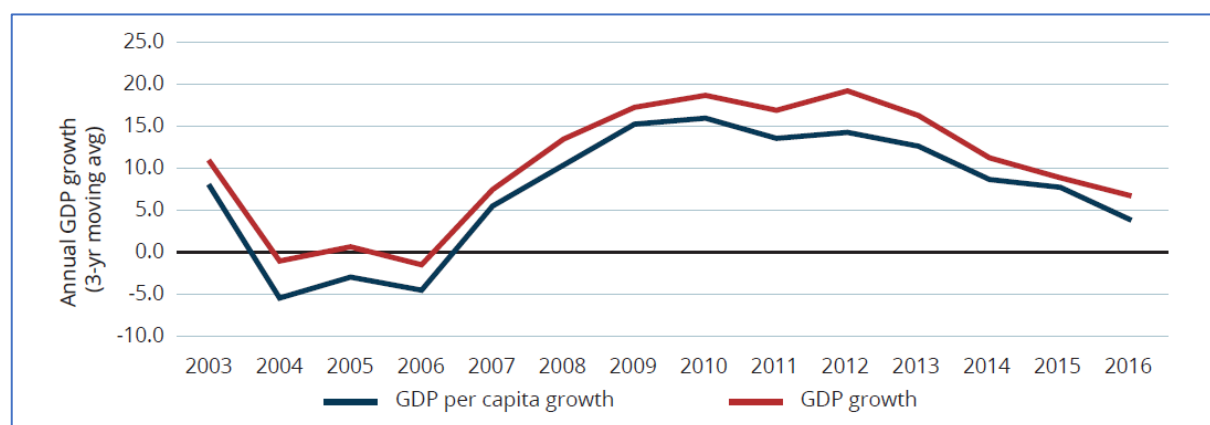
<sup>1</sup> Annexes to the TOR are not included here.

<sup>2</sup> World Bank 2018, Timor Leste Systematic Country Diagnostic- Pathways for a New Economy and Sustainable Livelihoods, page 3.

<sup>3</sup> Over the years 2000-2007, average annual real GDP growth was 2.4 percent per year but from 2007-2016, GDP growth performance changed markedly and average growth per year was 6.5 percent and real GDP per capita rose by 4 percent per year on average.

<sup>4</sup> World Bank 2018, Timor-Leste Systematic Country Diagnostic- Pathways for a New Economy and Sustainable Livelihoods, page 6.

**Figure 12. Gross domestic product growth rates, 2003-2016**



Source: World Bank 2018: Timor Leste Systematic Country Diagnostic.

6. Forty-two percent of the population in Timor-Leste currently lives below the national poverty line (declined from 50.4 percent in 2007). Unemployment is high, employment opportunities in the formal sector are generally limited, and job creation by the private sector falls far short of demand. Most of the population have no consistent earnings, and many are subsistence farmers. Access to health services poses a major concern as 70 percent of the population lives in rural areas in small, dispersed villages isolated by mountainous terrain and poor road conditions. Rural communities rely heavily on agriculture and natural resources for their livelihoods. At the same time, they have limited capacity to adapt to climate change and other environmental challenges. In Timor-Leste, forest and soil degradation is a major problem.<sup>5</sup>

7. Timor-Leste is the youngest nation in the Asia-Pacific Region with a population characterized as one of the most youthful in the world. Many youth lack access to quality education, even after completing high school and university, because they lack quality non-formal education. Many Timorese youth have very few of the skills and knowledge required to find jobs. Timor-Leste has very low employment rates, with only 31 percent of the working age population engaged in work and only 21 percent of 15 to 24-year-olds currently working.<sup>6</sup>

8. Timor-Leste conducted parliamentary elections for two consecutive years in 2017 and 2018, leading to a change of governments each time. A political deadlock followed the mid-2017 parliamentary elections and continued to affect economic activity in 2018. Specifically, the 2018 state budget was only approved in September and as a result the Government used a duodecimal/twelfth state budget.<sup>7</sup> The political and economic uncertainty caused by the delayed appointment of nine cabinet members including ministers of health and finance under the Eighth Government slowed down public expenditure and economic growth. As a result GDP is estimated to have contracted by 0.7 percent in 2018.<sup>8</sup>

### National policies and the SDGs

9. At the time of independence in 2002, Timor Leste developed a national vision called Timor-Leste 2020, "Our Nation Our Future". Today, this vision continues to be guided by the Timor-Leste Strategic Development Plan 2011–2030. The Strategic Development Plan is an integrated package of policies aligned with the Millennium Development Goals (MDGs), designed to be delivered in three phases: short term (1–5 years), medium term (5–10 years) and long term (10–20 years). It covers three key areas: social capital, infrastructure development and economic development. Underlying these are strategies for creating an effective institutional framework and a strong macroeconomic foundation.<sup>9</sup>

10. The Post-2015 consultation process to define a successor framework to the MDGs began not long after Timor-Leste initiated implementation of the Strategic Development Plan in 2012-2013. Timor-Leste played an active role in this process, notably by working with the G7+ group of countries to successfully

<sup>5</sup> World Bank 2018: Timor Leste Systematic Country Diagnostic – Pathways for a new Economy and Sustainable Livelihoods.

<sup>6</sup> UNDP 2018: *Timor-Leste National Human Development Report 2018*.

<sup>7</sup> In the absence of a state budget, the law allows monthly appropriation of 1/12<sup>th</sup> of the previous budget.

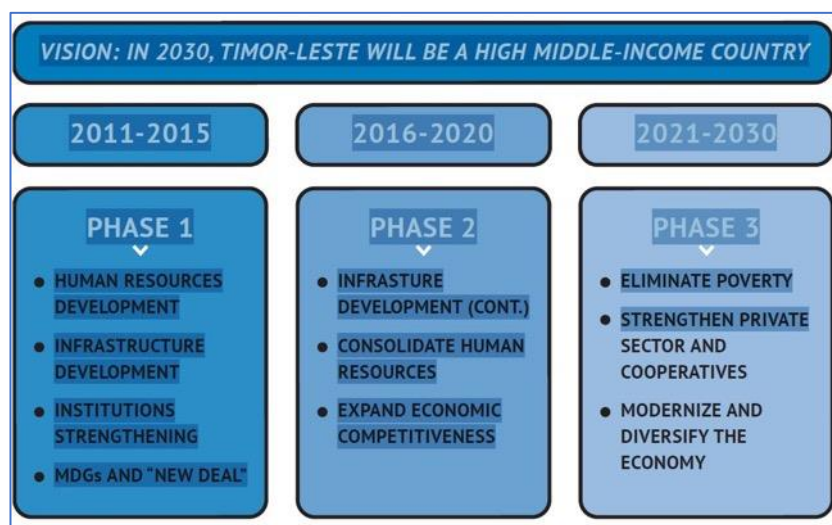
<sup>8</sup> World Bank Group 2019: Timor-Leste Economic Report: Moving Beyond Uncertainty.

<sup>9</sup> Government of Timor-Leste (2017), Roadmap for the Implementation of the 2030 Agenda and the SDGs.



advocate for a goal on peace, stability and effective institutions (resulting in SDG Goal 16) and offering detailed wording for targets that were of particular relevance for developing countries.<sup>10</sup>

**Figure 13. Timor-Leste Sustainable Development Plan 2011-2030**



Source: Government of Timor-Leste 2017: Timor-Leste's Roadmap for the Implementation of the 2030 Agenda and the SDGs.

11. The Government of Timor-Leste adopted the 2030 Agenda and Sustainable Development Goals through Government resolution No. 34 on 23 September 2015, two days before they were formally adopted by the United Nations at the General Assembly.

12. A roadmap for the Implementation of the 2030 Agenda and the SDGs was produced in 2017 outlining how the country's national plan aligns with the SDGs. It found a strong convergence of SDG targets and indicators with the Strategic Development Plan.

13. Recently, Timor Leste has completed its first Voluntary National Review (2019). The review focuses on the SDGs aligned with phase 1 of the nation's development plan; the development of human resources, infrastructure and institutions.<sup>11</sup>

### Agriculture and nutrition security

14. Agriculture remains an important economic sector, despite its declining weight. The agriculture sector contributed to 16 percent of non-oil output in 2017, a decrease from the 29 percent recorded in 2008. Agriculture output (value added) is largely determined by crop outputs, with highly volatile volumes that are particularly sensitive to weather conditions – including droughts, floods, El Niño/La Niña cycles – and influenced by public investments. Forestry and fisheries contribute marginally to agriculture value added, while livestock has been progressively increasing its share– from an estimated 12 to 17 percent.<sup>12</sup>

15. Smallholder farmers manage multiple crops on very small land holdings. Cropping systems are diverse and extensive, with 50 percent of households growing maize, cassava, sweet potato, vegetables, legumes and coconut trees. Rice production is concentrated in a limited number of areas that are suitable and provides for 25 percent of staple food production. Farm fields are small due to the difficult terrain, as rocky soil or mountains surround patches of arable land.

<sup>10</sup> Ibid.

<sup>11</sup> Government of Timor-Leste (2019), Report on the Implementation of the Sustainable Development Goals: From ashes to reconciliation, reconstruction and sustainable development, Voluntary National Review of Timor-Leste 2019, Dili: Timor Leste.

<sup>12</sup> World Bank 2018: Timor Leste Systematic Country Diagnostic – Pathways for a new Economy and Sustainable Livelihoods.

16. Yields of nutritious crops such as fruits, vegetables, beans and other pulses that provide for essential dietary quality are low, as are the yields of roots and tubers, which are important for the rural poor as they supply food reserves during the lean season.<sup>13</sup>

17. Among the most prevalent issues in Timor-Leste is the issue of food insecurity. In the 2018 Global Hunger Index, Timor-Leste ranks 110th out of 119 qualifying countries. The country suffers from a level of hunger that is serious bordering on alarming.<sup>14</sup> Malnutrition, food insecurity and poverty are intricately and multi-directionally linked: each contributes to the presence and permanence of others.<sup>15</sup> A recent IPC analysis report showed that only 25 percent of the population are considered food secure (IPC level 1).<sup>16</sup> One third of the population, 36 percent, suffers chronic food insecurity, including 21 percent who experience moderate chronic food insecurity (IPC level 3) and 15 percent that experience severe food insecurity (IPC level 4). On average, households in Timor-Leste spend almost 70 percent of their income on food with poorer families spending even a larger component of their income on food.

18. Timor-Leste has one of the highest rates of child stunting – chronic child malnutrition – in the world. The country faces the most serious stunting prevalence among children aged under 5 years old, while wasting and underweight are also at high levels. According to the Demographic Health Survey (2016) the percentage of children under 5 years old suffering from stunting has started to decrease from 58 percent in 2009/2010 to 46 percent in 2016. The drivers of malnutrition in Timor-Leste are many, especially those that affect maternal and child nutrition. Immediate causes of malnutrition include nutrient intake and disease, especially as they relate to breastfeeding, complementary feeding, maternal nutrition, infectious disease, and aflatoxin, exposure. Underlying causes include care for women and children, which encompasses women's education; women's social status and employment; and stress, violence, and mental health.<sup>17</sup>

19. Timor-Leste was the first country in the region to sign up for a Zero Hunger National Action Plan. The Zero Hunger National Action is a comprehensive multisectoral plan targeting equitable access to food year-round for everyone and reducing stunting to zero by 2025. This document together with the 2017 National Food and Nutrition Security Policy provides the key frameworks for addressing stunting. Strengthening the role of the cross-ministerial governance mechanism, KONSSANTIL, has been an important feature of the national response to food security and malnutrition.

## Human development

20. Timor-Leste ranks 132 out of 189 countries on the Human Development Index (2018), placing Timor-Leste within the medium human development category.<sup>18</sup> More than 40 percent of the population are estimated to lack the minimum resources needed to satisfy basic needs in Timor-Leste, based on the latest Survey of Living Standards (2014/15), and 30 percent of the population still live below the \$1.90 a day international poverty line.<sup>19</sup>

21. In terms of geographical distribution poverty-reduction progress has been uneven across the country. Poverty is a highly rural phenomenon, with 80 percent of the poor living in rural areas. Poverty incidence maternal remains highest in the Western region, and particularly its rural areas.<sup>20</sup>

22. The Timor-Leste Demographic and Health Survey (TLDHS) 2016, indicated the total fertility rate to be 4.2 children, a decline from 5.7 in 2009-10. Rural women have on average about one child more than urban women 4.6 as compared to 3.5 births, and they are more than twice as likely as urban women to have begun childbearing early. The maternal mortality ratio is estimated to be 195 deaths per 100,000 live births.

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<sup>13</sup> World Bank 2018: Timor Leste Systematic Country Diagnostic – Pathways for a new Economy and Sustainable Livelihoods.

<sup>14</sup> <https://www.globalhungerindex.org/timor-leste.html>

<sup>15</sup> Government of Timor-Leste (2019), Report on the Implementation of the Sustainable Development Goals: From ashes to reconciliation, reconstruction and sustainable development, Voluntary National Review of Timor-Leste 2019, Dili: Timor-Leste, page 48.

<sup>16</sup> IPC 2019: The first IPC analysis Report on the Chronic Food Insecurity Situation in Timor-Leste.

<sup>17</sup> CEPAD/John Hopkins University 2017; Timor-Leste Strategic Review; Progress and success in achieving the Sustainable Development Goal 2.

<sup>18</sup> <http://hdr.undp.org/en/countries/profiles/TLS> (consulted 26/6/2019)

<sup>19</sup> World Bank 2018: Timor Leste Systematic Country Diagnostic – Pathways for a new Economy and Sustainable Livelihoods page x

<sup>20</sup> World Bank 2018: Timor Leste Systematic Country Diagnostic – Pathways for a new Economy and Sustainable Livelihoods page x.



From 2009/2010 to 2016, a stark decline in pregnancy-related mortality was observed (557 deaths per 1000 live births to 218 deaths per 100,000 live births).<sup>21</sup>

## Gender

23. Timor-Leste ranks 124/149 (2018) in the global gender gap index<sup>22</sup>. Timor-Leste is a patriarchal society in which social norms and cultural values influence gender roles. Men are expected to be responsible for decision making in the household and are the major income earners in the formal economy.

24. Gender equality is relatively well reflected in law and political representation of women at the national level is good. Basic legislation to enshrine non-discrimination based on gender is in place in Timor-Leste, with the Constitution explicitly highlighting gender in prohibiting discrimination and Timor-Leste has ratified the Convention on the Elimination of all forms of Discrimination Against Women (CEDAW). Labour laws mandate non-discrimination based on gender in hiring and there exists legislation criminalizing domestic violence. Life expectancy at birth for women in 2015 is 70.36 years, 3.57 years higher than for men – about the same differential as for LMIC countries on average and the life expectancy for women in Timor-Leste has been growing faster than for men in recent years. Laws mandating a minimum level of female candidates has helped to ensure relatively high levels of representation in the national parliament – 38.5 percent of seats have been held by women since 2012, up from 29 percent previously, and double the average in LMICs. Women do not enjoy similar representation at the lower levels of government, with 4.7 percent of Chefi Suco (equivalent to village head) women, although here too representation has been steadily increasing from 1.6 percent in 2004, aided by progressive legislation requiring at least one woman to stand for election in every Suco.<sup>23</sup>

25. But despite the law, in practice women face serious problems of gender violence and lack of access to economic resources. A recent comprehensive survey<sup>24</sup> showed that 47 percent of every partnered women aged 15-49 had experienced physical and/or sexual violence in the last 12 months; a higher level than previously thought existed in Timor-Leste and double the average prevalence of violence against women of this age group in LMICs. The Nabilan Baseline study found that violence was linked to food insecurity in that men who reported food insecurity state significantly higher rates of perpetrating violence (physical, sexual, and/or economic) against their partners.<sup>25</sup> In addition to domestic violence Timor-Leste faces a number of other urgent gender concerns. Maternal mortality remains high, and significant gender gaps continue in labour market and local governance participation.

## International development assistance

26. According to OECD DAC data, Timor-Leste received a yearly average US\$ 222.6 million net Official Development Assistance (ODA)<sup>26</sup> between 2015-2017.<sup>27</sup> The proportion of net ODA per Gross National Income was 8.9 percent in 2017.<sup>28</sup> The average humanitarian aid between 2015-2019 was US \$ 3,112 million.<sup>29</sup> The average main ODA funding sources between 2016-2017 were Australia, Japan, EU, US and Portugal followed by the Asian Development Bank, World Bank, Korea, New Zealand and Germany.

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<sup>21</sup> General Directorate of Statistics, Ministry of Planning and Finance and Ministry of Health 2018; Demographic Health Survey 2016.

<sup>22</sup> <http://reports.weforum.org/global-gender-gap-report-2018/data-explorer/#economy=TLS>

<sup>23</sup> World Bank 2018, Timor-Leste – Systemic Country Diagnostic - Pathways for a New Economy and Sustainable Livelihoods, page 35.

<sup>24</sup> The Asia Foundation 2016, *Understanding Violence against Women and Children in Timor-Leste*; Findings from the Nabilan Baseline Survey.

<sup>25</sup> UN Women/UNFPA 2015: Gender & Sustainable Development in Timor Leste – Key to leaving no one behind.

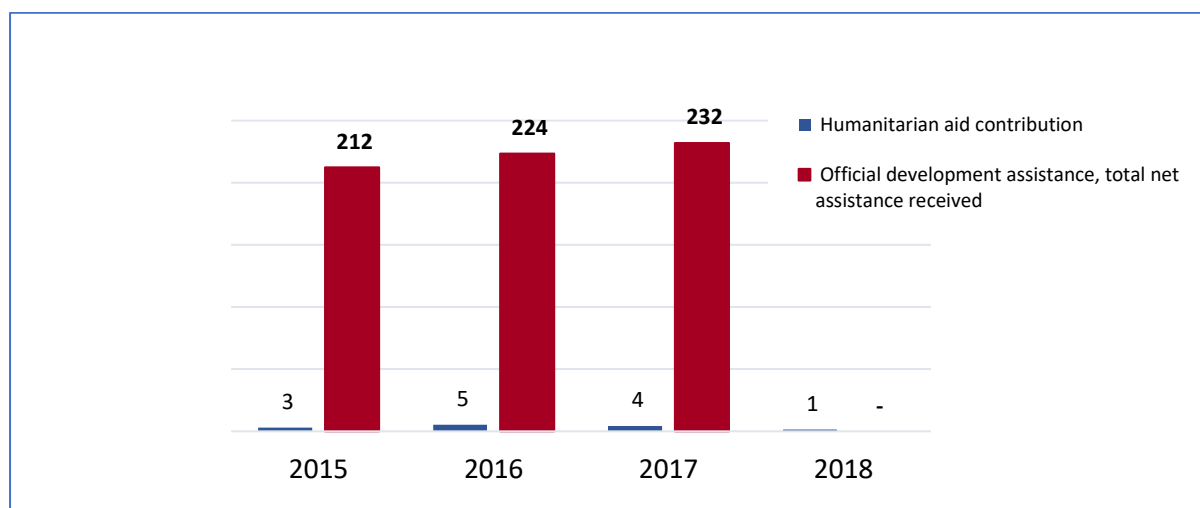
<sup>26</sup> As reported on the OECD/DAC website (see link).

<sup>27</sup> National data (aid portal) which includes more recent data from 2018 shows that Timor Leste has experienced an approximate 12% downward trend in ODA per year since 2015. By 2017 ODA declined to 176.6 million in development assistance. This trend is expected to intensify in future, with planned development partner commitments falling possibly to \$52m by 2021 (Government of Timor-Leste (2019), Report on the Implementation of the Sustainable Development Goals: From ashes to reconciliation, reconstruction and sustainable development, Voluntary National Review of Timor-Leste 2019, Dili: Timor-Leste).

<sup>28</sup> <https://data.worldbank.org/indicator/DY.OA.OAAT.GN.ZS?locations=TL> (consulted 27/06/2019)

<sup>29</sup> UN OCHA -FTS (accessed 21 May 2019)

**Figure 14. International assistance to Timor-Leste in 2015-2018**



No ODA data available for 2018.

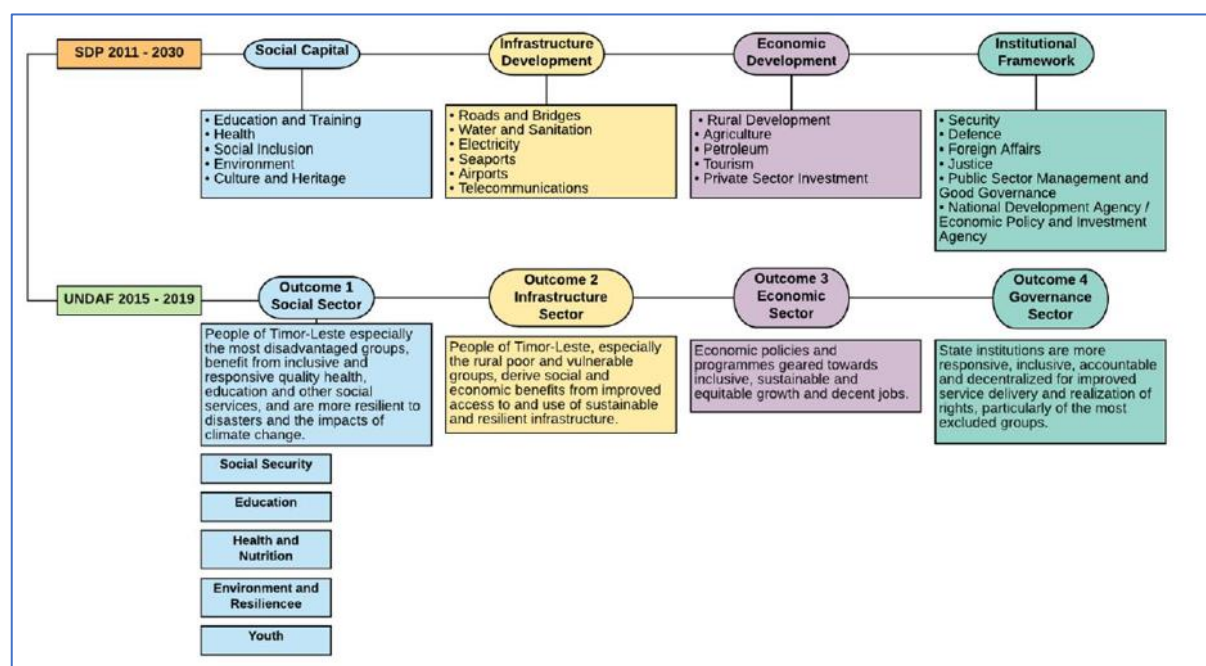
Source: OECD -DAC, UN OCHA -FTS (accessed 21 May 2019).

### United Nations Development Framework

27. The United Nations Development Assistance Framework (UNDAF) in Timor Leste covers the period 2015-2020 and leverages the expertise, capacity and resources of the United Nations to support the Government's priorities. The UNDAF is structured along the four strategic development sectors defined in the Government's Strategic Development Plan 2011–2030: (1) Social Capital; (2) Infrastructure Development; (3) Economic Development; and (4) Governance and Institutional Development. Aligned with these four sectors, four outcomes and seventeen sub-outcomes were elaborated to respond and evolve the needs within each sector (see Figure 15 below). The recently completed evaluation of the UNDAF (May 2019) concluded that since UNDAF's outcomes and objectives touched upon almost every aspect of the development agenda in Timor-Leste, maintaining relevance over the years had not been an issue. Yet, this resulted in lack of strategic focus and a plethora of very diverse initiatives (ranging from building infrastructure to prevent violence against women) all implemented under the umbrella of UNDAF.<sup>30</sup>

<sup>30</sup> United Nations Development Framework (UNDAF) 2015-2020 in Timor-Leste Evaluation Report 2019, page 6.

Figure 15. UNDAF 2015–2020 alignment with Strategic Development Plan 2011–2030 in Timor-Leste



Source: UNDAF Evaluation 2019.

28. Other opportunities for improvement identified by the evaluation included: UN adopting a stronger leadership role in assisting the government in co-ordinating initiatives related to the Strategic Development Plan and the Agenda 2013; place the SDGs at the core of the new UNDAF; explore innovative approaches for collaboration with the private sector and civil society; move towards joint programming and allow for an inclusive UNDAF process which is commensurate with resources available and capacity of the different UN entities.

## Reasons for the Evaluation

### Rationale

29. Country Strategic Plan Evaluations (CSPEs) have been introduced by the WFP Policy on CSPs in 2016, which states: “under the management of the Office of Evaluation, all CSPs, besides Interim CSPs, will undergo country portfolio evaluations towards the end of their implementation period, to assess progress and results against intended CSP outcomes and objectives, including towards gender equity and other cross-cutting corporate results; and to identify lessons for the design of subsequent country-level support”. These evaluations are part of a wide body of evidence expected to inform the design of CSPs. The evaluation is an opportunity for the CO to benefit from an independent assessment of its portfolio of operations. The timing will enable the CO to use the CSPE evidence on past and current performance in the design of the CO’s new Country Strategic Plan (CSP) – scheduled for Executive Board consideration in November 2020.

### Objectives

30. Evaluations serve the dual objectives of accountability and learning. As such, this evaluation will: 1) provide evaluation evidence and learning on WFP’s performance for country-level strategic decisions, specifically for developing WFP’s future engagement in Timor Leste and 2) provide accountability for results to WFP stakeholders.

## Stakeholders and Users of the Evaluation

31. The Evaluation will seek the views of, and be useful to, a broad range of WFPs internal and external stakeholders. It will present an opportunity for national, regional and corporate learning. The key standard stakeholders of a CSPE are the WFPs country office, regional Bureau of Bangkok (RBB) and headquarters technical divisions, followed by the Executive Board (EB), the beneficiaries, the Government of Timor Leste, other UN agencies, local and international NGOs and the UN Country Team and WFP Office of Evaluation for

synthesis and feeding into other evaluations. A matrix of stakeholders with their respective interests and roles in the CSPE is attached in Annex 4.

32. In the context of Timor Leste, the CSPE will seek the perspectives of partners on WFP's role. The CSPE can provide useful lessons for enhancing synergy, co-ordination and collaboration. National government partners comprise the Ministries of Health, the Permanent Technical Secretariat of the Interministerial Council for Food Security, Sovereignty and Security (KONSSANTIL), Ministry of Education, Youth and Sports, Ministry of Commerce and Industry, Ministry of Agriculture and Fisheries, Prime Minister's Office, Ministry of Interior, Ministry of Social Solidarity and Inclusion. This CSPE should enable policymakers to sharpen their view of opportunities for synergies and co-ordination to support national strategies; and ensure that WFP's future contributions are best attuned to national needs and policy – within any future CSPs and the UN Co-operation Framework.

33. WFP works closely with, United Nations Children's Fund (UNICEF) and the World Health Organization (WHO) through its activities on malnutrition. WFP is also working with FAO on food security and is a member of the UN Country team. In addition, WFP partners with multilateral, bilateral as well as private donors in the design, funding and co-ordination of delivery of technical assistance.

34. WFP has also collaborated with a wide range of partners to facilitate the implementation of activities. These are primarily national and international NGOs (see annex 4 for a complete list).

35. The evaluation is expected to enable enhancement of partnerships between WFP and various partners, to clarify mandates and roles and to accelerate progress towards replication and hand-over.

36. WFP beneficiaries are the most important stakeholder group of all: comprising subgroups such as, children under five and pregnant and lactating women. In addition, WFP activities are intended to assist the government to deliver better services. Data disaggregation by sex, gender-sensitive stakeholder assessment and understanding of differences in gender roles are particularly important for the CSPE.

## **Subject of the Evaluation**

### **WFP's portfolio in Timor Leste**

37. WFP has been present in Timor-Leste since 1999 when the country office (CO) was first set up. For a period after 2002, it was run as a sub-office from the Jakarta CO, but a full CO was re-established in 2005. WFP's support in Timor-Leste has evolved as development has progressed. In 1999, following the departure of Indonesian forces, WFP focused on life saving activities, providing unconditional food transfers to internally displaced persons as they started to rebuild their lives. As the Government brought security and stability, WFP shifted to recovery and relief work, focusing on food assistance for assets and social safety nets, managing a school meals programme and supporting the development of disaster response and early warning procedures. More recently, WFP has supported programmes for treating and preventing malnutrition and for building reliable, efficient supply chain mechanisms.

38. An evaluation of the Timor Leste portfolio was conducted in 2012 covering the period 2008-2012. The evaluation found that while there was not an explicit country strategy document to guide the portfolio during the evaluation period, in practice there was strategic continuity between the Protracted Relief operations which commenced in 2008 and the Country programme which succeeded it in 2011 and which focused on three strategic objectives: 1) improve the food and nutrition security of the most vulnerable groups in ways that build longer-term human and physical assets; 2) strengthen the Government's capacity to design, implement and manage tools, policies and systems for reducing food insecurity, and 3) hand over food-based programmes to the Government in a responsible manner.

39. Other key findings from the evaluation were:

- The portfolio had focused more on direct responses to undernutrition than on addressing underlying food security issues linked to rural livelihood systems, but this reflected WFP's comparative strengths as well as availability of partners for finance.
- WFP's strategy of supporting and working through government systems for delivery of basic services was highly appropriate for the fragile state context of Timor Leste.
- Joint programmes with other UN agencies needed more depth.

- All the portfolio activities were appropriately oriented towards WFP's strategic objectives and its increased attention to capacity development, was highly consistent with WFP's global strategy.
- The post emergency context for Timor Leste was a more complex and challenging one for WFP. It became more difficult to raise aid funds, yet developmental and capacity-building work required longer-term approaches and additional skill-sets, which were not easy to pursue in the light of WFP's internal constraints, which were particularly constricting for a small CO.
- The CO had been energetic in seeking supplementary funding and in seeking to maintain adequate CO staffing but a heavy reliance on low cost and relatively junior staff, and an inability to offer job security, had disadvantages.
- One of the main signs of overstretched WFP capacity was the neglect of basic monitoring, with inadequate tracking of programme delivery and hardly any attention to outcomes. This in turn limited WFP's position in seeking continued MCHN funding.
- Incorporation of gender had been weak.

40. The CPE included seven recommendations to which management prepared a response. Of particular importance to this evaluation was a recommendation on the transition strategy for Timor-Leste. An extension of the country programme was recommended so as to allow for a systematic approach to the MCHN. It highlighted that an orderly exit would minimize the reputational damage to WFP and would require an extension of the CP by at least a year beyond the current date of December 2013.

41. Management partially agreed with the recommendation and emphasized a request from the Ministry of Health to extend WFP's presence in Timor Leste until the end of 2014. The Government had pledged an additional US\$ 1.2 million to WFP, bringing its total contribution to US \$ 2.9 million. Further funding would be required beyond 2013 but prospects were dim. The situation would be reviewed, and a decision made in mid-2013.<sup>31</sup>

42. Recommendation 2 dealt with hand-Over/Exit Strategies and highlighted that hand over strategies should be developed in a timely fashion with a time frame of 2-3 years. It spoke to the internal capacity of the country office and the need for HQ to engage in a realistic assessment. Management referred to progress in handing over school feeding programmes to the Government and facilitating South-South co-operation as well as guidance in the strategic plan (2008-2013) to hand over. It noted that due to resource constraints there had been limited opportunities for training and staffing. It went on to state that the 2013 Management Plan authorized Programme Support and Administrative budget funding for small country offices to improve internal control mechanisms. Pending approval of the proposed strategic Plan (2014-2017). WFP would define the role of smaller country offices, such as that in Timor Leste. Management further highlighted that a stand-alone unit for engaging country office capacity and providing technical support for policy, programme and innovation had been established. Finally, management committed to reviewing WFP's presence beyond 2013 and using Timor Leste as a pilot for developing exit strategies.

43. Two other important recommendations for this evaluation were on developing indicators and practical guidance to assist country offices in designing and implementing effective gender and capacity development strategies. Management committed to ensuring inclusion of sex-disaggregated and gender-sensitive outcomes and output indicators, updating gender programme guidance, and facilitate regional training on the gender markers. Management also referred to a recently designed capacity development toolkit which would provide practical guidance and would support assessment of internal WFP capacities for implementation of national and local capacity development initiatives. Reference was also made to the revision of the SRF and the Strategic plan in which capacity development would be mainstreamed.

44. Other commitments in response to recommendations included revising the MCHN programme, formulating a hand over process and finalizing guidelines for the management of moderate and acute malnutrition, including improved geographical and beneficiary targeting with the aim of scaling down the programme mid 2013; reviewing the role of Timor Vita and reviewing the school feeding programme.

45. Following a request by the MoH to WFP to extend its support in the country DEV 200770 (2015-2017) (budget USD 13.8 million) was developed to increase ownership and the capacity of the MoH to reduce

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<sup>31</sup> Management Response to the Recommendations of the Summary Evaluation — TIMOR-LESTE COUNTRY PORTFOLIO (2008–2012) <https://docustore.wfp.org/stellent/groups/public/documents/eb/wfpdoc062690.pdf>

undernutrition and to improve the nutritional status of targeted children and women. The project was composed of two main components: (1) capacity development, in which WFP provides technical assistance to enhance the capacity of national counterparts to implement nutrition programmes independently; (2) a food-based component, characterized by the provision of specialized nutritious food products for treatment of Moderate Acute Malnutrition (MAM) in children 6–59 months and acute malnutrition in PLW. The intervention was implemented in six out of the thirteen municipalities of the country, namely: Ainaro, Bobonaro, Covalima, Dili, Ermera, Oecusse. The project was aligned with WFP Strategic objective 4 (Reduce Chronic Malnutrition).

46. A decentralized evaluation was carried out of the project in 2018.<sup>32</sup> Key findings were the following:

- Issues in targeting during programme implementation design and implementation hampered access to services to potential beneficiaries living in remote areas.
- Availability of supplementary foods in the health facilities was an important catalyst for the uptake of other health services provided to children and PLW.
- Recovering an acutely malnourished PLW was cheaper than recovering MAM child through Targeted Supplementary Feeding Programme (TSFP).
- The programme did not achieve expected treatment coverage for children.
- Targeting processes of health facilities were not harmonized between WFP and UNICEF which hampered mutualization of resources and continuum of care in health facilities delivering management of severe acute malnutrition (SAM), but not MAM services.
- The cost per recovered beneficiary in TSFP was higher than that of each child and woman managed through blanket feeding.
- Co-ordination mechanisms between different sectors for improving nutritional status of children and PLW were perceived as weak because of limited technical and financial capacity of the government and local authorities to lead them.

47. The evaluation included seven main recommendations on: i) improving coverage; ii) strengthening capacity of Ministry of Health for treatment follow up and prevention of MAM; iii) strengthening the national health information system for accuracy of data and real time monitoring; vi) strengthening the government supply chain and logistics) strengthening linkages and referral of TSFP beneficiaries to exiting nutrition sensitive and safety net interventions, vi) strengthening partnerships vii) undertake research viii) develop a detailed gender equality and empowerment approach with indicators. Each recommendation included a number of sub recommendations so out of 32 sub recommendations eight were partially accepted and the rest accepted.

48. Important follow up measures included:

- Undertake advocacy and fund raising to allow for continuation and expansion of MAM treatment.
- Conduct capacity needs mapping as part of Country Capacity Strengthening (CCS) framework, to identify concrete ways of supporting capacity building of Ministry of Health.
- Increase collaboration between UNICEF and WFP to harmonize targeting criteria
- Continue discussion with Ministry of Health on food quality and safety aspects of local production and support supply chain management of specialized nutritious foods.
- Continue dialogue with Ministry of Health and private sector on future use of Timor Vita.
- Undertake formative research to inform targeting adolescent girls and boys
- Undertake joint monitoring and supervision with Ministry of Health.
- Ensure closer coordination with Saude na Familia coordinators at municipality. level/coordinate with Mother Support Groups and NGO partners.

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<sup>32</sup> WFP 2018: End-term Evaluation of Treatment of Moderate Acute Malnutrition 2015-2017.



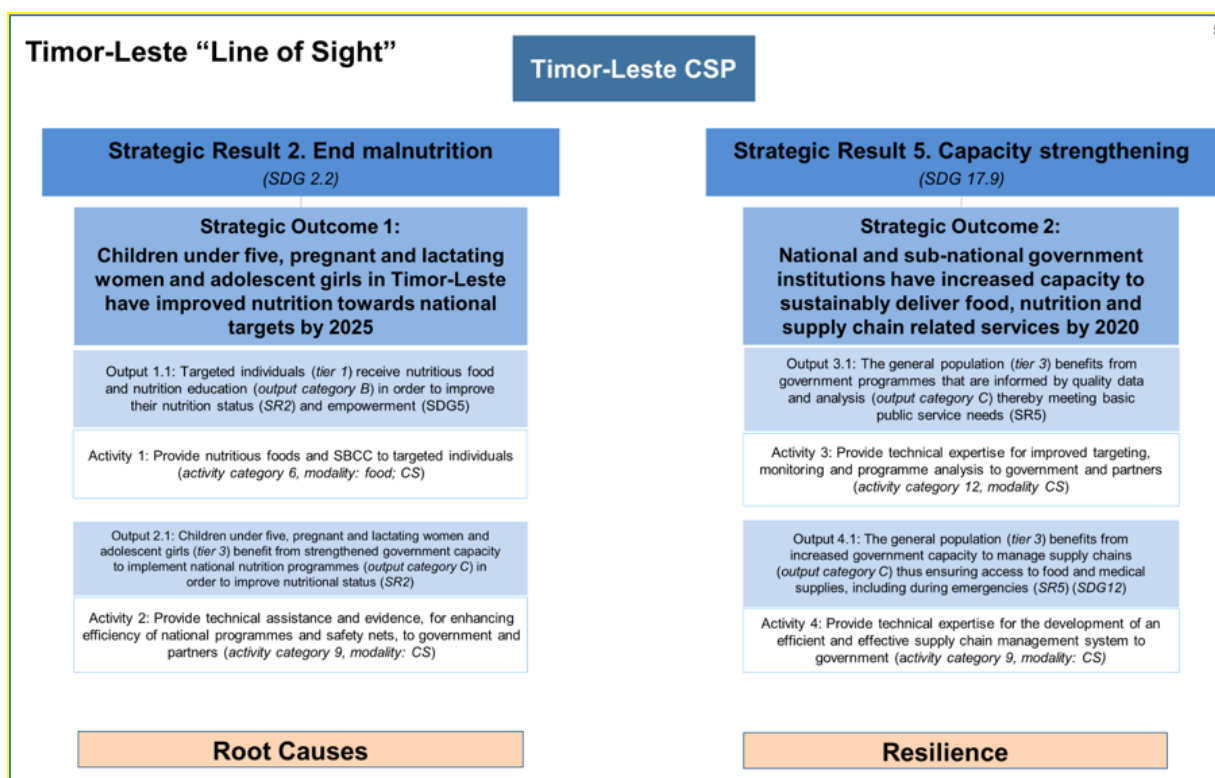
- Develop gender action plan.

49. In response to a drought caused by El Niño in 2016, WFP developed an EMOP intervention 201017 (budget USD 0.847 million) in order to prevent moderate acute malnutrition in children 6 to 23 months and PLW. The intervention targeted 20,600 beneficiaries in the affected areas of the country. Specifically, through the intervention specialized nutritious food was provided for children aged 6-23 months and PLW in three municipalities which were the most affected. The intervention was aligned with WFP strategic objective 1 (save lives, protect livelihoods in emergencies).

50. In 2017, WFP Timor Leste developed its first CSP (2018-2020) guided by WFP current Strategic Plan (2017-2021), the CSP Policy and the IRM. The CSP focus is on continuing to provide food assistance in the short term while recognizing the longer term need for WFP to strengthen national and local capacities and invest in sustainable food security and nutrition programmes to support the country's progress towards middle-income status and SDG 2. The vision is for WFP to continue to shift from the provision of food assistance to policy engagement and capacity development for a gradual hand-over to community run and government financed programmes by 2020. WFP began implementing the CSP in 2018.<sup>33</sup>

51. The CSP focuses on the following 2 strategic outcomes which aim at achieving SDG 2.

**Figure 16. Timor-Leste “line of sight”**



Source: WFP SPA Website

## Funding

52. During the period 2015-2017, WFP Timor-Leste was funded 63 percent. The CSP Timor-Leste requires 17 million for its 3-year CSP cycle. WFP plans to meet its commitment to allocating 15 percent of all project funds to gender activities. As of June 2019, total funding amounted to 2,575 million which corresponds to 20 percent of overall needs. Main donors include EU, Republic of Korea, UNCFERF, private donors and multilateral (see annex 7).

## Staffing

53. As of 30 April 2019, the country office had approximately 40 staff, 33 percent female and 68 percent male. Most of staff are based in the capital Dili (83 percent), of which 63 percent are on national contract and

<sup>33</sup> See annex 6 for a timeline of interventions including respective budgets.

20 percent are international staff; this is followed by national staff based in Ermera (5 percent), Oecussi Ambeno (5 percent), Suai (5 percent) and Maliana (2 percent).

### Scope of the evaluation

54. The evaluation will cover all of WFP’s activities (including cross cutting results) for the period 2015-mid 2019. The reason for a longer time frame (beyond the CSP) is that it enables the evaluation to assess key changes in the approach. Within this timeframe, the evaluation will look at how the CSP builds on or departs from the previous activities and assess if the envisaged strategic shift has actually taken place and what are the consequences. The unit of analysis is the Country Strategic Plan understood as the set of strategic outcomes, outputs, activities and inputs that were included in the CSP document approved by WFP Ex. Board, as well as any subsequent approved budget revisions.

55. In connection to this, the evaluation will focus on assessing WFP contributions to CSP strategic outcomes, establishing plausible causal relations between the outputs of WFP activities, the implementation process, the operational environment and the changes observed at the outcome level, including any unintended consequences, positive or negative. In so doing, the evaluation will also analyse the WFP partnership strategy, including WFP strategic positioning in complex, dynamic contexts, particularly as relates to relations with national governments and the international community.

56. The evaluation will adopt standard UNEG and OECD/DAC evaluation criteria, namely: relevance, efficiency, effectiveness, sustainability as well as connectedness, coherence and coverage as applicable. Moreover, it will give attention to assessing adherence to humanitarian principles, protection issues and AAP of WFP’s response.

57. The evaluation will primarily assess the extent to which having a CSP has facilitated the work of the CO and thereby the WFP outcomes. In doing so the evaluation will focus on the COs ability to fundraise, its partnership strategy and its involvement in policy and programme dialogue. As incorporation of gender concerns has repeatedly been identified as weak<sup>34</sup> the evaluation will analyse if and how gender equality and women’s empowerment were considered in the CSP design and implementation guided by the WFP Gender Policy, identifying any gaps and proposing areas for improvement.

### Evaluation Questions, Approach and Methodology

#### Evaluation questions

58. The evaluation will address four main questions common to all WFP CSPEs. The evaluation team will further develop and tailor them in a detailed Evaluation Matrix during the inception phase, considering gender differences in beneficiaries’ roles disaggregated by sex and age.

<b>EQ1 – To what extent is WFP’s strategic position, role and specific contribution based on country priorities and people’s needs as well as WFP’s strengths?</b>	
1.1	To what extent is the CSP relevant to national policies, plans, strategies and goals, including achievement of the national Sustainable Development Goals?
1.2	To what extent did the CSP address the needs of the most vulnerable people in the country to ensure that no one is left behind?
1.3	To what extent has WFP’s strategic positioning remained relevant throughout the implementation of the CSP in light of changing context, national capacities and needs?
1.4	To what extent is the CSP coherent and aligned with the wider UN and include appropriate strategic partnerships based on the comparative advantage of WFP in the country?
<b>EQ2 – What is the extent and quality of WFP’s specific contribution to CSP strategic outcomes in Timor-Leste?</b>	

<sup>34</sup> E.g. country portfolio evaluation for 2008-2012, End-Term Evaluation of Treatment of Moderate Acute Malnutrition in Timor-Leste 2015-2017.

2.1	To what extent did WFP deliver expected outputs and contribute to the expected CSP strategic outcomes?
2.2	To what extent did WFP contribute to achievement of cross-cutting aims (humanitarian principles, protection, accountability to affected populations, gender equality and other equity considerations)?
2.3	To what extent are the achievements of the CSP likely to be sustainable?
2.4	In humanitarian contexts, to what extent did the CSP facilitate more strategic linkages between humanitarian, development and, where appropriate, peace work?
<b>EQ3: To what extent has WFP's used its resources efficiently in contributing to CSP outputs and strategic outcomes?</b>	
3.1	To what extent were outputs delivered within the intended timeframe?
3.2	To what extent was coverage and targeting of interventions appropriate?
3.3	To what extent were WFP's activities cost-efficient in delivery of its assistance?
3.4	To what extent were alternative, more cost-effective measures considered?
<b>EQ4 – What are the factors that explain WFP performance and the extent to which it has made the strategic shift expected by the CSP?</b>	
4.1	To what extent did WFP analyse or use existing evidence on the hunger challenges, the food security and nutrition issues in the country to develop the CSP
4.2	To what extent has WFP been able to mobilize adequate, predictable and flexible resources to finance the CSP?
4.3	To what extent did the CSP lead to partnerships and collaborations with other actors that positively influenced performance and results?
4.4	To what extent did the CSP provide greater flexibility in dynamic operational contexts and how did it affect results?
4.5	What are the other factors that can explain WFP performance and the extent to which it has made the strategic shift expected by the CSP?

### Evaluability assessment

**Evaluability** is the extent to which an activity or a programme can be evaluated in a reliable and credible fashion. It necessitates that a policy, intervention or operation provides: (a) a clear description of the situation before or at its start that can be used as reference point to determine or measure change; (b) a clear statement of intended outcomes, i.e. the desired changes that should be observable once implementation is under way or completed; (c) a set of clearly defined and appropriate indicators with which to measure changes; and (d) a defined timeframe by which outcomes should be occurring.

59. Several issues could have implications for the conduct of the CSP evaluation. Common evaluability challenges may relate to:

- relatively vague definitions of the expected outcomes, or outputs;
- the validity and measurability of indicators;
- the absence of baselines and or limited availability of monitoring data;

- the time frame covered by the evaluation. The CSPE are meant to be final evaluations of a five-year or a three-year programme cycle, conducted during the penultimate year of the cycle. This has implications for the completeness of results reporting and attainment of expected outcomes.

60. During the inception phase, the evaluation team will be expected to perform an in-depth evaluability assessment and critically assess data availability, quality and gaps to inform its choice of evaluation methods. This will include an analysis of the different results frameworks and related indicators to validate the pre-assessment made by the Office of Evaluation.

61. A rapid analysis of outcome indicators<sup>35</sup> show that while use of some indicators have continued from projects prior to the CSP into the CSP (e.g. indicators on moderate and acute malnutrition) other outcome indicators have changed. Also, some indicators listed in the logical framework of the CSP have not been reported on in the annual country report (e.g. strategic outcome 2 national and sub national Government institutions have increased capacity to sustainably deliver food, nutrition and supply chain related services by 2020). So, while most indicators are conceptually reasonably clear with established definitions and methods of computation the main issue appears to be that data is not regularly produced for all the indicators. There are also inconsistencies between the log frames and what is reported in the ACR.

62. The evaluation team should take the different strategic results frameworks during the evaluation period into consideration. While DEV 200770 and EMOP 201017 was built on the Strategic plan 2014-2017 the CSP TL01 is grounded in WFP Strategic Plan (2017 -2021). The CSP's focus on capacity development and institutional strengthening may prove challenging in terms of outcome level data availability and quality. Previous evaluations recommended that WFP Headquarters' supported the CO in this respect.<sup>36</sup> Data on gender inequality and women empowerment, protection issues, efficiency and sustainability of WFP may also prove challenging. Complete and consistent baseline and yearly trend data sets on these areas since 2015 are not available.

63. The recently conducted decentralized evaluation focuses on moderate acute malnutrition. The CSP should validate the findings<sup>37</sup> and undertake further analysis to fill in any evidence gaps.

### National data

64. Timor-Leste has recently produced its first Voluntary National Review (2019). This process involved assessing data gaps and identifying other sources of information and analysis. The report concludes that while the Government has made progress in aligning budgeting and planning systems to the SDGs, there is significant work to do to strengthen government capacity for data collection, analysis and monitoring. Disaggregation of data is needed not only for Census and DHS surveys but for all national surveys.<sup>38</sup>

65. The Voluntary National Report includes an assessment of data availability of all SDGs of which those of particular relevance to this evaluation are mentioned below.

66. As concerns SDG 2 the report highlights the need for improved data and assesses that data is available for 54 percent of the indicators. Further improvements in the collection of anthropometric data on child nutrition (stunting and wasting) are required in order to effectively monitor nutrition levels in the country. The report notes that the collection of anthropometric data will reduce reliance on infrequent surveys and produce a more sustainable system of data collection and monitoring.<sup>39</sup>

67. Data availability for SDG 5 is assessed as available for 43 per cent of indicators. There is currently a lack of data relating to land ownership for women or the legal framework to promote, enforce and monitor equality and non-discrimination on the basis of sex. However, there is a good amount of data on gender-based violence from Government and NGO surveys.

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<sup>35</sup> See annex 10.

<sup>36</sup> See CPE 2008-2012 recommendation 6 and 7

<sup>37</sup> The overall rating of the report is 58% (approaching requirements) but the findings and analysis is rated as 63%(meets requirement).

<sup>38</sup> Government of Timor-Leste (2019), Report on the Implementation of the Sustainable Development Goals; *From ashes to reconciliation, reconstruction and sustainable development, Voluntary national Review of Timor Leste 2019*, Dili: Timor Leste, page 114.

<sup>39</sup> Ibid, page 54.

68. Data collection on SDG 17 is challenging, with only 21 percent of the data available for indicators for this SDG. At present, some data on the financial and economic indicators such as foreign direct investment are not available. In addition, there is no current data on the dollar value of financial and technical assistance. However, Timor-Leste has developed an aid transparency portal, which is a useful tool for accessing and analysing information on development assistance.<sup>40</sup>

69. A rapid review of key national data sources reveal that a Census was conducted in 2004, 2010 and 2015. A number of analytical reports have been produced in connection with the latest Census (e.g. on the labour force). The latest Timor-Leste Standard of Living Survey is from 2014/2015 and there has been two Demographic Health Surveys in the past 10 years (2009/10, 2016). An agricultural Census is being carried out in 2019.

70. The evaluation team needs to identify appropriate approaches for data collection and to design a strong methodology to analyse data rigorously. This should include measures to address the evaluability of results that can reasonably be linked to WFP's activities in policy advice, capacity development and knowledge-sharing, gender equality and women empowerment.

71. The evaluation team should collect and review a range of additional information and data, including on coordination, complementarity and coherence, risk management, contingency planning, resourcing, human resource capacity, and Accountability to Affected Populations (AAP).

## Methodology

*This evaluation will examine the extent to which gender and equity dimensions are integrated into WFP's policies, systems and processes.*

72. The Agenda 2030 mainstreams the notion of sustainable development as a harmonious system of relations between nature and human beings, in which individuals are part of an inclusive society with peace and prosperity for all. In so doing, it conveys the global commitment to end poverty, hunger and inequality, encompassing humanitarian and development initiatives in the broader context of human progress. Against this backdrop, the economic, social and environmental dimensions of sustainable development cannot be addressed in isolation from one another. This calls for a systemic approach to development policies and programme design and implementation, as well as for a systemic perspective in analysing development change. WFP assumes the conceptual perspective of Agenda 2030 as the overarching framework of its Strategic Plan 2017 -2021, with a focus on supporting countries to end hunger (SDG 2).

73. In so doing, it places emphasis on strengthening the humanitarian development nexus, which implies applying a development lens in humanitarian response and complementing humanitarian action with strengthening national institutional capacity.

74. The achievement of any SDG national target and of WFP's strategic outcomes is acknowledged to be the results of the interaction among multiple variables. In fact, there is an inverse proportional relation between the level of ambition at which any expected result is pitched and the degree of control over it by any single actor. From this perspective and in the context of the SDGs, the attribution of net outcomes to any specific organization, including WFP, may be extremely challenging or sometimes impossible. By the same token, while attribution of results would not be appropriate at the outcome level, it should be pursued at the output and activity level, where WFP is meant to be in control of its own capacity to deliver.

75. To operationalize the above-mentioned systemic perspective, the CSPE will adopt a mixed methods approach; this should be intended as a methodological design in which data collection and analysis is informed by a feedback loop combining a deductive approach, which starts from predefined analytical categories, with an inductive approach that leaves space for unforeseen issues or lines of inquiry that had not been identified at the inception stage; this would eventually lead to capturing unintended outcomes of WFP operations, negative or positive. In line with this approach, data may be collected through a mix of primary and secondary sources with different techniques including<sup>41</sup>: desk review<sup>42</sup>, semi-structured or open-ended interviews, closed answers questionnaires, focus groups and direct observation. Systematic data

<sup>40</sup> Ibid. page 111.

<sup>41</sup> There is no sequence or order of priority in the techniques listed.

<sup>42</sup> Annex 11 provides a list of key reference documents to be reviewed, including previous evaluations and studies that could be used as a secondary source of evidence.

triangulation across different sources and methods should be carried out to validate findings and avoid bias in the evaluative judgement.

76. During the inception phase, the evaluation team will be expected to develop a detailed methodological design, in line with the approach proposed in this ToR. The design will be presented in the inception report and informed by a thorough evaluability assessment. The latter should be based on desk review of key programming, monitoring and reporting documents and on some scoping interviews with the programme managers.

77. A key annex to the inception report will be an evaluation matrix that operationalizes the unit of analysis of the evaluation into its different dimensions, operational component, lines of inquiry and indicators, where applicable, with corresponding data sources and collection techniques. In so doing, the evaluation matrix will constitute the analytical framework of the evaluation. The methodology should aim at data disaggregation by sex, age, nationality or ethnicity or other characteristics as relevant to, and feasible in specific contexts. Moreover, the selection of informants and site visits should ensure to the extent possible that all voices are heard. In this connection, it will be very important at the design stage to conduct a detailed and comprehensive stakeholder mapping and analysis to inform sampling techniques, either purposeful or statistical.

78. WFP's evaluation quality assurance system calls for carrying out gender responsive evaluations. For gender to be successfully integrated into an evaluation it is essential to assess:

- the quality of the gender analysis that was undertaken before the CSP was designed.
- whether the results of the gender analysis were properly integrated into the CSP implementation.

79. The gender dimensions may vary, depending on the nature of the CSP outcomes and activities being evaluated. The CSPE team should apply OEV's Technical Note for Gender Integration in WFP Evaluations and the UN System-Wide Action Plan 2.0 on mainstreaming Gender Equality and Empowerment of Women. The evaluation team is expected to use a method to assess the Gender Marker levels for the CO. The inception report should incorporate gender in the evaluation design and operation plan, including gender sensitive context analysis. Similarly, the draft final report should include gender-sensitive analysis, findings, results, factors, conclusions, and where appropriate, recommendations; and technical annex.

80. The evaluation will give attention to assessing adherence to humanitarian principles, protection issues and accountability for affected populations in relation to WFP's activities, as appropriate, and on differential effects on men, women, girls, boys and other relevant socio-economic groups.

### **Quality assurance**

81. WFP's evaluation quality assurance system sets out processes with in-built steps for quality assurance and templates for evaluation products based on standardised checklists. The quality assurance will be systematically applied during this evaluation and relevant documents will be provided to the evaluation team. There will be two levels of quality assurance of the evaluation products, by the OEV Evaluation Manager and by the Senior Evaluation Officer, who will conduct the first and second level quality assurance respectively. This quality assurance process does not interfere with the views and independence of the evaluation team but ensures the report provides the necessary evidence in a clear and convincing way and draws its conclusions on that basis.

82. The evaluation team will be required to ensure the quality of data (validity, consistency and accuracy) throughout the analytical and reporting phases.

83. OEV expects that all deliverables from the evaluation team are subject to a thorough quality assurance review by the evaluation company in line with WFP's evaluation quality assurance system prior to submission of the deliverables to OEV.

### **Ethical considerations**

84. Ethical consideration shall be taken into the methodology. It will also define risks and appropriate management measures, including issues related to data confidentiality and protection issues, protecting vulnerable respondents, and ensuring that the evaluation team avoids causing harm, and set out ethical safeguards that include provisions for the reporting of ethical concerns.



85. The team will not have been involved in the design, implementation or monitoring of the WFP Timor-Leste CSP nor have conflicts of interest. All members of the evaluation team will abide by the 2016 UNEG norms and Standards, the 2007 UNEG Ethical Guidelines and Code of Conduct as well as the principles of 'do no harm'. The evaluation team will also commit to signing Annex 9 of the Long-Term Agreement regarding confidentiality, Internet and Data Security Statement.

### Organization of the Evaluation

#### Phases and deliverables

86. The evaluation is structured in five phases summarized in the table below. The evaluation team will be involved in phases 2 to 5 of the CSPE. Annex 2 presents a more detailed timeline. The CO and RBB have been consulted on the timeframe to ensure good alignment with the CO planning and decision-making so that the evidence generated by the CSPE can be used effectively.

**Table 13. Summary timeline – key evaluation milestones**

Main Phases	Timeline	Tasks and Deliverables
1. Preparatory	8 Jul 2019 14 August 2019 23 <sup>rd</sup> September onwards 15-17 October 2019	Draft and Final TOR Evaluation Team and/or firm selection & contract Document review Briefing at HQ
2. Inception	19-26 October 2019 11 November	Inception Mission Inception report
3. Evaluation, including fieldwork	27 November -13 Dec	Evaluation mission, data collection and exit debriefing
4. Reporting	18 December- 27 January 2019 27 January – 5 February 24-25 Feb 2020 10 April 2020	Report Drafting Comments Process  Learning Workshop Final evaluation report
5. Dissemination	Sept-Nov 2020	Summary Evaluation Report Editing / Evaluation Report Formatting Management Response and Executive Board Preparation

#### Evaluation team composition

87. The CSPE will be conducted by a gender balanced team of 3 independent evaluation consultants (international, regional and national) with relevant expertise, and a research analyst. The selected evaluation firm is responsible for proposing a mix of evaluators with multi-lingual language skills (English, Portuguese and Tetum) who can effectively cover the areas of evaluation. The team leader should have excellent synthesis and evaluation reporting writing skills in English. The evaluation team will have strong methodological competencies in designing feasible data capture and analysis, synthesis and reporting skills. In addition, the team members should have experience in humanitarian and development contexts, knowledge of the WFP food and technical assistance modalities.

**Table 14. Summary of evaluation team and areas of skills required**

Areas of CSPE	Experience, knowledge and skills required
<b>Team Leadership</b>	<ul style="list-style-type: none"> <li>• Team leadership, coordination, planning and management including the ability to resolve problems.</li> <li>• Strong experience in evaluating implementation of strategic plans and CO positioning related to capacity strengthening activities and of evaluation in humanitarian and development contexts.</li> <li>• Specialization in one of the following areas: food assistance, emergency preparedness, gender analysis; institution building.</li> <li>• Relevant knowledge and experience in Timor-Leste or similar context; strong, experience in CSPE analysis, monitoring and evaluation, synthesis, reporting, and strong presentation skills and ability to deliver on time.</li> <li>• Evaluate WFP assistance to national institutions and partners through capacity development, policy advice and knowledge sharing activities in their efforts to improve the effectiveness and efficiency with other humanitarian/development partners such as UNICEF, WHO, FAO and the World Bank.</li> <li>• Undertake risk assessment and management.</li> </ul>
<b>Food security and Nutrition</b>	<ul style="list-style-type: none"> <li>• Evaluate the direct provision of specialized food as well as capacity strengthening of national institutions in delivering education on nutrition and healthy eating habits.</li> <li>• Evaluate the nutrition component of the CSP design, implementation, outputs and outcomes.</li> <li>• Validate findings of the decentralised evaluation on Moderate Acute malnutrition</li> <li>• Review WFP nutrition assessments and monitoring systems; programming.</li> <li>• Validate findings of the decentralised evaluation on Moderate Acute malnutrition and assess WFP partnerships in the nutrition sector.</li> </ul>
<b>Emergency Preparedness and Response (EPR)</b>	<ul style="list-style-type: none"> <li>• Evaluate WFP assistance to the government in strengthening institutional capacities for emergency preparedness and responses to the wider humanitarian community and national institutions.</li> <li>• Assess AAP, targeting, humanitarian principles and protection.</li> </ul>
<b>Research Assistance</b>	<ul style="list-style-type: none"> <li>• Relevant understanding of evaluation and research and knowledge of food assistance, ability to provide qualitative and quantitative research support to evaluation teams, analyse and assess M&amp;E data, data cleaning and analysis; writing and presentation skills, proofreading, and note taking.</li> </ul>

### Roles and responsibilities

88. This evaluation is managed by the WFP Office of Evaluation (OEV). Catrina Perch has been appointed as Evaluation Manager (EM). The EM has not worked on issues associated with the subject of evaluation. She is responsible for drafting the TOR; selecting and contracting the evaluation team; preparing and managing the budget; setting up the review group; organizing the team briefing and the stakeholders learning in-country workshop; supporting the preparation of the field mission; drafting Summary Evaluation Report; conducting the 1st level quality assurance of the evaluation products and soliciting WFP stakeholders' feedback on draft products. The EM will be the main interlocutor between the team, represented by the team leader, and WFP counterparts to ensure a smooth implementation process. Sergio Lenci, Senior Evaluation

Officer, will provide second level quality assurance. Andrea Cook, Director of Evaluation, will approve the final evaluation products and present the CSPE to the WFP Executive Board for consideration in November 2020.

89. An internal reference group composed of selected WFP stakeholders at CO, RBB and HQ levels will be expected to review and comment on draft evaluation reports, provide feedback during evaluation briefings; be available for interviews with the evaluation team. The CO will facilitate the evaluation team's contacts with stakeholders in Timor-Leste; provide logistic support during the fieldwork and organize an in-country stakeholder learning workshop. Anastacio Soriano has been nominated the WFP CO focal point and will assist in communicating with the EM and CSPE team, and to set up meetings and coordinate field visits. To ensure the independence of the evaluation, WFP staff will not be part of the evaluation team or participate in meetings where their presence could bias the responses of the stakeholders.

90. The contracted firm will be responsible for ensuring the security of the evaluation team, and adequate arrangements for evacuation for medical or insecurity reasons. The evaluation team must observe applicable United Nations Department of Safety and Security rules including taking security training and attending in-country briefings.

### Communication

*It is important that Evaluation Reports are accessible to a wide audience, as foreseen in the Evaluation Policy, to ensure the credibility of WFP – through transparent reporting – and the usefulness of evaluations. The dissemination strategy will consider from the stakeholder analysis who to disseminate to, involve and identify the users of the evaluation, duty bearers, implementers, beneficiaries, including gender perspectives.*

91. All evaluation products will be produced in English. Should translators be required for fieldwork, the evaluation firm will make arrangements and include the cost in the budget proposal. A communication plan (see Annex 5) will be refined by the EM in consultation with the evaluation team during the inception phase. The summary evaluation report along with the management response to the evaluation recommendations will be presented to the WFP Executive Board in November 2020. The final evaluation report will be posted on the public WFP website and OEV will ensure dissemination of lessons through the annual evaluation report.

# Annex II. Methodology

1. **The methodology for this evaluation was developed during the inception phase of the assignment and set out in the inception report.** The approved inception report has guided the implementation of the evaluation phase itself. This annex therefore largely reproduces the assessment and description of methodology given in the inception report, with added commentary on how the planned approach and methods worked out in practice.

## Evaluability

2. As the inception report noted, one immediate challenge to the evaluability of the country strategic plan is the early stage at which the exercise must be undertaken. There are obvious limits to meaningful assessment of effectiveness and sustainability when implementation has been under way for less than two years, at much lower funding levels than planned.

3. A further challenge (recognized by the terms of reference) concerns the availability, consistency and actual use of monitoring indicators, particularly but not only at outcome level (Annex XI). As in all country offices implementing country strategic plans, comprehensive monitoring was constrained until the end of 2018 by the ongoing revisions to the Corporate Results Framework (CRF), which was approved by the Executive Board in November of that year. The Corporate Results Framework methodology for measuring capacity strengthening was not available until then, and – like other country offices – WFP Timor-Leste did not report on this in its annual country report for 2018. That annual country report did not report at all at outcome level for the country strategic plan's Strategic Outcome 2. In fact, the approved Corporate Results Framework only makes one outcome indicator on capacity strengthening mandatory.<sup>43</sup> Meanwhile, the logical framework for the Timor-Leste country strategic plan was revised in May 2019, with one of the original outcome indicators dropped and three new ones on capacity strengthening added (Table 36, Annex XI). The changes were made in order to align the logical framework with the revised Corporate Results Framework. They mean that, at outcome level, little information of consequence is available from the Corporate Results Framework so far on the capacity-strengthening outcomes of the Timor-Leste country strategic plan.

4. Particular data challenges concern the 2016 Demographic and Health Survey, whose dataset is not considered fully reliable (paragraph 20, main report). If these data are completely excluded from discussion, a major gap opens up for trend analysis, going back to the 2010 Demographic and Health Survey and a subsequent 2013 survey. On balance, the evaluation team considered it advisable to continue quoting the 2016 data, while warning that they are not fully reliable.

5. As the evaluation report observes, a more significant challenge for both reporting and evaluation is that formal indicators only tell part of the story. The evaluation team found that some important contributions through country strategic plan implementation, such as on SBCC, are not reflected by any performance indicators. As always, therefore, the task of the evaluation has been to offer a comprehensive, higher-level review of all aspects of performance, quoting the formal indicator data but providing a broader and deeper assessment. This depended partly on drawing information and analysis from a wide range of informants with adequate institutional memory of WFP performance and context in Timor-Leste over the review period: a task challenged by the rate of staff turnover in the country office, where many personnel had to be employed on short contracts.

6. Also significant is the challenge that evaluators of WFP operations face as those operations shift from direct delivery and implementation of easily measurable commodities and activities to the more diffuse processes of capacity strengthening and the associated tasks of organizational and institutional development. Methodology was adopted to address this challenge (see below), but – especially at this early stage in the country strategic plan – the evaluative results are more indicative than empirically conclusive, particularly because of the early stage and small scale of the work being reviewed. Again, however, those results should offer a partial foundation for the strategic analysis and recommendations on which a country strategic plan evaluation should focus.

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<sup>43</sup> WFP, 2018. Country capacity strengthening (CCS). M&E for CCS – indicator listing. Rome: WFP.

## Overall approach

7. **The methodology responds to the four evaluation questions and 17 subquestions set out in the ToR**, concerning the strategic relevance of WFP performance in Timor-Leste; the extent and quality of the specific contribution of WFP to country strategic plan strategic outcomes in the country; the efficiency of WFP resource use in implementing the portfolio; and the wide range of factors explaining WFP performance and the extent to which it has made the required strategic shift.

8. **The methodology enabled the evaluation to develop a strategic understanding, reaching back three years before the country strategic plan was launched, of the direction that WFP contributions have taken in Timor-Leste, and what the prospects are for its future role and contribution.** As a theory-based evaluation, the exercise identifies (to the extent possible) and assesses the intervention logic that WFP applied, and verifies that logic in terms of the performance observed. This leads to conclusions about the accuracy of the WFP strategy and design logic in Timor-Leste, and recommendations about optimal future strategy. The analysis, findings and recommendations are partly based on an assessment of the country office's performance in the results-based management of the country strategic plan. Ideally, a theory-based evaluation refers to a clear statement of the theory of change and associated intervention logic underpinning the design of the work being evaluated. For this evaluation, no such clear statements could be identified, and the evaluation team has had to piece together what it could infer about the theory and logic driving design of the development operation and the country strategic plan.

9. **Given the primary character of this country strategic plan evaluation as a strategic evaluation, the methodology is based on the following.**

- **Analysis, synthesis and validation of secondary data.** As part of the validation process, national data were collected and used to the extent possible, but there are some challenges in relation to national statistics. Data and surveys are sparse and often several years apart. In the case of nutrition, the validity of the 2016 Demographic and Health Survey<sup>44</sup> is in doubt due to the inconsistency of the results compared with the previous exercise conducted in 2010.<sup>45</sup>
- **Discussions with the categories of informant identified in a stakeholder analysis carried out during the inception phase**, including resource partners (donor and United Nations agencies), policy and governance partners (government), beneficiaries and other relevant partners (non-government organizations and private sector). These took the form of semi-structured interviews or structured focus group discussions. The latter were used, in particular, for the assessment of progress with regard to capacity-strengthening and gender issues. Information was mainly gathered from interviewees in Dili, at WFP headquarters in Rome and at the WFP regional bureau in Bangkok – as well as from field visits to four municipalities (Aileu, Ainaro, Bobonaro and Ermera), which focused on nutrition work at health facilities and on the implementation of the Merenda Eskolar school feeding programme.

10. **The data sources and collection techniques used are thus largely a conventional combination of documentary evidence, databases and stakeholder perceptions**, with all sources carefully triangulated as far as possible. Triangulation and data validation are particularly important, of course, when findings are partially or wholly based on stakeholder perceptions, however well-informed and professional those stakeholders may be. Informant perceptions were sourced and structured in a more specific manner through the methodology used for exploring capacity-strengthening process and outcomes, as well as gender issues.

11. **During the inception mission, the evaluation team undertook documentary research and discussions with country office staff to produce a fuller statement of the work done to implement the country strategic plan to date**, complementing what is presented in the annual county reports for 2018 and 2019 (the latter received only after the evaluation mission). This is presented at Annex VI. The exercise was found necessary because available reporting did not give a full, clear picture of the work done towards each output and outcome. Scattered references to activities during 2018, in particular, were not immediately

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<sup>44</sup> General Directorate of Statistics (GDS) and ICF, 2018. 2016 Timor-Leste Demographic and Health Survey. Key findings. Rockville, Maryland, USA: GDS and ICF.

<sup>45</sup> See also UNICEF, nd. Plausibility analysis for anthropometry. Timor-Leste DHS 2016. Dili: UNICEF: PowerPoint presentation and summary text.

clear to the evaluation team. This mapping process helped, in discussion with country office staff, to confirm the scale and significance of the various activities undertaken, and which output and outcome each fell under.

### Approach to the evaluation of performance in capacity strengthening

12. **Capacity strengthening was the core strategy for the WFP contribution in Timor-Leste over the review period, especially for country strategic plan activities 2, 3 and 4. Evaluating performance in capacity strengthening is a complex challenge.**

13. **The 2015 evaluation of the WFP Policy on Capacity Development<sup>46</sup> identified a number of areas for improvement, which prompted the organization to rethink its strategy for capacity strengthening.**

Overall, the evaluation revealed that the majority of capacity-strengthening efforts had focused on developing individual and institutional capacities, but that there was a need to focus further on the enabling environment to achieve sustainable capacity strengthening (for example, by attempting to influence policies or legislation). Additionally, the evaluation identified certain gaps in terms of organizational processes and capacities for capacity strengthening. To address these shortcomings, WFP has developed a corporate Country Capacity Strengthening framework.<sup>47, 48</sup> This is structured around three main domains of intervention (1. enabling environment; 2. organizational; 3. individual), as well as five impact pathways that are expected to lead to sustainable outcome-level change on capacity strengthening:

1. Policy and legislation
2. Institutional accountability
3. Strategic planning and financing
4. Stakeholder programme design and delivery
5. Engagement and participation of civil society and the private sector.

14. **It is difficult accurately to measure the extent to which country strategic plan capacity-strengthening outputs have been achieved to date**, as output indicators do not fully reflect the capacity strengthening elements that were planned for in the country strategic plan, and some indicators were added in the new logical framework (May 2019). Developing appropriate indicators of capacity-strengthening performance is an ongoing corporate issue for WFP as it strengthens and applies the Corporate Results Framework. As can be seen from the tables at Annex XI, which present performance against targets in terms of logical framework (CRF) indicators, those indicators are mostly focused on the number of training workshops organized or of technical assistance inputs provided. Most them are broadly defined and do not specify the type of training or technical assistance provided. Indicators in the revised logical framework are slightly more specific about the objectives of training activities, but do not represent a significant improvement from a results-based management perspective (paragraph 200-204, section 2.4). Furthermore, they will only cover part of the country strategic plan implementation, largely after completion of this evaluation.

15. **Thus, reporting data on capacity strengthening are limited.** This creates a significant challenge in terms of assessing the effectiveness of capacity-strengthening programming. The evaluation team therefore developed a methodology that seeks to identify WFP contribution to capacity-strengthening outcomes in the absence of robust reporting, as well as the progress that WFP has made in Timor-Leste to

Unlike some evaluation approaches, outcome harvesting does not measure progress towards predetermined objectives or outcomes, but rather, collects evidence of what has changed and, then, working backwards, determines whether and how an intervention contributed to these changes. The outcome(s) can be positive or negative, intended or unintended, direct or indirect, but the connection between the intervention and the outcomes should be plausible.

Better Evaluation, 2019

Better Evaluation, 2019. *Outcome harvesting*.

[https://www.betterevaluation.org/en/plan/approach/outcome\\_harvesting#O](https://www.betterevaluation.org/en/plan/approach/outcome_harvesting#O)

<sup>46</sup> Adrien, M-H., Baser, H., Markie, J., Thompson, D., Slaibi, R. and Wenderoth, A., 2015. WFP policy on capacity development: an update on implementation (2009): evaluation report. Rome: WFP Office of Evaluation.

<sup>47</sup> WFP, 2017. WFP Corporate Approach to Country Capacity Strengthening (CCS). Rome: WFP CCS Toolkit Component 1.

<sup>48</sup> WFP, nd. Country Capacity Strengthening (CCS). CCS framework: entry points and process milestones. Rome: WFP.



develop processes that will enable it to implement more effective and sustainable programming on capacity strengthening. At the heart of this enquiry is whether WFP and its partners have been able to take the principles and practice of capacity strengthening beyond the simple performance of awareness-raising and training activities to a broader and deeper enhancement of capacity in the three domains.

16. **To assess how WFP has addressed capacity strengthening in its portfolio, the evaluation team took two steps. First, it mapped the capacity-strengthening work done so far during country strategic plan implementation.** It did this in two ways. Starting in the inception phase, it identified all the discrete activities carried out so far by the country office, as shown at Annex VI. Secondly, it mapped this work to the five country capacity-strengthening pathways mentioned above, as shown at Annex XIII. This exercise helped the team to determine whether the country office focuses mostly on individual/institutional capacity strengthening or is also positioned to tackle more systemic issues by addressing the enabling environment, among other aspects of the Corporate Capacity Strengthening framework.

17. **Secondly, the evaluation team identified the contribution of WFP to capacity-strengthening outcomes** by combining the mapping exercise with outcome harvesting. The outcome harvesting approach is often used to identify outcomes where few reporting data are available or when the results chain between outputs and outcomes is not clearly depicted. It seeks to identify, describe and validate a set of outcomes, and then work its way backwards to understand how an organization or a programme might have contributed to that change.<sup>49</sup> Because the mapping identifies activities/milestones in each of the five impact pathways depicted in the organization's new corporate framework on capacity strengthening, this exercise helped the evaluators to understand better the results chain that links WFP activities/outputs to the observed outcomes. The main limitation to the outcome harvesting exercise is that the country strategic plan is young and it is therefore still early to identify outcome-level results. Nevertheless, the evaluation team identified progression toward the achievement of outcomes, and integrated this analysis in its findings on effectiveness, efficiency and the factors explaining performance. It is also important to note that due to lack of resources, which has significantly affected the implementation of the country strategic plan, fewer outcomes were identified than expected.

18. **Those outcome areas for which activities have been ongoing for a longer period were selected for the outcome harvesting exercise.** The three outcomes that were selected were:

- Raise awareness through social and behaviour change communication for targeted individuals. – Strategic Outcome 1, Activity 1 (operational beneficiary: Ministry of Health, INS)
- Enhanced effectiveness of nutrition coordination mechanisms at the national and subnational levels and the development of cohesive policies and regulatory frameworks for nutrition. – Strategic Outcome 1, Activity 2 (operational beneficiary: KONSSANTIL)
- Enhance the technical expertise of SAMES for the development of an efficient and effective supply chain management system – Strategic Outcome 2, Activity 4 (operational beneficiary: SAMES, Ministry of Health).

19. Outcome areas related to strengthening the monitoring capacities of: (1) the Ministry of Education, Youth and Sports; (2) the Ministry of Social Solidarity and Inclusion were not included in the outcome harvesting approach as these activities are too recent to observe outcome-level results. However, the implementation of activities and realization of outputs were considered through semi-structured interviews with WFP staff and operational beneficiaries.

### Approach to evaluation of performance in nutrition

20. **Much of the country strategic plan is intended to enhance food and nutrition security in Timor-Leste – particularly through activities 1, 2 and 4.** Like the development operation and IR-EMOP before it, the country strategic plan (under Strategic Outcome 1) has a major focus on enhancing the nutrition of target groups, as a contribution to reducing the high rates of stunting and other forms of malnutrition in Timor-Leste. This evaluation was not able to collect primary data on the nutritional status of target groups. It assembled the most recently available secondary data to make time series analysis as comprehensive as possible. But it focused its nutrition enquiries on the approaches taken by WFP during the country strategic plan and two preceding operations – especially its SBCC efforts and the coherence of its contribution to health

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<sup>49</sup> Wilson-Grau, R. and Britt, H., 2012. *Outcome harvesting*. Cairo: Ford Foundation.

systems strengthening in Timor-Leste – taking into account the extent to which the Government of Timor-Leste, United Nations and other agencies have coordinated their understanding of, and action to strengthen, the building blocks of the health system.<sup>50</sup> For this purpose it has made due reference to WFP guidelines on nutrition monitoring and evaluation,<sup>51</sup> as part of a broader assessment of the extent to which WFP design and delivery of nutrition interventions have matched corporate best practice – as most recently set out in the 2018 Food and Nutrition Handbook.<sup>52</sup>

21. **A key concern also was the clarity of country strategic plan design with regard to the contribution(s) that WFP nutrition interventions were expected to make,** alongside (and preferably integrated with) interventions by the Government and other external agencies – notably UNICEF. Of particular strategic concern was the recent discussion, in Timor-Leste and elsewhere, about simplified protocols for treating acute malnutrition in children aged under 5 years.<sup>53</sup> This has potential for the use of a single supplementary feeding ration for both moderate and severe acute malnutrition and for a revision of the respective roles of UNICEF and WFP in treating child malnutrition. It puts the country strategic plan evaluation's assessment of WFP Timor-Leste's approach and performance in nutrition into sharper focus, as questions inevitably arise as to whether WFP, with its currently meagre resources, should aim to retain a role in this field at all if a unified protocol is adopted. The guidelines for a revised approach to moderate and severe acute malnutrition have not yet been developed, as the evidence is still being collected and verified and it may take some time to roll them out to country office level. A Joint United Nations High Commissioner for Refugees (UNHCR), WFP, UNICEF and WHO statement on these simplified protocols was released in March 2019 and states that "as they currently stand, not all elements of the simplified approaches align with WHO normative guidelines and the evidence available to date does not yet warrant a change in global recommendations".<sup>54</sup> All these issues have been addressed in the context of current discussions about the revision of the National Nutrition Strategy.

22. From a capacity-strengthening-for-nutrition perspective, the WFP approach to health systems strengthening was reviewed, looking at all the health systems strengthening building blocks (paragraph 20 above). The evaluation team assessed collaboration with UNICEF, which is the lead for health systems strengthening, to explore strategic options. In addition, the role of WFP in capacity strengthening to ensure a more multisectoral approach to nutrition coordination and implementation was reviewed.

23. **The evaluation explored strategic alternatives for WFP,** building on its comparative advantages, predominantly in the nutrition-sensitive sphere and in relation to strengthening its role in supporting food systems for improved nutrition. Food-based or private-sector approaches building on what the development operation project started were reviewed and explored further, in addition to other strategies that support improved food security and food systems.

24. **Meetings with beneficiaries did not proceed as planned.** In planning the four days of field work in four municipalities, the evaluation team requested that small groups of parents be available for focus group discussions about WFP nutrition interventions. In practice, the schedule of visits to health facilities was tight – on some days the team ran out of time to visit them all – and in most cases they found either that beneficiaries had not been asked to be present, or had come and left because the team did not arrive at the expected time. While more interaction with beneficiaries would definitely have enriched the evaluation, the lack of it was not a critical constraint, given that this is a strategic evaluation of the country strategic plan and its preceding operations as a whole, rather than an evaluation of nutrition operations specifically.

### Approach to evaluation of performance with regard to gender

25. **The evaluation assessed the extent to which WFP in Timor-Leste delivered on intended gender equality outcomes.** In particular, it assessed the extent to which WFP has engaged in gender-responsive programming that responds to the differentiated needs of women and girls and men and boys and, where relevant, examined whether and to what extent WFP has sought to engage in gender-transformative programming. In doing so, it examined the extent to which key aspects such as harmful gender roles and

<sup>50</sup> GAVI, The Vaccine Alliance, 2013. What are the health system building blocks? Geneva: GAVI CSO project fact sheet 5.

<sup>51</sup> WFP, nd. WFP Nutrition Monitoring and Evaluation. Rome: WFP.

<sup>52</sup> WFP, 2018. *Food and Nutrition Handbook*. Rome: WFP Nutrition Division (OSN).

<sup>53</sup> WFP, 2019. *Acute Malnutrition. Exploring Simplified Protocols*. Rome: WFP Nutrition Division (OSN).

<sup>54</sup> UNHCR, WFP, WHO and UNICEF, 2019. *Simplified approaches for the treatment of child wasting*. Geneva: UNHCR, WFP, WHO and UNICEF.

norms, power imbalances between women and men, women's participation in decision-making as well as their access to and control over productive assets have been considered in programme design. However, a comprehensive assessment of gender outcomes was constrained by the inability of the evaluation team to meet beneficiaries as intended. For example, it was not possible to determine the effectiveness of nutrition messaging for tackling gender norms. The evaluation also sought to explore issues of intersectionality by examining whether the specific needs of women and girls from different ethnic, cultural and socio-economic backgrounds were considered in WFP programming. However, limited reporting on these specific groups did not allow for this level of analysis.

26. **To guide its analysis, the evaluation team assessed the design and implementation of WFP activities using elements of the Inter-Agency Standing Committee (IASC) Gender and Age Marker (GAM) and the Gender Benchmark Matrix**, which is the matrix used to measure progress in the implementation of the WFP Gender Transformation Programme (GTP: see Annex IV). It looked at the quality of gender analyses in programmatic design and assessed whether WFP has been engaging with women and men from different age groups. Among other elements, it also explored the extent to which WFP has established partnerships with women's rights entities. In doing so, the evaluation team attempted, to the extent possible, to observe whether there has been an evolution in the way that the WFP country office has integrated GEWE considerations into its programming, comparing the pre- and post-country strategic plan period. The elements of the WFP Gender and Age Marker, some of which have been integrated as lines of inquiry in the evaluation matrix, were used as guidance to get a sense of the extent to which WFP programming has integrated gender through the assessed period, rather than for a rigorous quantitative measurement of the criteria.

27. **In addition to assessing programme design and implementation, the evaluation examined factors that may affect WFP performance with regard to mainstreaming GEWE**, notably by assessing the extent to which the country office has adopted gender-equitable and transformative practices and systems. In 2017, WFP adopted the Gender Transformative Programme with the objective of strengthening the ability of WFP country offices to deliver gender equality outcomes. To measure progress toward the implementation of the programme, WFP has developed a benchmark matrix with 39 benchmark indicators.<sup>55</sup> Although the Timor-Leste country office has not signed up to the WFP Gender Transformative Programme and therefore cannot be held accountable for its implementation, using the benchmark matrix helped the evaluation team understand the extent to which practices and systems in the country office enable or hinder the ability of WFP to deliver gender equality outcomes (Annex XV). Using the benchmark matrix (without working through every single indicator, given the time available), the evaluation team held discussions with relevant WFP staff (including activity managers and the gender focal point) to gather information on these indicators, identify any good practices in integrating GEWE in the country office's practices and systems, and highlight potential constraints the office may have faced.

28. **In addition to including a separate annex on GEWE, gender issues were mainstreamed throughout the evaluation. Data disaggregated by sex and age are presented – to the extent possible – throughout.** More particularly, the evaluation assessed gender mainstreaming in nutrition, supply chain and capacity-strengthening activities; in doing so, it used the WFP gender toolkit for the various sectors. Additionally, the evaluation assessed the extent to which the corporate commitment of 15 percent of all project funds allocated to and expended on gender equality was met. Gender outcomes and explanatory factors were discussed and assessed.

### **Approach to evaluation of accountability to affected populations**

29. **The terms of reference stipulate that the evaluation will give particular attention to assessing adherence to humanitarian principles**, including protection issues and accountability to affected populations. When evaluating the IR-EMOP, the evaluation gave particular importance to the principle of "do no harm" and considered whether the intervention was grounded in the WFP Humanitarian Protection Policy,<sup>56, 57</sup> as well as its Strategy for Accountability to Affected Populations (2016-2021).<sup>58</sup>

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<sup>55</sup> WFP, nd. The WFP Gender Transformation Programme: office guide. Rome: WFP Gender Office.

<sup>56</sup> WFP, 2012. WFP Humanitarian Protection Policy. Rome: WFP: WFP/EB.1/2012/5-B/Rev. 1.

<sup>57</sup> WFP, 2014. Update on Implementation of the Protection Policy. Rome: WFP: WFP/EB.A/2014/5-F.

<sup>58</sup> WFP, nd. WFP's Strategy for Accountability to Affected Populations. Rome: WFP.

30. **Apart from the IR-EMOP, WFP programming in Timor-Leste is mostly focused on capacity strengthening and development issues, rather than purely humanitarian work.** The evaluation team did not assess these principles in the development operation and country strategic plan as it would for a humanitarian evaluation. Instead, it was more broadly concerned with whether the universally required standards of accountability to and respect for the rights and dignity of beneficiaries, accompanied by constant, gender-sensitive concern for beneficiary welfare, have been satisfactorily maintained in the implementation of these operations – by WFP and by its operational beneficiaries. Part of this broader concern was to assess the extent to which WFP has explored and applied new thinking around the humanitarian-development-peace nexus in seeking to optimize its contribution to food security and resilient livelihoods in Timor-Leste.<sup>59, 60</sup>

### Ethical considerations

31. **In carrying out this assignment, the evaluation team paid scrupulous attention to ethical principles,** in conformance with the United Nations Evaluation Group (UNEG) code of conduct and ethical guidelines for evaluation. All interviewees and focus group participants were notified at the start of each meeting that their participation was voluntary and wholly confidential. They were invited to raise any concerns that they might have about participation, and to withdraw if they so chose. The evaluation team emphasized their independence and neutrality and invited informants to speak plainly about positive and negative aspects of WFP performance. They worked carefully and respectfully with vulnerable respondents to reassure them that their interests would not be harmed in any way by their participation in the evaluation. Informants were invited to speak in Tetum if they preferred.

32. **This evaluation report lists all persons met and interviewed, but no individual is named as the source of any information or opinion.** The evaluation team carefully respected the confidentiality of all data and information received, and took thorough precautions to prevent the access of any unauthorized persons to them. They ensured the security of women participants by holding interviews/focus group discussions in safe locations.

33. **The evaluation team is gender-balanced and composed of a mix of local and international consultants.** The gender, cultural and linguistic diversity within the evaluation team facilitated communication with both men and women who were consulted during data collection. However, it was not possible to consult women and men separately due to the limited timeframe for consultations.

### Limitations

34. Some of the methodological challenges encountered during the evaluation have been identified above (see also Section 1.1. paragraph 9). More broadly, **the evaluation team and the country office faced daily difficulties in arranging the programme of meetings in Dili,** with numerous appointments having to be rescheduled and sometimes not happening despite confirmation, or not with the expected interviewees. These problems arise in many countries, and the team are not unused to them. Ultimately, with the strong support of the country office, it was possible to reach almost all of the intended informants, with the exception of beneficiaries in the field (paragraph 24 above).

35. The availability and consistency of monitoring data was a challenge, particularly since this evaluation was required to review data from previous operations as well as the country strategic plan itself. For the country strategic plan, as elsewhere, the evaluators (and the country office) were challenged by revisions to the Corporate Results Framework during implementation, meaning that the monitoring database for the country strategic plan is not only short but also incomplete, with some indicators only measured for the first time in 2019.

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<sup>59</sup> Organisation for Economic Co-operation and Development, 2019. *DAC recommendation on the humanitarian-development-peace nexus*. Paris: OECD/LEGAL/5019.

<sup>60</sup> Delgado, C., Jang, S., Milante, G. and Smith, D., 2018. *The World Food Programme's contribution to improving the prospects for peace*. Preliminary report. Stockholm and Rome: SIPRI and WFP.

## Annex III. Evaluation Matrix

1. Although the standard wording of the evaluation questions refers to the country strategic plan, this evaluation covers two previous WFP operations as well. The questions are therefore taken as referring, where applicable, to the whole evaluation period from 2015 to 2019. The questions and subquestions in the matrix are taken not as referring only to the limited amount of work that WFP has been able to do in implementing its country strategic plan since early 2018, or to the project-level performance of each of the other two operations. They refer more broadly to the overall purpose, direction, delivery and prospects of WFP from 2015. This should lead to an understanding of how best it can contribute to tackling Timor-Leste's hunger challenge through the next country strategic plan.

Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
EQ1 – To what extent is the strategic position, role and specific contribution of WFP based on country priorities and people's needs as well as WFP strengths?			
1.1 To what extent is the country strategic plan relevant to national policies, plans, strategies and goals, including achievement of the national Sustainable Development Goals?			
Alignment of CSP design to national policies, plans and strategies	CSP design (SOs and activities) contribute to the objectives set in national policies, plans and strategies Stakeholders' perception that CSP design (SOs and activities) considers national policies, strategies and plans Degree of alignment of CSP design (SOs and activities) with national policies, plans, strategies, and approaches on GEWE	WFP design documents (CSP, DEV, EMOP) National policies, strategies and plans: Strategic Plan (2011–2030), Food and Nutrition Security Policy, National Nutrition Strategy (2014–2019), National Health Sector Strategic Plan (2011–2030), Zero Hunger Challenge National Action Plan 2014, National Strategy and Action Plan for Gender and Private Sector Government of Timor-Leste, WFP, United Nations, development partners and external informants Studies and analyses on gender equality (e.g., TOMAK)	Document review Semi-structured interviews: HQ, RBB, CO, other United Nations, , partner agencies Triangulation where possible by cross-checks among datasets
Relevance of the CSP to the national context	CSP is based on an understanding of the Timor-Leste context CSP is based on the analysis of Timor-Leste needs (nutrition, food security, etc.)	WFP operational documents (CSP, DEV, EMOP) Zero Hunger Strategic Review Country surveys on nutrition/food security	Document review Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP

Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
	<p>Design of capacity-strengthening activities of CSP is based on a recent country capacity needs assessment</p> <p>Integration of gender perspective into needs assessments</p> <p>Design of capacity strengthening addresses contextual factors hindering GEWE</p>	<p>Other research/analysis on nutrition/food security</p> <p>Government of Timor-Leste, WFP, United Nations, development partners and external informants</p> <p>Studies and analyses on gender equality (e.g., TOMAK)</p>	
<b>1.2 To what extent did the country strategic plan address the needs of the most vulnerable people in the country to ensure that no one is left behind?</b>			
Extent of CSP focus on the most vulnerable/marginalized groups	<p>CSP design was informed by vulnerability assessments/analysis</p> <p>CSP focus on the most vulnerable/marginalized groups</p> <p>CSP focus on geographical areas with greatest poverty/livelihood vulnerability</p>	<p>CSP design documentation and related assessments and analytical studies</p> <p>CSP implementation reports and data (ACR and monitoring indicators)</p> <p>Perceptions of internal and external stakeholders (United Nations agencies, WFP Ministry of Health)</p>	<p>Document review</p> <p>Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP</p>
Extent to which CSP integrates gender equality and women's empowerment	<p>CSP design was informed by gender analysis that considers aspects of intersectionality and equity</p> <p>CSP focus on gender equality and women's empowerment</p> <p>CSP focus on gender equity and transformative approaches (e.g. harmful gender roles and norms, gender relations and power inequalities, access to and control over resources, participation in decision making)</p> <p>Proportion of activities in the CSP that are: (1) gender-blind; (2) gender-specific; (3) gender-sensitive; and (4) gender-transformative</p>	<p>CSP design documentation and related assessments and analytical studies</p> <p>CSP implementation reports and data (ACR and monitoring indicators)</p> <p>Perceptions of internal and external stakeholders (United Nations agencies, WFP, Government of Timor-Leste)</p> <p>Strategic planning documents (WFP Gender Action Plan, Gender Policy and RBB Gender Implementation Strategy)</p>	<p>Document review</p> <p>Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP</p> <p>Analysis of CSP activities using a gender scale</p>



Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
<p>CSP design documentation and related assessments and analytical studies</p> <p>CSP implementation reports and data (ACR and monitoring indicators)</p> <p>Perceptions of internal and external stakeholders (United Nations agencies, WFP, Government of Timor-Leste)</p>	<p>CSP design was informed by an analysis of protection concerns</p> <p>CSP focus on protection issues</p>	<p>CSP design documentation and related assessments and analytical studies</p> <p>CSP implementation reports and data (ACR and monitoring indicators)</p> <p>Perceptions of internal and external stakeholders (United Nations agencies, WFP, Government of Timor-Leste)</p>	<p>Document review</p> <p>Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP</p>
<p><b>1.3 To what extent has WFP strategic positioning remained relevant throughout the implementation of the country strategic plan in light of changing context, national capacities and needs?</b></p>			
<p>Extent to which relevance sustained in light of changing political and institutional context</p>	<p>Evidence that WFP was able to adapt to evolving needs at country level</p> <p>Evidence that WFP was able to adapt to changes in policy priorities and/or Government of Timor-Leste requests</p>	<p>Progress reporting, annual planning (including country operations management plan (COMP)) and (budget) revisions on CSP and preceding operations</p> <p>Perceptions of internal and external stakeholders (United Nations agencies, WFP, Government of Timor-Leste)</p>	<p>Document review</p> <p>Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP</p>
<p>Extent to which relevance sustained in light of changing national capacities</p>	<p>Evidence that WFP was able to adapt to changes in partner or national capacities</p>	<p>Progress reporting, annual planning (including COMP) and (budget) revisions on CSP and preceding operations</p> <p>Perceptions of internal and external stakeholders (United Nations agencies, WFP, Government of Timor-Leste)</p>	<p>Document review</p> <p>Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP</p>
<p>Extent to which relevance sustained in light of changing programmatic context</p>	<p>Evidence that WFP was able to adapt to changes in funding, its own capacity and its relations with other United Nations agencies</p>	<p>Progress reporting, annual planning (including COMP), United Nations system planning (including UNSDCF) and (budget) revisions on CSP and preceding operations</p> <p>Perceptions of internal and external stakeholders</p>	<p>Document review</p> <p>Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP</p>

Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
1.4 To what extent is the country strategic plan coherent and aligned with the wider United Nations and to what extent does it include appropriate strategic partnerships based on the comparative advantage of WFP in the country?			
Alignment with UNDAF and the new UNSDCF	CSP is aligned with the objectives and priorities set in the UNDAF/UNSDCF WFP and United Nations country team stakeholders can articulate how the CSP contributes to UNDAF/UNSDCF objectives	Plans and supporting process documentation linked to CSP, UNDAF, UNSDCF WFP and United Nations country team informants	Document review Semi-structured interviews with United Nations, WFP informants
Extent to which CSP articulates and exploits WFP comparative advantage in Timor-Leste	CSP articulates the WFP comparative advantage CSP design reflects the comparative advantage of other partners (e.g. United Nations agencies) WFP is recognized as the “lead” partner in the areas targeted by the CSP WFP, UNICEF and Government of Timor-Leste clearly agree the respective roles of the two agencies with regard to nutrition	CSP and documentation on CSP design process UNDAF, UNSDCF and documentation on related design processes Perceptions of internal and external stakeholders (United Nations agencies, WFP, Government of Timor-Leste)	Document review Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP
Extent to which CSP design specifies and exploits strategic partnerships	CSP maps key Government of Timor-Leste partners in its target areas CSP maps/considers operational partners active in the areas targeted by the CSP CSP proposes a strategy to identify and exploit partnerships Efficiency and effectiveness of this strategy, if in place	CSP and documentation on CSP design process Perceptions of internal and external stakeholders	Document review Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP
EQ2 – What is the extent and quality of the specific contribution of WFP to country strategic plan strategic outcomes in Timor-Leste?			
2.1 To what extent did WFP deliver expected outputs and contribute to the expected country strategic plan strategic outcomes?			

Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
Achievement of planned CSP outputs to date and quality of performance	<p>Mapping of tasks undertaken and outputs achieved against CSP design and corporate process guidelines</p> <p>Performance data at activity level (outputs accomplished, people reached/trained etc.)</p> <p>Stakeholder views on the quality of WFP performance under each activity</p>	<p>CO monitoring and performance reporting at outcome, and output data (ACRs, SPRs, preliminary data from CO for 2019)</p> <p>National statistics, where available and relevant</p> <p>Perceptions of stakeholders: those directly engaged in/benefitting from WFP activities (e.g. SAMES, KONSSANTIL) and those with broader involvement in relevant sectors (Ministry of Health, Ministry of Agriculture and Fisheries)</p>	<p>Document and data review</p> <p>Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP</p>
Extent to which planned contribution to CSP strategic outcomes achieved to date and quality of performance in this regard	<p>Evidence of WFP contribution to enhancing the effectiveness of nutrition coordination mechanisms</p> <p>Evidence of WFP contribution to enhancing the effectiveness and efficiency of the supply chain management system</p> <p>Evidence of WFP contribution to raising awareness through SBCC</p> <p>Evidence of WFP contribution to improving M&amp;E systems for national programmes on food security and nutrition.</p> <p>Unintended results (positive, negative) for women, men, girls and/or boys, as applicable</p>	<p>Perception of WFP staff, Government of Timor-Leste and external stakeholders on unintended results</p> <p>Perception of Government of Timor-Leste (i.e., KONSSANTIL, SAMES, INS, Ministry of Health, NLC) on outcome achievement</p> <p>Perception of Government of Timor-Leste (i.e., Ministry of Education, Ministry of Youth, Sports and Culture) on progress toward outcome achievement.</p>	<p>Document and data review</p> <p>Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP</p> <p>Outcome harvesting</p>
<b>2.2 To what extent did WFP contribute to achievement of cross-cutting aims (humanitarian principles, protection, accountability to affected populations, gender equality and other equity considerations)?</b>			
Compliance with humanitarian principles and	WFP corporate humanitarian principles and approaches reflected in CSP	CSP	<p>Document review</p> <p>Semi-structured interviews with informants from the Government of</p>

Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
contribution to achievement of humanitarian objectives	Monitoring systems comply with WFP requirements in relation to humanitarian principles Stakeholders' perception on WFP compliance with humanitarian principles	Documentation on CSP monitoring systems (logical framework, internal guidelines and systems) Perceptions of internal and external stakeholders	Timor-Leste, NGOs, the United Nations and WFP
Compliance with protection principles and contribution to achievement of protection objectives	WFP corporate protection principles and approaches reflected in CSP Monitoring systems comply with WFP requirements in relation to protection principles Stakeholders' perception on WFP compliance with protection principles	CSP Documentation on CSP monitoring systems (logical framework, internal guidelines and systems) Perceptions of internal and external stakeholders	Document review Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP
Compliance with principles and achievement of objectives regarding accountability to affected populations	WFP corporate principles and approaches regarding accountability to affected populations reflected in CSP Monitoring systems comply with WFP requirements regarding accountability to affected populations Stakeholders' perception on WFP compliance with principles of accountability to affected populations	CSP Documentation on CSP monitoring systems (logical framework, internal guidelines and systems) Perceptions of internal and external stakeholders	Document review Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP
Compliance with principles and achievement of objectives regarding gender equity and women's empowerment	WFP corporate principles and approaches regarding GEWE reflected in CSP Monitoring systems comply with WFP requirements regarding GEWE Stakeholders' perception on WFP compliance with GEWE principles National stakeholders in sectors receiving WFP capacity-strengthening support have capacity to generate and	CSP Documentation on CSP monitoring systems (logical framework, internal guidelines and systems) Perceptions of internal (WFP staff) and external stakeholders (i.e. Government of Timor-Leste representatives, NGOs, United Nations)	Document review Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP Gender benchmarking exercise Gender toolkit analysis

Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
	<p>analyse sex-disaggregated data through national M&amp;E systems to inform/produce gender-responsive national programming</p> <p>Evidence that national stakeholders in sectors receiving WFP capacity-strengthening support understand and are applying appropriate gender-sensitive principles for engagement of men and boys</p> <p>Evidence that national stakeholders in sectors receiving WFP capacity-strengthening support understand and are applying gender transformative approaches, where relevant</p> <p>Compliance with WFP gender toolkits (e.g., gender and social protection toolkit, gender and supply chain) in relevant sectors of intervention, including nutrition, supply chain and capacity-strengthening activities</p> <p>Evidence of contribution to gender equality outcomes</p>		
<b>2.3 To what extent are the achievements of the country strategic plan likely to be sustainable?</b>			
Extent to which Government of Timor-Leste shows ownership of CSP objectives and strategy and perceives integration of CSP and Government of Timor-Leste objectives and programmes	<p>Analysis of Government of Timor-Leste policies and strategies and level of alignment with WFP activities, i.e. extent to which objectives and approaches are shared</p> <p>Stakeholder views on country ownership of CSP</p>	<p>Statements of Government of Timor-Leste policy and strategy on health, nutrition, school feeding, social protection and civil protection</p> <p>Perceptions of the Government of Timor-Leste and external stakeholders</p>	<p>Document review</p> <p>Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP</p>

Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
<p>Extent to which CSP capacity-strengthening work incorporates all three capacity-strengthening domains</p>	<p>Evidence of WFP contribution to the legal framework addressing food security and nutrition</p> <p>Evidence of WFP contribution to enhanced multisectoral coordination for food security and nutrition</p> <p>Evidence of WFP contribution to strengthened technical skills of Government of Timor-Leste staff to address food security and nutrition</p> <p>Analysis of CSP capacity strengthening implementation and categorization into enabling environment, organizational and individual domains</p> <p>Analysis of recognition of the three capacity-strengthening domains by national stakeholders with whom CSP intends capacity-strengthening engagement</p>	<p>Strategic planning and reporting documents produced by WFP</p> <p>Perception of WFP staff</p> <p>Perception of the Government of Timor-Leste and external stakeholders</p>	<p>Document review</p> <p>Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP</p> <p>Light outcome harvesting approach</p> <p>CCS retrofitting exercise</p>
<p>Extent to which Government of Timor-Leste likely to be able and willing to fund continuation of strategy and programmes to which CSP contributes</p>	<p>Analysis of Government of Timor-Leste budget and Government of Timor-Leste priorities</p> <p>National stakeholder views on future of strategies and programmes supported by WFP</p>	<p>Statements of government policy, strategy and budgets on health, nutrition, school feeding, social protection and civil protection</p> <p>Analysis by international finance institutions (and other analysts, if available) of Timor-Leste fiscal outlook and policy</p> <p>Perceptions of the Government of Timor-Leste and external stakeholders</p>	<p>Document review</p> <p>Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP</p>



Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
Quality of handover of programmes from WFP to Government of Timor-Leste	Existence of clearly defined handover strategy for each relevant WFP programme Evidence that clear and agreed handover strategies have been completed or are in place	Statements of handover strategy by WFP Documentation on agreement with relevant Government of Timor-Leste agencies about handover strategy Perceptions of the Government of Timor-Leste and external stakeholders	Document review Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP
<b>2.4 In humanitarian contexts, to what extent did the country strategic plan facilitate more strategic linkages between humanitarian, development and, where appropriate, peace work?</b>			
Extent to which CSP design facilitates progress at the humanitarian-development-peace nexus	Evidence that CSP design acknowledges significance of the HDP nexus and specifies support for strengthening it	CSP and documentation relating to CSP consultations and preparation Perceptions of the Government of Timor-Leste, United Nations, NGO and WFP stakeholders	Document review Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP
Extent to which CSP implementation facilitates progress at the humanitarian-development-peace nexus	Evidence that CSP implementation has facilitated progress at the HDP nexus	CSP monitoring and performance reports Perceptions of the Government of Timor-Leste, United Nations, NGO and WFP stakeholders	Document review Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP
<b>EQ3: To what extent has WFP used its resources efficiently in contributing to country strategic plan outputs and strategic outcomes?</b>			
<b>3.1 To what extent were outputs delivered within the intended timeframe?</b>			
Adherence to timeframe	Activities delivered as proposed in the timeline defined in CSP and annual plans Delays or divergences are justified in country/project reports Analysis of factors explaining delays/divergences from expected timeline (e.g. internal vs. external factors)	CSP implementation planning documents (including COMP) and CSP monitoring and performance reports WFP, United Nations and Government of Timor-Leste informants	Document review Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP
<b>3.2 To what extent were coverage and targeting of interventions appropriate?</b>			

Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
Appropriateness of coverage	<p>Coverage of CSP activities is justified and realistic, based on existing mapping and assessments and on available resources</p> <p>Coverage of CSP activities reflects recommended/ standard practices</p>	<p>CSP planning and implementation documents</p> <p>Nutrition and other relevant mappings and assessments, including UNICEF-WFP acute malnutrition coverage report (if available)</p> <p>WFP corporate guidelines and recommendations</p> <p>WFP, United Nations, NGO and Government of Timor-Leste informants</p>	<p>Document review</p> <p>Semi-structured interviews with informants from the Government of Timor-Leste, NGOs, the United Nations and WFP</p>
Appropriateness of targeting	<p>Targeting of CSP activities (differentiate support at levels of partnerships with Government of Timor-Leste, of beneficiaries and of institutions) is justified and realistic, based on existing mapping and assessments and on available resources</p> <p>Targeting of CSP activities reflects recommended/standard corporate practice</p>	<p>CSP planning and implementation documents</p> <p>Nutrition and other relevant mapping and assessments</p> <p>WFP corporate guidelines and recommendations</p> <p>WFP, United Nations, NGO and Government of Timor-Leste informants</p>	<p>Document review</p> <p>Semi-structured interviews with WFP informants</p>
<b>3.3 To what extent were WFP activities cost-efficient in delivery of its assistance?</b>			
Cost-efficiency of CSP implementation	<p>Comparative analysis of the budget for period 2015-2019 with breakdown for comparable activities, including (if data available) those of other relevant agencies (e.g. UNICEF)</p> <p>If data available, budget analysis to show costs per unit of delivery, with breakdown for direct support costs, staff costs, transfer costs and implementation costs</p>	<p>WFP budgets, funding and implementation reports</p> <p>WFP informants</p>	<p>Document review</p> <p>Semi-structured interviews with WFP informants</p>
<b>3.4 To what extent were alternative, more cost-effective measures considered?</b>			

Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
Attention paid to cost-effectiveness during CSP design and implementation	<p>Alternatives and types of intervention were considered in CSP/activity design, including in annual plans</p> <p>Alternatives were discussed with or presented to partners (including Government of Timor-Leste)</p> <p>Final approaches/implementation decisions are justified by WFP</p>	<p>CSP planning and implementation documents</p> <p>Reports (if any) of consultations with Government of Timor-Leste (and other partners)</p> <p>WFP, Government of Timor-Leste and United Nations informants</p>	<p>Document review</p> <p>Semi-structured interviews with Government of Timor-Leste, United Nations, WFP informants</p>
<b>EQ4 – What are the factors that explain WFP performance and the extent to which it has made the strategic shift expected by the country strategic plan?</b>			
<b>4.1 To what extent did WFP analyse or use existing evidence on the hunger challenges, the food security and nutrition issues in the country to develop the country strategic plan?</b>			
Comprehensiveness and quality of data and analysis used in CSP design	<p>Evidence that National Zero Hunger Strategic Review identified and analysed implications of existing evidence</p> <p>Evidence that CSP design was explicitly based on NZHSR analysis and on current Government of Timor-Leste policy</p> <p>Analysis of how interventions or strategies were prioritized</p> <p>Informant confirmation that CSP appropriately analysed/used existing evidence</p> <p>Evidence of application of development operation evaluation recommendations in CSP design</p>	<p>NZHSR</p> <p>References in CSP and related planning documentation to relevant analytical sources and data</p> <p>WFP, Government of Timor-Leste and United Nations informants</p>	<p>Document review</p> <p>Semi-structured interviews with Government of Timor-Leste, United Nations, WFP informants</p>
<b>4.2 To what extent has WFP been able to mobilize adequate, predictable and flexible resources to finance the country strategic plan?</b>			
Adequacy of resourcing for the CSP	<p>Analysis of needs versus mobilized resources for period 2015-2019, comparing activity categories: humanitarian, direct (nutrition) implementation, capacity strengthening</p>	<p>WFP budgets (including revisions), funding and implementation reports</p> <p>WFP informants</p>	<p>Document review</p> <p>Semi-structured interviews with WFP informants</p> <p>Gender benchmarking exercise</p>

Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
	<p>Analysis of sources of funding per type and level of earmarking</p> <p>Analysis of WFP adjustments to changes in levels of funding (e.g. staff, shift in activities)</p> <p>Dedicated resources for GEWE initiatives and GEWE-related expenses (15% threshold of project funds)</p>		
Predictability of resourcing for the CSP	Trend analysis of relationship between needs-based budgets, timing of actual resource mobilization, and funding sources, considering fluctuation/turnover in donors supporting CSP and variable length of donor engagement	WFP budgets (including revisions), funding and implementation reports WFP informants	Document review Semi-structured interviews with WFP informants
Flexibility of resourcing for the CSP	Analysis of proportions of funds received that are unrestricted or tied to specified levels in the CSP “line of sight”	WFP budgets (including revisions), funding and implementation reports WFP informants	Document review Semi-structured interviews with WFP informants
<b>4.3 To what extent did the country strategic plan lead to partnerships and collaborations with other actors that positively influenced performance and results?</b>			
Extent to which WFP has engaged in partnerships and collaboration during CSP implementation	Analysis of thematic focus, operational specificity, funding and outputs of identified partnerships, by category of partner	CSP planning and implementation documents and reports, including MoUs, technical and cooperation agreements, joint work plans WFP and partner informants	Document review Semi-structured interviews with WFP and partner informants
Influence of partnerships and collaboration on CSP performance and results	<p>Analysis of extent to which recorded outputs derive from joint implementation with partners</p> <p>Informant perceptions of significance of partnerships and collaboration on quality of CSP performance and results</p>	CSP planning and implementation documents and reports, including MOUs, technical and co-operation agreements, joint work plans WFP and partner informants (United Nations, NGOs)	Document review Semi-structured interviews with WFP and partner informants Gender benchmarking exercise

Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
	<p>Evidence of factors facilitating and obstructing formation and effective use of partnerships</p> <p>Evidence of South-South co-operation (e.g., Centre of Excellence against Hunger in Brazil, strategic partnerships with China/India) facilitating capacity strengthening</p> <p>Partnership on GEWE (e.g. United Nations, academia, civil society organizations) to support gender-transformative programming</p>		
<b>4.4 To what extent did the country strategic plan provide greater flexibility in dynamic operational contexts and how did it affect results?</b>			
Extent to which CSP structure and procedures have enhanced flexibility	Evidence of extent to which CSP structure and procedures have affected flexibility in terms of funding allocation; human resource allocation; and adaptiveness to evolving needs, context, contingencies	<p>WFP CO and RB implementation reports</p> <p>WFP documentation on implementation and amendment of Integrated Road Map</p> <p>WFP informants</p>	<p>Document review</p> <p>Semi-structured interviews with WFP informants</p>
Influence of CSP structure and procedures on results	Evidence of extent to which CSP structure and procedures had a positive or negative effect on quantity and quality of results	<p>WFP CO and RB implementation reports</p> <p>WFP documentation on implementation and amendment of Integrated Road Map</p> <p>WFP informants</p>	<p>Document review</p> <p>Semi-structured interviews with WFP, United Nations and donor informants</p>
<b>4.5 What are the other factors that can explain WFP performance and the extent to which it has made the strategic shift expected by the country strategic plan?</b>			
Technical quality of WFP design and implementation of CSP Activities	Analysis of extent to which design and implementation of CSP activities conformed to global and WFP norms, standards, guidelines and procedures, with specific reference to nutrition, capacity strengthening and gender	<p>CSP design documentation and implementation reports</p> <p>WFP corporate guidelines, notably on capacity strengthening, nutrition and gender</p> <p>WFP informants (CO, RB)</p>	<p>Document review</p> <p>Semi-structured interviews with WFP informants</p>

Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
Focus on, and quality of, results-based management (RBM)	<p>Analysis of extent to which comprehensive monitoring data promptly generated as a tool for RBM</p> <p>Analysis of extent to which RBM practised in CSP strategic management, using monitoring data to guide decisions</p>	<p>CSP implementation reports</p> <p>Perceptions of WFP (CO and RB) informants</p>	<p>Document review</p> <p>Semi-structured interviews with WFP informants</p>
Factors related to development and implementation of WFP Integrated Road Map	<p>Analysis of extent to which the eight positive impacts of the CSP approach envisaged in the Policy on CSPs have been realized in Timor-Leste to date:</p> <ul style="list-style-type: none"> <li>• increased effectiveness and efficiency in emergencies and protracted crises</li> <li>• improved alignment with national SDG targets and partners</li> <li>• greater focus, improved visibility and communication</li> <li>• integration of operational support, technical assistance and resource mobilization</li> <li>• flexibility to plan for and respond to dynamic operational contexts while better linking humanitarian and development work</li> <li>• increased strategic guidance and reduced transaction costs</li> <li>• harmonization with the humanitarian programme cycle and other United Nations agencies and processes</li> </ul>	<p>CSP implementation reports</p> <p>Perceptions of WFP (CO and RB) informants</p>	<p>Document review</p> <p>Semi-structured interviews with WFP informants</p>



Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
	<ul style="list-style-type: none"> <li>enhanced performance management, reporting and accountability</li> </ul> <p>Analysis of operational costs and benefits experienced by the Timor-Leste country office to date in the design and implementation of the CSP</p>		
Adequacy of WFP CO human resources	<p>Levels of staff work (over)load</p> <p>Staff retention/turnover</p> <p>Adequacy of staffing across CO structure (as adjusted for the CSP)</p> <p>Clear understanding of roles &amp; responsibilities among CO staff</p> <p>Existence of focal points (e.g. gender, M&amp;E)</p>	<p>WFP human resource data</p> <p>Perceptions of WFP and United Nations informants</p>	<p>Document review</p> <p>Semi-structured interviews with WFP and United Nations informants</p>
Adequacy of WFP CO staff expertise	<p>Evidence of gender expertise (including expertise on gender-transformative approaches)</p> <p>Evidence of capacity-strengthening expertise</p> <p>Evidence on availability and use of staff training opportunities</p> <p>Staff knowledge of WFP corporate policies (e.g. capacity development policy, Gender Policy (2015-2020), nutrition, social protection)</p> <p>Type and frequency of support received from RBB and HQ, per activity</p> <p>Evidence of use by the CO of corporate tools and guidance on capacity strengthening</p>	<p>WFP human-resource data</p> <p>Perceptions of WFP informants</p> <p>Performance assessment and competency assessment (PACE)</p> <p>Job descriptions</p>	<p>Document review</p> <p>Semi-structured interviews with WFP informants</p> <p>Gender benchmarking exercise</p>

Dimensions of analysis	Lines of enquiry/indicators	Data sources	Data-collection technique
<p>Factors related to Timor-Leste demography, economy, natural environment, human resources, political conditions</p>	<p>Analysis of extent to which design and implementation of CSP adapted to specific characteristics, trends and events in Timor-Leste demography, economy, natural environment, human resources, political conditions – e.g. beneficiary numbers, access to skilled human resources, disasters, political instability, ability of Government of Timor-Leste to engage with CSP implementation</p> <p>Analysis of influence of above factors on WFP ability to implement CSP, and its implicit strategic shift in the profile and purpose of WFP</p>	<p>CSP design documentation (including NZHSR) and implementation reports</p> <p>Perceptions of WFP and external informants</p>	<p>Document review</p> <p>Semi-structured interviews with WFP and external informants</p>
<p>Factors related to quality of collaboration within United Nations system in Timor-Leste</p>	<p>Analysis of extent to which CSP implementation linked to sharing of data, resources, personnel with other United Nations agencies</p> <p>Analysis of quality of UNDAF design and implementation in achieving practical and positive collaboration within United Nations system in Timor-Leste</p> <p>Analysis of potential for UNSDCF to strengthen WFP contribution to its CSP SOs</p> <p>Evidence of duplication/complementarity of capacity-strengthening efforts within the United Nations system</p> <p>Frequency of participation in United Nations thematic working groups (e.g. gender, health)</p>	<p>Documentation, including 2019 evaluation of UNDAF and planning of UNSDCF</p> <p>Perceptions of WFP and United Nations informants</p>	<p>Document review</p> <p>Semi-structured interviews with WFP and United Nations informants</p>

# Annex IV. Evaluation Timeline and Evaluation Mission Schedule

1. Only one change was made to the timeline that was shown in the evaluation terms of reference. The evaluation mission took place from 27 November to 13 December 2019.

**Table 15. Evaluation timeline**

	Timor-Leste country strategic plan evaluation	By whom	Key dates (deadlines)
<b>Phase 1 – Preparation</b>			
	Desk review. Draft terms of references. Office of Evaluation (OEV)/Director clearance for circulation in WFP	EM	8 July
	Draft terms of reference circulated to long term agreement (LTA) firms for proposals and to WFP stakeholders	EM/LTA	8 July
	Review draft terms of reference based on WFP stakeholders' feedback	EM	15–18 July 2019
	Final terms of reference sent to WFP stakeholders	EM	19 July 2019
	Long term agreement firms submit proposals	LTAs	26 July 2019
	Long term agreement proposal review and selection	EM	29–30 July 2019
	Contracting evaluation team/firm	EM	14 August 2019
<b>Phase 2 – Inception</b>			
	Team preparation, literature review prior to headquarters briefing	Team	23 Sept 2019 onwards
	Headquarters briefing – and conference calls with regional bureau	EM & Team	15–17 Oct 2019
	Inception Mission in Dili	EM + TL	19–26 Oct 2019
	Submit inception report (IR)	TL	11 November 2019
	Office of Evaluation quality assurance and feedback	EM	18 November 2019
	Submit revised inception report	TL	22 November 2019
	Circulate final inception report to WFP key stakeholders for their information and post a copy on intranet	EM	24 November 2019
<b>Phase 3 – Evaluation phase, including fieldwork</b>			
	Fieldwork and desk review, Timor-Leste	Team	27 Nov – 13 Dec 2019
	Debriefing with country office, RBB and headquarters	EM&TL	13 December 2019
<b>Phase 4 – Reporting</b>			
<b>Draft 0</b>	Submit high quality draft zero to Office of Evaluation	TL	27 January 2020
	Office of Evaluation feedback to team leader	EM	31 January 2020
<b>Draft 1</b>	Submit high quality draft evaluation report (ER) to Office of Evaluation	TL	5 February 2020
	Seek Office of Evaluation Director's clearance prior to circulating the evaluation report to WFP stakeholders	EM	10 February 2020
	Office of Evaluation shares draft evaluation report with WFP stakeholders for their feedback		15 February 2020

	<b>Timor-Leste country strategic plan evaluation</b>	<b>By whom</b>	<b>Key dates (deadlines)</b>
	Stakeholders Learning workshop – Dili	EM/TL	February 24-25, 2020
	Consolidate WFP comments and share them with team	TL/EM	27 February 2020
<b>Draft 2</b>	Submit revised draft evaluation report to Office of Evaluation based on WFP comments, with team’s responses on the matrix of comments	TL	4 March 2020
	Review Draft 2 and draft summary evaluation report (SER)	EM	16 March 2020
	Seek Office of Evaluation Director’s clearance to send the summary evaluation report to Executive Management	EM	23 March 2020
	Office of Evaluation circulates the summary evaluation report to WFP Executive Management for comments (upon clearance from Office of Evaluation’s Director)	EM	24 March 2020
	Office of Evaluation shares the comments on draft summary evaluation report to the team	EM	3 April 2020
<b>Draft 3</b>	Submit final draft evaluation report (with the revised draft summary evaluation report) to Office of Evaluation	TL	10 April 2020
	Seek final approval by Office of Evaluation Director	EM	End April 2020
<b>Phase 5 Executive Board and follow-up</b>			
	Submit summary evaluation report/recommendations to Performance Management and Accountability for management response and summary evaluation report to Executive Board Secretariat for editing and translation	EM	September–October 2020
	Tail end actions, Office of Evaluation websites posting, Executive Board Round Table etc.	EM	October 2020
	Presentation of summary evaluation report to the Executive Board	D/OEV	Nov 2020 with country strategic plan
	Presentation of management response to the Executive Board	D/RMP	November 2020

# Annex V. Timor-Leste Policies, Strategies and Plans: Food Security and Nutrition

1. Table 16 summarizes the alignment of WFP Timor-Leste country strategic plan design to Government of Timor-Leste policies, strategies and plans from the perspective of food security and nutrition.

**Table 16. Alignment of country strategic plan to Government of Timor-Leste policies, strategies and plans for food security and nutrition**

National policy, strategy or declaration	Nutrition and food security elements with which the WFP country strategic plan strategic outcomes are aligned	Comments
The 2010 Comoro Declaration against Hunger and Malnutrition	This is a statement of policy commitment to address nutrition through concerted and joint efforts of seven ministries: the Ministry of Agriculture and Fisheries, the Ministry of Finance, the Ministry of Health, the Ministry of Commerce, Industry, and Environment, the Ministry of Economy and Development, the Ministry of Education and the Ministry of Social Solidarity and Inclusion.	WFP country strategic plan outcomes are aligned to this declaration and aim to support the Government of Timor-Leste to achieve some of these commitments.
Timor-Leste Strategic Development Plan (2011–2030)	<p>Under social capital, health sector strategies for improved access to and quality of nutrition services at health facilities and community through nutrition behaviour change programmes are stipulated.</p> <p>Also under social capital, the Strategic Development Plan acknowledges the role of the environment and climate change on food security due to inherent risks of natural disasters, drought, rising sea levels among others.</p> <p>Under economic development, the plan outlines strategies to promote diversification and consumption of locally produced food.</p>	No specific nutrition targets are articulated.
<b>The four key policies and strategies that drive the food security and nutrition agenda in Timor-Leste</b>		
Zero Hunger Action Plan (2015–2025)	<p>This has five pillars. The WFP country strategic plan is aligned with all of them to some extent: minimally for pillars 3, 4 and 5, and more strongly for Pillar 1 (100 percent equitable access to adequate nutritious and affordable food all year round) and Pillar 2 (zero stunted children less than two years old).</p> <p>It sets out ambitious targets to be met by 2025: Global Hunger Index of 5 by 2025; stunting &lt;10 percent; underweight &lt;20 percent; anaemia for children under 5 &lt;3 percent; anaemia in women of reproductive age (WRA) &lt;10 percent; and population living under the poverty line &lt;10 percent, from 41 percent in 2013.</p>	The NZHSR makes frequent reference to this plan.

National policy, strategy or declaration	Nutrition and food security elements with which the WFP country strategic plan strategic outcomes are aligned	Comments
Food and Nutrition Policy (2017)	<p>Articulates a vision of a hunger- and malnutrition-free Timor-Leste by 2030.</p> <p>Targets: reduce stunting to &lt;40 percent, underweight &lt;30 percent and wasting &lt;10 percent.</p> <p>Has eight outcomes. The WFP country strategic plan is aligned to seven:</p> <ul style="list-style-type: none"> <li>• Outcome 1 on production of nutritious crops (specifically 1.1–1.3 on diversified micronutrient crop production)</li> <li>• Outcome 2: stability and resilience (2.3 safety net programmes, food aid and food assistance and 2.6 grain/food reserve system)</li> <li>• Outcome 3: safe, quality nutritious food (aspects of post- harvest technologies, storage, transportation and regulatory environment)</li> <li>• Outcome 5: increase access to nutritious foods and nutrient intake</li> <li>• Outcome 6: improved health status (integrated management of acute malnutrition is embedded under strategy 6.4, which is a key focus of the WFP country strategic plan)</li> <li>• Outcome 7: nutrition education and awareness/advocacy</li> <li>• Outcome 8: Integrated Food and Nutrition Security Information (8.2 National Information Early Warning Systems).</li> </ul>	<p>All WFP country strategic plan outcomes are aligned to this policy. The critical question is the extent to which WFP is fully utilizing its potential to meet broader strategies/actions articulated in this policy.</p> <p>WFP current contributions to this policy are narrow and/or fragmented.</p>
National Nutrition Strategy (2014–2019)	<p>Six strategic priorities (SPs) with which WFP country strategic plan is well aligned:</p> <ul style="list-style-type: none"> <li>• SP 1: Women, children and adolescent girls' nutrition (country strategic plan SO1)</li> <li>• SP2: Care of mothers and children (country strategic plan SO1)</li> <li>• SP3: Food security at household (HH), community and national level (country strategic plan SO2 – partially)</li> <li>• SP4: WASH</li> <li>• SP5: Nutrition behaviour change and promotion (country strategic plan SO1)</li> <li>• SP6: policies and medical Supply coordination (country strategic plan SO2 including aspects of capacity strengthening).</li> </ul>	<p>Will be replaced by the National Nutrition Strategy 2020–2024 (under development).</p>
The Consolidated National Action Plan for SDG 2	<p>Process led by the Government of Timor-Leste (through KONSSANTIL and the Office of the Prime Minister) that aims to prioritize actions by key sectors by consolidating the actions outlined in the three other strategies.</p> <p>WFP country strategic plan outcomes are mostly aligned to the following actions by sector:</p>	<p>The United Nations will use it to prioritize actions in the UNSDCF and will support alignment within respective country programmes.</p>



National policy, strategy or declaration	Nutrition and food security elements with which the WFP country strategic plan strategic outcomes are aligned	Comments
	<ul style="list-style-type: none"> <li>• Health: MIYCN (including promotion/SBCC), IMAM and WASH for good nutrition</li> <li>• Education; improve school feeding</li> <li>• Social protection: improve the nutrition sensitivity and targeting of Bolsa da Mãe</li> <li>• Agriculture: promote diversity of homestead production.</li> </ul>	
Other sector strategies with which the country strategic plan is aligned		
National Health Sector Strategic Plan (2011–2030)	Seeks to “reduce the incidence and prevalence of macro and micronutrient deficiencies and associated malnutrition among vulnerable groups”.	Broad alignment, but not specifically mentioned by the country strategic plan.
Agriculture Policy and Strategic Framework (2017)	<p>This outlines six main policy objectives, of which the WFP country strategic plan is aligned most to:</p> <ul style="list-style-type: none"> <li>• PO 1: improved availability and access to nutritious, diversified and safe food</li> <li>• PO 2: increased farmer linkages to market opportunities through value chain development as well as increased private-sector participation.</li> </ul>	Not mentioned by the country strategic plan.
Ministry of Agriculture and Fisheries Strategic Plan (2011–2030)	<p>Outlines the nine main goals, of which WFP country strategic plan is aligned to:</p> <ul style="list-style-type: none"> <li>• Goal 2: increasing household food and nutrition security</li> <li>• Goal 5: increasing food production.</li> </ul>	Quoted by the country strategic plan.
National Strategic Plan for Education (2011–2030)	<p>This consists of 12 priority programmes, of which early childhood development (ECD) and social inclusion have the greatest relevance to nutrition and thus to WFP country strategic plan outcomes:</p> <ul style="list-style-type: none"> <li>• ECD: universal pre-school education by 2030</li> <li>• Social inclusion: supports the removal of barriers to education for girls and women and others who are disadvantaged, mainly for secondary and higher education</li> </ul> <p>School feeding is also part of social inclusion in this plan, but mainly to ensure enrolment and retention rather than as a nutrition intervention.</p>	The country strategic plan makes numerous references to education and to the links between nutrition and education, but does not refer specifically to this strategic plan.
National Action Plan on Gender-Based Violence (2017–2021)	The WFP country strategic plan is aligned to this in relation to targeting women, particularly pregnant and lactating women, adolescent girls and women in general (mainly under country strategic plan SO1).	The country strategic plan mentions this action plan and makes frequent reference to gender-based violence concerns.
Bolsa da Mãe Programme (Ministry of Social	This programme supports cash grants to vulnerable families with young children in need of social protection. The Strategic Plan 2014–2017 of the Ministry of Social Solidarity and Inclusion does not mention	The country strategic plan sees the Bolsa da Mãe programme as a major target for support under Activity 3.

National policy, strategy or declaration	Nutrition and food security elements with which the WFP country strategic plan strategic outcomes are aligned	Comments
Solidarity and Inclusion)	<p>nutrition explicitly, though nutrition-relevant considerations are included as follows:</p> <ul style="list-style-type: none"> <li>• To promote access of vulnerable families to the Bolsa da Mãe /Bolsa Familia Conditional Cash Transfer (CCT) programme</li> <li>• To improve and consolidate the processes for selecting Bolsa da Mãe /Bolsa Familia beneficiaries, making and monitoring payments, monitoring compliance with conditionalities, and responding to complaints</li> <li>• To further develop the Bolsa da Mãe /Bolsa Familia programme to have a greater impact on poverty alleviation.</li> </ul> <p>Relevant objectives that the WFP country strategic plan is aligned with (under SO2; technical expertise to improve targeting, monitoring and programme analysis):</p> <ul style="list-style-type: none"> <li>• Improving and consolidating the processes for selecting Bolsa da Mãe/Bolsa Familia beneficiaries</li> <li>• Making and monitoring payments</li> <li>• Monitoring compliance with conditionalities</li> <li>• Responding to complaints.”</li> </ul>	
National Adaptation Programme of Action on Climate Change	<p>Sets out strategies to protect and promote food security and nutrition in the context of climate change and opportunities to mitigate impact.</p> <p>The WFP country strategic plan does not elaborate much on its contribution to the climate change agenda, but it has initiated activities that support monitoring the impacts of climate change: Vulnerability assessment and mapping and climate and food security risk analysis briefs, in collaboration with the WFP Indonesia country office.</p>	The country strategic plan summarizes climate change concerns in Timor-Leste but makes no specific mention of the National Adaptation Programme.
National Action Plan for Children in Timor-Leste (2016–2020)	<p>Timor-Leste has ratified most of the human-rights treaties developed by the United Nations General Assembly (including the Convention on the Rights of the Child).</p> <p>This Action Plan has four main priorities. The WFP country strategic plan is aligned with one of these, on Child Health, Nutrition and Adolescent Health.</p>	There is no reference to this Action Plan in the country strategic plan.
Timor-Leste National Disaster Risk Management Policy (2008, Ministry of Social	<p>This articulates strategies and policy priorities for disaster risk management. The WFP country strategic plan is partially but not explicitly aligned to the following strategies:</p> <ul style="list-style-type: none"> <li>• Integrated Hazard Vulnerability Risk Analysis to Action Systems (Early Warning)</li> <li>• Emergency management.</li> </ul>	This is currently being updated. The WFP country strategic plan does not specify any contribution to disaster risk management, although it mentions this as an opportunity.

National policy, strategy or declaration	Nutrition and food security elements with which the WFP country strategic plan strategic outcomes are aligned	Comments
Solidarity and Inclusion)		
Emergency Response and Preparedness Plan (2014)	A copy of this was not made available	The country strategic plan refers to this plan in its country priorities section. <sup>61</sup>

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<sup>61</sup> WFP, 2018. Timor-Leste Country Strategic Plan (2018–2020). Rome: WFP: WFP/EB.1/2018/6-A/3, p. 9.

## Annex VI. Implementation of the Country Strategic Plan to October 2019

1. During the inception and evaluation missions, the evaluation team developed this analysis of country strategic plan implementation to date through iterative consultations with country office staff and detailed reference to the available documentation. It became apparent that there were discrepancies between the country strategic plan and the actions reported by the country office in the annual country report and other communications. The objective of this exercise was to identify, and group under coherent streams of work, the actions that WFP had implemented under the country strategic plan in the period 2018–2019. This exercise allowed the team to identify linked and related actions that make a contribution to the country strategic plan.

Strategic Outcome	Activity	Description	Partner	Comments
<b>SO1: “Children under 5, adolescent girls and pregnant and lactating women have improved nutrition towards national targets by 2025”</b>				
<b>Activity 1: “Provide nutritious food and raise awareness through social and behaviour change communication for targeted individuals”</b>				
1	1	TSFP in six municipalities through health facilities	Ministry of Health	Ended in June 2019
1	1	Coverage survey integration of MAM and SAM with UNICEF and Ministry of Health in Baucau, Ermera and Viqueque municipalities	UNICEF & Ministry of Health	Survey in three municipalities. Contributes to simplification protocol
1	1	National dissemination of WFP evaluation report on MAM treatment (development programme project evaluation)		Decentralized evaluation, dissemination
1	1	Develop a plan to handover the Targeted Supplementary Feeding Programme to the Ministry of Health, including the facilities for producing Super Cereal		Handing over. Equipment was procured by WFP and funded by Government of Timor-Leste
1	1	SBCC through health facilities, same six municipalities targeted in TSFP	Ministry of Health	
1	1	Formative research study with TOMAK on adolescent nutrition. Results let to development of new educational materials	TOMAK, Ministry of Health & Ministry of Education, Youth and Sport (lead)	Contributes to update SBCC strategy. This included Ministry of Health and Ministry of Education, Youth and Sport (lead). More formative researches are coming out addressing other age groups
1	1	Participation in national symposium on SBCC with Ministry of Health. Presentation of formative research	See above	As above
1	1	INS technical agreement on training (workplan under development)	INS	Workplan under development. Limited engagement at activity level

Strategic Outcome	Activity	Description	Partner	Comments
1	1	WFP and UNICEF supported the National Health Institute INS for the capacity-building training on integrated moderate acute malnutrition guidelines, monitoring and evaluation, including SBCC to nutrition coordinators	UNICEF	Support Ministry of Health in the training of nutrition co-ordinators. UNICEF and WFP organize.
1	1	Partnership agreement with Catalpa International is being developed to support the Ministry of Health's health promotion department to develop a knowledge management system on social and behaviour change communication	Catalpa International	Workplan in development. Initiated by Patrick Teixeira (former Deputy Country Director)
1	1	WFP signed a technical agreement with Agora Food Studio, a local food-based organization, to promote local nutritious food and raise awareness	Agora Food Studio	Workplan in development. Initiated by Patrick Teixeira (former Deputy Country Director)
1	1	Supported the Ministry of Health to consolidate the results of an SBCC partner mapping survey carried out in February 2019, with Catalpa International and the DFAT-funded Partnership for Human Development	Catalpa International, DFAT, Ministry of Health	Supported drafted of national strategy, partner mapping ongoing
1	1	WFP held a nutrition session with the National Parliament Commission F and D to raise awareness about the status of nutrition and food security in Timor-Leste	Parliament	Advocacy
<b>Activity 2: "Provide the Government and partners with technical assistance and evidence for enhancing the efficiency of national programmes and safety nets"</b>				
1	2	KONSSANTIL – policy engagement. WFP is a member. Activities: advocacy, analysis of chronic food security, training and data analysis. Focus on food and nutrition security in general, including nutrition-sensitive and nutrition-specific policies, strategies (food fortification, school feeding, etc.)	KONSSANTIL, Ministry of Agriculture and Fisheries	
1	2	Acceptability pilot of fortified rice, two schools in Dili	KONSSANTIL	Mandated by KONSSANTIL
1	2	Fill the Nutrient Gap report. To be used in policy engagement with KONSSANTIL, and social assistance programme	KONSSANTIL	Preliminary report is completed. Frances Knight from HQ
1	2	WFP conducted a three-day Fill the Nutrient Gap Training to 36 people doing data collection and analysis at municipality level (Cost of Diet initiative in six municipalities)		FNG, training for the people that would do the data collection and analysis in the municipalities
1	2	Training (South–South co-operation) for Director General Ministry of Agriculture & KONSSANTIL (rice fortification) & NLC (Logistics)		Study tour of China
<b>SO2: "National and subnational government institutions have increased capacity sustainably to deliver food-, nutrition- and supply chain-related services by 2020"</b>				
<b>Activity 3: "Provide the Government and partners with technical expertise for improved targeting, monitoring and programme analysis"</b>				

Strategic Outcome	Activity	Description	Partner	Comments
2	3	M&E support to Ministry of Education, Youth and Sport, Merenda Eskolar (school feeding)	Ministry of Education, Youth and Sport	Planning and MoU preparation - concept note on M&E. Finding common ground
2	3	SABER exercise for school feeding, Ministry of Education	Ministry of Education, Youth and Sport	
2	3	The Ministry of Education, Youth and Sport has cleared a draft agreement with WFP. Formalizing of this agreement through an MoU will initiate the implementation of activities in support of the school feeding programme, including strengthening the M&E system, rice fortification and supply chain management	Ministry of Education, Youth and Sport	
2	3	Technical assistance to Oecusse on school feeding. Consultant to support region in design of guidelines for school feeding in Oecusse municipality	Ministry of Education, Youth and Sport	
2	3	M&E support to Ministry of Social Solidarity and Inclusion. Agreement (in negotiation) between WFP and Ministry of Social Solidarity and Inclusion will facilitate the provision of technical support in areas such as electronic beneficiary registration in social protection systems and payment solutions		Agreement not yet signed, part of engagement/planning at policy level. MoU under discussion
2	3	Presented SCOPE to improve tracking and monitoring systems in context of Bolsa de Mãe, Ministry of Social Solidarity and Inclusion	Ministry of Social Solidarity and Inclusion	Wanted to introduce platform. Ministry of Social Solidarity and Inclusion has its own system in place. Looking for ways to engage. Still under discussion/planning
2	3	Training on mobile data collection and analytics (MDCA) system with Ministry of Education, Youth and Sport, Ministry of Health, Ministry of Social Solidarity and Inclusion and NLC. Presented to different ministries. Idea was to complement food distribution system, but was expanded to other departments	Ministry of Education, Youth and Sport, Ministry of Health, Ministry of Social Solidarity and Inclusion & NLC	For the upcoming country strategic plan. MDCA used as entry point
2	3	WFP conducted a three-day nutrition result measurement exercise attended by a total 34 participants. Based on MDCA tool	Ministry of Education, Youth and Sport, Ministry of Health, Ministry of Social Solidarity and Inclusion & NLC	
2	3	Started collecting data on health facility and household monitoring using mobile data collection and analytics, in five municipalities.	Ministry of Health	New system deployed, rolling out phase. WFP no longer involved in collection: handed over to Government of Timor-Leste



Strategic Outcome	Activity	Description	Partner	Comments
2	3	WFP, through the Global Child Nutrition Foundation, has launched School Meals Programme Global Survey	Global Child Nutrition Foundation	Preparation for Global Child Nutrition Foundation's Global Forum in December. WFP shared some data on school feeding
<b>Activity 4: "Provide the Government and partners with technical expertise for the development of an efficient and effective supply chain management system"</b>				
2	4	Logistic support/technical assistance to SAMES (depends on Ministry of Health)	SAMES, Ministry of Health	MoU exists between WFP and SAMES. For background, mSupply was introduced by WFP, then Government of Timor-Leste moved to local software (Aden), but it is not adequate. Government is returning to mSupply
2	4	Training to SAMES & Ministry of Health in 13 municipalities on warehouse and stock management. Three warehouse management and food quality and safety sessions were delivered to 72 health staff from 13 municipalities in a training on integrated management of acute malnutrition, organized by the National Health Institute (INS) and UNICEF	SAMES, Ministry of Health, UNICEF, INS	
2	4	WFP conducted a two-day training on warehouse management in collaboration with Timor-Leste's Medical and Pharmaceutical Supply Agency (SAMES). Thirty five participants attended the training from different line ministries and government institutions	SAMES	
2	4	Training to the Ministry of Health nutrition department staff embedded at SAMES on food physical inventory and food data reconciliation	SAMES, Ministry of Health	
2	4	Assessment of AdenBox and AdenCare with UNICEF and WHO. Apps to manage and track medicines and medical supplies	UNICEF, WHO	mSupply was introduced by WFP, then Government of Timor-Leste moved to local software (Aden), but it is not adequate. Government is returning to mSupply
2	4	Early engagement with NLC. Assessment of warehouses with the National Logistics Centre. NLC depends on the Ministry of Commerce and Industry	NLC, Ministry of Commerce and Industry	Planning with NLC, MoU preparation context
2	4	WFP-HELP Logistics: assessment of supply chain of school feeding programme. Training has not been done	HELP Logistics	Report is available in E-library
2	4	WFP-HELP Logistics engaged the Secretary of State for Civil Protection to discuss the existing disaster operational management structure and map supply chains; and the National Logistics Centre to identify gaps in their supply chain	HELP Logistics, DNPC, NLC	
2	4	Entry points Directorate for Civil Protection (DNPC) - 72-hour methodology for enhanced data preparedness and drought impact analysis	DNPC	One-week mission from RBB, early engagement with civil protection, planning

Strategic Outcome	Activity	Description	Partner	Comments
2	4	Training on food safety for relevant stakeholders from the Government and private institutions		
2	4	WFP conducted a training on humanitarian supply chain management to World Vision staff	World Vision	Request by World Vision

Source: country office documentation and informants

# Annex VII. Financial Information, 2015–2019

1. Timor-Leste is not the only country in the WFP Asia-Pacific region to face funding challenges. Resource situation reports of 6 January 2020 in the WFP Information Network and Global System (WINGS) database show other countries in a similar situation in the region, but they are generally very large operations with needs exceeding USD 100m (North Korea, 28 percent; and Myanmar, 27 percent) and/or countries in the first year of implementation of four- or five-year country strategic plans (for example, Nepal, 38 percent; the Pacific multi-country country strategic plan, 12 percent; and North Korea, 28 percent).

2. Funding for Timor-Leste should be seen in the context of the global geography of WFP finances. In 2018, WFP expenditures in its Asia-Pacific region made up 7.6 percent of the total (2.8 percent of the total if Bangladesh and Afghanistan are excluded), with 90.1 percent going to sub-Saharan Africa and the Middle East and North Africa.<sup>62</sup> As much of the region moves into middle-income status, funding for its food security and nutrition challenges through WFP becomes harder to secure.

3. The European Union and Korea were the largest donors to the development operation, contributing USD 4.1m and USD 3.5m respectively (Figure 22, Annex VII). Together they accounted for 93 percent of all directed contributions and 89 percent of all the funding allocated to the development operation project. Private donors provided USD 0.56 million and included the Yum! Brands initiative, the Japan WFP Association and the Red Cross. A small grant from Ireland (USD 67,000) completes the list of direct donors. (The figures used here for EU contributions do not exactly correspond to those shown in WINGS, because they are sourced from a more detailed analysis of funding data.)

4. The situation has been compounded by arrival of funding at a rather late stage of country strategic plan implementation. Actual expenditure in 2018 and 2019 adds up to USD 2.27m, but, as seen above, total resources allocated to the country strategic plan as of January 2020 are USD 5.1 million.<sup>63</sup> After adjusting for indirect support costs (ISC) and other elements, the available balance as the start of 2020, the last year of country strategic plan implementation, was USD 2.37m. The contrast between the very limited spending until the end of 2019 and the overall funding situation is explained by the arrival of large amounts of funding in late 2019. WFP approved a circa USD 0.9 million SRAC allocation in October 2019, while China and the Japan Association awarded their grants at the very end of 2019. Once the grant has been awarded, the programming of resources and their deployment through operations take some time. This creates a lag between the time when allocated resources reflect in the system and the time that they become available for spending at country level.

**Table 17. Country portfolio budget implementation plan and actual spending per year (USD)**

Activity	2018				2019			
	Needs-based plan	Implementation plan	Actuals	(%) Actuals / implementation plan	Needs-based plan	Implementation plan	Actuals	(%) Actuals / implementation plan
1	3,996,775	2,374,988	408,491	17%	2,935,700	305,894	140,026	46%
2	618,267	407,893	83,958	21%	736,509	57,215	74,112	130%
3	530,026	334,562	172,221	51%	347,692	144,187	185,595	129%
4	1,026,556	663,627	477,627	72%	452,289	220,386	226,145	103%
DSC	677,150	652,366	199,774	31%	698,267	103,945	298,218	287%
Total	6,848,775	4,433,436	1,342,072	30%	5,170,456	831,626	924,095	111%

<sup>62</sup> WFP, 2019. Annual performance report for 2018. Rome: WFP: WFP/EB.A/2019/4-A/Rev.2., pp. 150, 154.

<sup>63</sup> WFP, 2020. Timor-Leste Resource Situation. Rome: WFP.

Source: Country Portfolio Budget (CPB) plan versus actual report, WING

**Table 18. Country Strategic Plan (2018–2020): resource situation (USD), 6 January 2020**

<b>TIMOR-LESTE RESOURCE SITUATION</b>		<b>06/01/2020</b>	
Title	CSP Timor-Leste (2018-2020)		
CPB Duration	01.Jan.2018 to 31.Dec.2020		
<b>Needs Based Plan (U.S. Dollars)</b>			
<b>16,972,517</b>			
Donor	Allocated Contributions (in US\$)	Share of Needs Based Plan (%)	
AUSTRALIA	135,006	0.8%	
CHINA	550,000	3.2%	
EDMF	11,012	0.1%	
FLEXIBLE FUNDING	3,339,229	19.7%	
MISCELLANEOUS INCOME	90,971	0.5%	
PRIVATE DONORS	410,937	2.4%	
REPUBLIC OF KOREA	98,043	0.6%	
RESOURCE TRANSFER	187,851	1.1%	
TIMOR LESTE	232,000	1.4%	
UN OTHER FUNDS AND AGENCIES (EXCL. CERF)	45,000	0.3%	
	<b>Needs Based Plan Funded:</b>	<b>5,100,049</b>	
	<b>% Needs Based Plan Funded:</b>	<b>30.05%</b>	
	<b>Shortfall (of Needs Based Plan):</b>	<b>11,872,469</b>	

1. The source of the data is the WINGS Finance Module (FM), which might differ from the amount in the donor contract due to exchange rate fluctuations or other financial adjustments.

2. Allocated Contributions includes both new grants and grants migrated from former projects to the CSP.

Source: WFP Information Network and Global System (WINGS)

**Table 19. Country Strategic Plan (2018–2020): financial detail 6 January 2020**

	<b>Total USD</b>	<b>Non-direct Multilateral USD</b>	<b>Directed Multilateral USD</b>
Allocated Resources	5,100,049	3,441,212	1,470,986
Expenditures			
<i>Food and related costs</i>	365,978	103,601	120,107
<i>Cash-based transfer and related costs</i>	0	0	0
<i>Capacity strengthening</i>	1,416,237	1,047,195	382,906
<i>Service delivery</i>	0	0	0
Total transfer	1,782,216	1,150,796	503,013
Implementation cost	118,094	91,806	13,104
Total direct operational costs	1,900,309	1,242,602	516,117
Direct support cost (DSC)	497,992	362,930	76,195
Total direct costs	2,398,301	1,605,532	592,312
Indirect support cost (ISC)	331,930	241,847	90,084
Total expenditures	2,730,231	1,847,379	682,396
Carry-over to subsequent operation	0	0	0
Balance of resources	<b>2,369,818</b>	<b>1,593,833</b>	<b>788,590</b>
Outstanding contributions receivable			113,516
Cash balance			<b>675,074</b>

Source: WINGS

**Table 20. IR-EMOP 201017: funding overview (USD)**

Report run from WINGS Data Warehouse on 10/24/19. Data presumed as day before

<b>Project details:</b>					
Project Number	201017				
Country	Timor-Leste				
Project Title	Moderate acute malnutrition intervention in drought affected areas				
Programme Category	IR-EMOP				
Start / End Date	From 01/09/2016 to 31/03/2017				
<b>Total Requirements:</b>	<b>847,040</b>				
<b>Project Cycle</b>		<b>FORECASTS</b>			
<b>Donor</b>	<b>Project Resource Level</b>	<b>High</b>	<b>Medium</b>	<b>Low</b>	<b>Total Forecast</b>
UN CERF	\$846,703				
MISCELLANEOUS INCOME	\$10,466				
<b>Total directed:</b>	<b>\$846,703</b>				
<b>Total non directed:</b>	<b>\$10,466</b>				
<b>Total:</b>	<b>\$857,169</b>				
<b>% of Requirements:</b>	<b>101%</b>				

Note: Total non directed includes Multilateral, Stock transfer, Miscellaneous Income and Cost Recovery.

Source: WINGS

**Table 21. DEV 200770: funding overview (standard project report) (USD)**

	Approved Budget	Confirmed Contributions
<b>Direct Project Costs</b>		
Food and Related Costs	3,556,611	1,351,555
Cash & Voucher and Related Costs	0	0
Capacity Dev't & Augmentation	6,655,399	4,281,492
<b>Total Direct Operational Costs</b>	<b>10,212,010</b>	<b>5,633,047</b>
DSC	2,669,989	2,055,002
Stock Transfer		95,002
Unprogrammed Project Costs		55,716
<b>Total Direct Project Costs</b>	<b>12,881,999</b>	<b>7,838,767</b>
Indirect Support Costs	901,740	527,648
Carry-over to subsequent operation		
<b>Total</b>	<b>13,783,739</b>	<b>8,366,415</b>

	Total	Incoming and Outgoing Transfers	Total Multilateral	Subtotal Directed Multilateral
<b>Confirmed Contributions</b>				
In Kind	176,938	0	0	176,938
Cash	8,094,476	87,792	171,993	7,834,691
Stock Transfer	95,002	95,002		
<b>Total Confirmed Contributions</b>	<b>8,366,415</b>	<b>182,794</b>	<b>171,993</b>	<b>8,011,628</b>
<b>Expenditures</b>				
<b>Project Costs</b>				
Food and Related Costs	1,351,555	31,001	28,080	1,292,474
Cash & Voucher and Related Costs	0	0	0	0
Capacity Dev't & Augmentation	4,281,492	0	0	4,281,492
<b>Total Direct Operational Costs</b>	<b>5,633,047</b>	<b>31,001</b>	<b>28,080</b>	<b>5,573,966</b>
DSC	2,055,002	56,790	76,945	1,921,267
Stock Transfer	95,002	95,002		
<b>Total Direct Project Costs</b>	<b>7,783,051</b>	<b>182,794</b>	<b>105,025</b>	<b>7,495,233</b>
Indirect Support Costs	527,648		11,252	516,396
<b>Total Expenditures</b>	<b>8,310,699</b>	<b>182,794</b>	<b>116,277</b>	<b>8,011,628</b>
Carry-over to subsequent operation*	55,716		55,716	0
Balance of Contributions	0	0	0	0
Outstanding Contributions Receivable				0
Cash Balance				0

Source: Standard Project Report, 2018<sup>64</sup>

<sup>64</sup> WFP, 2018. Capacity development for health and nutrition. Standard project report 2018. Dili: WFP.



**Table 22. DEV 200770: funding overview (WINGS) (USD)**

Project details:		FORECASTS			
Donor	Project Resource Level	High	Medium	Low	Total Forecast
MULTILATERAL	\$171,993				
European Commission	\$4,147,051				
Republic of Korea	\$3,543,855				
Private Donors	\$556,228				
Ireland	\$66,780				
STOCK TRANSFER	\$182,794				
<b>Total directed:</b>	<b>\$8,313,913</b>				
<b>Total non directed:</b>	<b>\$354,787</b>				
<b>Total:</b>	<b>\$8,668,700</b>				
<b>% of Requirements:</b>	<b>63%</b>				

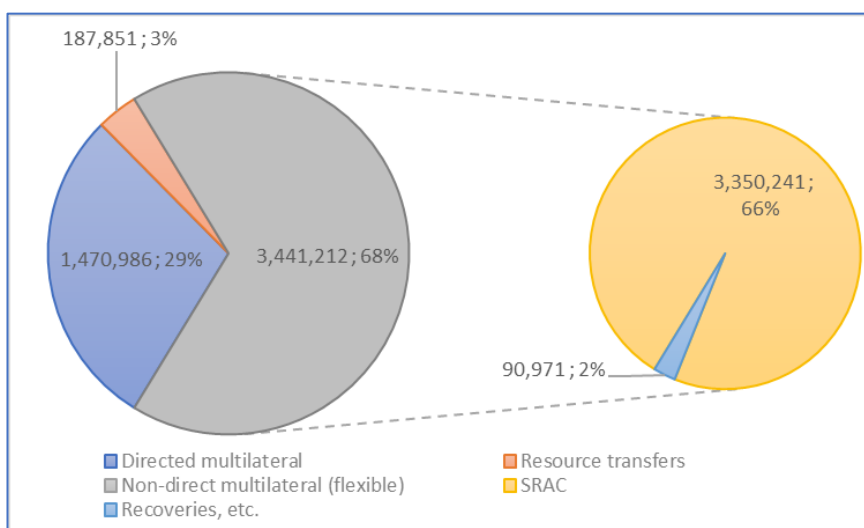
Report run from WINGS Data Warehouse on 10/22/19. Data presumed as day before

Note: Total non directed includes Multilateral, Stock transfer, Miscellaneous Income and Cost Recovery.

Source: WINGS

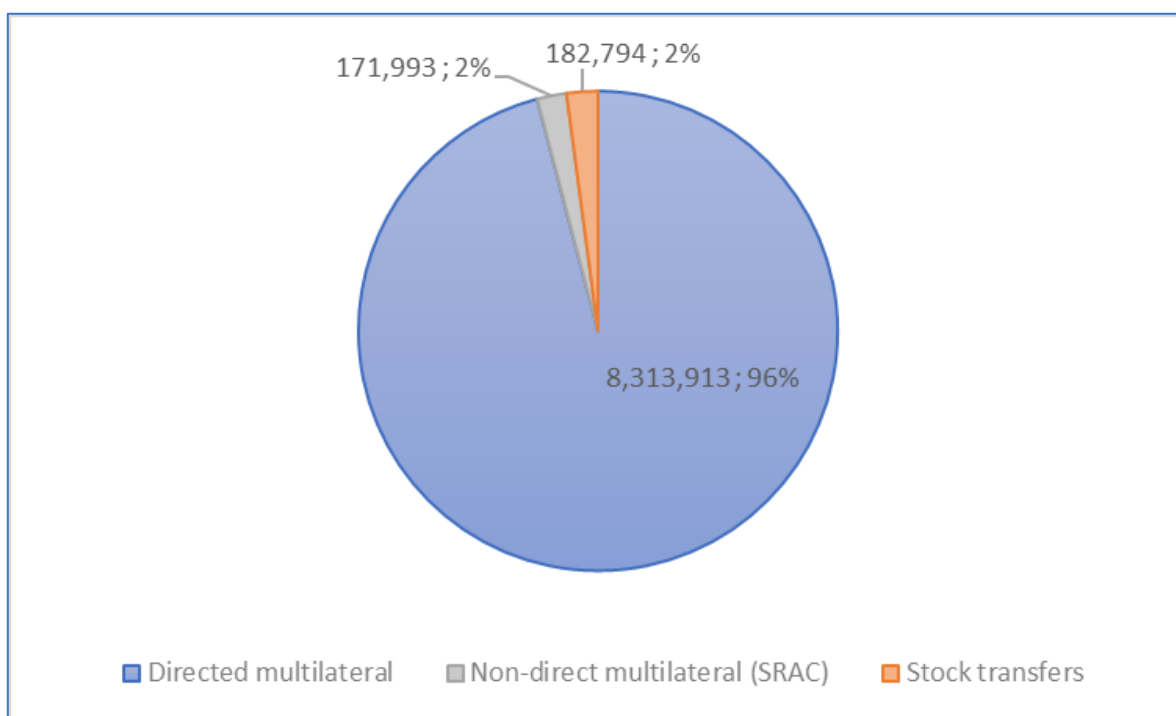
**Note** that there are some discrepancies between the standard project report and WINGS data in Table 21 and Table 22 above.

**Figure 17. Country strategic plan funding (USD)**



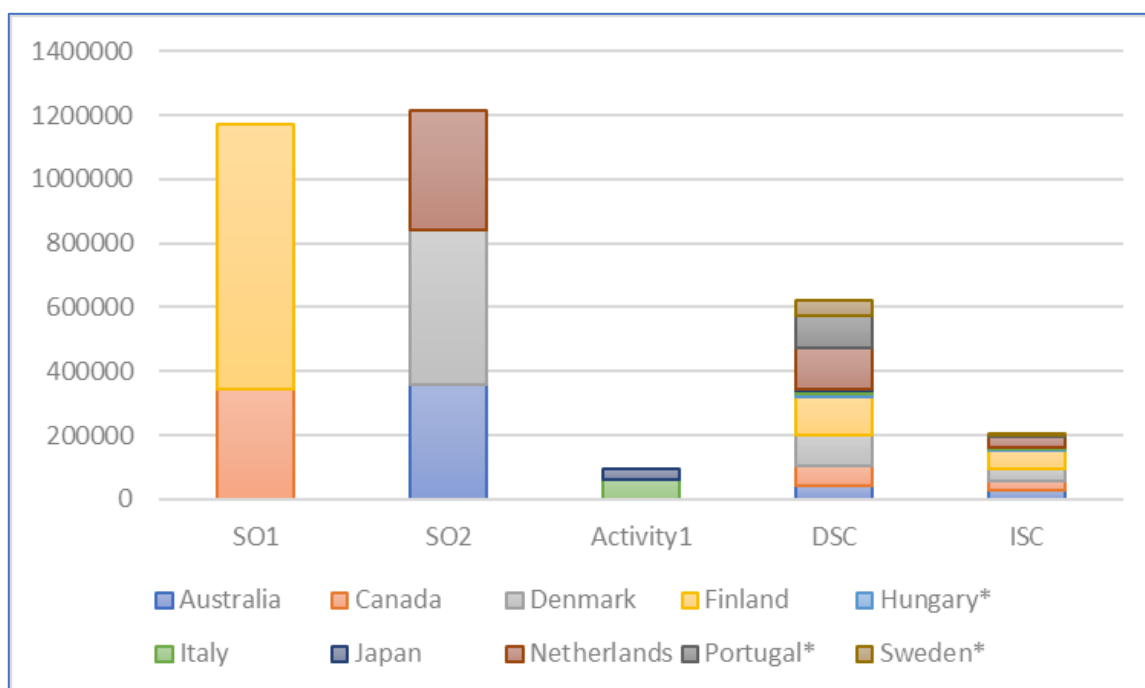
Source: WINGS; WFP, 2019. Timor-Leste Annual Country Report 2018. WFP Country Strategic Plan (2018–2020). Dili: WFP

**Figure 18. DEV 200770: Breakdown of funding (USD)**



Source: WINGS

**Figure 19. Earmarking of non-direct multilateral Strategic Resource Allocation Committee contributions to Timor-Leste country strategic plan per donor and cost category (USD)**

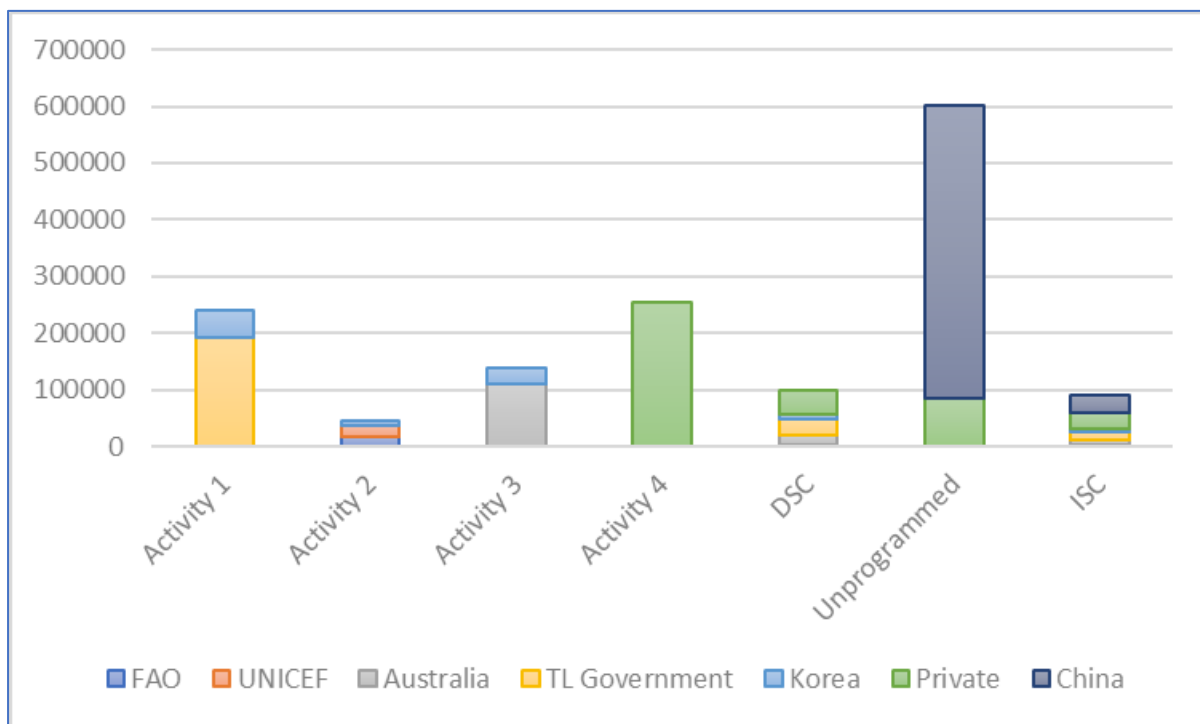


Source: Country portfolio budget financial management resourcing

5. Only three countries (Hungary, Portugal and Sweden) provide fully flexible funding. Contributions from these countries only appear in the column in Figure 19 representing the direct support costs. Both direct support costs and indirect support costs apply to all grants. Direct support costs cover local general costs related to the implementation of WFP activities. Indirect support costs have a fixed recovery rate of 6.5

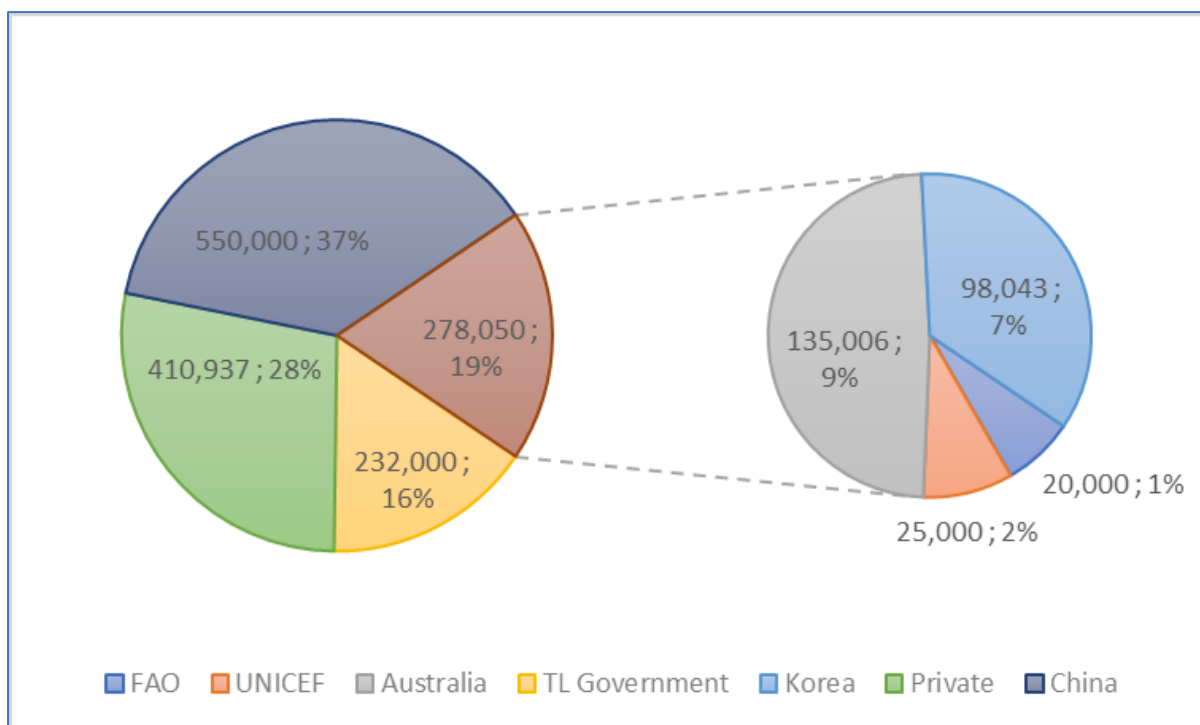
percent and are transferred to headquarters. When it comes to other sources, recoveries are fully flexible, while resource transfers remain linked to the previous activity and are earmarked.

**Figure 20. Earmarking of direct multilateral contributions to Timor-Leste country strategic plan per activity and cost category (USD)**



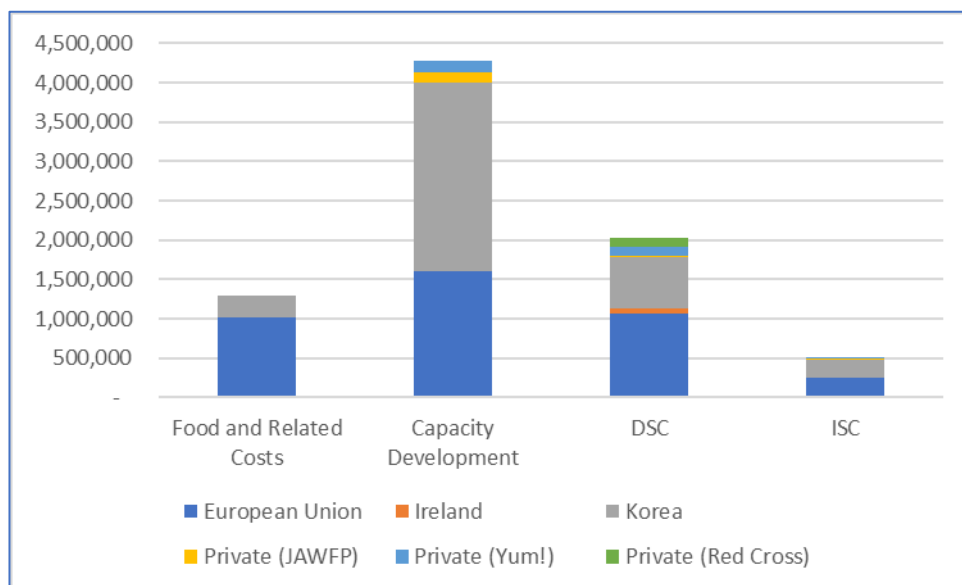
Source: Country portfolio budget financial management resourcing

**Figure 21. Direct multilateral contributions to Timor-Leste country strategic plan by source (USD)**



Source: Country portfolio budget financial management resourcing

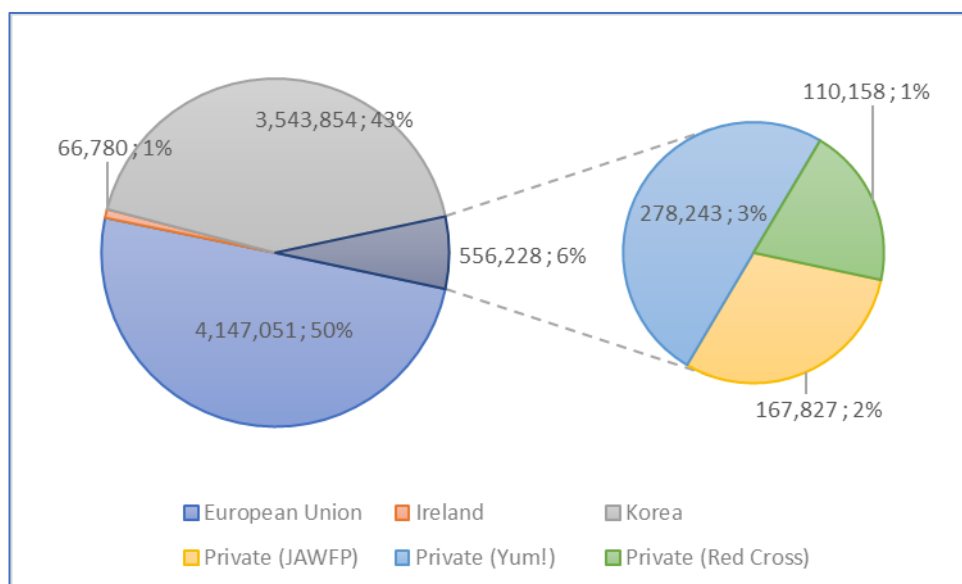
**Figure 22. DEV 200770: earmarking of direct multilateral contributions by donor and cost category (USD)**



Source: WFP, 2018. Capacity development for health and nutrition. Standard Project Report 2018. Dili: WFP

6. Levels of earmarking are not fully comparable between the development operation and the country strategic plan, due to the changes in the budget and activity structure. As shown in the figure, development operation funds were earmarked for food and other related costs or capacity development. The latter category received 53 percent of all the budget, including direct support costs and indirect support costs. Out of all donors to the development operation project, only Ireland and the Red Cross provided fully flexible funding (reflected in column DSC only). All IR-EMOP funding was essentially earmarked (being provided by UN-CERF).

**Figure 23. DEV 200770: direct contributions by source, USD**



Source: WINGS; WFP, 2018. Capacity development for health and nutrition. Standard Project Report 2018. Dili: WFP

# Annex VIII. WFP Timor-Leste Human Resources

1. Annual data in this annex are from the annual staffing reports provided by the country office. Data are as of 31 December, with the exception of 2019, where data are as of October 2019.

**Table 23. WFP Timor-Leste staff numbers**

Group	2015	2016	2017	2018	2019
<b>Fixed term</b>	<b>10</b>	<b>11</b>	<b>10</b>	<b>11</b>	<b>11</b>
Fixed term int.	3	3	3	2	1
Fixed term local	7	8	7	9	10
Fixed term women	4	3	3	3	3
Fixed term men	6	8	7	8	8
<b>Short term</b>	<b>33</b>	<b>39</b>	<b>34</b>	<b>29</b>	<b>23</b>
Short term int.	6	5	4	6	5
Short term local	27	34	30	23	18
Short term women	8	10	8	10	9
Short term men	25	29	26	19	14
<b>Dili</b>	<b>35</b>	<b>38</b>	<b>33</b>	<b>33</b>	<b>30</b>
<b>Field</b>	<b>8</b>	<b>12</b>	<b>11</b>	<b>7</b>	<b>4</b>
<b>Men, total</b>	<b>31</b>	<b>37</b>	<b>33</b>	<b>27</b>	<b>22</b>
<b>Women, total</b>	<b>12</b>	<b>13</b>	<b>11</b>	<b>13</b>	<b>12</b>
<b>Total staff</b>	<b>43</b>	<b>50</b>	<b>44</b>	<b>40</b>	<b>34</b>

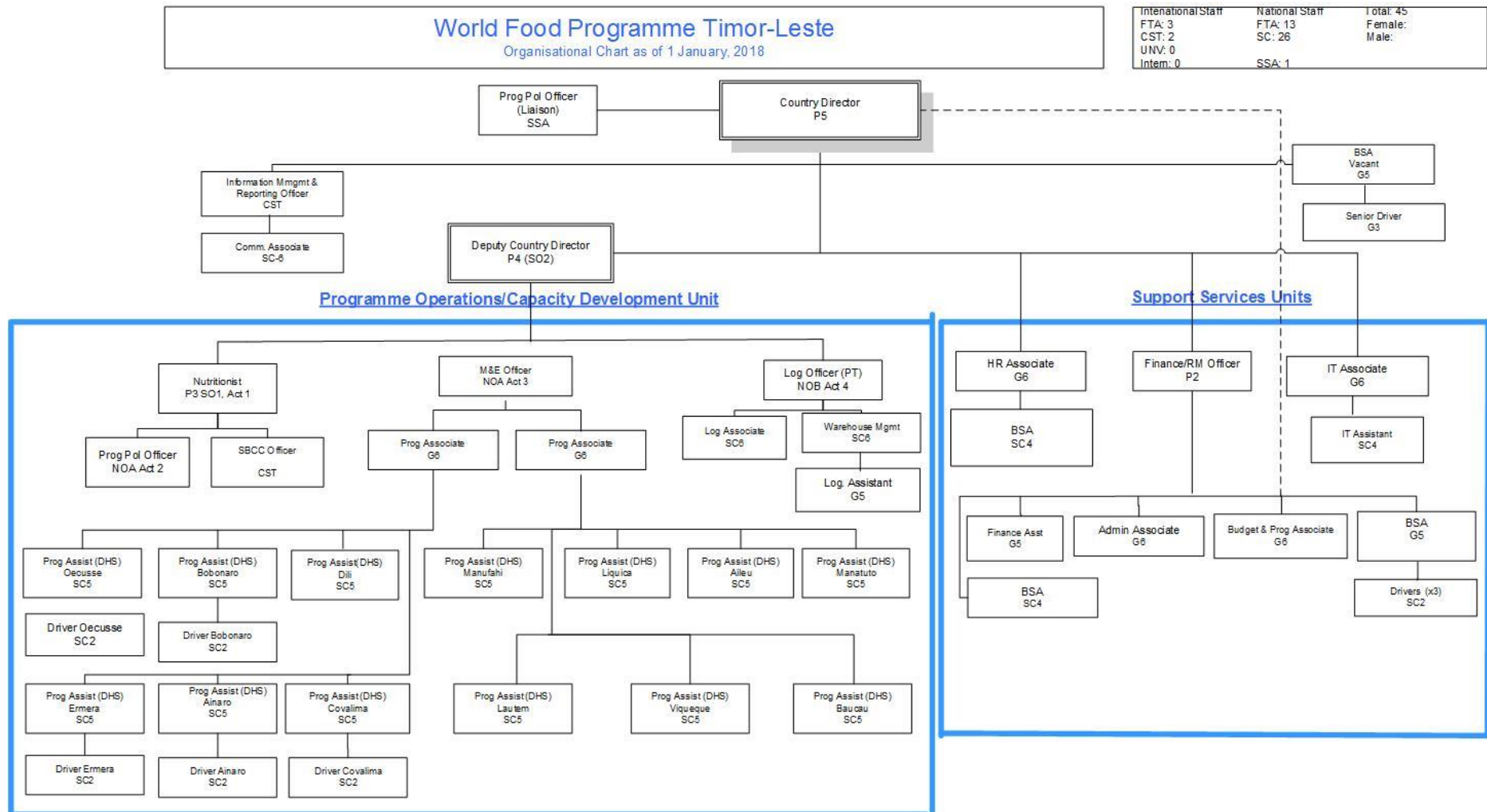
Source: WFP Timor-Leste country office

**Table 24. WFP Timor-Leste staff by function**

Function (functional areas)	2015	2016	2017	2018	2019
<b>Administration (administration, business support, finance, human resources, information management and reporting, information technologies, procurement and resource management)</b>					
Women	7	8	8	7	7
Men	14	16	15	12	9
<b>Sub-total</b>	<b>21</b>	<b>24</b>	<b>23</b>	<b>19</b>	<b>16</b>
<b>Professional (programme and policy, communication, evaluation, field operations management, logistics and nutrition)</b>					
Women	4	4	3	4	1
Men	17	20	17	14	13
<b>Sub-total</b>	<b>21</b>	<b>24</b>	<b>20</b>	<b>18</b>	<b>14</b>
<b>Volunteers and interns</b>					
Women	1	1		2	4
Men		1	1	1	
<b>Sub-total</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>3</b>	<b>4</b>
<b>Total</b>	<b>43</b>	<b>50</b>	<b>44</b>	<b>40</b>	<b>34</b>

Source: WFP Timor-Leste country office

Figure 24. WFP Timor-Leste: proposed organigram for country strategic plan implementation, following 2017 workforce planning exercise



Source: WFP Timor-Leste country office

# Annex IX. Operations Preceding the Country Strategic Plan

1. This annex summarizes the design and implementation of the two operations that WFP undertook in Timor-Leste during the review period, before the start of the country strategic plan in 2018.

## DEV 200770

2. **Preceding the country strategic plan, the development operation was designed with a strong capacity-strengthening component.** Its main objective was to build the capacity of the Ministry of Health with a view to the future handover of the TSFP managed by WFP. The design document for DEV 200770 noted that Timor-Leste was not on track to achieve “the Millennium Development Goal (MDG) 1 goal: Eradicate Extreme Poverty and Hunger target of 31 percent by 2015”.<sup>65</sup> Without presenting a detailed rationale, it stated that, given the high prevalence of under nutrition in Timor-Leste, there was a strong case for WFP to continue its operations in the country; and that the hunger challenge would be best tackled “through building the capacity of existing Government structures with a view to operating a sustainable Government led nutrition programme”.<sup>66</sup> The design document did not state any assumptions but did note, under a section on risks, that “the project relies on the capacity and ownership by the Ministry of Health”.<sup>67</sup>

3. **The key implicit, unstated assumption in the development operation design approach was that the Government of Timor-Leste provided a stable, receptive platform on which to build adequate capacity for this purpose in the medium, if not the short term;** and that an autonomous, competent, adequately capacitated government food and nutrition security system was therefore a realistic prospect. Consequently, it was deemed appropriate to focus on capacity strengthening, while continuing direct engagement in TSFP on an interim basis. While it was not expected that the Government would have achieved full capacity in the food and nutrition sector by 2017, the intervention logic was that significant progress could be achieved in this regard over the period of the operation, grounded in strong ownership and engagement by the national authorities – in particular, the Ministry of Health. Three years before the launch of the country strategic plan, WFP was thus already committed to a focus on capacity strengthening and a withdrawal from direct implementation.

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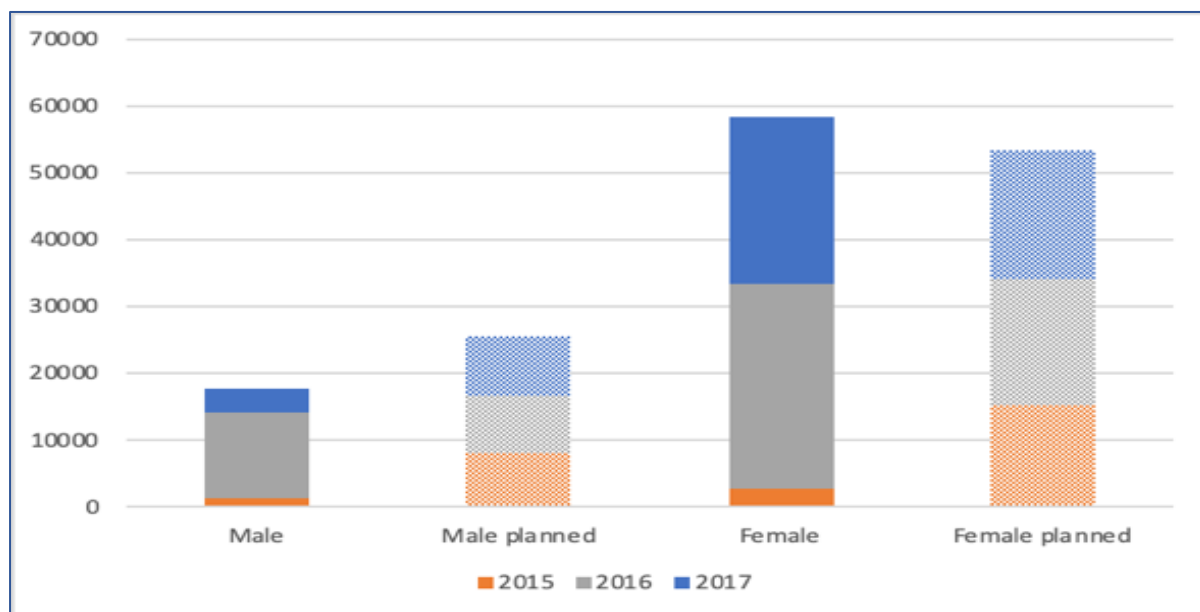
<sup>65</sup> WFP, 2015. Timor-Leste development project number 200770. Capacity development for health and nutrition. Rome: WFP, pp. 4–5.

<sup>66</sup> Ibid, p. 7.

<sup>67</sup> Ibid, pp. 12–13.



Figure 25. DEV 200770: beneficiaries, planned versus actual, stacked by year



Source: WFP, 2016. Moderate Acute Malnutrition in Drought-Affected Areas. Standard Project Report 2016. Dili; WFP, 2017. TL01" line of sight" 5.06.2017. Dili; WFP, 2017. Moderate Acute Malnutrition in Drought-Affected Areas. Standard Project Report 2017. Dili.

4. **The DEV 200770 design document presents a gender analysis that is gender-specific, but does not touch on gender transformation.** (For WFP, "gender-transformative food assistance involves designing and implementing policies and programmes that recognize the importance of gender equality and women's empowerment in achieving positive development outcomes and promoting universal human rights".<sup>68</sup> The situation analysis in the development operation design document presents sex- and age-disaggregated data that provide information on the nutritional status of the population, explaining that stunting and wasting are higher among boys than among girls while both underweight (BMI <18.5) and overweight (BMI >25) are higher among women than men.<sup>69</sup> The gender analysis also provides statistics on gender-specific health issues such as maternal mortality and family planning, as well as cultural taboos whereby men are privileged in intra-household food consumption. However, the context section does not provide a gender-transformative analysis that discusses women's access to and control over productive assets, and linkages between women's income and their nutritional status. The development operation design for treatment of moderate acute malnutrition targets a higher number of boys aged 6–59 months (18,500 boys versus 17,500 girls) and seeks to address cultural taboos associated with food consumption through community-based advocacy messages. It also explains that issues of sexual and gender-based violence are to be integrated into community messages.<sup>70</sup>

5. **The development operation project comprised two main activities. The first, technical assistance for capacity strengthening,** mainly targeted the Ministry of Health, as the ministry responsible for the TSFP. WFP provided training to the ministry at central and decentralized levels (municipalities). Health staff, government officials and community members participated in training and learning events on various topics including nutrition, on-the-job orientations, monitoring and evaluation, and the use of SBCC. As part of the programme, WFP field staff carried out monthly monitoring visits to targeted health facilities. WFP also supported Timor-Leste's Medical and Pharmaceutical Supply Agency (SAMES) with the aim of increasing the efficiency of national supply chain management for medical supplies, consumables and nutrition supplies.

<sup>68</sup> WFP, 2015. WFP Gender Policy (2015–2020). Rome: WFP, p. 6.

<sup>69</sup> WFP, 2015. Timor-Leste development project number 200770. Capacity development for health and nutrition. Rome: WFP,

pp. 3–4.

<sup>70</sup> Ibid, p. 12.

WFP supported the roll-out of mSupply, a stock management software, across the country. The capacity-strengthening component of the development operation project absorbed 76 percent of the project's total direct operational costs.<sup>71</sup>

6. **The second main development operation component, TSFP activities for the treatment of moderate acute malnutrition**, targeted 6 of the 13 municipalities of Timor-Leste (Ainaro, Bobonaro, Covalima, Dili, Ermera and Oecusse). These districts were prioritized because they registered the highest levels of stunting and wasting in the 2013 National Food and Nutrition Survey. TSFP targeted children aged 6–59 months and pregnant and lactating women. In addition to TSFP, the project included an SBCC component. Cooking demonstrations using the locally produced Timor Vita were organized to explain to pregnant and lactating women the nutritional properties of the supplementary food and how to prepare it. There were 72 such demonstrations in 2017.<sup>72</sup> The sessions also promoted the use of locally available nutrient-rich foods to enhance the nutrient intake of family members. WFP installed televisions in community health centres in four municipalities (Bobonaro, Dili, Ermera and Oecusse), showing clips to promote good health and nutrition practices. It also worked in partnership with other organizations. In Ermera municipality, WFP collaborated with *Liga Inan*, a programme that provides health services via SMS messaging to pregnant and lactating women by sharing key messages on nutrition and the importance of visiting health facilities to assess their nutritional status. The Ministry of Health and WFP also cooperated with the Alola Foundation (Dili and Oecusse) and World Vision International (Covalima). These organizations established parent support groups to promote proper infant feeding practices, hygiene and nutrition. The moderate acute malnutrition component of the development operation project absorbed 24 percent of the project's total direct operational costs.<sup>73</sup> The total number of beneficiaries of moderate acute malnutrition treatment targeted by this activity was 78,580 (63 percent children 6–59 months and 37 percent pregnant and lactating women). Over the three years, the activity reached a total of 59,600 beneficiaries, mainly as a result of a much lower than expected coverage in the first year (18 percent of the annual target).

7. **Funding levels for the development operation project stood at 61 percent of needs** (see Table 2). Main funders included the European Commission (USD 4.1m), Korea (USD 3.5m) and private donors (USD 556,000; see Annex VII). Out of the total funds received, the large majority was earmarked (USD 8m or 96 percent of total resources). Non-earmarked funding was restricted to a USD 171,000 contribution from WFP headquarters.

8. **In terms of outputs, the development operation reached all the health facilities it intended** (88 percent of the functioning health facilities in the six municipalities.<sup>74</sup> But the nutrition messaging (SBCC) only reached 12,299 of the 27,790 planned beneficiaries (44.3 percent) (Figure 25 and Table 31, Annex XI). Similarly, WFP only conducted 50 percent of the planned 144 cooking demonstrations. In terms of contribution to outcomes, the project underperformed against some key indicators. Coverage (proportion of eligible population who participate in a programme) was significantly below the expected 50 percent (Table 32, Annex XI), especially among children. This was explained by pipeline breaks and shortage of food, in the absence of which it was difficult to attract beneficiaries to health facilities.<sup>75</sup> The project was also unable to achieve target moderate acute malnutrition treatment recovery rates (Table 32, Annex XI). This was explained by “irregular screenings, insufficient time dedicated to counsel patients properly, insufficient monitoring and supervision of health staff, systematic sharing of supplementary foods by beneficiaries at home, and irregular follow-up of the beneficiaries”.<sup>76</sup>

9. **The development operation underwent a decentralized evaluation in 2018**, after the design of the country strategic plan.<sup>77</sup> The evaluation pointed to significant levels of underperformance, associated partly with funding shortfalls and partly with operational shortcomings, compounded by weak beneficiary

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<sup>71</sup> WFP, 2018. Capacity development for health and nutrition. Standard project report 2018. Dili: WFP.

<sup>72</sup> WFP, 2018. End-Term Evaluation of Treatment of Moderate Acute Malnutrition in Timor-Leste (2015-2017) evaluation report. Decentralized evaluation. Dili: WFP, p. 30.

<sup>73</sup> WFP, 2018. Capacity development for health and nutrition. Standard project report 2018. Dili: WFP.

<sup>74</sup> WFP, 2018. End-Term Evaluation of Treatment of Moderate Acute Malnutrition in Timor-Leste (2015-2017) evaluation report. Decentralized evaluation. Dili: WFP, p. 21.

<sup>75</sup> Kouam et al., 2018. End-Term Evaluation of Treatment of Moderate Acute Malnutrition in Timor-Leste (2015-2017) evaluation report. Decentralized evaluation. Dili: WFP.

<sup>76</sup> Ibid.

<sup>77</sup> Ibid.

tracking that distorted monitoring data.<sup>78</sup> It made the following recommendations for future WFP programmes in Timor-Leste.

- a. Revise the programme design in collaboration with UNICEF to improve coverage and ensure continuum of care between severe acute malnutrition and moderate acute malnutrition interventions. (As noted, there was no formal opportunity for this, given the timing of the evaluation and of country strategic plan design.)
- b. Strengthen the capacity of the country in the following areas: (a) Ministry of Health for appropriate treatment, follow up and prevention of moderate acute malnutrition; (b) national health information system for accuracy of data and real time monitoring; (c) government supply chain and logistics system for timely delivery of supplies in the health facilities. (The country strategic plan includes efforts in all these areas.)
- c. Strengthen linkages and referral of TSFP beneficiaries to existing nutrition-sensitive and safety net interventions delivered in the community to empower households and enhance prevention. (Limited efforts were possible in this regard.)
- d. Conduct operational research to assess the: (a) cost-effectiveness of counselling versus supplementary foods for addressing moderate acute malnutrition in children and acutely malnourished pregnant and lactating women; (b) cost per recovered moderate acute malnutrition child or acutely malnourished pregnant or lactating woman using ready-to-use supplementary food (RUSF) or Timor Vita versus other types of super cereals; (c) relevance of using Sphere standards (designed for emergency response) to assess the performance of TSFP implemented in a more stable context like Timor-Leste; and (d) in-depth assessment of the 2016 Demographic and Health Survey database for better understanding of nutrition outcomes of the survey. (These studies have not been done.)
- e. Develop a detailed gender equality and empowerment approach in the next country strategic plan, including relevant indicators. (Again, the timing did not allow for this.)

10. **During the development operation, moderate acute malnutrition treatments effectively reached boys and girls as well as pregnant and lactating women.** The development operation evaluation's community-level informants said that support to women's support groups and gender-sensitive nutrition messages contributed to increased support by fathers for mothers during pregnancy and lactation. Even though the development operation targeted more boys than girls through moderate acute malnutrition treatments (17,500 for boys versus 16,500 for girls), slightly more girls (52 percent) were reached compared to boys (48 percent). Recovery rates among these two groups were not statistically different. Local informants said that cooking demonstrations improved women's ability to cook nutritious foods.<sup>79</sup> Men were actively engaged in women's support groups and in awareness-raising activities. Women consulted during the development operation evaluation confirmed that support from their husband (for example, to purchase food, collect firewood and water and to take care of children) increased following the intervention. However, support normally decreased after pregnancy and lactation. Although nutrition items provided by the programme were only meant for pregnant and lactating women, the evaluation found that these became a source of food for the household. Additionally, the evaluation found that TSFP interventions were not linked to other nutrition-specific and -sensitive interventions that could contribute to women's empowerment and improve their overall nutrition status. The evaluation made a recommendation for the country strategic plan to address issues of women's empowerment further.<sup>80</sup>

#### **IR-EMOP 201017**

11. **During implementation of DEV 200770, a key external event was the El Niño occurrence in late 2015.** This led to a severe drought in Timor-Leste, resulting in livestock deaths and an estimated 25 percent reduction in locally grown food.<sup>81</sup> To prevent malnutrition among children, the IR-EMOP provided blanket

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<sup>78</sup>Ibid. p vii.

<sup>79</sup> Ibid, p. 34.

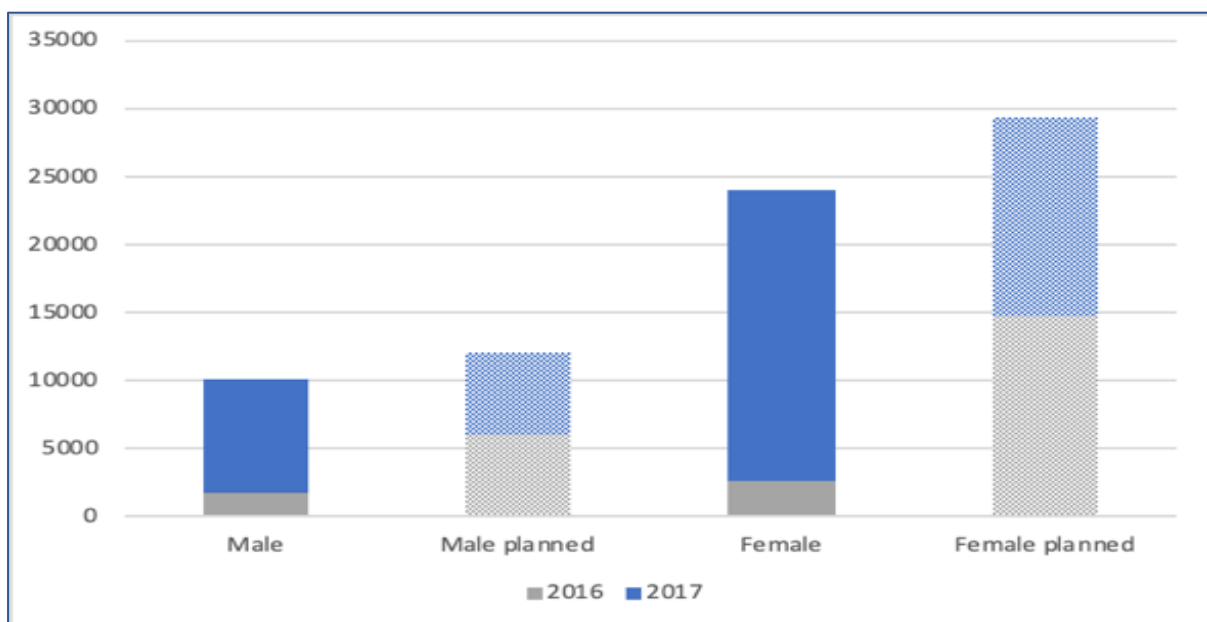
<sup>80</sup> Ibid, p. 49.

<sup>81</sup> WFP, 2016. Immediate Response Emergency Operation: Timor-Leste, EMOP ref. 201017: Prevention of moderate acute malnutrition in children 6 to 23 months and pregnant and lactating women. Project document. Rome: WFP, p. 1.

feeding in the form of RUSF for children aged 6–23 months and Timor Vita to pregnant and lactating women. It focused on three municipalities not targeted by moderate acute malnutrition treatment efforts under the development operation project. The budget for the IR-EMOP, of USD 847,040, was fully funded (Table 2). The project was originally approved for a period of three months (September to November 2016), but was extended with no budget implications for a further 1.5 months (until 14 January 2017).

12. **The IR-EMOP had a target of 33,968 beneficiaries** (Figure 26). Out of that total, the project reached 23,907 women (2,659 in 2016 and 21,248 in 2017) and 10,061 men (1,729 in 2016 and 8,332 in 2017; figures from different years may double count some beneficiaries). Although performance in the final month of implementation (January 2017) improved significantly compared to deliveries in 2016, the project failed to reach its beneficiary targets (Figure 26). The operation distributed a total of 101 mt of food. This represents 56.4 percent of the expected figure of 179 mt. The under-performance is explained by pipeline breaks in the supply of Timor Vita for pregnant and lactating women and slow delivery of imported RUSF, which did not arrive until December 2016.<sup>82</sup> Overall, the IR-EMOP distributed less food, and reached fewer people, than planned.

**Figure 26. IR-EMOP 201017: beneficiaries, planned versus actual, stacked by year**



Source: WFP, 2017. Immediate Response Emergency Operation: Timor-Leste, EMOP ref. 201017: Prevention of moderate acute malnutrition in children 6 to 23 months and pregnant and lactating women. Standard Project Report 2016. Dili; WFP, 2017. Immediate Response Emergency Operation: Timor-Leste, EMOP ref. 201017: Prevention of moderate acute malnutrition in children 6 to 23 months and pregnant and lactating women. Standard Project Report 2017. Dili.

<sup>82</sup> WFP, 2016. Immediate Response Emergency Operation: Timor-Leste, EMOP ref. 201017: Prevention of moderate acute malnutrition in children 6 to 23 months and pregnant and lactating women. Standard Project Report 2016. Dili: WFP, p. 10.

# Annex X. WFP Timor-Leste, 2015–2019: Analysis of Performance Indicators

1. An early step in the country strategic plan evaluation data-collection process was to determine what formal monitoring indicators have been used (or are in use) for the operation(s) under review, and to assess their availability and consistency.

2. This annex is based on analysis of the reporting data for each of the WFP operations covered by the evaluation. In addition, the team has reviewed the original and revised country strategic plan logical frameworks. In general, the analysis shows that there is very little consistency over time, making it difficult to assess trends over the evaluation period. A detailed analysis per indicator level is provided below. Supporting data are shown in Table 26–Table 29. For each individual operation, the data show the availability of each per year.

3. The IR-EMOP project only monitored beneficiaries and the amount of food purchased and distributed.

## Outcome level:

4. Only five outcome indicators used and reported on in the country strategic plan were used in the development operation. For these indicators, it is possible to generate some longer-term data. The five indicators are:

- Moderate acute malnutrition treatment default rate
- Moderate acute malnutrition treatment mortality rate
- Moderate acute malnutrition treatment non-response rate
- Moderate acute malnutrition treatment recovery rate
- Proportion of eligible population that participates in programme (coverage).

5. There were nine outcome indicators in the original country strategic plan logical framework. The country office only reported on five of these (the ones listed above). The updated country strategic plan logical framework (approved in May 2019) drops one of the nine original indicators and includes three new ones on capacity strengthening from the (now approved) Corporate Results Framework.

## Output level:

6. Only one indicator used in the development operation has been carried over to the country strategic plan monitoring framework. This indicator is the only one that can be monitored across the evaluation period (2015–2019):

- Number of people exposed to WFP-supported nutrition messaging.

7. Under the country strategic plan, there are significant differences between the original and the current, revised logical frameworks. As illustrated in Table 25, the revised logical framework has included three additional indicators (C4–C6). The three additional indicators report on the basis of four sub-indicators. Only one of these four sub-indicators is new. Indicators in the revised logical framework are drawn from the revised Corporate Results Framework.

8. Comparing data reported against the two different logical frameworks is not straightforward. Data reported against the new logical framework should be more granular (additional breakdown through indicators C4–C6). However, the draft Annual Country Report 2019<sup>83</sup> only contains data for the three new indicators and not for indicators C1–C3. It is thus not clear how data should be reconciled.

## Cross-cutting indicators

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<sup>83</sup> WFP, 2020. Timor-Leste Annual Country Report 2019. Country Strategic Plan (2018–2020). Dili: WFP.

9. Only one indicator used in the development operation has been used in the country strategic plan, although the logical framework revision performed in 2019 reintroduced a similar one (see Table 25 below). This indicator is:

- Proportion of assisted people informed about the programme.

10. In 2018, the country office only reported on two of the three indicators in the original logical framework.

11. The updated logical framework for the country strategic plan includes six additional cross-cutting indicators.

**Table 25. Sample comparison of country strategic plan output indicators: new and revised logical frameworks, including matches**

Activity 3: Provide technical expertise for improved targeting, monitoring and programme analysis to the Government and its partners		
2019 data reporting structure <sup>84</sup>		2018 data reporting structure <sup>85</sup>
<b>C.1</b>	<b>Number of people trained</b>	<b>Number of people trained</b>
	Number of government/national partner staff receiving technical assistance and training	Number of government/national partner staff receiving technical assistance and training
	Number of government counterparts trained in use of data-collection tablets	Number of government counterparts trained in use of data-collection tablets
<b>C.2</b>	<b>Number of capacity development activities provided</b>	<b>Number of capacity development activities provided</b>
	Number of training sessions/workshops organized	Number of training sessions/workshop organized
<b>C.3</b>	<b>Number of technical support activities provided</b>	<b>Number of technical support activities provided</b>
	Number of technical assistance activities provided	Number of technical assistance activities provided
<b>C.4</b>	<b>Number of people engaged in capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)</b>	
	Number of government/national partner staff receiving technical assistance and training	
<b>C.5</b>	<b>Number of capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)</b>	
	Number of technical assistance activities provided	
	Number of training sessions /workshops organized	
<b>C.6</b>	<b>Number of tools or products developed or revised to enhance national food security and nutrition systems as a result of WFP capacity-strengthening support (new)</b>	
	Number of tools or products developed	

Source: WFP, 2019. Timor-Leste Annual Country Report 2018. Country Strategic Plan (2018–2020). Dili; WFP, 2020. Timor-Leste Annual Country Report 2019. Country Strategic Plan (2018–2020). Dili

### Beneficiaries and food

13. This is the only area for which IR-EMOP data are available. Data for the IR-EMOP and development operations are sometimes combined in country office reports.

14. This is the most consistent area of reporting, with two indicators available for all three projects. These are:

<sup>84</sup> WFP, 2020. Timor-Leste Annual Country Report 2019. Country Strategic Plan (2018–2020). Dili: WFP.

<sup>85</sup> WFP, 2019. Timor-Leste Annual Country Report 2018. Country Strategic Plan (2018–2020). Dili: WFP.

- Beneficiaries
- Food distribution.

15. Both the development operation and the IR-EMOP include one additional indicator on food purchased.



**Table 26. WFP Timor-Leste: outcome indicators by operation, 2015–2019**

Project	Indicator	CSP original log frame?	CSP revised log frame?	Strategic outcome	2015	2016	2017	2018	2019	
CSP TL01	MAM treatment default rate	Yes	Yes	SO1: Children under five, pregnant and lactating women, and adolescent girls in Timor-Leste have improved nutrition towards national targets by 2025				Yes	Yes	
	MAM treatment mortality rate	Yes	Yes					Yes	Yes	
	MAM treatment non-response rate	Yes	Yes					Yes	Yes	
	MAM treatment recovery rate	Yes	Yes					Yes	Yes	
	Minimum dietary diversity – Women	Yes	Yes							
	Proportion of children 6–23 months of age who receive a minimum acceptable diet	Yes	Yes							
	Proportion of eligible population that participates in programme (coverage)	Yes	Yes						Yes	Yes
	Proportion of target population that participates in an adequate number of distributions (adherence)	Yes	Yes							
	Zero Hunger Capacity Scorecard	Yes	No	SO2: National and subnational government institutions have increased capacity to sustainably deliver food, nutrition and supply chain related services by 2025						
	Number of national food security and nutrition policies, programmes and system components enhanced as a result of WFP capacity strengthening	No	Yes							Yes
	Number of national programmes enhanced as a result of WFP-facilitated South–South and triangular cooperation support	No	Yes							Yes
	SABER School Feeding National Capacity	No	Yes							
DEV 200770	MAM treatment default rate			SO4 Reduce undernutrition and break the intergenerational cycle of hunger	Yes	Yes	Yes			
	MAM treatment mortality rate				Yes	Yes	Yes			
	MAM treatment non-response rate				Yes	Yes	Yes			
	MAM treatment recovery rate				Yes	Yes	Yes			
	Proportion of eligible population that participates in programme (coverage)				Yes	Yes	Yes			
	Fortified foods purchased from regional, national and local suppliers as % of fortified food distributed by WFP in country				Yes	Yes	Yes			

**Table 27. WFP Timor-Leste: output indicators by operation, 2015–2019**

Project/ CSP	Indicator	CSP original log frame?	CSP revised log frame?	Strategic outcome	Activity	2015	2016	2017	2018	2019	Comments		
CSP	[Indicator on receipt of deworming treatment now excluded: see note below table.]			SO1: Children under five, pregnant and lactating women, and adolescent girls in Timor-Leste have improved nutrition towards national targets by 2025	Act 01. Provide nutritious food and raise awareness through SBCC to targeted individuals								
	Quantity of fortified food provided	Not detailed	Yes							Yes	Yes		
	Quantity of specialized nutritious foods provided	Not detailed	Yes								Yes	Yes	
	Number of institutional sites assisted	No	Yes									Yes	
	Number of rations provided	No	Yes									Yes	
	Number of targeted caregivers (male and female) receiving three key messages delivered through WFP-supported messaging and counselling	No	Yes										
	Number of people exposed to WFP-supported nutrition messaging	Not detailed	Yes								Yes		
	Number of people reached through interpersonal SBCC approaches	No	Yes									Yes	
	Number of people reached through SBCC approaches using media	No	Yes									Yes	
CSP	Number of training sessions/workshops organized	Not detailed	As sub-indicator	SO1: Children under five, pregnant and lactating women, and adolescent girls in Timor-Leste have improved nutrition towards	Act 02. Provide technical assistance and evidence, for enhancing efficiency of national programmes and safety nets, to				Yes				
	Number of counterparts trained in capacity development on MCHN and nutrition activities	Not detailed	As sub-indicator							Yes			
	Number of technical assistance activities provided	Not detailed	As sub-indicator							Yes			
	Number of people trained	No	Yes										Equivalent
	Number of capacity development activities provided	No	Yes										Equivalent
	Number of technical support activities provided	No	Yes										Equivalent

Project/ CSP	Indicator	CSP original log frame?	CSP revised log frame?	Strategic outcome	Activity	2015	2016	2017	2018	2019	Comments		
CSP	Number of people engaged in capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities	No	Yes	national targets by 2025	Government and partners					Yes	Equivalent		
	Number of capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities	No	Yes								Yes	Equivalent	
	Number of tools or products developed or revised to enhance national food security and nutrition systems as a result of WFP capacity-strengthening support	No	Yes								Yes		
	Number of training sessions/workshop organized	Not detailed	As sub-indicator	SO2: National and subnational Government of Timor-Leste institutions have increased capacity to sustainably deliver food, nutrition and supply chain related services by 2025	Act 03. Provide technical expertise for improved targeting, monitoring and programme analysis to Government and partners				Yes				
	Number of Government of Timor-Leste counterparts trained in use of data-collection tablets	Not detailed	As sub-indicator							Yes			
	Number of government/national partner staff receiving technical assistance and training	Not detailed	As sub-indicator							Yes			
	Number of technical assistance activities provided	Not detailed	As sub-indicator							Yes			
	Number of people trained	No	Yes										Equivalent
	Number of capacity development activities provided	No	Yes										Equivalent
	Number of technical support activities provided	No	Yes										Equivalent
Number of people engaged in capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities	No	Yes									Yes	Equivalent	
Number of capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities	No	Yes									Yes	Equivalent	
CSP													

Project/ CSP	Indicator	CSP original log frame?	CSP revised log frame?	Strategic outcome	Activity	2015	2016	2017	2018	2019	Comments		
CSP	Number of tools or products developed or revised to enhance national food security and nutrition systems as a result of WFP capacity-strengthening support	No	Yes	SO2: National and subnational Government of Timor-Leste institutions have increased capacity to sustainably deliver food, nutrition and supply chain related services by 2025	Act 04. Provide technical expertise for the development of an efficient and effective supply chain management system to Government					Yes			
	Number of training sessions/workshop organized	Not detailed	As sub-indicator							Yes			
	Number of government/national partner staff receiving technical assistance and training	Not detailed	As sub-indicator							Yes			
	Number of technical assistance activities provided	Not detailed	As sub-indicator							Yes			
	Number of people trained	No	Yes									Equivalent	
	Number of capacity development activities provided	No	Yes									Equivalent	
	Number of technical support activities provided	No	Yes									Equivalent	
	Number of people engaged in capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities	No	Yes									Yes	Equivalent
	Number of capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities	No	Yes									Yes	Equivalent
	Number of tools or products developed or revised to enhance national food security and nutrition systems as a result of WFP capacity-strengthening support	No	Yes									Yes	
	Number of government/national partner staff receiving technical assistance and training			SO4: Capacity Development –		Yes	Yes						
	Number of national programmes developed with WFP support (nutrition)					Yes	Yes						
	Number of national response plans developed with WFP support					Yes	No						

Project/ CSP	Indicator	CSP original log frame?	CSP revised log frame?	Strategic outcome	Activity	2015	2016	2017	2018	2019	Comments
DEV 200770	Quantity of fortified foods, complementary foods and special nutrition products purchased from local suppliers			Strengthening National Capacities and Nutrition: Treatment of Moderate Acute Malnutrition		Yes	Yes				
	Number of community groups developed to share nutrition messages					Yes	Yes				
DEV 200770	Number of instances in which nutrition and health messages were provided					Yes	Yes				
	Number of people receiving nutrition counselling supported by WFP					Yes	Yes				
	Number of targeted caregivers (male and female) receiving 3 key messages delivered through WFP supported messaging and counselling					Yes	Yes				
	Number of health centres/sites assisted					Yes	Yes	Yes			
	Number of cooking demonstrations undertaken for fortified foods, complementary foods and special nutritional products					Yes	Yes	Yes			
	Number of people exposed to nutrition messaging supported by WFP					Yes	Yes	Yes			

An output indicator that the country office has used in reporting to date concerned the provision of deworming treatment. This indicator was used because the WFP COMET system did not offer an indicator to show distribution of TSFP rations before a last batch of 35 metric tons was handed over to the Ministry of Health. This caused confusion. The country office has dropped this indicator, and this report does not include it.

**Table 28. WFP Timor-Leste: cross-cutting indicators by operation, 2015–2019**

Project/ CSP	Indicator	CSP original log frame?	CSP revised log frame?	Domain	2015	2016	2017	2018	2019
CSP	Proportion of assisted people informed about the programme (who is included, what people will receive, length of assistance)	Yes	Yes	Affected populations are able to hold WFP and partners accountable for meeting their hunger needs in a manner that reflects their views and preferences				Yes	
	Proportion of project activities for which beneficiary feedback is documented, analysed and integrated into programme improvements	Yes	Yes					Yes	
	Proportion of targeted people accessing assistance without protection challenges	No	Yes						
	Proportion of targeted people receiving assistance without safety challenges	No	Yes						
	Proportion of targeted people who report that WFP programmes are dignified	No	Yes						
	Proportion of targeted people having unhindered access to WFP programmes	No	Yes						
	Proportion of households where women, men, or both women and men make decisions on the use of food/cash/vouchers or income generated through programme activities	Yes	Yes	Improved gender equality and women's empowerment among WFP-assisted population					
	Type of transfer (food, cash, voucher, no compensation) received by participants in WFP activities, disaggregated by sex and type of activity	No	Yes						
	Proportion of activities for which environmental risks have been screened and, as required, mitigation actions identified	No	Yes	Targeted communities benefit from WFP programmes in a manner that does not harm the environment					
DEV 200770	The project has activities to raise awareness of how gender equality goals can increase effectiveness of WFP interventions (Y/N)			Gender		Yes	Yes		
	The project has initiatives to reduce risk of sexual and gender-based violence (Y/N)					Yes	Yes		
	Training on food distribution includes a solid explanation for gender-sensitive food distribution (yes/no)					Yes	Yes		
	Proportion of assisted people informed about the programme (who is included, what people will receive, where people can complain)						Yes	Yes	

DEV 200770	Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site			Protection and accountability to affected populations		Yes	Yes		
	Amount of complementary funds provided to the project by partners (including NGOs, civil society, private-sector organizations, international financial institutions and regional development banks)			Partnership	Yes	Yes	Yes		
	Number of partner organizations that provide complementary inputs and services				Yes	Yes	Yes		
	Proportion of project activities implemented with the engagement of complementary partners				Yes	Yes	Yes		

**Table 29. WFP Timor-Leste: beneficiary and commodity data by operation, 2015–2019**

Project/CSP	Indicator	Unit	2015	2016	2017	2018	2019	Comments
CSP	Beneficiaries	Individual				Yes	Yes	
	Food distribution/food transfers (2019)	Mt				Yes	Yes	
DEV 200770	Beneficiaries	Individual	Yes	Yes	Yes			
	Food purchased	Mt		Yes	Yes			
	Food distribution	Mt	Yes	Yes	Yes			
IR-EMOP 201017	Food purchased	Mt		Yes	Yes			Reporting overlaps with development operation
	Food distribution	Mt		Yes	Yes			
	Beneficiaries	individual		Yes	Yes			



# Annex XI. Output and Outcome Data

1. This annex contains all monitoring data that have been used in this report, and some supporting analysis. It is divided into two sections.

- The first section presents the data collected by the evaluation team and consolidated in a database for the analysis of WFP performance. It mostly contains data for indicators that are comparable across time (i.e. some individual datapoints have not been included). The database focuses on outcome and output data (excluding food and beneficiaries). It draws from standard project reports and annual country reports, as well as internal WFP databases. The data presented here do not include municipality-level data as that would require much more space.
- The second section complements the first one and contains WFP annual reporting data for all the operations under review.

**Table 30. Country strategic plan evaluation database**

Year	Indicator	Indicator type	Activity	Population	Value	Target
2015	MAM treatment default rate	Outcome	1	Children U5	32.8	<15
2015	MAM treatment default rate	Outcome	1	PLW	0	<15
2015	MAM treatment default rate	Outcome	1	All	32.8	<15
2016	MAM treatment default rate	Outcome	1	Children U5	30.8	<15
2016	MAM treatment default rate	Outcome	1	PLW	35.7	<15
2016	MAM treatment default rate	Outcome	1	All	33.7	<15
2017	MAM treatment default rate	Outcome	1	Children U5	28.31	<15
2017	MAM treatment default rate	Outcome	1	PLW	26.87	<15
2017	MAM treatment default rate	Outcome	1	All	27.35	<15
2018	MAM treatment default rate	Outcome	1	Children U5	23.4	<15
2018	MAM treatment default rate	Outcome	1	PLW	15.1	<15
2018	MAM treatment default rate	Outcome	1	All	18.45	<15
2019	MAM treatment default rate	Outcome	1	Children U5	22.9	<15
2019	MAM treatment default rate	Outcome	1	PLW	21.75	<15
2019	MAM treatment default rate	Outcome	1	All	22.07	<15
2015	MAM treatment mortality rate	Outcome	1	Children U5	0.3	<3
2015	MAM treatment mortality rate	Outcome	1	PLW	0	<3
2015	MAM treatment mortality rate	Outcome	1	All	0.3	<3
2016	MAM treatment mortality rate	Outcome	1	Children U5	0.04	<3
2016	MAM treatment mortality rate	Outcome	1	PLW	0.01	<3
2016	MAM treatment mortality rate	Outcome	1	All	0.02	<3

Year	Indicator	Indicator type	Activity	Population	Value	Target
2017	MAM treatment mortality rate	Outcome	1	Children U5	0	<3
2017	MAM treatment mortality rate	Outcome	1	PLW	0.01	<3
2017	MAM treatment mortality rate	Outcome	1	All	0.01	<3
2018	MAM treatment mortality rate	Outcome	1	Children U5	0.02	<3
2018	MAM treatment mortality rate	Outcome	1	PLW	0	<3
2018	MAM treatment mortality rate	Outcome	1	All	0.01	<3
2019	MAM treatment mortality rate	Outcome	1	Children U5	0	<3
2019	MAM treatment mortality rate	Outcome	1	PLW	0.02	<3
2019	MAM treatment mortality rate	Outcome	1	All	0.01	<3
2015	MAM treatment non-response rate	Outcome	1	Children U5	7.2	<15
2015	MAM treatment non-response rate	Outcome	1	PLW	0	<15
2015	MAM treatment non-response rate	Outcome	1	All	7.2	<15
2016	MAM treatment non-response rate	Outcome	1	Children U5	7.6	<15
2016	MAM treatment non-response rate	Outcome	1	PLW	14.4	<15
2016	MAM treatment non-response rate	Outcome	1	All	11.5	<15
2017	MAM treatment non-response rate	Outcome	1	Children U5	5.47	<15
2017	MAM treatment non-response rate	Outcome	1	PLW	15.94	<15
2017	MAM treatment non-response rate	Outcome	1	All	12.49	<15
2018	MAM treatment non-response rate	Outcome	1	Children U5	9.14	<15
2018	MAM treatment non-response rate	Outcome	1	PLW	28.86	<15
2018	MAM treatment non-response rate	Outcome	1	All	21.48	<15
2019	MAM treatment non-response rate	Outcome	1	Children U5	7.17	<15
2019	MAM treatment non-response rate	Outcome	1	PLW	20.69	<15
2019	MAM treatment non-response rate	Outcome	1	All	16.9	<15
2015	MAM treatment recovery rate	Outcome	1	Children U5	59.7	>75
2015	MAM treatment recovery rate	Outcome	1	PLW	100	>75

Year	Indicator	Indicator type	Activity	Population	Value	Target
2015	MAM treatment recovery rate	Outcome	1	All	59.7	>75
2016	MAM treatment recovery rate	Outcome	1	Children U5	61.6	>75
2016	MAM treatment recovery rate	Outcome	1	PLW	49.9	>75
2016	MAM treatment recovery rate	Outcome	1	All	54.8	>75
2017	MAM treatment recovery rate	Outcome	1	Children U5	66.22	>75
2017	MAM treatment recovery rate	Outcome	1	PLW	57.18	>75
2017	MAM treatment recovery rate	Outcome	1	All	60.15	>75
2018	MAM treatment recovery rate	Outcome	1	Children U5	67.45	>75
2018	MAM treatment recovery rate	Outcome	1	PLW	55.05	>75
2018	MAM treatment recovery rate	Outcome	1	All	60.06	>75
2019	MAM treatment recovery rate	Outcome	1	Children U5	69.93	>75
2019	MAM treatment recovery rate	Outcome	1	PLW	57.54	>75
2019	MAM treatment recovery rate	Outcome	1	All	61.02	>75
2019	Number of national food security and nutrition policies, programmes and system components enhanced as a result of WFP capacity strengthening (new)	Outcome	2	All	0	0
2015	Proportion of eligible population that participates in programme (coverage, based on actual versus target)	Outcome	DEV	All	18	>50
2018	Proportion of eligible population that participates in programme (coverage, based on actual versus target)	Outcome	1	Children U5	44	>50
2018	Proportion of eligible population that participates in programme (coverage, based on actual versus target)	Outcome	1	PLW	58	>50
2019	Proportion of eligible population that participates in programme (coverage, based on actual versus target)	Outcome	1	Children U5	19	>50

Year	Indicator	Indicator type	Activity	Population	Value	Target
2019	Proportion of eligible population that participates in programme (coverage, based on actual versus target)	Outcome	1	PLW	89	>50
2019	Number of capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)	Output	2	All	15	26
2019	Number of capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)	Output	3	All	9	12
2019	Number of capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)	Output	4	All	21	28
2015	Number of community groups developed to share nutrition messages	Output	DEV	All	88	0
2016	Number of community groups developed to share nutrition messages	Output	DEV	All	215	160
2016	Number of cooking demonstrations undertaken for fortified foods, complementary foods and special nutritional products	Output	DEV	All	342	415
2017	Number of cooking demonstrations undertaken for fortified foods, complementary foods and special nutritional products	Output	DEV	All	72	144
2018	Number of counterparts trained in capacity development on MCHN and nutrition activities	Output	2	All	180	160
2018	Number of Government of Timor-Leste counterparts trained in use of data-collection tablets	Output	3	All	13	50
2015	Number of government/national partner staff receiving technical assistance and training	Output	DEV	All	458	360
2016	Number of government/national partner	Output	DEV	All	170	154

Year	Indicator	Indicator type	Activity	Population	Value	Target
	staff receiving technical assistance and training					
2018	Number of government/national partner staff receiving technical assistance and training	Output	3	All	51	58
2018	Number of government/national partner staff receiving technical assistance and training	Output	4	All	73	0
2019	Number of government/national partner staff receiving technical assistance and training	Output	2	All	51	58
2015	Number of health centres/sites assisted	Output	DEV	All	117	99
2016	Number of health centres/sites assisted	Output	DEV	All	117	120
2017	Number of health centres/sites assisted	Output	DEV	All	125	125
2015	Number of instances in which nutrition and health messages were provided	Output	DEV	All	24	0
2016	Number of instances in which nutrition and health messages were provided	Output	DEV	All	74	80
2018	Number of men exposed to WFP-supported nutrition messaging	Output	1	All	5603	6000
2019	Number of men exposed to WFP-supported nutrition messaging	Output	1	All	6377	7200
2015	Number of national programmes developed with WFP support (nutrition)	Output	DEV	All	1	1
2016	Number of national programmes developed with WFP support (nutrition)	Output	DEV	All	1	1
2015	Number of national response plans developed with WFP support	Output	DEV	All	1	2
2016	Number of national response plans developed with WFP support	Output	DEV	All	0	3
2019	Number of people engaged in capacity- strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)	Output	2	All	51	58
2019	Number of people engaged in capacity- strengthening initiatives facilitated by WFP	Output	3	All	55	80

Year	Indicator	Indicator type	Activity	Population	Value	Target
	to enhance national food security and nutrition stakeholder capacities (new)					
2019	Number of people engaged in capacity- strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)	Output	4	All	115	165
2015	Number of people exposed to WFP-supported nutrition messaging	Output	DEV	All	198088	23000
2016	Number of people exposed to WFP-supported nutrition messaging	Output	DEV	All	194645	125000
2017	Number of people exposed to WFP-supported nutrition messaging	Output	DEV	All	12299	27790
2018	Number of people exposed to WFP-supported nutrition messaging	Output	1	All	50675	24000
2019	Number of people exposed to WFP-supported nutrition messaging	Output	1	All		24000
2015	Number of people receiving nutrition counselling supported by WFP	Output	DEV	All	4611	23000
2016	Number of people receiving nutrition counselling supported by WFP	Output	DEV	All	27249	27790
2015	Number of targeted caregivers (male and female) receiving three key messages delivered through WFP-supported messaging and counselling	Output	DEV	All	3800	0
2016	Number of targeted caregivers (male and female) receiving three key messages delivered through WFP-supported messaging and counselling	Output	DEV	All	19281	17077
2018	Number of technical assistance activities provided	Output	2	All	0	12
2018	Number of technical assistance activities provided	Output	3	All	4	6
2018	Number of technical assistance activities provided	Output	4	All	10	12
2019	Number of technical support activities provided	Output	2	All	8	16
2019	Number of tools or products developed or revised to enhance national food	Output	2	All	2	4

Year	Indicator	Indicator type	Activity	Population	Value	Target
	security and nutrition systems as a result of WFP capacity-strengthening support (new)					
2019	Number of tools or products developed or revised to enhance national food security and nutrition systems as a result of WFP capacity-strengthening support (new)	Output	3	All	5	5
2019	Number of tools or products developed or revised to enhance national food security and nutrition systems as a result of WFP capacity-strengthening support (new)	Output	4	All	6	8
2018	Number of training sessions/workshops organized	Output	2	All	8	6
2018	Number of training sessions/workshops organized	Output	3	All	8	4
2018	Number of training sessions/workshops organized	Output	4	All	3	12
2018	Number of women exposed to WFP-supported nutrition messaging	Output	1	All	45072	18000
2019	Number of women exposed to WFP-supported nutrition messaging	Output	1	All	13552	168000
2015	Quantity of fortified food provided	Output	DEV	All	69	180
2016	Quantity of fortified food provided	Output	DEV	All	412	386
2018	Quantity of fortified food provided	Output	1	All	110.24	866
2019	Quantity of fortified food provided	Output	1	All	113.7	102.7
2019	Quantity of fortified food provided	Output	1	All	108	432
2018	Quantity of specialized nutritious foods provided	Output	1	All	50.73	144
2019	Quantity of specialized nutritious foods provided	Output	1	All	5.4	18.2
2019	Quantity of specialized nutritious foods provided	Output	1	All	5	72

Year	Indicator	Indicator type	Activity	Population	Value	Target
2015	Amount of complementary funds provided to the project by partners (including NGOs, civil society, private-sector organizations, international financial institutions and regional development banks)	Cross-cutting		All	450000	900000
2015	Number of partner organizations that provide complementary inputs and services	Cross-cutting		All	1	2
2015	Proportion of project activities implemented with the engagement of complementary partners	Cross-cutting		All	100	100
2016	Amount of complementary funds provided to the project by partners (including NGOs, civil society, private-sector organizations, international financial institutions and regional development banks)	Cross-cutting		All	450000	900000
2016	Number of partner organizations that provide complementary inputs and services	Cross-cutting		All	3	2
2016	Proportion of assisted people informed about the programme (who is included, what people will receive, length of assistance)	Cross-cutting		All	85	90
2016	Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site	Cross-cutting		All	100	100
2016	Proportion of project activities implemented with the engagement of complementary partners	Cross-cutting		All	100	100
2016	The project has activities to raise awareness of how gender equality goals can increase effectiveness of WFP interventions (1=yes/0=no)	Cross-cutting		All	1	1
2016	The project has initiatives to reduce risk of sexual and gender-based violence (yes/no)	Cross-cutting		All	1	1
2016	Training on food distribution includes a solid explanation	Cross-cutting		All	1	1



Year	Indicator	Indicator type	Activity	Population	Value	Target
	for gender-sensitive food distribution (yes/no)					
2017	Amount of complementary funds provided to the project by partners (including NGOs, civil society, private-sector organizations, international financial institutions and regional development banks)	Cross-cutting		All	450000	900000
2017	Number of partner organizations that provide complementary inputs and services	Cross-cutting		All	3	2
2017	Proportion of assisted people informed about the programme (who is included, what people will receive, length of assistance)	Cross-cutting		All	89	90
2017	Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme site	Cross-cutting		All	100	100
2017	Proportion of project activities implemented with the engagement of complementary partners	Cross-cutting		All	100	100
2017	The project has activities to raise awareness of how gender equality goals can increase effectiveness of WFP interventions (1=yes/0=no)	Cross-cutting		All	1	1
2017	The project has initiatives to reduce risk of sexual and gender-based violence (yes/no)	Cross-cutting		All	1	1
2017	Training on food distribution includes a solid explanation for gender-sensitive food distribution (yes/no)	Cross-cutting		All	1	1
2018	Proportion of assisted people informed about the programme (who is included, what people will receive, length of assistance)	Cross-cutting		All	96.5	100
2018	Proportion of project activities for which beneficiary feedback is documented, analysed and integrated into programme improvements	Cross-cutting		All	25	100
2019	Proportion of assisted people informed about the	Cross-cutting		All	86	100

Year	Indicator	Indicator type	Activity	Population	Value	Target
	programme (who is included, what people will receive, length of assistance)					
2019	Proportion of project activities for which beneficiary feedback is documented, analysed and integrated into programme improvements	Cross-cutting		All	20	100

Source: SPR 2015 (WFP, 2015. Capacity Development for Health and Nutrition. Standard Project Report 2015. Dili); SPR 2016 (WFP, 2017. Moderate acute malnutrition in drought affected areas. Standard Project Report 2017. Dili); SPR 2017 (WFP, 2018. Capacity development for health and nutrition. Standard Project Report 2018. Dili); ACR 2018 (WFP, 2019. Timor-Leste annual country report 2018. Country Strategic Plan (2018–2020). Dili), ACR 2019 (WFP, 2020. Timor-Leste annual country report 2019. Country Strategic Plan (2018-2020). Dili).

**Table 31. DEV 200770: output data, 2017**

Output	Unit	Planned	Actual	Percentage actual versus planned
<b>SO4: Capacity Development - Strengthening National Capacities and Nutrition: Treatment of Moderate Acute Malnutrition</b>				
Number of health centres/sites assisted	Centre/site	125	125	100.0%
<b>SO4: Nutrition: Treatment of Moderate Acute Malnutrition</b>				
Number of cooking demonstrations undertaken for fortified foods, complementary foods and special nutritional products	Demonstration	144	72	50.0%
Number of people exposed to nutrition messaging supported by WFP	Individual	27,790	12,299	44.3%

Source: SPR 2017 (WFP, 2017. Moderate Acute Malnutrition in Drought-Affected Areas. Standard Project Report 2017. Dili).

**Table 32. DEV 200770: outcome data, 2017**

Outcome	Project end target	Base value	Previous follow-up	Latest follow-up
<b>MAM treatment recovery rate (%)</b>				
Dili (children 6–59 months), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	>75.00	-	66.83	47.26
<b>MAM treatment mortality rate (%)</b>				
Dili (children 6–59 months), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP	<3.00	-	0.00	0.00

Outcome	Project end target	Base value	Previous follow-up	Latest follow-up
programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR				
<b>MAM treatment default rate (%)</b>				
Dili (children 6–59 months), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	<15.00	-	25.64	50.57
<b>MAM treatment non-response rate (%)</b>				
Dili (children 6–59 months), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	<15.00	-	7.53	2.17
<b>Proportion of eligible population who participate in programme (coverage)</b>				
Dili (children 6–59 months), <b>Project end target:</b> 12/2017, Ministry of Health reports <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	>70.00	-	41.69	25.54
<b>MAM treatment recovery rate (%)</b>				
Dili (PLW), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	>75.00	-	57.55	52.05
<b>MAM treatment mortality rate (%)</b>				
Dili (PLW), <b>Project end target:</b> 12/2017, Ministry of Health Reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 2017.12, WFP programme monitoring, MPR	<3.00	-	0.02	0.00
<b>MAM treatment default rate (%)</b>				
Dili (PLW), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	<15.00	-	29.27	31.15
<b>MAM treatment non-response rate (%)</b>				
Dili (PLW), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	<15.00	-	13.15	16.79

Outcome	Project end target	Base value	Previous follow-up	Latest follow-up
<b>MAM treatment recovery rate (%)</b>				
Municipalities (children 6–59 months), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	>75.00	-	61.57	66.22
<b>MAM treatment mortality rate (%)</b>				
Municipalities (children 6–59 months), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	<3.00	-	0.04	0.00
<b>MAM treatment default rate (%)</b>				
Municipalities (children 6–59 months), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	<15.00	-	30.84	28.31
<b>MAM treatment non-response rate (%)</b>				
Municipalities (children 6–59 months), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	<15.00	-	7.55	5.47
<b>Proportion of eligible population who participate in programme (coverage)</b>				
Municipalities (children 6–59 months), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	>50.00	-	40.27	25.69
<b>MAM treatment recovery rate (%)</b>				
Municipalities (PLW), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	>75.00	-	49.93	57.18
<b>MAM treatment mortality rate (%)</b>				
Municipalities (PLW), <b>Project end target:</b> 12/2018, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	<3.00	-	0.01	0.00
<b>MAM treatment default rate (%)</b>				
	<15.00	-	35.71	26.88

Outcome	Project end target	Base value	Previous follow-up	Latest follow-up
Municipalities (PLW), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR				
<b>MAM treatment non-response rate (%)</b>				
Municipalities (PLW), <b>Project end target:</b> 12/2017, Ministry of Health reports, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, MPR, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, MPR	<15.00	-	15.35	15.94
<b>Project-specific</b>				
<b>Fortified foods purchased from regional, national and local suppliers, as percentage of fortified food distributed by WFP in-country</b>				
Timor-Leste, <b>Project end target:</b> 12/2017, <b>Base value:</b> 02/2015, WFP survey, no baseline and according target population, <b>Previous follow-up:</b> 12/2016, WFP programme monitoring, Food Distribution Reports, <b>Latest follow-up:</b> 12/2017, WFP programme monitoring, Food Distribution Reports	>77.00	5.08	81.00	98.29

Source: SPR 2017 (WFP, 2017. Moderate Acute Malnutrition in Drought-Affected Areas. Standard Project Report 2017. Dili)

**Table 33. Country strategic plan: output data, 2018**

Detailed indicator	Unit	Target value	Actual value	Percentage achieved
<b>Strategic Result 2: No one suffers from malnutrition</b>				
<b>Strategic Outcome 01: Children under five, pregnant and lactating women, and adolescent girls in Timor-Leste have improved nutrition towards national targets by 2025</b>				
<b>Output A: Targeted individuals receive nutritious food and gender-sensitive nutrition education in order to improve their nutrition status, dietary diversity and empowerment</b>				
<b>Activity 01. Provide nutritious food and raise awareness through SBCC to targeted individuals</b>				
[Indicator on receipt of deworming treatment now excluded: see Table 27]				
<b>Output B: Targeted individuals receive nutritious food and gender-sensitive nutrition education in order to improve their nutrition status, dietary diversity and empowerment</b>				
<b>Activity 01. Provide nutritious food and raise awareness through SBCC to targeted individuals</b>				
Quantity of fortified food provided	mt	866.0	110.24	12.7

Detailed indicator	Unit	Target value	Actual value	Percentage achieved
Quantity of specialized nutritious foods provided	mt	144.0	50.73	35.2
Output C: Vulnerable populations benefit from strengthened Government capacity to implement national nutrition programmes, grounded in gender equality, in order to improve nutritional status				
Activity 02. Provide technical assistance and evidence, for enhancing efficiency of national programmes and safety nets, to the Government and its partners				
Number of training sessions/workshop organized	Training session	6.0	8.0	133.3
Number of counterparts trained in capacity development on MCHN and nutrition activities	Individual	160.0	180.0	112.5
Number of technical assistance activities provided	Unit	12.0	-	0.0
Output E: Targeted individuals receive nutritious food and gender-sensitive nutrition education in order to improve their nutrition status, dietary diversity and empowerment				
Activity 01. Provide nutritious food and raise awareness through SBCC to targeted individuals				
Number of men exposed to WFP-supported nutrition messaging	Individual	6000.0	5603.0	93.4
Number of women exposed to WFP-supported nutrition messaging	Individual	18000.0	45072.0	250.4
Strategic Result 5: Countries have strengthened capacity to implement the Strategic Development Goals				
Strategic Outcome 02: National and subnational government institutions have increased capacity to sustainably deliver food-, nutrition- and supply chain-related services by 2020				
Output C: Vulnerable groups benefit from government programmes that are informed by quality disaggregated data and analysis supported by increased central and local government capacity to manage supply chains thus ensuring access to food and medical supplies				
Activity 03. Provide technical expertise for improved targeting, monitoring and programme analysis to the Government and its partners				
Number of training sessions/workshop organized	Training session	4.0	8.0	200.0
Number of Government of Timor-Leste counterparts trained in use of data-collection tablets	Individual	50.0	13.0	26.0
Number of government/national partner staff receiving technical assistance and training	Individual	100.0	178.0	178.0
Number of technical assistance activities provided	Unit	6.0	4.0	66.7
Activity 04. Provide technical expertise for the development of an efficient and effective supply chain management system to the Government				
Number of training sessions/workshop organized	Training session	12.0	3.0	25.0

Detailed indicator	Unit	Target value	Actual value	Percentage achieved
Number of government/national partner staff receiving technical assistance and training	Individual	-	73.0	0.0
Number of technical assistance activities provided	Unit	12.0	10.0	83.3

Source: ACR, 2018 (WFP, 2019. Timor-Leste Annual Country Report 2018. Country Strategic Plan (2018–2020). Dili).

**Table 34. Country strategic plan: outcome data, 2018**

Target / location	Modalities	Activities	Gender	Base value	Latest follow-up	Year-end target	CSP end target	Date/source/means of collection
<b>Strategic Result 2 – No one suffers from malnutrition</b>								
Strategic Outcome 01: Children under five, pregnant and lactating women, and adolescent girls in Timor-Leste have improved nutrition towards national targets by 2025								
Outcome Indicator: MAM treatment default rate								
Children aged under five years (CU5)	Malnutrition prevention activities (NPA): Provide nutritious food and raise awareness through SBCC to targeted individuals	Food	male	27.00	23.00	<15.00	<15.00	Base value: 12/2017, Secondary data, CP Report Latest follow-up: 12/2018, Secondary data, CP Report Year-end target: 12/2018 CSP end target: 12/2020
			female	29.00	24.00	<15.00	<15.00	
			overall	28.00	23.00	<15.00	<15.00	
Outcome Indicator: MAM treatment mortality rate								
CU5	Malnutrition prevention activities (NPA): Provide nutritious food and raise awareness through SBCC to targeted individuals	Food	male	0	0	<3	<3	Base value: 12/2017, Secondary data, CP Report Latest follow-up: 12/2018, Secondary data, CP Report Year-end target: 12/2018 CSP end target: 12/2020
			female	0	0	<3	<3	
			overall	0	0	<3	<3	
Outcome Indicator: MAM treatment non-response rate								

Target / location	Modalities	Activities	Gender	Base value	Latest follow-up	Year-end target	CSP end target	Date/source/means of collection
CU5	Malnutrition prevention activities (NPA): Provide nutritious food and raise awareness through SBCC to targeted individuals	Food	male	5	8	<15.00	<15.00	Base value: 12/2017, Secondary data, CP Report Latest follow-up: 12/2018, Secondary data, CP Report Year-end target: 12/2018 CSP end target: 12/2020
			female	6	10.00	<15.00	<15.00	
			overall	5	9	<15.00	<15.00	
Outcome Indicator: MAM treatment recovery rate								
CU5	Malnutrition prevention activities (NPA): Provide nutritious food and raise awareness through SBCC to targeted individuals	Food	male	67.00	69.00	>75.00	>75.00	Base value: 12/2017, Secondary data, CP Report Latest follow-up: 12/2018, Secondary data, CP Report Year-end target: 12/2018 CSP end target: 12/2020
			female	65.00	66.00	>75.00	>75.00	
			overall	66.00	67.00	>75.00	>75.00	
Outcome Indicator: Proportion of eligible population that participates in programme (coverage)								
CU5	Malnutrition prevention activities (NPA): Provide nutritious food and raise awareness through SBCC to targeted individuals	Food	male	52.00	37.00	>50.00	>50.00	Base Value: 12/2017, Secondary data, CP Report Latest follow-up: 12/2018, Secondary data, CP Report Year-end target: 12/2018 CSP end target: 12/2020
			female	68.00	51.00	>50.00	>50.00	
			overall	60.00	44.00	>50.00	>50.00	
PLW	Malnutrition prevention	Food						Base value: 12/2017,



Target / location	Modalities	Activities	Gender	Base value	Latest follow-up	Year-end target	CSP end target	Date/source/means of collection
	activities (NPA): Provide nutritious food and raise awareness through SBCC to targeted individuals		female	98.00	58.00	>50.00	>50.00	Secondary data, CP Report Latest follow-up: 12/2018, Secondary data, CP Report Year-end target: 12/2018 CSP end target: 12/2020

Source: ACR, 2018 (WFP, 2019. Timor-Leste annual country report 2018. Country Strategic Plan (2018–2020). Dili).

**Table 35. Country strategic plan: output data, 2019**

		Beneficiary group	Activity tag	Gender/unit	Planned	Actual
<b>Strategic Outcome 01. Children under five, pregnant and lactating women, and adolescent girls in Timor-Leste have improved nutrition towards national targets by 2025</b>						
<b>Activity 01 Provide nutritious food and raise awareness through SBCC to targeted individuals</b>						
A.1	Beneficiaries receiving food transfers	Children	Treatment of moderate acute malnutrition	Female Male Total	5 897 6 138 12 035	877 912 1 789
		Pregnant and lactating women	Prevention of acute malnutrition	Female Total		8 439 8 439
			Treatment of moderate acute malnutrition	Female Total	12 015 12 015	16 093 16 093
A.2	Food transfers			Mt	505	149
A.6	Number of institutional sites assisted					
	Number of health centres/sites assisted		Prevention of acute malnutrition	Health centre	259	152
A.8	Number of rations provided					
	Number of rations provided		Prevention of acute malnutrition	Ration	619 180	613 115
B.1	Quantity of fortified food provided					
	Quantity of fortified food provided		Prevention of acute malnutrition	Mt	432	108
B.2	Quantity of specialized nutritious foods provided					
	Quantity of specialized nutritious foods provided		Prevention of acute malnutrition	Mt	72	5

		Beneficiary group	Activity tag	Gender/unit	Planned	Actual
E.4	Number of people reached through interpersonal SBCC approaches					
	Number of people reached through interpersonal SBCC approaches (female)		Prevention of acute malnutrition	Number	16 800	13 552
	Number of people reached through interpersonal SBCC approaches (male)		Prevention of acute malnutrition	Number	7 200	6 377
E.5	Number of people reached through SBCC approaches using media					
	Number of people reached through SBCC approaches using social media (i.e. Twitter, Facebook)		Prevention of acute malnutrition	Individual	8 000	3 219
<b>Activity 02 Provide technical assistance and evidence, for enhancing efficiency of national programmes and safety nets, to Government and partners</b>						
C.4	Number of people engaged in capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)					
	Number of Government of Timor-Leste/national partner staff receiving technical assistance and training		Institutional capacity-strengthening activities	Individual	58	51
C.5	Number of capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)					
	Number of training sessions/workshops organized		Institutional capacity-strengthening activities	Training session	10	7
	Number of technical assistance activities provided		Institutional capacity-strengthening activities	Unit	16	8
C.6	Number of tools or products developed or revised to enhance national food security and nutrition systems as a result of WFP capacity-strengthening support (new)					
	Number of tools or products developed		Institutional capacity-strengthening activities	Unit	4	2
<b>Strategic Outcome 02 National and subnational government institutions have increased capacity to sustainably deliver food-, nutrition- and supply chain-related services by 2020</b>						
<b>Activity 03 Provide technical expertise for improved targeting, monitoring and programme analysis to Government and partners</b>						
C.4	Number of people engaged in capacity-strengthening initiatives facilitated by WFP					

	Beneficiary group	Activity tag	Gender/unit	Planned	Actual
to enhance national food security and nutrition stakeholder capacities (new)					
Number of government/national partner staff receiving technical assistance and training		Institutional capacity-strengthening activities	Individual	80	55
C.5 Number of capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)					
Number of technical assistance activities provided		Institutional capacity-strengthening activities	Unit	8	7
Number of training sessions/workshops organized		Institutional capacity-strengthening activities	Training session	4	2
C.6 Number of tools or products developed or revised to enhance national food security and nutrition systems as a result of WFP capacity-strengthening support (new)					
Number of tools or products developed		Institutional capacity-strengthening activities	Unit	5	5
<b>Activity 04 Provide technical expertise for the development of an efficient and effective supply chain management system to Government</b>					
C.4 Number of people engaged in capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)					
Number of government/national partner staff receiving technical assistance and training		Institutional capacity-strengthening activities	Individual	165	115
C.5 Number of capacity-strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)					
Number of training sessions/workshops organized		Institutional capacity-strengthening activities	Training session	20	15
Number of technical assistance activities provided		Institutional capacity-strengthening activities	Unit	8	6
C.6 Number of tools or products developed or revised to enhance national food security					

	Beneficiary group	Activity tag	Gender/unit	Planned	Actual
and nutrition systems as a result of WFP capacity-strengthening support (new)					
Number of tools or products developed		Institutional capacity-strengthening activities	Unit	8	6

Source: ACR 2019 (WFP, 2020. Timor-Leste Annual Country Report 2019. Country Strategic Plan (2018-2020). Dili)

**Table 36. Country strategic plan: outcome data, 2019**

Outcome results		Baseline	End-CSP target	2019 Target	2019 Follow-up value	2018 Follow-up value
<b>Strategic Outcome 01. Children under five, pregnant and lactating women, and adolescent girls in Timor-Leste have improved nutrition towards national targets by 2025</b>						
<b>CU5; Food</b>						
MAM treatment recovery rate						
Activity 01: Provide nutritious food and raise awareness through SBCC to targeted individuals	Treatment of moderate	Female	66	>75	>75	68
	acute	Male	69	>75	>75	73
	malnutrition	Overall	67	>75	>75	70
MAM treatment mortality rate						
Activity 01: Provide nutritious food and raise awareness through SBCC to targeted individuals	Treatment of moderate	Female	0	<3	<3	0
	acute	Male	0	<3	<3	0
	malnutrition	Overall	0	<3	<3	0
Proportion of eligible population that participates in programme (coverage)						
Activity 01: Provide nutritious food and raise awareness through SBCC to targeted individuals	Prevention of moderate	Female	51	>50	>50	23
	acute	Male	37	>50	>50	15
	malnutrition	Overall	44	>50	>50	19
MAM treatment non-response rate						
Activity 01: Provide nutritious food and raise awareness through SBCC to targeted individuals	Prevention of moderate	Female	10	<15	<15	8
	acute	Male	8	<15	<15	6
	malnutrition	Overall	9	<15	<15	7
MAM treatment default rate						
Activity 01: Provide nutritious food and raise awareness through SBCC to targeted individuals	Prevention of moderate	Female	24	<15	<15	24
	acute	Male	23	<15	<15	21
	malnutrition	Overall	23	<15	<15	23
<b>Government institution; Timor-Leste; Capacity strengthening</b>						
Number of national food security and nutrition policies, programmes and system components enhanced as a result of WFP capacity strengthening (new)						
Activity 02: Provide technical assistance and evidence, for enhancing efficiency of national programmes and safety nets, to Government and partners	Institutional capacity-strengthening activities	Overall	0	=1	=1	0
<b>PLW; Timor-Leste; Food</b>						
Proportion of eligible population that participates in programme (coverage)						
Activity 01: Provide nutritious food and raise awareness through SBCC to targeted individuals	Prevention of moderate	Female	58	>50	>50	89
		Male	0	>0	>0	0
		Overall	58	>50	>50	89

Outcome results			Baseline	End-CSP target	2019 Target	2019 Follow-up value	2018 Follow-up value
		acute malnutrition					
Strategic Outcome 02 National and subnational government institutions have increased capacity to sustainably deliver food-, nutrition- and supply chain-related services by 2020							
Government Institution; Timor-Leste; Capacity strengthening							
Number of national food security and nutrition policies, programmes and system components enhanced as a result of WFP capacity strengthening (new)							
	Activity 03: Provide technical expertise for improved targeting, monitoring and programme analysis to Government and partners	Institutional capacity-strengthening activities	Overall	0	1	0	0
Government Staff; Timor-Leste; Capacity strengthening							
Number of national programmes enhanced as a result of WFP-facilitated South-South and triangular cooperation support (new)							
	Activity 03: Provide technical expertise for improved targeting, monitoring and programme analysis to Government and partners	Institutional capacity-strengthening activities	Overall	0	1	0	0

Source: ACR 2019 (WFP, 2020. Timor-Leste Annual Country Report 2019. Country Strategic Plan (2018-2020). Dili).

# Annex XII. Nutrition: Background, Field Observations and Analysis of Performance

## The determinants of malnutrition

1. **The determinants of malnutrition are multisectoral.** Among the Human Development Indicators, for which Timor Leste is ranked 132 out of 189 countries, the most noteworthy for both their contribution to malnutrition and their ultimate impact include the Total Fertility Rate at 4.2 percent (DHS, 2016) which has only fallen from 7.1 in 2000; and maternal mortality, which was reported at 570/100,000 live births in 2010 and fell to 195/100,000 (DHS, 2016). Timor-Leste is considered to have one of the highest maternal mortality rates in the world. This reflects poor access and quality of health services and inadequate care of pregnant women during pregnancy and delivery. Infant mortality rates are a key component in the Human Development Index: they have improved significantly since 2000 from 86.3/1000 live births to 30/1000 live births in 2016.
2. **Child and maternal malnutrition are considered the greatest risk for disease,** while diseases or conditions with the highest risk of death include lower respiratory infection, pre-term birth complications, diarrhoeal disease and congenital anomalies. Despite impressive malaria reduction efforts in Timor-Leste, with a 97 percent reduction in malaria cases and 93 percent reduction in malaria-related deaths observed between 2006 and 2012,<sup>86</sup> 34 percent of the Timorese population live in high malaria transmission areas (>1 case/1,000 population).<sup>87</sup> Thus, malaria continues to be an important risk factor for malnutrition and anaemia.
3. **Soil-transmitted helminth (STH) infections such as hookworms and roundworms continue to contribute to malnutrition and increased risk of anaemia.** In 2016, 72 percent of the population were estimated to have an STH infection.<sup>88</sup>
4. **Sub-optimal sanitation and hygiene practices are considered to increase exposure to infectious diseases and to limit nutrient absorption and result in growth faltering or malnutrition.** The situation in Timor-Leste has improved overall, with open defaecation at 26.1 percent (TLFNS, 2013), down from 43 percent (DHS 2003). Sixty-four percent of the population have access to improved water sources and 51 percent have access to improved sanitation facilities (TLFNS, 2013). DHS 2016 found that 47 percent of mothers with children under two years old did not dispose of their child's stool safely and found that there had been limited improvement since 2010. The incidence of diarrhoea in children under five years was reported to be 11 percent in the two weeks preceding the DHS 2016 survey, while treatment or advice was sought by 65 percent of mothers.
5. **A particularly challenging aspect for Timor Leste is the mountainous terrain and consequent difficulty of reaching health facilities,** which limits physical access to health centres and thus leads to poor health-seeking behaviour. One in ten households was found not to have sought health care when sick.<sup>89</sup> In the 2010 DHS, more than half of women reported access or distance to health facilities as a main problem in seeking health services.
6. **Globally and in Timor-Leste, aflatoxin exposure is an increasingly significant cause of stunting and undernutrition.** TLFNS (2013) reported aflatoxin detectable exposure levels in Timorese children aged under five years at 83 percent, and 81 percent for non-pregnant women.
7. **Age at first birth for women was found to be 23 years (DHS, 2016). This, combined with low contraceptive prevalence, teenage pregnancies (7 percent of 15-19-year-old women, DHS 2016) and**

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<sup>86</sup> Provo et al., 2017. *Malnutrition in Timor-Leste*, p. 31.

<sup>87</sup> World Health Organization, 2019. *World malaria report 2019*. Geneva: WHO, p. 160.

<sup>88</sup> Provo et al., 2017. *Malnutrition in Timor-Leste*, p. 32.

<sup>89</sup> Provo et al., 2017. *Malnutrition in Timor-Leste*, p. 36.

**high fertility rates, are all important risk factors for anaemia and low birthweight in the country.** These can be collated as critical gender factors, as are aspects of gender empowerment, women and girl decision-making, gender-based violence and mothers' education, which all undermine the ability of women to care for their children. A 2010 study found that 15.8 percent of women aged 15–49 years in Timor Leste reported completing their secondary education.<sup>90</sup> The secondary enrolment rate for women was as high as 87 percent in 2018.<sup>91</sup> Nonetheless, women's education is a critical determinant of optimal child care practices and a key driver of undernutrition.<sup>92</sup>

8. **Most pertinent to past and future WFP support, there is evidence (internationally and in Timor-Leste) that malnutrition is closely related to the limited availability and affordability of nutrient-rich foods to support optimum nutrition practices for infants, young children, adolescents, women and the wider population.**<sup>93, 94</sup> This may ultimately invalidate interventions that focus only on social and behaviour change activities without the provision of food/cash or other social transfers. The impacts of nutritious food unavailability are worsened during the hunger season. This emphasizes that food insecurity is a key driver of malnutrition.

### Geographical coverage

9. **In 2015, WFP initially supported only three municipalities** (Bobonaro, Covalima and Oecusse) with a targeted supplementary feeding programme and maternal child health and nutrition interventions. Under the development programme it expanded support to Ermera, Ainaro and Dili. The TSFP implemented during the development operation period and through the first 18 months of the country strategic plan targeted moderately malnourished children aged 6–59 months and moderately malnourished pregnant and lactating women. MCHN implemented prior to the development programme provided a nutritious food supplement (Super Cereal or Timor Vita) to all pregnant and lactating women and children 6–23 months; this was a blanket supplementary feeding programme.

10. **Six of the thirteen municipalities were covered under the country strategic plan and previously under DEV 200770.** WFP supported 117 health facilities to implement combined MCHN and TSFP in 2015, and 125 health facilities in 2017 (TSFP only). At the start of the country strategic plan it was planned to extend the TSFP intervention to all 13 municipalities, but lack of funds precluded this. WFP completely handed over the programme to the Ministry of Health in June 2019. Many of the facilities visited reported that they last received food supplies (Super Cereal) in the first quarter of 2019, primarily for pregnant and lactating women. Plans for the handover were developed in January 2019 with the Ministry of Health.

11. **The development operation contributed significantly to the doubling of the supplementary feeding programme coverage in six municipalities,** from 18 percent in 2015 to 40 percent in 2017. However, there was a significant increment in 2016 to 61 percent, which declined again in 2017. Neither international nor national targets were met overall, except in 2016.<sup>95</sup>

### Targeted supplementary feeding

**Supplementary feeding of moderate acutely malnourished clients through the Timor-Leste TSFP is a core component of the Integrated Management of Acute Malnutrition guidelines, which constitutes Module 8 of the Specific Nutrition Interventions Package** developed by the Ministry of Health and partners in 2016. This is the treatment of malnourished children aged 6–59 months and of malnourished pregnant and lactating women (until the child is 6 months old). Moderate acute malnutrition programming is supposed to be implemented in an integrated manner alongside other IMAM programme components: community mobilization, outpatient therapeutic care (severe acute malnutrition without complications) and inpatient therapeutic care (severe acute malnutrition cases with complications). The programme operates

<sup>90</sup> Provo et al., 2017. *Malnutrition in Timor-Leste*, p. 33.

<sup>91</sup> World Bank, 2020. *Timor-Leste – school enrolment, secondary, female (% gross)*. <https://knoema.com/WBGS2019/gender-statistics?tsid=1076570> [accessed 27 January 2020].

<sup>92</sup> Smith and Haddad, 2014, quoted by Provo et al., 2017. *Malnutrition in Timor-Leste*, p. 33.

<sup>93</sup> Ministry of Health and United Nations Children's Fund (UNICEF), 2013. *Timor-Leste Food and Nutrition Survey 2013*. Dili: Ministry of Health and UNICEF.

<sup>94</sup> Provo et al., 2017. *Malnutrition in Timor-Leste*, p. 33, p. 38.

<sup>95</sup> Kouam et al., 2018. End-Term Evaluation of Treatment of Moderate Acute Malnutrition in Timor-Leste (2015–2017), p. 19.

through hospitals, 66 community health centres, over 200 health posts, and integrated community health service (SISCa) points nationwide. In Timor-Leste, IMAM services are integrated with other child health and nutrition services provided through the existing health system. The Ministry of Health thus applies a health-systems-strengthening approach.

12. **As a continuum of care approach, management of severe acute malnutrition is being implemented across all municipalities (hospitals and community health centres), while management of moderate acute malnutrition was being implemented in only those municipalities that WFP supported.** Thus, the other municipalities have not been implementing an integrated moderate and severe acute malnutrition approach.

13. **In line with international guidance and as stipulated in the global memorandum of understanding between UNICEF and WFP regarding agency mandates in the management of acute malnutrition, WFP is responsible for supporting management of moderate acute malnutrition while UNICEF supports management of severe acute malnutrition.** In Timor-Leste, the role of WFP has comprised: supporting the development of the guidelines; providing the supplementary food rations including local production efforts; developing training curricula, training, on site supervision, mentoring and technical assistance; developing nutrition education materials; and supporting SBCC activities, specifically through the SISCa programme at community level, including screening and follow-up of malnourished pregnant and lactating women and children aged under five years. WFP and UNICEF have collaborated in supporting the development of the guidelines and training manuals, implementation of training and follow up after training. Procurement and distribution of therapeutic and supplementary feeding rations has been supported separately by the respective agencies, as has development of nutrition education materials and implementation of SBCC activities.

14. **In health systems strengthening, the main role of WFP has been in supply chain management and distribution (supplementary feeding rations), service delivery, and monitoring and evaluation.** WFP monitoring and evaluation and service delivery support have been supported by the presence of programme assistants placed in each of the six focus municipalities. UNICEF works directly through the Ministry of Health. With EU support, UNICEF has been able to provide funding for nutritionists at all 66 community health centres throughout the country. This has contributed to human resource strengthening and health management information system (HMIS) support. It is not clear how far other health systems strengthening components (governance and community service delivery) are being implemented in Timor-Leste. WFP and UNICEF have supported the Ministry of Health to quantify supply needs and supported the joint mobilization of funds for nutrition supplies, mainly through the EU. Overall, it is not clear whether both agencies are comprehensively applying a health systems strengthening lens in their ongoing support for IMAM or other nutrition interventions. There is need for further articulation of a joint health systems strengthening for nutrition approach.

15. **The specific objectives of TSFP are:**

- To rehabilitate children 6–59 months with moderate acute malnutrition
- To prevent children with moderate acute malnutrition from developing severe acute malnutrition
- To prevent mortality and morbidity associated with moderate acute malnutrition
- To prevent deterioration of maternal nutritional status and subsequent poor birth outcomes.

16. **Past supplementary feeding programmes in Timor-Leste (2003–2014) included blanket feeding of all pregnant and lactating women and children aged 6–23 months (otherwise known as a maternal and child health and nutrition (MCHN) programme) in addition to TSFP.** In 2008, WFP and the Government (the Ministry of Health and the Ministry of Tourism, Trade and Industry) signed an agreement to process and fortify locally produced food with the aim of increasing the long-term availability of nutritious foods within Timor-Leste. This led to the identification of Timor Global as a facility/processor to support the production of a locally fortified product called Timor Vita, also known as Super Cereal. This product targeted the malnourished, specifically pregnant and lactating women. An agreement between Timor Global and WFP was signed in 2009 for a ten-year period (it expired in December 2019).

17. **The MCHN programme continued implementation up to 2014.** There was a pause in mid-2013 when the Government requested the handover of the MCHN programme. Later, the Government asked WFP to continue implementing it from March 2014, alongside technical assistance and capacity building.



18. **The 2012 Timor-Leste country portfolio evaluation recommended that “the Ministry of Health and WFP should discontinue targeted supplementary feeding for children aged 24–59 months and provide targeted supplementary feeding for children aged 6–23 months and pregnant and lactating women”.**<sup>96</sup> WFP had been providing blanket supplementary feeding for children aged 6–23 months. In adopting this recommendation, WFP – in consultation with Ministry of Health – focused entirely on a TSFP.

19. **Timor-Leste IMAM guidelines stipulate the basic requirements, including equipment and supplies, for running a TSFP,** as well as admission and discharge criteria.<sup>97</sup> Unusually, given the international guidance on treatment of moderate acute malnutrition, the Timor-Leste admission criteria are solely on mid-upper arm circumference (MUAC) assessment and do not include other anthropometric assessments (weight and height).

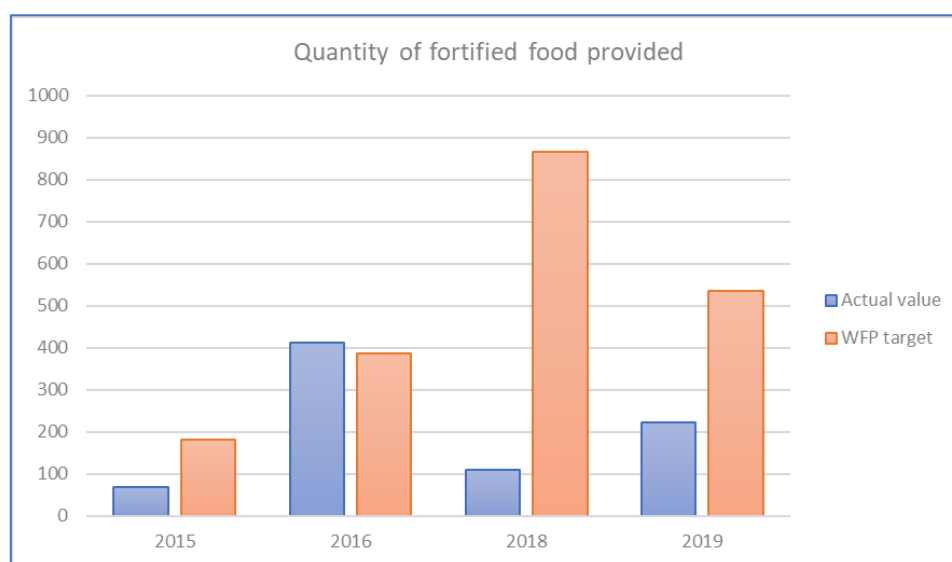
20. **Supplementary feeding activities have failed to reach most outcome targets since 2015,** except the moderate acute malnutrition treatment mortality rate, and programme coverage for pregnant and lactating women in two years (Table 6). The evaluation of DEV 200770 found that “recovery rates and default rates did not meet recommended standards for treatment of MAM in children”.<sup>98</sup> Although both evaluations presumably used the same sources, there are some discrepancies between the data quoted by the development operation evaluation and those shown below, for example on non-response rates.

**Table 37. Trends in country strategic plan nutrition outcome data**

Indicator	2015	2016	2017	2018	2019	Target
MAM treatment default rate (%)	32.8	33.7	27.35	18.45	22.07	<15
MAM treatment mortality rate (%)	0.3	0.02	0.01	0.01	0.01	<3
MAM treatment non-response rate (%)	7.2	11.5	12.49	21.48	16.9	<15
MAM treatment recovery rate (%)	59.7	54.8	60.15	60.06	61.02	>75
CU5: proportion of eligible population that participates in programme (coverage)				44	19	>50
PLW: proportion of eligible population that participates in programme (coverage)				58	89	>50

Source: Standard project reports and annual country reports.

**Figure 27. Quantity of fortified food provided (mt)**



Source: Standard project reports and annual country reports.

<sup>96</sup> Mokoro Ltd., 2013. Timor-Leste: an evaluation of WFP’s portfolio (2008–2012). Rome: Office of Evaluation, WFP, p. 58.

<sup>97</sup> Government of Timor-Leste, 2016. Specific Nutrition Intervention Package (SNIP) guidelines. Dili: Ministry of Health, pp. 137–139.

<sup>98</sup> Kouam et al., 2018. End-Term Evaluation of Treatment of Moderate Acute Malnutrition in Timor-Leste (2015–2017), p. vi.

21. **Data from WFP standard project reports thus indicate that the quantity of fortified food provided by WFP has been short of the targets in three out of the four years for which data are available** (Figure 27). There are no data for 2017. Food provision was severely under target in 2018 (13 percent of target was met). Targets were only exceeded in 2016 (106 percent).

22. **New country strategic plan outcome indicators were introduced in 2019, following revision of the Corporate Results Framework in late 2018.** They cover the percentage of children aged 6–23 months who receive a minimum acceptable diet; the percentage of women who meet minimum dietary diversity requirements; and the number of national food security and nutrition policies, programmes and system components enhanced as a result of WFP capacity strengthening. System components focus mainly on the supply chain, and on aspects of multisectoral nutrition governance support and support to the fortification agenda. Some data on these minimum acceptable diet and minimum dietary diversity indicators are collected by the Avansa Agrikultura project (funded by USAID) in five municipalities, of which four have also received WFP interventions through the development operation and the country strategic plan. But the project does not cover the full area of these municipalities, and the data it reports are significantly higher than those collected by national surveys.

23. **Pipeline breaks and delays in food deliveries to health facilities affected treatment outcomes.** As discussed in paragraph 88, attendance was significantly reduced during these episodes. Staff at some of the facilities visited also expressed concern about the poor performance of the programme and the impact of infrequent deliveries. One facility observed that it also reduces the trust between health workers and the beneficiaries, meaning that beneficiaries cease to take the support seriously and doubt what benefit it can offer. Overall, fortified food deliveries through the development operation and country strategic plan only met their target in one out of the four years for which data is available. Under the country strategic plan, fortified food deliveries stood at 13 percent of the target in 2018 and 41 percent in 2019. Poor performance under the country strategic plan may have been linked to the temporary transfer of responsibility for distribution to the Government during that year. WFP reported that the late availability and, consequently, programming of funds under Strategic Outcome 1 affected the timely procurement of Super Cereal for pregnant and lactating women, resulting in a pipeline break of six months and hindering overall performance of the moderate acute malnutrition treatment programme. As a mitigation measure, WFP used its advance financing mechanism against the Government's pledged contribution of USD 210,000. This enabled advance purchase of Super Cereal, allowing food distribution to resume in September 2018.<sup>99</sup> Table 38 below includes a number of observations from informants at field level about past and present lack of stock and about the valued role that WFP played in the distribution of supplementary foods.

24. **The evaluation of the development operation<sup>100</sup> highlighted the following factors related to high default rates:** low beneficiary awareness about the importance of returning frequently to the health facility for clinical and anthropometric check-ups and for collecting additional supplementary foods; long distances to health facilities, (making it difficult for beneficiaries to make repeat visits, especially given the poor coverage by mobile clinics); insufficient follow up of beneficiaries at home; shortages of food commodities (RUSF and Timor Vita) at health facilities; and the length of stay in the programme, which was perceived as long by the beneficiaries. Regarding this last point, the national guidelines recommend a maximum length of stay of four months in the programme.

25. **However, WFP support for supplementary feeding since 2015 is likely to have caused higher attendance at health facilities, with a range of consequent health and nutrition benefits.** Informants throughout the health system stated that attendance is higher when people know that supplementary foodstuffs are available for the target groups – and that access to other health services therefore increases too. The evaluation team attempted to verify this by analysing available Timor-Leste health information system (TLHIS) data on antenatal visits and child immunization, but the available data are not fully reliable. The development operation evaluation found a gradual increase in the number of women accessing other health services, such as deworming, antenatal care as well as family planning for lactating women. It highlighted that municipality and health facility staff attributed these increments to the availability and distribution of supplementary foods in the health facilities.<sup>101</sup>

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<sup>99</sup> WFP, 2019. Timor-Leste Annual Country Report 2018. Country Strategic Plan (2018–2020). Dili: WFP, p. 7.

<sup>100</sup> Kouam et al., 2018. End-Term Evaluation of Treatment of Moderate Acute Malnutrition in Timor-Leste (2015–2017).

<sup>101</sup> Ibid, p. vi.

26. **Successful advocacy of government funding for nutrition supplies has been a significant unintended achievement.** According to the country office, this has led to the commitment by Ministry of Health since 2018 of more than USD 500,000 for supplies used for treatment of acute malnutrition (both MAM and SAM). Of this amount, USD 210,000 has actually been spent on treatment of moderate acute malnutrition.

27. **WFP has contributed to analysis of the potential for a single product for the management of both moderate and severe acute malnutrition.** As part of the process of building the case to increase the Government's contribution towards nutrition supplies, WFP undertook a comparative analysis of costs for moderate acute malnutrition treatment using Super Cereal, Timor Vita, RUSF and Plumpy'Nut. Based on this, the Government would reportedly like to move forward on using a single product (ready-to-use therapeutic food) for both moderate and severe acute malnutrition cases. The recommendation from both WFP and UNICEF headquarters is that this approach should be implemented as an operational research model that will feed into the current global evidence base on the application of the integration strategy.

## Training

28. **Interviews conducted with INS, municipality and health staff indicate that WFP has supported training efforts on integrated management of acute malnutrition.** The training is provided as part of the Specific Nutrition Interventions Package and is coordinated with UNICEF, Ministry of Health and the National Health Institute at the national level.

29. **Nutrition-related training work by WFP came closer to output targets** (although the quality and consistency of output indicators and reporting were not optimal). According to annual project reporting (see Annex XI), WFP organized eight training sessions in 2018 (target of six) and seven sessions in 2019 (target of six). The target for the number of personnel to be trained was exceeded in 2018: 180, compared with the planned 160.<sup>102</sup> In 2019, the number of personnel trained was 51, but figures are reported through a new set of indicators (see Annex X and Annex XI). Much of this training was carried out in collaboration with the National Health Institute, as part of the Specific Nutrition Interventions Package, in association with UNICEF and the Ministry of Health. All districts visited (except Aileu) have had staff (doctors, midwives, nurses, etc.) trained on IMAM, with the last training reportedly held in 2018.

## Community mobilization and social and behaviour change communication

30. **A key element of an IMAM programme is the community component.** This involves community mobilization, screening for malnutrition, identification and referral of malnourished clients. In Timor-Leste, all these activities are integrated into the SISCa programme, which is supposed to take place once a month in each *suco* (village). Community leaders are involved in mobilizing communities. WFP facilitated the implementation of integrated outreaches through SISCa. This included delivery of priority health and nutrition services including cooking demonstrations, screening for malnutrition and distribution of moderate acute malnutrition food supplies (when available). WFP facilitated transport to the various SISCa community points and used its staff to support cooking demonstrations.

31. **SBCC materials were a significant output in the nutrition sector, although not formally reflected in the performance indicators.** These posters, booklets etc. were frequently seen during field visits to health facilities. At least ten of these products were produced during implementation of DEV 200770, with reprinting in 2018 during the country strategic plan.<sup>103</sup> Other partners have supported similar nutrition materials. UNICEF supports the Family Care Practices package which was found in some of the facilities visited. WHO, ALOLA Foundation and TOMAK have also developed nutrition information, education and communication materials.

32. **Despite its significance, WFP SBCC work is not universally endorsed.** Field visits (Table 38) showed that, with supplementary food commonly unavailable at health facilities, SBCC and counselling are the main current nutrition interventions by Ministry of Health staff – which underscores the significance of the work done by WFP and others on SBCC. In 2018, WFP organized a national symposium on SBCC, following the global symposium on this subject that it had convened in Bali, Indonesia. The national symposium led to

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<sup>102</sup> WFP, 2019. Timor-Leste Annual Country Report 2018. Country Strategic Plan (2018–2020). Dili: WFP, p. 17.

<sup>103</sup> WFP, 2020. Online collection of SBCC materials.

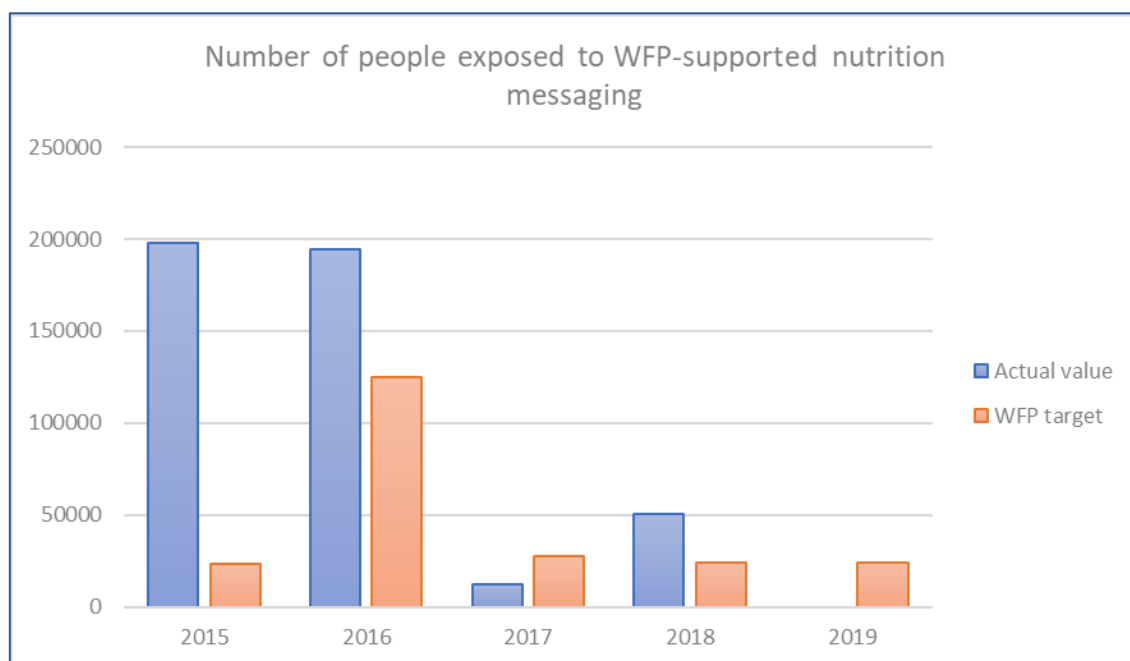
<https://drive.google.com/drive/folders/1E13jnnROFcUZxJwMi5u9Vf3Niw1y--L> [accessed 17 January 2020].

a mapping of SBCC partner organizations in Timor-Leste and the creation of a “repository” of the mapping data, currently held by partner organization Catalpa because the Ministry of Health lacks the capacity to house it. It also led to the preparation of terms of reference for a national SBCC strategy, with which the Ministry of Health decided not to proceed, reportedly because it felt too many potentially overlapping strategies were being proposed. SBCC is not generally seen as a leading area of WFP competence or mandate. Coordination of WFP inputs in this field with other agencies has not been optimal, leading to queries about the rationale for WFP engagement.

33. **Cooking demonstrations were a widely appreciated intervention.** Except for Aileu, which was not supported by WFP, health facilities in all the municipalities visited reported the implementation of cooking demonstrations on appropriate use and preparation of the supplementary food ration and on how to make better use of locally available foods for complementary feeding. These were conducted at both facility and community level through SISCa events. Many informants at municipality and local health facility levels felt that these demonstrations were the most beneficial part of WFP support, providing practical help to communities in making the best use of locally available foods. However, few of these SBCC activities are currently operational (except facility-based counselling and education) due to lack of funding. Furthermore, it was observed that there was limited engagement of community-based health or other workers such as health volunteers and agricultural extension workers. Opportunities for a more broadly multisectoral nutrition approach were missed.

34. **Overall, according to project reports, the number of people exposed to WFP nutrition messaging in 2015–2018 far exceeded those planned,** at 455,000 versus 200,000. It was only in 2017 that the numbers did not exceed the targets at 44 percent (Figure 28). Data from 2018 indicate that the number of women receiving this messaging far exceeded the number of men (45,072 compared with 5,603).<sup>104</sup> According to municipality and local health facility staff, WFP support significantly increased participation in community and facility education sessions through the SISCa programme. Support from non-governmental organizations involving mother support groups contributed to this high participation. WFP assisted with materials, visual aids and transport for delivering services during SISCa events. It is likely that this participation would have reduced in 2019 due to handover to the Government and limited resources to deliver SISCa at the levels of the development operation period.

**Figure 28. Number of people exposed to WFP nutrition messaging**



Source: Standard project reports and annual country reports

<sup>104</sup> WFP, 2019. Timor-Leste Annual Country Report 2018. Country Strategic Plan (2018–2020). Dili: WFP, p. 17.

## WFP field staff

35. **The role and performance of WFP programme assistants at municipality level were greatly appreciated.** These staff, now all withdrawn, provided on-the-job support, mentoring and quality control to colleagues in district offices of health and at health facilities, for example on entering nutrition data into Timor-Leste Health Information System forms alongside WFP-specific report tools for the TSFP. Staff in some of the municipalities visited expressed concern that, due to the termination of the WFP staff contracts, the quality of the nutrition reports would decline. Concerns were also expressed about what was seen as the rapid withdrawal of these WFP staff, with what informants considered to be an incomplete handover process.

## Field observations

36. **The evaluation team conducted field visits between 2 and 5 December 2019.** They visited four municipalities (Bobonaro, Ermera, Aileu and Ainaro) and interviewed Municipal Directors of Health; District Public Health Officers responsible for nutrition and maternal and child health; Health Promotion Officers at municipality level; and staff at health facilities (CHCs and health posts). In addition, one health volunteer was interviewed. Aileu municipality was included as a control district since it has not previously received WFP support.

37. The team visited a total of four district health offices, eight community health centres and two health posts and interviewed a total of 39 health staff. In line with the evaluation matrix, discussion guides were developed (see page 125). These focused on: identifying the district/community health centre/health post priorities; the role of WFP and its support in addressing these priorities; the benefits or impacts of WFP support; the identification of challenges experienced; and recommendations for future support.

38. Unfortunately, despite efforts to arrange for beneficiary interviews at the health facilities visited, the evaluation team were not able to interview any care givers or other members of the surrounding communities.

39. The table below summarizes the findings generated by these field visits.

Table 38. Summary of findings on nutrition from field visits to four municipalities

Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
<b>Discussion guide question: What type of support have you received from WFP? (Aligned to EQ2.1, EQ2.2 – gender, EQ2.3 –sustainability)</b>					
<b>Nutrition assessment</b>	<ul style="list-style-type: none"> <li>All facilities reported carrying out screening for malnutrition at facility and community level</li> <li>All WFP-supported municipalities reported conducting screening at community level through SISCa</li> <li>Nutrition assessment equipment (height boards, weighing scales, MUAC tapes) was visible in all facilities visited included Aileu due to support provided by UNICEF through Ministry of Health. It is not clear what equipment has been specifically procured by WFP nor that procured by UNICEF)</li> <li>Severe malnutrition cases are referred to nearest referral hospital</li> </ul>			Received equipment from World Vision as well. Although UNICEF, through Ministry of Health, supplies equipment to the whole country	
<b>Training</b>	<ul style="list-style-type: none"> <li>All districts visited (except Aileu) have had staff trained on IMAM (doctors, midwives, nurses, etc.) with last training said to have been held in 2018</li> <li>Most trainings have been organized through national level so it is not possible to detect if they are funded specifically by WFP. In most cases these have been co-supported by the various UN agencies</li> <li>Other types of training received include; interpersonal communication, other SNIP modules (micronutrients, infant and young child feeding etc.) – It is not clear if WFP has supported training beyond IMAM</li> </ul>			Nurse interviewed in Madabeno health post mentioned last training was in 2008 Received posters in 2015 (not from WFP)	An INS-led training was also said to have taken place in Dili in 2019 (Maubisse CHC)
<b>Integrated community health and nutrition services (SISCa)</b>	<ul style="list-style-type: none"> <li>Community mobilization through the SISCa programme, which is supposed to take place once a</li> </ul>	Balibo CHC mentioned			No funding for SISCa since Jan 19

Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
	<p>month/suco (village). Community leaders are involved in mobilizing communities</p> <ul style="list-style-type: none"> <li>WFP facilitated the implementation of integrated outreaches through SISCa. This included delivery of priority health and nutrition services including cooking demos, screening for malnutrition and distribution of MAM food supplies (when available)</li> <li>SISCa has helped to engage with communities and receive services even if they do not come to the facility (Balibo HC)</li> </ul>	involvement of their leaders			
<b>SBCC (including interpersonal communication or IPC)</b>	<ul style="list-style-type: none"> <li>Main current intervention for clients with MAM is counselling both interpersonal and group and SBCC on nutrition since 7 of 10 facilities visited reported no food supplies for treating clients with MAM. It is not clear what type of messages are being provided to clients with MAM nor the consistency of the messages on home-based approaches for treating MAM</li> <li>Development of various types of posters. All facilities had IEC materials visibly displayed, of which some (not all) were WFP supported</li> <li>Various nutrition IEC materials have been distributed to the municipalities developed by different partners; UNICEF supports the Family Care Practices package, which was found in some of the facilities visited, WHO, ALOLA Foundation and TOMAK have also developed other nutrition IEC materials</li> <li>WFP supported the procurement of televisions for health facilities to air nutrition, other health-related or government messages. Televisions were visibly observed in 2 facilities</li> </ul>	Bobonaro Director of Health Services stated that routine services (mainly SBCC) for MAM cases would go on without WFP Balibo CHC received a television	Ermera CHC stated that cooking demos are not as regular since WFP support ended	Madabeno health post does not have funds to conduct cooking demos but used to receive support from Alola Foundation (ended in 2014)  Last demo was in 2014  Madabeno health post provides counselling for MAM clients	Ainaro CHC: last cooking demo training was in July 2018  No demos held in 2019  No cooking demos done in 2019 – Maubisse CHC

Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
	<ul style="list-style-type: none"> <li>WFP supported the development of a package of nutrition materials mainly during the DEV period (2015–2017) which were reprinted and disseminated in 2018 under the country strategic plan</li> <li>All facilities in all municipalities (except Aileu) reported the implementation of cooking demonstrations on appropriate use and preparation of the supplementary food ration in addition to how to make use of locally available foods. These were conducted at both facility and community level through SISCa</li> <li>WFP supported by facilitating transport to the various SISCa community points and using its hired staff to support cooking demos</li> <li>Worked with mother support groups to promote consumption and preparation of local food for children at schools (Maliana CHC) and promoting iron rich foods through cooking demos targeting adolescent girls</li> </ul>			<p>and shows how to prepare local foods</p> <p>Megaphones were provided by Japan International Cooperation Agency (JICA) to support health post</p>	



Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
<b>Provision, distribution, transportation (logistics support) and storage of supplementary food supplies</b>	<ul style="list-style-type: none"> <li>WFP has filled the gaps that are not easily supported by the Government particularly food commodities, according to some Ministry of Health staff</li> <li>A WFP vehicle was often used to deliver supplies (both nutrition and other supplies to lower-level facilities) but this still isn't enough</li> <li>Have had different MAM/supplementary food supplies provided over the years; Corn Soya Blend, Super Cereal/Super Cereal Plus, Timor Vita (locally produced version of Super Cereal) and ready-to-use supplementary food (RUSF or Plumpy'Sup)</li> <li>Recent communication from Ministry of Health was that were changing from Super Cereal to Super Cereal Plus for both PLW and children</li> <li>6kg of Super Cereal is provided /month – PLW</li> <li>30 sachets per month are provided for children 6–59 months</li> <li>Stocks stopped in February 2019 for children under five years however, some supplies were available for PLW.</li> <li>3 of 10 (30 percent) facilities visited reported having Super Cereal in stock at the time of the visit</li> <li>WFP supported distribution, transportation and storage of MAM supplies to lower-level facilities prior to the hand over to the Government in 2019</li> <li>WFP staff used to follow up on deliveries from SAMES and support with stock monitoring and supply use. Process for receiving supplies; health posts/CHCs send monthly reports with supply requests to municipal/district office. Then the district office sends</li> </ul>	District Office reported having Super Cereal stocks for PLW only Balibo CHC had stocks Maliana had no stocks	Ermera municipality mentioned that the one vehicle that WFP had at the municipality was still not enough to reach all the facilities  Ermera municipality only had 3 CHCs out of 6 CHCs with proper storage facilities for nutrition/other supplies Ermera has some supplies of Super Cereal in stock  District office stated last delivery of Super Cereal plus was in Sep 2019  Railaco CHC had Super Cereal in	RUTF was in stock in Madabeno health post not Super Cereal (control district, thus not receiving Supplementary Food Product)  Receive Micro Nutrient Powders from UNICEF/Ministry of Health  No support from WFP	Have not had Super Cereal supplies since July 2019  CHC Ainaro did not have any Super Cereal in stock (none had been received in 2019)  Hautio CHC received last consignment of Super Cereal in Feb 2019  Maubisse CHC did not have Super Cereal in stock and have not received any in 2019 but Plumpy'Nut in stock

Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
	their consolidated monthly reports to Ministry of Health, SAMES and WFP. Supplies are sent on the basis of these reports		stock which could last till Dec 2019		
<b>Local production of nutritious foods (Timor Vita)</b>	All knew about the product but did have more information on why the product was no longer being produced locally				
<b>Treatment and follow up of malnourished children and PLW</b>	<ul style="list-style-type: none"> <li>From the 10 facilities visited and based on a random review of monthly reports from 3 facilities, an average of 4 MAM cases and 2 SAM cases per month (CU5) and an average of 26 MAM PLW cases per month</li> <li>Two facilities (both in Ainaro municipality) reported providing RUTF (meant for the treatment of SAM without complications) to MAM cases since they do not have supplementary feeding programme supplies</li> </ul>	Balibo CHC- 2 SAM cases in Nov 2019, 7 MAM cases (5 girls and 2 boys) 12 MAM cases in PLW (Sep 2019)	Ermera CHC reported a perceived MAM coverage of 73% 7 cases of MAM in Nov 2019 (4 boys and 3 girls)  Railaco had 1 case of SAM (Nov		Ainaro CHC and Maubisse CHC are currently providing RUTF for MAM cases  Maubisse CHC is providing

Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
	<ul style="list-style-type: none"> <li>Quantities of RUTF being provided for MAM are being estimated in the same way as for SAM cases. No guidance has yet been provided by the Ministry of Health and its partners</li> <li>Follow up in some facilities is by phone call to clients or caregivers to check on their progress and remind them to come for visits. (Ainaro CHC and Maubisse CHC)</li> </ul>		19) and 3 cases of MAM – CU5 59 MAM cases in PLW (Oct-Nov)		same quantities of RUTF for both MAM and SAM cases
<b>Technical assistance/on the job mentoring/supervision (HR support)</b>	<ul style="list-style-type: none"> <li>All municipal offices (except Aileu, the control) reported the support provided by WFP staff in following up reports, providing on the job support to staff at health posts, CHCs and at the municipal level in order to compile nutrition reports and submit them to national level</li> <li>Monthly support supervision is provided jointly between WFP, District Public Health Officer-Nutrition and other district health team members</li> <li>WFP staff also provided support to ensure nutrition data were reported in the government system (THIS/DHIS2) in addition to inputting of data in their own parallel system</li> <li>Separate forms/registers were observed for WFP and for the government system</li> <li>Full integration of nutrition indicators in the government system despite challenges in data accuracy</li> <li>All districts have nutrition coordinators supported by UNICEF/the Ministry of Health /EU on contract working at CHC level (support began in mid-2018)</li> </ul>				

Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
<b>Monitoring and reporting</b>	<ul style="list-style-type: none"> <li>WFP supported the compilation of MAM data right from the government registers, individual treatment cards, CHC, health post reporting forms and municipal report forms (TLHIS/04 – Nutrition). The municipal nutrition forms are sent to the Ministry of Health, etc.</li> <li>In addition, WFP has a separate monthly tool that is filled in by WFP-paid staff based in the municipality and sent to WFP Dili office</li> <li>Concern from district and facility staff that the quantity and quality of nutrition reporting will be affected due to recent termination of WFP staff contracts</li> </ul>	Bobonaro municipality reported this			
<b>Programme hand over</b>	<ul style="list-style-type: none"> <li>No formal communication from WFP or the Government, according to most municipalities</li> <li>Short time for hand-over</li> <li>Abrupt termination of WFP staff contracts.</li> <li>Feel that they would manage after a few months but staff and beneficiaries would be affected at the beginning</li> </ul>	Maliana CHC received communication about change in MAM product in April 2019 but nothing regarding handing over programme to Government of Timor-Leste	<p>Were told that Super Cereal supplies would soon run out since WFP handed over to Government</p> <p>Railaco CHC had not received any information on next steps after WFP hand over</p>		

Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
<b>Discussion guide question: What are your priorities in addressing the needs of the most vulnerable? How are the activities supported by WFP in line with these? (Aligned to EQ1.1 and 1.2)</b>					
<b>Timely deliveries of health and nutrition supplies (logistics support)</b>	Ensuring supplies required for health service delivery is a key priority of the health department		Mentioned by Ermera municipal office		X
<b>Budget for food supplies or other programme activities</b>	Without sufficient funds (from the Government or its partners) activities cannot be implemented and thus a key priority		District health office (DHO) stated this		
<b>Human resources</b>	Ensuring that there are sufficient HR particularly at lower levels i.e. health posts since these are the main centres for service delivery		Ermera DHO stated that without sufficient HR there is limited sustainability		
<b>Food security/household income</b>	<ul style="list-style-type: none"> <li>Ability to purchase and access food for a proper nutritious diet is a major challenge and priority</li> <li>Affordability due to inadequate income or limited livelihood options is a priority in Timor-Leste</li> <li>For example; high prices of meat USD 15 per chicken and USD 8 per kg of beef (stated by Aileu municipality DHO)</li> </ul>			Madabeno health volunteer: "Poverty affects ability to feed children. Main diet is beans, eggs and veg. Do not drink cow's milk".	
<b>High malnutrition</b>	<ul style="list-style-type: none"> <li>All malnutrition indicators are a problem and a priority (stunting, wasting, underweight and anaemia)</li> <li>Even though malnutrition (stunting) appears to be improving, it remains a major problem and a high</li> </ul>	Improvement in nutrition situation stated by Bobonaro	Ermera district office noted improvements in nutrition situation	All types of malnutrition are a priority but should be	

Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
	<p>government priority as noted in the National Nutrition Strategy, SNIP guideline etc</p> <ul style="list-style-type: none"> <li>Addressing malnutrition in an integrated manner especially treatment of acute malnutrition. There is a need to ensure integration of SAM and MAM treatment without treating them as parallel programmes</li> <li>Prevention of malnutrition</li> </ul>	health office, Maliana CHC, Balibo CHC	Ermera has one of the highest malnutrition rates in the country	addressed simultaneously	
<b>Lack of knowledge</b>	Broader prevention is a priority and counselling on local food options, diets and recipes is very important			X	
<b>Discussion guide question: What are the perceived benefits and impact of WFP support (Aligned to EQ 2.1 –effectiveness and EQ 3 –efficiency)</b>					
<b>High attendance and participation of beneficiaries</b>	This was stated by all facilities visited in addition to Aileu (as a control)			Even though do not receive food support from WFP, they perceive this as a benefit mainly for PLW	
<b>Supporting the most at risk or vulnerable</b>	Treatment of malnutrition (SAM or MAM) ensures WFP is supporting the most at risk of morbidity or mortality				
<b>Food supplies</b>	<ul style="list-style-type: none"> <li>Main advantage of WFP support is that it provided food supplies directly and would distribute these to all facilities</li> <li>This also helped with distribution of other medical/health supplies to lower level facilities</li> </ul>	Most beneficial support from WFP (Balibo CHC)	Railaco CHC stated that WFP strength is the provision of food. No one does it better than them		

Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
<b>HR support/capacity building.</b>	<ul style="list-style-type: none"> <li>WFP staff have been a welcome addition to their structure and supported to fill their HR gap</li> <li>WFP staff have provided the much needed on-the-job mentoring and capacity building of health staff at all levels</li> <li>Especially for reviewing and preparing the nutrition report</li> </ul>				
<b>Nutrition/health promotion and education including cooking demonstrations</b>	<p>Cooking demonstrations provided very practical help to communities in making the most of available local foods (sharing of local recipes)</p> <p>Almost all facilities acknowledged WFP support with this</p>	Most beneficial support from WFP (Balibo CHC)	Railaco CHC; cooking demonstrations at schools and through SISCa		Maubisse CHC; promotion was very good; showing the preparation of food techniques using local foods
<b>Discussion guide question: How do you, through WFP support, collaborate with other sectors and/or partners (Aligned to EQ 4.3 – Collaboration and partnerships)</b>					
<b>Coordination of nutrition activities with other sectors</b>	This was stated as weak by two of the four municipality health offices visited	Bobonaro health office stated that agricultural extension officers exist (1 per <i>suco</i> ) but do not have	Have KONSSANTIL coordination structure at municipality level but it is weak		

Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
		the knowledge on nutrition	Mostly meet with agriculture and education sectors during district meetings		
<b>Collaboration with other partners</b>	<ul style="list-style-type: none"> <li>WFP and UNICEF collaboration is evident since there are clear roles or mandates between what was observed to be supported by the respective agencies</li> <li>For some activities like training, support supervision etc. it was not clear to the health service providers which of the partners was supporting what since collaboration is handled at the national level</li> <li>Also, in relation to support for HR, UNICEF, through the Ministry of Health, has been supporting contract nutrition staff at CHC level in all districts in the country through European Union support; while WFP supported its own staff in the six districts where it operated at municipal level</li> <li>Multiple partners support the implementation of nutrition activities in the various districts visited; World Vision, TOMAK, Alola Foundation, CARE International</li> <li>Main donors observed to support nutrition activities; AUSAID, KOICA, EU, JICA and USAID</li> </ul>		Coordination is mainly happening with schools/education sector		
<b>Discussion guide question: What are your challenges (Aligned to EQ 2.1, 2.3-sustainability and EQ 3)</b>					
<b>Inconsistent deliveries</b>	This has been observed most when SAMES took over the deliveries. It used to be better when WFP was in charge of distribution (Balibo CHC)		Municipality health office stated quantities received are not	Do not have enough stores (only 2 of 4 CHCs have	District health office reported that they do not



Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
	<p>Some facilities reported getting fewer supplies than what was requested, thus compromising the treatment of MAM cases</p> <p>Supply shortages occur for both SAM and MAM supplies</p> <p>Infrequent deliveries reduce trust between health workers (HWs) and beneficiaries</p> <p>Lower participation in services from shift from MCHN (blanket SFP) to TSFP and now with limited MAM food supplies (Hautio CHC-Ainaro)</p>		usually in line with what was requested	stores) nor experience in stores management	receive what are supposed to e.g. for 4 rations requested they only receive 2 rations i.e. only 50%
<b>Inadequate distribution to lower-level facilities below municipality level</b>	<p>All facilities complained that the SAMES distribution of supplies stops at the municipality level yet WFP used to support the distribution to the lower levels</p> <p>Due to ongoing hand over to Government, there was also limited transportation for supplies to be used during the SISCa programme; this had reduced the likelihood of implementing SISCa</p>			Also have a challenge of distributing all their medical supplies to lower levels	
<b>Staffing/HR</b>	<p>Not all facilities appeared to be fully staffed</p> <p>Delayed payment to nutrition coordinators on contract. They are not being paid regularly</p> <p>Nutrition coordinators currently in place at CHCs are temporary/contract staff of the Ministry of Health and not part of the formal Ministry of Health structure</p>		Of actual staff required in a CHC, Ermera had 2 of 4 nurses required, 3 of 4 midwives. All other staff were in place. Nutrition coordinator	Aileu District health office stated staffing gaps were a challenge	CHC Hautio stated that contract nutrition staff received only 2 months' salary for the whole year

Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
			Railaco had not been paid for 3 months		
<b>Lack of continuity of WFP-supported supplies</b>	Lack of sustainability of resources to ensure continuity of supplies was a major concern – this is linked to issue below of over-dependence on external resources				Complaints from beneficiaries due to change in products - CHC Hautio
<b>Accuracy in reporting</b>	Data is often misrepresented or reported (at all levels)	Stated by Bobonaro health office			
<b>Perceived lack of continuity on nutrition reporting</b>	Due to recent and abrupt termination of WFP staff contracts there is a general concern that this will no longer be done properly or at all				
<b>Dependency on external food supplies</b>				Stated by Aileu DHO	
<b>Other observations</b>					
<b>Understanding/knowledge of treatment protocols</b>	<ul style="list-style-type: none"> <li>• Three facilities demonstrated some information or knowledge gaps regarding the treatment protocols, also on what the exact role of WFP had been</li> <li>• This was most evident when discussions were held with just the Directors of the facilities</li> </ul>				
<b>Confusion over types of commodities provided and for which target group</b>	<ul style="list-style-type: none"> <li>• Due to the numerous types of commodities provided in the municipalities over the years, there is some confusion over what types are actually being provided and for which target group. For example, at the time of</li> </ul>				

Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
	<p>the visit only malnourished PLW were supposed to be given Super Cereal</p> <ul style="list-style-type: none"> <li>Furthermore, RUTF was reported to be given for MAM cases in two facilities (mainly in Ainaro district)</li> </ul>				
<b>Limited involvement, engagement or empowerment of community health workers or health volunteers (HVs)</b>	<ul style="list-style-type: none"> <li>Balibo CHC reported that HVs are supposed to do regular screening of malnutrition at community level but this is not happening</li> <li>HVs are given USD 5 per day as an incentive since are not salaried</li> <li>No reporting tool on screening for malnutrition by HVs exists; only through SISCa programme</li> <li>Infrequent training of HVs (Madabeno HV stated she had only been trained once or twice in the last 3-4 years). Previous training was an integrated health and nutrition package (probably Family Care Practices)</li> <li>A communications consultant for UNICEF STOP Immunization (Berissa Abdella) stated that this was a big gap in Timor-Leste and that there was need to equip HVs with knowledge, IEC materials or tools to convey messages at household level</li> </ul>			HV from Madabeno Health Post mentioned he did not keep any MUAC tapes nor did he have any IEC materials to support household visits	
<b>Informant recommendations</b>					
	<p>Focus on health/nutrition promotion activities to prevent malnutrition; emphasis on promoting production, preparation and consumption of locally available foods</p> <p>Continued food supplementation</p>		Ermera DHO stated that it is more about knowledge than treatment		

Theme in line with evaluation question and discussion guide	Summary of key findings	Findings specific to respective districts			
		Bobonaro	Ermera	Aileu	Ainaro
	Simplify reporting tools				Stated by Maubisse CHC
	Support small-scale production/processing of foods utilizing existing foods – local capacity building		Railaco CHC		Focus on capacity building on local production or food processing
	Mobilization of farmers to enhance local production efforts e.g. rice and corn etc.				
	Outreach programmes (SISCa) need more support as part of either SISCa or Saude de Familia (households visits programme being piloted in Ainaro – replaces SISCa)				
	Capacity building of nutrition coordinators (especially new ones) and refresher training for older ones and other health workers on IMAM, use of tools etc.				Maubisse had a very new nutrition coordinator who had not yet received any training

### Group discussion guide: staff at health facilities

40. At each health facility that the evaluation team visited, a group discussion was requested with staff directly responsible for mother and child health and nutrition, covering the points set out in the table below.

41. The evaluation team began all meetings, interviews and focus group discussions with personal introductions, an exploration of participants' backgrounds and job descriptions, an explanation of the country strategic plan evaluation, an assurance of neutrality and confidentiality, and a check on participant willingness to proceed. They emphasized that participation would have no negative effects on participant interests, and that anyone who did not wish to take part was free to withdraw without negative consequences.

42. Numbering refers to the questions in the evaluation matrix.

**Table 39. Interview guide for group discussions with health facilities**

Evaluation matrix question number	Discussion points
2.1	What are the main health and nutrition challenges for children aged under five in your catchment area?
2.1	What are the main health and nutrition challenges for pregnant and lactating women (PLW) in your catchment area?
2.1	Is stunting an issue in your catchment area? Please explain your answer.
2.1	Should anything be done to prevent stunting? If so, what?
2.1	Should anything be done to prevent other nutrition challenges for children under five or PLW?
2.1	What SBCC programmes are implemented by this health facility, and what subjects do they cover?
2.1	How are nutrition activities monitored and reported at this health facility?
2.1	What training have you (or colleagues) received on SBCC about nutrition? When and how often was/is it done, and what subjects were covered? How was the training done (e.g. by interpersonal counselling, drama), and what materials were used? Was the training useful?
2.1	Do you and colleagues need more training on SBCC about nutrition, or do you feel fully informed and competent on this issue?
1.1	What sort of support has WFP provided to health and nutrition services in this area? Please give details of the type and frequency of support provided
2.1	What are the main challenges for this health facility in providing optimum nutrition services to the people of the area?

# Annex XIII. Capacity-Strengthening Contributions along Five Country Capacity Strengthening Pathways

1. The WFP Country Capacity Strengthening Corporate Framework<sup>105</sup> seeks to contribute to sustainable capacity strengthening by conducting capacity-strengthening activities in three domains: (1) the enabling environment; (2) the organizational domain; (3) the individual domain. It describes these domains as follows.

- **Enabling environment:** “The enabling environment describes the broader system within which individuals and organizations function, that facilitates (or hampers) their existence and performance. It may refer to the broader, macro-context, or alternatively, a narrower environment or system within an organization or sector. This domain determines the ‘rules of the game’ for how a society operates, including the interaction between and among organizations and government units, and with the private sector and civil society; it is here that the conditions are created that will allow for the effective development of individual and organizational capacities. It sets the context for capacity strengthening and determines the changes that may be necessary to ensure results.”
- **Organizational domain:** “It encompasses the internal policies, systems and strategies, arrangements, procedures and frameworks – including programme design and delivery – that allow an organization to operate and deliver on its mandate and that enable the coming together of individual capacities to holistically and harmoniously work to achieve goals. If these exist, are well-resourced and well-aligned, the capacity of an organization to perform will be greater than that of the sum of its parts. Capacities at the level of the organization also include such things as leadership, the organization’s ability to engage, to produce results and to manage change, as well as to provide relevant rewards and incentives, to adapt and self-renew.”
- **Individual domain:** “This domain relates to the skills and knowledge that are vested in people (individuals, communities, groups, teams). Each person is endowed with a mix of capacities that allows them to perform, whether at home, at work, or in society at large. Capacities at this level are acquired through formal education, training, learning by doing and experience, and increasingly through coaching and mentoring, networks, communities of practice and platform mechanisms. Individuals can absorb any combination of hard and soft skills that can be expressed and acted upon to further specific achievements within their individual spheres or larger collective groups/entities e.g., communities, organizations, networks, etc.”<sup>106</sup>

2. The country capacity strengthening framework identifies five different pathways through which WFP country offices can strengthen national capacities across these domains (paragraph 13, Annex II). For each impact pathway, several entry points are identified, and these are accompanied by a menu of process milestones that country offices can work toward to meaningfully contribute to the impact pathway.

3. The evaluation team used these pathways as a framework within which to structure its findings about the capacity-strengthening work undertaken in implementation of the Timor-Leste country strategic plan to date. While it did not assess all the milestones and entry points specified in the Country Capacity Strengthening Corporate Framework, it used elements of this framework to understand better the extent to which the Timor-Leste country office is contributing the three levels of capacity strengthening. This analysis was informed by the outcome harvesting exercises undertaken with selected partners (Annex II) and by semi-structured interviews.

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<sup>105</sup> WFP, 2017. WFP Corporate Approach to Country Capacity Strengthening (CCS). Rome: WFP CCS Toolkit Component 1.

<sup>106</sup> Ibid, p. 3.

**Table 40. Country capacity-strengthening retrofitting exercise: findings**

Entry points	Evidence of progress towards process milestones
<b>PATHWAY 1: POLICIES AND LEGISLATION</b>	
<b>1.1 Specific sectoral or multisectoral food and nutrition security policy</b>	
1.1.1 Stakeholder support in developing and promoting a food and nutrition security sensitive sectoral or multisectoral instrument	Enabling environment: WFP has advocated the importance of rice fortification in Timor-Leste and provided technical guidance for the development of a draft law on food fortification. The law has been submitted to the Ministry of Commerce, but is still pending approval. WFP informants explained to the evaluation team that the country office currently has very good relations with the Government of Timor-Leste at a technical level, but does not have such a relationship at the ministerial level, thereby significantly hindering its ability to influence policies and legislation.
<b>1.2 Integration with other sector-specific policies</b>	
1.2.1 Stakeholder support in achieving relevant integration in other sector-specific instruments	Enabling environment: Limited evidence overall. The country office has raised awareness on the importance of addressing nutrition (and more particularly among adolescent girls) by disseminating the findings of studies on food and nutrition security (FNS) to the Government, United Nations partners and donors. However, as noted above, limited relationships at the political level curtail the country office's ability to influence the enabling environment.
<b>1.3 Policy dissemination mechanisms</b>	
1.3.1 Stakeholder support in strengthening effective dissemination of relevant information	No evidence of support found in the area.
<b>1.4 International/regional partnerships</b>	
1.4.1 Stakeholder support in increasing engagement in relevant global and regional fora (including through South South Cooperation)	Individual domain: WFP has supported the participation of several government representatives in regional forums (for example, seminar on school feeding in Cambodia). WFP also spearheaded a symposium in Bali where relevant line ministries (for example, the Ministry of Health) and partners were invited to attend. These events seek to build individual capacities, although it is still too early to know the extent to which knowledge learned by participants has been applied in Timor-Leste.
<b>PATHWAY 2: INSTITUTIONAL EFFECTIVENESS AND ACCOUNTABILITY</b>	
<b>2.1 Institutional mandate and recognition</b>	
2.1.1 Stakeholder support in strengthening institutional mandate and recognition	No evidence of support found in the area.
<b>2.2 Co-ordination mechanisms and accountability</b>	
2.2.1 Stakeholder support in strengthening relevant institutional coordination mechanisms	Enabling environment: <b>Technical level:</b> In late 2018, KONSSANTIL, jointly with WFP, conducted a National Consultation on Rice Fortification, which led to the creation of a technical working group on the subject, mandated to work on the implementation of recommendations that emerged from the consultations. KONSSANTIL informants confirmed that WFP developed the terms of reference of the technical working

Entry points	Evidence of progress towards process milestones
	<p>group, regularly attends its meetings, and provides technical support for the implementation of recommendations.</p> <p><b>Political level:</b> Several partners and government informants noted a number of shortcomings within KONSSANTIL – the Government’s coordinating body on matters of food and nutrition safety – which have hindered its ability to effectively fulfil its co-ordinating function. KONSSANTIL’s Secretariat sits within the Ministry of Agriculture and has no legal recognition. It therefore has little traction to convene other ministries, especially at the political level. In June 2019, WFP, jointly with FAO, advocated for the KONSSANTIL Secretariat to be moved to the Office of the Prime Minister, but these efforts proved unsuccessful.</p> <p>In August 2019, WHO spearheaded a joint United Nations presentation (in which WFP actively participated) to all Parliamentarians in an effort to raise awareness on the importance of food and nutrition security in Timor-Leste. A United Nations informant mentioned that this presentation likely influenced the Government in its recent decision to join the SUN movement. This successful experience indicates that, in a country where WFP has little traction at the political level, developing strategic partnerships with other United Nations agencies that have stronger connections at that level is an effective way to influence decision-making on food and nutrition security.</p>
<b>2.3 Information management systems</b>	
2.3.1 Stakeholder support in designing and developing relevant digital information management systems	Organizational domain: In the country strategic plan, WFP sought to offer its support to the Ministry of Social Solidarity and Inclusion to integrate the WFP corporate digital beneficiary and transfer management platform (SCOPE), which would allow the ministry to better collect and monitor sex-disaggregated data on beneficiaries. However, other agencies have similar systems (for example, the World Bank and its SIGAS system) and have also offered their support to the Ministry of Social Solidarity and Inclusion. At the time of the evaluation mission there was little Ministry of Social Solidarity and Inclusion interest in working with WFP on SCOPE.
2.3.2 Stakeholder support in rolling-out relevant digital information management systems	As above.
<b>2.4 Assets, platforms and infrastructure</b>	
2.4.1 Stakeholder support in designing and developing relevant assets, platforms and/or infrastructure	Organizational domain: WFP provided support to SAMES for the implementation of mSupply (a system used for procurement, inventory management system and tendering), thus building institutional capacity for supply chain management. However, the Government rejected mSupply because it wished to use its own nationally developed information system. While mSupply is still being used, it will likely be discontinued once the Government develops its own system. Once again, this shows that shifting government priorities significantly hinder WFP ability to strengthen institutional capacities. WFP supported the development of a repository on SBCC. Owned by the Ministry of Health, the platform is currently housed under Catalpa.
2.4.2 Stakeholder support in utilizing, maintaining and managing relevant assets, platforms and/or infrastructure	No evidence.



Entry points	Evidence of progress towards process milestones
<b>2.5 National/local partnerships</b>	
2.5.1 Stakeholder support in strengthening relevant national and local partnerships	No evidence.
<b>PATHWAY 3: STRATEGIC PLANNING AND FINANCING</b>	
<b>3.1 Strategic planning</b>	
3.1 Stakeholder support in articulating relevant strategic roadmaps and/or costed action plans	Organizational domain: In Timor-Leste, there are many scattered strategies on food and nutrition security and it has been difficult for the Government to set priorities for implementation. Jointly with FAO, WHO has provided support to KONSSANTIL to consolidate 171 priorities and establish a roadmap to operationalize them. However, the evaluation did not find evidence of WFP support for the development of costed action plans.
<b>3.2 Value proposition</b>	
3.2.1 Stakeholder support in articulating relevant evidence-based value proposition statements	The evaluation team did not find evidence that WFP has provided support to partners of the Government of Timor-Leste for the articulation of evidence-based policy statements.
<b>3.3 Sustainable financing</b>	
3.3 Stakeholder support in advocating for required financing mechanisms and models	Enabling environment: The evaluation team did not find evidence that WFP has advocated financing mechanisms on food and nutrition security. As for policy making, limited WFP engagement at ministry level has hindered its ability to advocate financing mechanisms and models on food and nutrition security. Budgetary allocations for nutrition within the Ministry of Health are inadequate and require further support. Furthermore, technical staff of the Ministry of Education, Youth and Sport explained that they have recently submitted a proposal to increase budget allocations for the school feeding programme but it is not yet clear whether it will be approved. Given the ongoing difficulties experienced by the Government in funding this programme, more advocacy for financing is needed.
<b>3.4 Financial management systems</b>	
3.4. Stakeholder support in designing and developing digital financial information management systems	No evidence of support found in this area.
3.4.2 Stakeholder support in rolling-out relevant digital financial information management systems	No evidence.

Entry points	Evidence of progress towards process milestones
<b>PATHWAY 4: STAKEHOLDER PROGRAMME DESIGN, DELIVERY AND MONITORING AND EVALUATION</b>	
<b>4.1 Programme design and delivery</b>	
4.1.1 Stakeholder support in strengthening relevant programme design	No evidence.
4.1.2 Stakeholder support in strengthening relevant programme delivery	<p>Organizational and individual domains: WFP has provided support to SAMES to enhance the institution's capacity in the delivery of nutrition items. For example, WFP trained SAMES on storage and warehouse management. SAMES staff confirmed that WFP support has effectively strengthened their capacities in storage and distribution. They noted that they are now knowledgeable about the composition of nutrition items and their shelf life. WFP has also taught them how to repackage commodities so that they can be more easily distributed and to better manage distribution lead time. However, SAMES staff explained that they are still experiencing difficulties in the procurement of items from suppliers and require more support in this area.</p> <p>WFP has also supported numerous trainings in other areas; for example, nutrition training delivered by the National Health Institute with WFP support as part of the SNIP.</p>
4.1.3 Stakeholder support in disseminating relevant information on programme design and delivery to key stakeholders	No evidence.
<b>4.2 Evidence-based approach</b>	
4.2.1 Stakeholder support in strengthening relevant monitoring and evaluation practices and procedures	Organizational domain: Little progress has been made in building institutional monitoring and evaluation systems for the monitoring of food and nutrition security programmes. The Ministry of Education, Youth and Sport told the evaluation team that they would like to receive support from WFP for the development of a monitoring and evaluation system for the school feeding programme, but explained that a memorandum of understanding was still pending. Informants from the Nutrition Department of the Ministry of Health also confirmed that they requested WFP support for their monitoring and evaluation programme, but never received a response.
4.2.2 Stakeholder support in ensuring evidence informs the design and delivery of relevant solutions	<p>Enabling environment: WFP has made strong attempts to influence the environment by generating new evidence (i.e., TOMAK formative research, the Fill the Nutrient Gap study), and data from interviews with WFP staff and government partners indicate that results will likely be considered in some programmes. The Ministry of Education, Youth and Sport is already using findings to review its school menu. However, some limitations of the Fill the Nutrient Gap study (i.e., small sample size) may, according to some government informants, limit its usefulness.</p> <p>In August-September 2019, WFP conducted acceptability trials of rice fortification in two schools in Dili to generate evidence on the level of acceptability among students and the cost-efficiency of using rice fortification. Results are expected to feed into ongoing efforts to integrate food fortification into the SFP.</p>
<b>4.3 Stakeholder implementation capacity</b>	

Entry points	Evidence of progress towards process milestones
4.3.1 Stakeholder support with training-of-trainers in improved/revise programme design.	Not assessed.
4.3.2 Stakeholder support with training-of-trainers in improved/revise programme delivery	Individual domain: In 2018, WFP conducted a training of trainers on supply chain management for SAMES alongside the Ministry of Health, with a view to building institutional capacities within these organizations. Non-governmental organizations also received the training so that they could replicate capacity-building workshops. SAMES staff have replicated the training, but others reported difficulties in deploying the tools and skills they learned because of changes in governments, political obstacles etc.
4.3.3 Stakeholder support with training-of-trainers in improved/revise programme monitoring and evaluation	Not assessed.
4.3.4 Stakeholder support with programme implementation	Not assessed.
<b>PATHWAY 5: ENGAGEMENT AND PARTICIPATION OF COMMUNITY, CIVIL SOCIETY AND PRIVATE SECTOR</b>	
<b>5.1 Civil society, community and private sector engagement in programme design and delivery</b>	
5.1.1 Stakeholder support in increasing engagement of other actors in relevant programme design	Not assessed
5.1.2 Stakeholder support in increasing engagement of other actors in relevant programme delivery	Enabling environment: In the country capacity-strengthening framework, developing strategic partnerships with civil society and the private sector is seen as a central element in fostering an enabling environment, as these entities are sustainable and can support the Government over time. The evaluation found that, under the country strategic plan, WFP has established relatively few non-government partners. WFP engaged with the private sector to build its capacity for the local production of nutrition items but this had limited success.
5.1.3 Stakeholder support in increasing engagement of other actors in relevant programme monitoring and evaluation	Not assessed.

Entry points	Evidence of progress towards process milestones
<b>5.2 Civil society, community and private sector programme participation as beneficiaries</b>	
5.2.1 Stakeholder support in increasing other actor participation in relevant programme (as beneficiaries)	Not assessed.
<b>5.3 National research agenda</b>	
5.3.1 Stakeholder support in establishing a relevant research agenda	Enabling environment: WFP signed a memorandum of understanding with the UNTL. However, this memorandum of understanding has only been partly implemented. The only action implemented so far is the internship programme through which UNTL sends university students to complete an internship at WFP. So far, four interns were selected to participate in the Fill the Nutrient Gap study. However, WFP has not yet supported the development of a national research agenda, a key element of the country capacity-strengthening framework to foster an enabling environment. UNTL informants said that they would like to receive WFP support to conduct research on food and nutrition security.
5.3.2 Stakeholder support in developing higher-level educational programmes to build relevant national professional capacity	Organizational and individual domains: This has been limited to an internship programme at WFP, in which a few UNTL students have participated. The evaluation did not find evidence that WFP has made attempts to integrate food and nutrition security issues into higher-level educational curricula.

# Annex XIV. School Feeding: Background, WFP Role and Field Observations

## Introduction: Merenda Eskolar

1. **Merenda Eskolar (ME) is a school feeding programme implemented by the Government of Timor-Leste.** It is a component of the National Education Strategic Plan (2011–2030).<sup>107</sup> Merenda Eskolar targets almost 280,000 students across 1,200 public and private schools. At municipality level, public schools are organized in clusters. A number of central primary schools, *escolas basicas centrales* (EBCs), located in the main communities serve as an umbrella for the branch primary schools, *escolas basicas filiales* (EBFs), located in small villages and hamlets. EBCs centralize and coordinate school feeding budgets and rice distribution, as well as reporting on behalf of the EBFs. From the budgetary perspective, Merenda Eskolar consists of different elements, as identified by the evaluation team and an earlier study:<sup>108</sup>

- A **USD 0.25/student/school day cash transfer** to schools based on the number of students for the previous year (2019 calculated on the basis of 2018 student numbers). This element is for purchasing food (meat, eggs, fish and vegetables). This budget is first transferred to the municipalities after its approval. Then, the municipalities approve and transfer the budget to schools. The budget transfer is usually done through bank accounts.
- A **food transfer (rice)**. The National Logistic Centre's budget for procuring and purchasing rice from overseas is not a part of the Merenda Eskolar annual budget. However, some expenses related to food distribution are covered by the Merenda Eskolar budget.
  - Expenses occurred during the distribution of rice from the National Logistics Centre to municipalities: these expenses include trucks, drivers, and all transport expenses operated and handled by the Ministry of Education, Youth and Sport
  - Additional money is transferred to municipalities to be used for last-mile distribution of rice to schools. This type of distribution is usually handled by logistics providers (i.e. the contractors of municipalities)
  - Expenses for operating National Logistics Centre warehouses, which includes staff and warehouse maintenance. The budget flows directly from the Ministry of Finance to the National Logistics Centre.
- **Salary of the cooks**. Each school employs cooks, who are each paid a salary of USD 50 per month by the Ministry of Education, Youth and Sport to procure the food, prepare the meals and clean up after the meals. The number of cooks employed varies, depending on the number of students (one cook per 0–300 students; two additional cooks for groups of 300–700 students; groups of over 700 students get one additional cook).
- **Budget for purchasing new catering equipment** such as pans, forks, spoons, and dishes. This is based on spot-requests from schools, but the budget has not been available since 2014.

## The role of WFP in Merenda Eskolar

2. **WFP has had limited engagement in the Merenda Eskolar programme during the scope of this evaluation (2015–2019).** The Merenda Eskolar programme was created by WFP, which handed it over to the Government, at the Government's urgent request, in 2011. Under the country strategic plan, WFP has re-engaged in school feeding, albeit in a limited way. Between 2005 and 2011, WFP supported school feeding in

<sup>107</sup> Government of Timor-Leste, 2011. National Education Strategic Plan (2011-2030). Dili: Ministry of Education.

<sup>108</sup> WFP and Help Logistics, 2019. School Feeding Programme Assessment in Timor-Leste. A Joint Assessment by HELP Logistics, World Food Programme (WFP) Timor-Leste, and Ministry of Education (MoE) Timor-Leste. Dili: WFP and HELP Logistics. Draft.

Timor-Leste.<sup>109</sup> School feeding remains a priority for the Government, but it has faced implementation difficulties since it took over the programme.<sup>110</sup> In 2019, WFP reviewed the school feeding programme in partnership with Help Logistics.<sup>111</sup> The report identifies some gaps in logistics and budget management and complements a national review of the school feeding programme conducted by the Ombudsman.<sup>112</sup> In 2018, WFP also developed an updated set of guidelines on school feeding and was preparing to pilot them in Oecusse with local government support and in partnership with Oxfam; but the local authorities did not provide the authorization. The reasons why are not clear, but it is likely that the political complexity of Government decision-making played an important role.

3. **The Ministry of Education, Youth and Sport would like to receive support from WFP for the development of a monitoring and evaluation system for its school feeding programme.** There have been discussions with WFP in this regard but a memorandum of understanding is still pending (Table 11, page 48). Informants from the Ministry of Education, Youth and Sport noted that, before 2010, the support that they received from WFP was significant, but recently WFP has only provided limited, support as required.

4. **The country strategic plan identifies gaps and entry points for support to the Ministry of Education, Youth and Sport on supply chain management for school feeding.** But engagement in school feeding has been limited by financial constraints (for example Help Logistics provided *pro bono* support). There are other partners active in the sector, but there is still space for a stronger WFP contribution. In 2018, Timor-Leste became eligible for the United States McGovern-Dole grant scheme for school feeding. A consortium led by CARE International and including Mercy Corps and WaterAid developed a successful proposal called the Hatutan Project. The project aims to support school feeding in four municipalities across the country. It includes complementary food deliveries to cover gaps in local supply. WFP did not make a proposal to McGovern-Dole in 2018. It considered that importing food for school feeding was not fully in line with the Government's priorities, and potential partners were concerned about the infrastructure available in schools to support such a scheme. The short time available to develop the proposal may also have played a role.

#### Field observations

5. **This section summarizes the findings of the field visits to municipal education offices and schools that were conducted by the evaluation team, 2-5 December 2019.** The team visited four municipalities (Bobonaro, Ermera, Aileu and Ainaro) and interviewed Municipal Directors of Education and staff at schools. The full list of facilities and people interviewed is shown in Table 41 below. The team focused on the implementation of school feeding at municipal and school levels. Only public schools were visited. In this regard, the country strategic plan evaluation complements the reports by the Ombudsman<sup>113</sup> and the WFP-Help Logistics report.<sup>114</sup>

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<sup>109</sup> Mokoro Ltd., 2013. Timor-Leste: an evaluation of WFP's portfolio (2008–2012). Rome: Office of Evaluation, WFP.

<sup>110</sup> Ibid, p. 25. See also Annex XIV below.

<sup>111</sup> WFP and Help Logistics, 2019. School Feeding Programme Assessment in Timor-Leste. A Joint Assessment by HELP Logistics, World Food Programme (WFP) Timor-Leste, and Ministry of Education (MoE) Timor-Leste. Dili: WFP and HELP Logistics. Draft.

<sup>112</sup> Government of Timor-Leste, 2019. Monitorizasaun Programa Merenda Eskolar. Dili: Office of the Ombudsman: Provedoria de Direitos Humanos e Justiça.

<sup>113</sup> Ibid.

<sup>114</sup> WFP and Help Logistics, 2019. School Feeding Programme Assessment in Timor-Leste. A Joint Assessment by HELP Logistics, World Food Programme (WFP) Timor-Leste, and Ministry of Education (MoE) Timor-Leste. Dili: WFP and HELP Logistics. Draft.

**Table 41. Field visits to offices and schools overseen by the Ministry of Education, Youth and Sport**

<p><b>Bobonaro municipality</b>  Alcino Barreto Joao, Director of Education  Mario Pires, Focal Point for School Feeding Programme</p> <p><b>EBC 01 Maliana Villa, Bobonaro</b>  Adalzira N.S.S Gama, Director of School  Rafael dos Reis Soares, Deputy Director  Domingos Afonso, GAT Coordinator  Rui Manuel Lasi, Parents Council  Joao Godinho, Coordinator of Food Supplier</p> <p><b>EBC Balibo, Bobonaro</b>  Gregorius Kono, Director  Francisco dos Santos, Deputy  Maria Jose dos Santos, Coordinator of Technical Support Office (GAT)  Maria Emilia dos Santos Maia, Food Supplier</p> <p><b>Ermera municipality</b>  Silvino Salsinha, SFP Coordinator</p> <p><b>EBC Dona Ana Lemos, Ermera</b>  Luciano Babo, Coordinator  Ona Rata Martins, SFP Coordinator  Saturnina de Araujo, Cook  Avelina de Araujo, Cook  Atina Soares, Cook</p> <p><b>EBC Hatuqueiro, Ermera</b>  Director (name lost)  Cook (name lost)</p> <p><b>EBC Railaco, Ermera</b>  Director (name lost)</p>	<p><b>Aileu municipality</b>  Cristina da Conceicao, Director of Education  Henrique da Silva, School Feeding Coordinator</p> <p><b>EBF Madabeno, Aileu</b>  Filomena Martins, School Coordinator  Antonia Lurdes, Cook  Franciscos Borges, Gabinete Apoio Tecnico (GAT)  Afonso, Vice Coordinator  Martins Leite, GAT member  Students</p> <p><b>EBC Aileu Vila, Aileu</b>  Tomas Gunda, School Coordinator  Henrique Soares de Jesus – Gabinete Apoio Tecnico (GAT)</p> <p><b>EBC Daisoli, Aileu</b>  Aleixo Piedade, School Coordinator  Mouzinho Lopes, Gabinete Apoio Tecnico (GAT)  Alianca da Conceicao, Cook  Juliana Moreira, Cook  Students</p> <p><b>Ainaro municipality</b>  Celestino Magno Pereira, Director of Education</p> <p><b>EBC Venancio Ferraz, Ainaro</b>  Jose da Costa, School Coordinator  Saturnina da Costa, Cook  Students</p> <p><b>EBC Maubisse Vila, Ainaro</b>  Jaime Mendonca, School Coordinator  Octavia Maria de Araujo – Gabinete Apoio Tecnico (GAT)  Bendita do Rego Mendonca, Cook  Students</p>
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**Table 42. School feeding: observations in four municipalities**

Topic	Findings	Bobonaro	Ermera	Aileu	Ainaro
Cash transfer element	<p>No budget for ME implementation between January and March due to the delays in central budget approval.</p> <p>Of the 194 effective days in the official ME calendar, schools interviewed implemented between 104 and 70 days of effective feeding in 2019.</p> <p>After decentralization (2017), municipalities receive budget for ME every three months (quarterly basis). Municipalities are responsible for managing the budget and making it available to schools. There are complaints about delays in the disbursement to schools. In most cases, interviewees blame the lack of human capacity (skills and quantity), the complexity of the process (budget software) and technical challenges (internet speed). Although the general view is that the situation is worse after decentralization (before funds were transferred directly to schools by the Ministry of Education, Youth and Sport), some interviewees argued that decentralization has increased flexibility in the management of funds. Several interviewees mentioned that the budget for ME is classified as “goods and services” and that if it was considered a “public transfer” disbursements would be easier and quicker (simpler process and simpler procurement and accountability).</p> <p>There seems to be some differences in the way municipalities manage ME budget. Schools get ME funding on a monthly basis. Some schools complain that funds always arrive late and that they cannot carry over the expenditure to the next month (unspent funds are reimbursed to the municipality), effectively decreasing the number of days meals can be provided. Other municipalities allow schools to continue spending the following month.</p> <p>The daily allowance of USD 0.25/student per day is used to buy food, including rice (when rice transfers are not available, see below) and oil.</p>	<p>No carry over of unspent money in schools consulted</p> <p>Effective feeding days not discussed in detail, but well below the official calendar</p>	<p>Seems schools are allowed to carry over the money, though 1 of the 3 schools consulted argued to the contrary</p> <p>Effective feeding days not discussed in detail, but well below the official calendar</p>	<p>Schools are getting around 104 days of effective feeding</p> <p>Carry over allowed.</p>	<p>Schools are getting around 70 days of effective feeding</p> <p>Carry over allowed</p>



Topic	Findings	Bobonaro	Ermera	Aileu	Ainaro
	Often it is also used to pay for firewood, transportation costs and assistants hired to help the cooks.				
Rice transfers	<p>Very unreliable deliveries. NLC distributed very little rice to municipalities in 2019. There are some complaints about the poor quality of the rice.</p> <p>Rice transfers are managed centrally by NLC and delivered to the municipality. They are not coordinated with ME. Rice may arrive when there is no budget for ME feeding. Rice spoils quickly when not used and is therefore destroyed.</p> <p>Some schools had benefitted from rice, while other in the same municipality did not. It is unclear why.</p> <p>At least one of the municipalities consulted does not have budget for rice distribution and/or rice distribution does not cover the distribution from EBC to EBF. Schools have to cover distribution cost from ME budget (USD 0.25/day and student).</p> <p>Lack of rice means ME budget (USD 0.25) has to be used to procure rice. This decreases the overall amount of food provided to students.</p>	<p>Municipality: NLC did distribute rice in 2018 and until March 2019. They do not distribute rice anymore</p>	<p>One school received no rice in 2019. 2 schools received only in October/ November</p>	<p>No budget for rice distribution Municipality received no rice in 2018 and rice for 20 days in 2019 (October/ November) Once school did not receive rice Another did receive rice in October</p>	<p>EBF have to arrange and earmark the costs of food/budget distribution from EBC No rice received by municipality since mid-2018</p>
ME budget and rice estimates	<p>The budget and amount of rice are calculated based on the number of students enrolled in the previous year (2019 budget based on 2018 student number). Schools argue that this fails to account for increases in the number of students, though some municipalities adjust the figure upwards to compensate. At the same time, other interviewees argue that attendance is always below enrolment number, which means budget should suffice.</p>				
Menu and food procurement	<p>All schools try to follow the menu in the official guidelines, but it is not always possible. Vegetables are generally easy to procure locally. For EBF, not enough food is available locally and they need to travel to the market in the main town, thus incurring transportation costs.</p>	<p>Relatively strict implementation of local procurement</p>	<p>Relatively strict implementation of local procurement</p>	<p>Soft/flexible implementation of local procurement</p>	<p>Relatively strict implementation of local procurement</p>

Topic	Findings	Bobonaro	Ermera	Aileu	Ainaro
	<p>There are Ministry of Education, Youth and Sport guidelines requiring the procurement of local food. However, guidelines are implemented rather flexibly in some municipalities (i.e. imported food is allowed). Local food is generally more expensive than imported food.</p> <p>To make ends meet, especially when they also have to buy rice, some schools replace meals in the menu with a snack (e.g. bread and milk) some days every week (generally 2 days).</p> <p>Some schools do not buy fish. Fish is not easy to procure in some areas and children are not used to eating it. Rice and meat seems to be the favourite meal across schools consulted.</p> <p>Cooks do not have sufficient capacity to analyse the nutrient content of foods when replacement from the menu is needed (lack of training). Making ends meet is their main concern.</p>				Do not provide fish
Water, facilities and kitchen equipment	<p>Running water was available in all schools, but several of them experience water shortages in the dry season and have to fetch the water nearby. Water is fetched by cooks and students sometimes help. Cooks complained that this was hard work.</p> <p>In most cases water supply consisted of a pipe and lacked hand washing facilities. When there is not water, buckets are used. Soap is not always provided by the school.</p> <p>Kitchen facilities are rather basic and usually cook in open fires. Some efficient stoves were built or provided by NGOs in the past, but they are not used because they are slow and/or require much work (chopping wood). Often cooks are concerned about health issues (smoke).</p> <p>General complaints about kitchen equipment. Cooking pots with holes, lack of plates and spoons, etc. In seems ME budget for kitchen equipment was last made available in 2014.</p> <p>Firewood is usually purchased with the ME budget, but at least one school required students to bring one piece of firewood every day.</p>	<p>Water supply generally available</p> <p>Challenges in 1 school out of 3 (buys external water)</p> <p>Handwashing facilities available in 2 schools (Princes of Thailand grant)</p> <p>Soap available</p>	<p>Some water supply issues during dry season in some schools. Children are requested to bring water to wash their hands</p> <p>Handwashing sometimes</p>	<p>All schools had water issues in dry season. In 1 out of 3, students help with water</p> <p>Handwashing sometimes.</p> <p>Soap not always available</p> <p>1 school required students to bring firewood</p>	<p>Water supply challenges in some schools, but not in the two visited by the evaluation team</p> <p>Handwashing sometimes.</p> <p>Soap not always available</p>

Topic	Findings	Bobonaro	Ermera	Aileu	Ainaro
	<p>Fridges are not generally available in schools (only one confirmed). Perishable food (e.g. meat) is purchased in the morning of the day it is cooked or the day before and placed in fridges of nearby community members (homes).</p> <p>All visited facilities were easy to access and there was only 1 EBF in the sample. Facilities are likely to be worse in more remote and smaller schools.</p>				
Training & capacity strengthening	<p>Schools staff and cooks have received very little training, and this is not systematic. No budget for training available at municipality level and no ongoing central government training programme.</p> <p>Teachers are supposed to provide nutrition advice to children, but this only happens in a few schools. Limited knowledge of nutrition concept among students and cooks.</p> <p>At municipal level, delays are often blamed on the capacity of municipal staff to manage municipal budgets after the decentralization process (see above). Similarly, the findings also question the capacity of NLC and municipal actors to distribute quality rice in a timely manner.</p>	<p>Director and cook in 1 school trained in 2017</p> <p>1 school provided advice on nutrition to students</p>	<p>Cooks in 1 school received training from Red Cross (intended for restaurants, but invited others)</p>	<p>No training for cooks and staff since 2015</p> <p>Students in two schools mentioned advice on nutrition (food groups)</p>	<p>No training for cooks or school staff</p> <p>Cooks in 1 school attended a training by Mercy Corps</p> <p>No nutrition advice for students</p>
Perceived benefits and satisfaction	<p>Interviews confirmed that ME increased attendance rate. When no ME is available, some students do not attend, while others leave earlier (many do not have breakfast at home). Most impact on younger children (1st-4th grade) and poorest students (parents cannot afford money for a snack).</p> <p>More attention and better nutrition are sometimes mentioned as a benefit of ME.</p> <p>On the negative side, some schools complained about the impact of ME on teaching time. Guidelines provide for a 15 min break, but they say it often takes 45 minutes. The effect would be higher on students from most demanding classes, 7th-9th grade. At the same time, schools seem to have some flexibility to decide when to provide the meal (some start</p>	<p>2 schools complained about impact on teaching time</p>	<p>1 school said there was limited impact on teaching time</p>	<p>1 school said no impact on teaching time</p> <p>1 school said there was an impact on teaching time</p>	<p>1 school said there was an impact on teaching time</p>

Topic	Findings	Bobonaro	Ermera	Aileu	Ainaro
	<p>around 10.00, while others wait till noon). Some schools also say that ME has little impact on teaching time.</p> <p>In any case, the official curriculum has not been adjusted to make ME fit within the class schedule.</p>				
Gender	<p>There are no strong differences in gender role or assistance rates between sex groups.</p> <p>Some schools mentioned early marriage and pregnancies as factors explaining student drop-out rates by girls in later years. Pregnant girls are not legally excluded from school, but social pressure is very strong.</p> <p>According to research performed by CARE for the HATUTAN programme (unpublished) dropout rates are higher in boys than girls. Performance is also better for girls. Dropout rates invert in the transition from 6th-7th grade (2nd-3rd cycle). Many girls also drop out at 9th grade (transition to high school).</p>				

# Annex XV. Analysis of Performance: Gender Equality and Women’s Empowerment

1. For a better understanding of its findings regarding GEWE, the evaluation team used two WFP tools to assess them; the Inter-Agency Standing Committee Gender and Age Marker (GAM) and the Gender Benchmark Matrix (paragraph 26, paragraph 27, Annex II) , which is the matrix used to measure progress in the implementation of the WFP Gender Transformation Programme (GTP). The results of this assessment are presented below and have been used to inform the analysis of GEWE presented in the main report.

2. The Gender and Age Marker framework includes some optional sections that overlap with elements of the Gender Benchmark Matrix and are therefore not included here.

**Table 43. Gender and Age Marker assessment**

GAM components	GAM sub-components	Assessment
<b>1. Gender and age analysis</b>	<ol style="list-style-type: none"> <li>1. There is collection and analysis of sex- and age-disaggregated data</li> <li>2. There is understanding of the particular circumstances, needs, interests and abilities of different groups of people</li> <li>3. Targeted individuals and groups receive needs-based assistance</li> </ol>	<p>Country operations management plans and annual country reports provide sex-disaggregated data by the following age groups:</p> <ul style="list-style-type: none"> <li>• Adults (18 years +)</li> <li>• Children (5–18 years)</li> <li>• Children (24–59 months)</li> <li>• Children (6–23 months)</li> </ul> <p>The categories are not fully aligned with WFP age categories which, as per the Gender and Age Marker, are: 0–23 months, 24–59 months, 5–11 years, 12–17 years, 18–59 years, 60+ years. However, considering that the Gender and Age Marker is fairly recent (mid-2018) and that it was developed after the Timor-Leste country strategic plan, it is understandable that the Timor-Leste country office is still reporting using the aforementioned age categories. This being said, given the strong focus of the country strategic plan on adolescent girls, further disaggregation would help to better monitor and report on the extent to which this target group has been reached.</p> <p>Even so, the country strategic plan explains why it targets adolescent girls in particular: this age group is particularly vulnerable as 24 percent of mothers have their first child before the age of 20. Targeting non-pregnant women as a preventative measure to address the intergenerational cycle of malnutrition is explained.</p>

GAM components	GAM sub-components	Assessment
		<p>Vulnerable groups in general (i.e., elderly, disabled people, etc.) are targeted by the country strategic plan as part of Activity 3, which aims to provide support to the Ministry of Social Solidarity and Inclusion under the Bolsa de Mãe programme. However, it is not clear how the country strategic plan seeks to address the specific needs of women from different socio-economic, ethnic backgrounds etc. in other activities (other than a specific target on adolescent girls).</p>
<p><b>2. Tailored activities</b></p>	<p>[The Gender and Age Marker template does not show sub-components for tailored activities.]</p>	<p>WFP shared gender-sensitive nutrition messages that seek to tackle harmful gender norms related to food consumption. However, more women (45,072) were reached by WFP-supported nutrition messages than men (5,603), suggesting that there is a need for further outreach to men and boys with these messages to effectively tackle harmful norms.</p> <p>Adolescent girls are specifically targeted by the nutrition messaging. However, it is not possible to know how many have been reached due to lack of data disaggregation for this age group. Finally, even though the needs of people who are elderly or have disabilities were mentioned in the country strategic plan, it is not possible to know the extent to which they have been reached by activities because monitoring reports do not report on them specifically.</p>
<p><b>3. Beneficiary participation</b></p>	<ul style="list-style-type: none"> <li>• Direct (Tier 1) beneficiaries influence the design / implementation of the activities</li> <li>• Beneficiaries and participants can safely and readily make complaints and provide feedback</li> <li>• Information about the activities is provided to the different stakeholders</li> </ul>	<p>During the implementation of the country strategic plan, WFP established a standard operating procedure that formally established the Timor-Leste country office complaints and feedback mechanism, which covers WFP operations under the country strategic plan such as the TSFP and joint Ministry of Health/WFP programmes. The standard operating procedure establishes systems and procedures to follow (roles and responsibilities of staff, hotline, communications channels, case management, etc.). However, the cross-cutting indicator on accountability to affected populations for 2019 indicates that only 20% of project activities documented, analysed and integrated beneficiary feedback to improve programming (compared to a target of 100%). Now that WFP has handed over the TSFP and is focusing its activities solely on capacity strengthening, WFP staff explained that there have been several attempts by WFP to embed the complaints and feedback mechanisms in line ministries. The Office of the Prime Minister expressed interest in integrating the mechanism with its work on gender based violence, but efforts stalled when the Deputy Country Director left the country office. WFP also tried to convince the Ministry of Health to adopt the complaints and feedback mechanism, but the Ministry of Health reportedly showed little interest.</p>
<p><b>4. Benefits</b></p>	<p>1. The activities contribute to gender equality outcomes</p>	<p>One of the most important results in terms of gender equality is that the specific needs of adolescent girls are now recognized thanks to evidence produced by the country office.</p>

GAM components	GAM sub-components	Assessment
	<ol style="list-style-type: none"> <li>2. The beneficiaries are satisfied with the activities</li> <li>3. Problems, challenges and unintended impacts are identified and addressed</li> </ol>	<p>The evaluation team's assessment of gender outcomes was limited by the fact that it was not possible to consult beneficiaries, and it was therefore not possible to determine the effectiveness of nutrition messaging. For the same reason, it was also not possible to determine the extent to which they have been satisfied with the activities.</p>

**Table 44. Gender Benchmark Matrix: accountabilities and oversight**

Benchmark <sup>115</sup>	Evidence gathered by the evaluation team
Indicator 1.1: Management accountability systems in place and functional	
1.1.1 <sup>M</sup> Office Gender Action Plan; aligned with the Gender Policy (2015–2020), Gender Action Plan and Regional Gender Implementation Strategy	<p>The Timor-Leste country office has a gender action plan (2019), which has the following overarching objectives:</p> <ol style="list-style-type: none"> <li>1. Increase gender capacity and knowledge of WFP staff</li> <li>2. Promote gender parity through enhanced human resource processes and increase engagement and well-being of staff</li> <li>3. Strengthen accountability and zero tolerance for gender-based violence</li> <li>4. Improve gender-transformative programming, SBCC, results-based management and communications in all country office activities.</li> </ol>
1.1.2 Annual Performance and Competency Enhancement (PACE) plans of senior managers include at least one key gender equality result	PACE not assessed due to confidentiality.
1.1.3 PACE reviews of Office staff include assessment of GEWE competencies	PACE not assessed due to confidentiality. Please refer to benchmark indicator 3.3.3 (Table 45) for information on staff terms of reference.
1.1.4 <sup>M</sup> Gender is incorporated in the Office monitoring and evaluation framework, which is aligned with the Office Gender Strategy / Action Plan	<p>The revised country strategic plan logical framework includes two cross-cutting indicators on gender, which the Timor-Leste country office was expected to report on in 2019:</p> <ul style="list-style-type: none"> <li>• Proportion of households where women, men, or both women and men make decisions on the use of food/cash/vouchers or income generated through programme activities</li> <li>• Type of transfer (food, cash, voucher, no compensation) received by participants in WFP activities, disaggregated by sex and type of activity.</li> </ul> <p>However, the Timor-Leste-Leste country office did not report on these indicators in 2019 as expected. It is unclear why.</p> <p>The annual country report includes a section dedicated to gender equality.</p>
Indicator 1.2: Active and effective participation in the Gender Results Network	
1.2.1 <sup>M</sup> At least one member of staff (minimum P4 level, or equivalent) in the Office is a member of the Gender Results Network (GRN), with a written ToR and at least 20 percent of work time allocated to GEWE functions	<p>The Timor-Leste country office has a gender results network (GRN) composed of five staff that meet on a regular basis to discuss gender issues. The former Deputy Country Director was part of the gender results network, until his departure in mid-2019. Since then, there has been no senior staff in the gender results network, which is chaired by a volunteer. She acts as the gender focal point in the office and allocates part of her time to fulfil GEWE functions.</p>

<sup>115</sup> The benchmarks marked with M are mandatory; they must fall within the 34 benchmarks required to achieve the Award for Excellence in Gender Equality.



Benchmark <sup>115</sup>	Evidence gathered by the evaluation team
Indicator 1.3: Adequate financial resources for gender equality and women's empowerment work	
1.3.1 <sup>M</sup> At least 15 per cent of the total programme expenditure is attributable to gender equality activities. (11% - 2016; 12% - 2017; 13% - 2018; 14% - 2019)	WFP Timor-Leste country office informants explained that there was an attempt to develop a gender budget but that this exercise was not finalized and is no longer formally required. They noted that their approach is to embed GEWE into all operations of the Timor-Leste country office. However, this is not in line with the gender strategy, which requires that all programme budgets include specific lines for gender-related costs under each programme activity.
1.3.2 All field-level agreement budgets include specific lines for GEWE-related costs	Field-level agreements do not include specific budgetary lines for GEWE-related activities.
1.3.3 The Office has a strategy for mobilizing resources for gender equality and women's empowerment initiatives	The Timor-Leste country office does not have a specific GEWE resource mobilization strategy. Nonetheless, there have been some attempts to mobilize resources for GEWE. For example, the country office developed a proposal for the United Nations Spotlight Initiative on gender-based violence but was not selected for funding. The RBB supported a partnership mapping exercise for GEWE, in which it identified a number of donors that could fund GEWE-related initiatives (the Australian Department of Foreign Affairs and Trade (DFAT), USAID, KOICA and the EU). So far, a funding proposal was submitted to KOICA (though it is not yet clear the extent to which GEWE was integrated into the proposal) and other donors have not yet been approached.

**Table 45. Gender Benchmark Matrix: enabling environment**

Benchmark	Evidence gathered by the evaluation team
Indicator 2.1: Corporate gender parity policies localized and applied	
2.1.1 <sup>M</sup> Progress has been made towards overall gender parity in Office staff; with a minimum 5% shift in preceding 12 months.	The Timor-Leste country office gender action plan monitors gender parity in the office, with a baseline of 33% and a target of 38% by end of 2019. In December 2019, 35% of staff were women. Some efforts have been made to attract women to professional roles (for example, by ensuring gender parity among UNTL interns). However, the majority (93%) of professional staff are men while 92% of women are administrative staff, volunteers or interns.
2.1.2 Progress has been made towards the equal participation of women and men in committees, advisory bodies and other decision-making entities; with at least a 5% shift in the preceding 12 months	Not assessed due to lack of data. The Timor-Leste country office gender action plan does not monitor and report on equal participation of men and women in Timor-Leste country office decision-making.

Benchmark	Evidence gathered by the evaluation team
Indicator 2.2: Corporate workplace environment policies applied	
2.2.1 <sup>M</sup> Corporate work/life balance measures are communicated to all staff and staff are encouraged to utilize the available arrangements	Not assessed.
2.2.2 At least 70 per cent of staff feel empowered to express their views in the Office	Not assessed.
2.2.3 <sup>M</sup> Corporate directives on prevention of sexual exploitation, abuse and harassment, and abuse of authority, are communicated to all staff and are implemented	95% of Timor-Leste country office staff completed training on awareness and accountability towards gender-based violence.
2.2.4 At least one Office-wide learning activity on work/life balance and prevention of sexual exploitation, harassment and abuse measures implemented in the preceding 12 months	See above.

**Table 46. Gender Benchmark Matrix: capacities**

Benchmark	Evidence gathered by the evaluation team
Indicator 3.1: Staff have a basic understanding of gender equality and women's empowerment, including in relation to food security and nutrition.	
3.1.1 <sup>M</sup> Orientation to WFP's commitment to gender equality and women's empowerment is integrated into the staff induction documents and procedure	Not assessed.
3.1.2 <sup>M</sup> All staff have completed a basic-level training course on gender equality and women's empowerment, preferably in	The Timor-Leste country office gender results network delivered training to staff on GEWE in 2019. Additionally, WFP informants confirmed that the gender toolkit was disseminated to staff. While there is evidence that the toolkit has been used to integrate GEWE in some training delivered by WFP to government partners (i.e., supply chain management training

Benchmark	Evidence gathered by the evaluation team
<p>relation to food security and nutrition; such as the (a) FAO "Gender in Food and Nutrition Security" course; (b) UN Women "I Know Gender: an Introduction to Gender Equality for UN Staff" course; or (c) UNHCR's Age, Gender and Diversity Approach e-Course</p>	<p>delivered to SAMES), a WFP informant mentioned that activity managers are often overwhelmed by their workload and have limited time to adequately use these tools.</p>
<p>3.1.3 In the preceding 12 months, the Office has implemented at least one learning event to strengthen staff understanding of, and ability to integrate gender into, their work</p>	<p>As noted above, one training on GEWE was delivered to WFP staff.</p>
<p><b>Indicator 3.2: Office has adequate technical capacities for gender-transformative programming</b></p>	
<p>3.2.1 "Learning by doing" gender capacity-development plan for mid-level and senior managers (P4, P4 equivalent and "above") is implemented</p>	<p>Until mid-2019, the Timor-Leste country office had a senior staff member (the Deputy Country Director) with strong gender expertise. Since his departure, there is limited expertise on gender in the office. The focal point for gender is a volunteer.</p>
<p>3.2.2<sup>M</sup> Large Offices: dedicated gender specialist (adviser, officer etc.) in place</p> <p>Other Offices: there is at least one formal partnership with a gender specialist or gender-specialized entity (e.g. UN Women, academic department, women's civil society organization, standby partner) to support gender-transformative programming</p>	<p>The partnership mapping for GEWE completed by the RBB identified several potential partnerships with gender-specialized entities to strengthen GEWE in WFP operations, including CSOs (World Vision, Plan, Marie Stopes, Tomak, Nabilan, Alola, Rede Feto, Oxfam and Handicap international); and United Nations agencies (UN Women, UNFPA). The Timor-Leste country office has collaborated on specific activities with TOMAK (formative research on adolescent girls) and UN Women (e.g., on gender-related events such as the 16 Days of Activism campaign), but no formal partnership has been established.</p>
<p><b>Indicator 3.3: Strategic actions taken to strengthen staff gender capacities</b></p>	
<p>3.3.1<sup>M</sup> Tailored gender refresher courses delivered to senior management</p>	<p>No evidence of gender training delivered.</p>
<p>3.3.2 At least two all-staff events organized in the preceding 12 months to promote dialogue on gender equality and women's empowerment</p>	<p>At the time of the field visit, the Timor-Leste country office organized an all-staff event during which men were invited to cook for women, raising awareness among staff of the importance for men to engage in cooking activities.</p>

Benchmark	Evidence gathered by the evaluation team
3.3.3 Recruitment procedures include screening for gender competencies	The evaluation team reviewed the terms of reference of four staff at various staffing levels (i.e., one G5, two NOA, one NOB) and there was no mention of GEWE in the description of responsibilities or in the section on required qualifications and experience.

**Table 47. Gender Benchmark Matrix: programming**

Benchmark	Evidence gathered by the evaluation team
Indicator 4.1: Gender is mainstreamed across all programmes and operations, in accordance with corporate policies and guidelines	
4.1.1 <sup>M</sup> The Office systematically collects, analyses and uses sex and age-disaggregated data. (Where the collection of sex- and age-disaggregated data poses considerable challenges, estimates are provided.)	<p>Country operations management plans and annual country reports provide sex-disaggregated data by the following age groups:</p> <ul style="list-style-type: none"> <li>• Adults (18 years +)</li> <li>• Children (5–18 years)</li> <li>• Children (24–59 months)</li> <li>• Children (6–23 months)</li> </ul> <p>The categories are not fully aligned with WFP age categories which, as per the Gender and Age Marker, are: 0–23 months, 24–59 months, 5–11 years, 12–17 years, 18–59 years, 60+ years.</p> <p>Further disaggregation would be helpful to fully capture age groups for adolescents, women of reproductive age, as well as those who are elderly. However, it is important to note that, at this stage, age disaggregation is considered as secondary to gender disaggregation. Based on Gender and Age Marker guidance, age disaggregation is helpful as it improves programming but it is not a strict corporate requirement.</p>
4.1.2 <sup>M</sup> Gender analyses are systematically undertaken and incorporated into (a) situation/ context analyses, and (b) key planning, implementation, monitoring, evaluation and reporting documents	The country strategic plan presents a strong gender analysis, using sex-disaggregated data on the socio-economic and nutritional status of men/boys and women/girls. The socio-economic and nutritional status of (ultimate) beneficiaries is discussed through an intersectionality lens. The gender analysis also discusses harmful gender norms in the country, most notably in terms of intra-household relationships and women's unequal access to nutritious foods, as well as issues of women's economic empowerment. A gender analysis is also integrated in some reporting documents (e.g., the ACR 2018) but it could be more strongly reflected in the accountability to affected populations.
4.1.3 <sup>M</sup> All Office projects (initiated since 2015) are coded 2A or 2B on the Gender Marker of the Inter-Agency Standing Committee	Not assessed.
4.1.4 WFP stakeholders of different sex and age groups are involved in decisions about the assessment, design, implementation, monitoring and	Not assessed.

Benchmark	Evidence gathered by the evaluation team
evaluation of WFP policies and programmes	
4.1.5 The largest project includes gender equality targeted actions	<p>Under Activity 1 of the country strategic plan, WFP aims to provide support for the implementation of nutrition-specific interventions to reduce malnutrition and micronutrient deficiencies among children, adolescent girls and pregnant and lactating women. This activity also seeks to achieve gender-transformative change by integrating messages into SBCC material that challenge harmful gender norms and roles, and advocate women's empowerment and their equal participation in decision-making.</p> <p>Activity 2 aims to generate evidence that will help address the nutrient gap among adolescent girls and vulnerable groups.</p> <p>Activity 3 aims to provide support to the Ministry of Social Solidarity and Inclusion for the integration of the WFP corporate digital beneficiary and transfer management platform (SCOPE) into the Bolsa de Mãe, a social protection programme granting cash transfer to mothers for up to three children, with a view to enhance the management of sex- and age-disaggregation data. However, no progress has been made toward the implementation of this plan.</p> <p>Although the situational analysis identifies gender inequalities regarding women's unequal access to agricultural income, the country strategic plan does not propose a concrete strategy for increasing women's access to and control over productive assets.</p>

**Table 48. Gender Benchmark Matrix: communications and knowledge management**

Benchmark	Evidence gathered by the evaluation team
Indicator 5.1: Knowledge products explicitly address gender equality and women's empowerment issues	
5.1.1 <sup>M</sup> Main knowledge product issued in the preceding 12 months explicitly addresses issues of gender equality and women's empowerment	<p>Jointly with TOMAK, WFP conducted formative research on adolescent nutrition in Timor-Leste. The study shed light on the high levels of malnutrition and anaemia among adolescent girls and how this contributes to the delivery of low birthweight babies and the intergenerational cycle of malnutrition. The study also discussed cultural taboos that limit intra-household distribution of nutritious foods among Timorese women and girls.</p> <p>The Timor-Leste country office also conducted the "Fill the Nutrient Gap" study, which generated evidence on the cost of nutritious diets for adolescent girls and pregnant and lactating women.</p> <p>Studies have been disseminated, and there is evidence of early uptake of results.</p>
5.1.2 In the last 12 months, the Office has produced a knowledge product specifically addressing gender equality	See above.

Benchmark	Evidence gathered by the evaluation team
Indicator 5.2: Internal and external communication materials consistently contain gender equality and women's empowerment messages	
5.2.1 <sup>M</sup> The Office communication plan explicitly references measures for gender-sensitive communication and the dissemination of GEWE messages	Not assessed.
5.2.2 <sup>M</sup> Key messages on gender equality are developed and disseminated by the Office	Some messages on gender equality disseminated (e.g., Lafaek Magazine, food posters). Because the evaluation team was not able to conduct focus group discussions with beneficiaries, it was not possible to assess the effectiveness of these messages.
5.2.3 <sup>M</sup> Office communications and advocacy materials are gender sensitive	Not assessed.

**Table 49. Gender Benchmark Matrix: partnerships**

Benchmark	Evidence gathered by the evaluation team
Indicator 6.1: Partnerships include specific measures to promote gender equality and women's empowerment.	
6.1.1 <sup>M</sup> Since 2015, Office partnership agreements (contracts, Memorandums of Understanding etc.) include gender equality clauses addressing minimum standards, activities, performance indicators, monitoring, reporting or other applicable measure/s (such as budget lines for gender capacity strengthening)	Only one of the memorandums of understanding reviewed includes a clause regarding minimum GEWE standards. The memorandum of understanding with the Ministry of Health states that “data will be disaggregated by sex, age and disability and programme actions will emphasize the need to be gender-responsive in the delivery of nutrition-related health services to beneficiaries”.
6.1.2 <sup>M</sup> The Office has invested in assessing the gender capacities of its Partners and working together on mutual gender capacity strengthening	The evaluation did not find evidence that the Timor-Leste country office has invested in assessing the gender capacities of its partners. However, the evaluation found that the country office has integrated GEWE in some of its capacity-strengthening activities. For example, it used elements of the gender toolkit to deliver gender-sensitive training on supply chain management to SAMES. SAMES informants confirmed that the training has helped them to better understand gender roles in the workplace (especially important given that supply chain is traditionally an area that is dominated by men).
6.1.3 One agreement involves direct collaboration with a women’s rights organization, academic / research institution, community group (or other entity)	As noted above, no formal partnership has been established with a gender-specialized organization. The Timor-Leste country office established a memorandum of understanding with a research institution (UNTL), through which four university students have participated in the elaboration of a gender-sensitive knowledge product (the Fill the Nutrient Gap study).
Indicator 6.2: Partnerships with other United Nations entities strategically leveraged to support gender equality goals.	
6.2.1 <sup>M</sup> In the preceding 12 months, the Office has participated in (a) inter-agency coordination mechanisms on GEWE, or (b) local gender networks	The Timor-Leste country office has actively participated in the United Nations Gender Theme Group. However, a WFP informant mentioned that since the Deputy Country Director left, there is no senior WFP staff working on gender issues and, therefore, WFP is no longer adequately represented in this group.
6.2.2 In the preceding 12 months, the Office has made at least one substantive contribution to interagency work on gender equality and women's empowerment	WFP informants confirmed that the Timor-Leste country office has taken part in several United Nations gender-related events, such as the 16 Days of Activism campaign. They also noted that WFP developed a proposal to work jointly with UNFPA, UN Women and UNICEF on the United Nations Spotlight Initiative on gender-based violence. However, WFP was not selected to receive funding for this initiative. WFP staff explained that agencies with a traditionally stronger gender focus were selected and that United Nations agencies, as well as donors, do not see WFP comparative advantage on

Benchmark	Evidence gathered by the evaluation team
	GEWE. In addition to the United Nations Spotlight Initiative, WFP initiated discussion with UN Women to integrate the complaint and feedback mechanism into the Safe Cities initiative, but attempts were unsuccessful.

**Table 50. Gender Benchmark Matrix: results**

Benchmark	Evidence gathered by the evaluation team
Indicator 7.1: WFP substantially contributes to gender equality and the empowerment of women outcomes in its areas of work	
7.1.1 <sup>M</sup> In the last two years, the Office has made at least one substantive contribution to transformative gender equality results, aligned to one or more of the four objectives of the Gender Policy (2015–2020)	The Timor-Leste country office has generated evidence that shed light on harmful gender social norms related to food consumption in Timor Leste. Some partners have confirmed that they are using this new evidence to inform SBCC messages. However, it is too early to know whether and to what extent this will contribute to transformative gender equality results.
7.1.2 The Office has made a significant contribution to ensuring that national normative frameworks (policies, legislation etc.) related to food security, nutrition and/or emergencies are gender-transformative	The evaluation did not find evidence that the Timor-Leste country office has made a contribution to ensuring that national normative frameworks related to food security are gender-transformative.



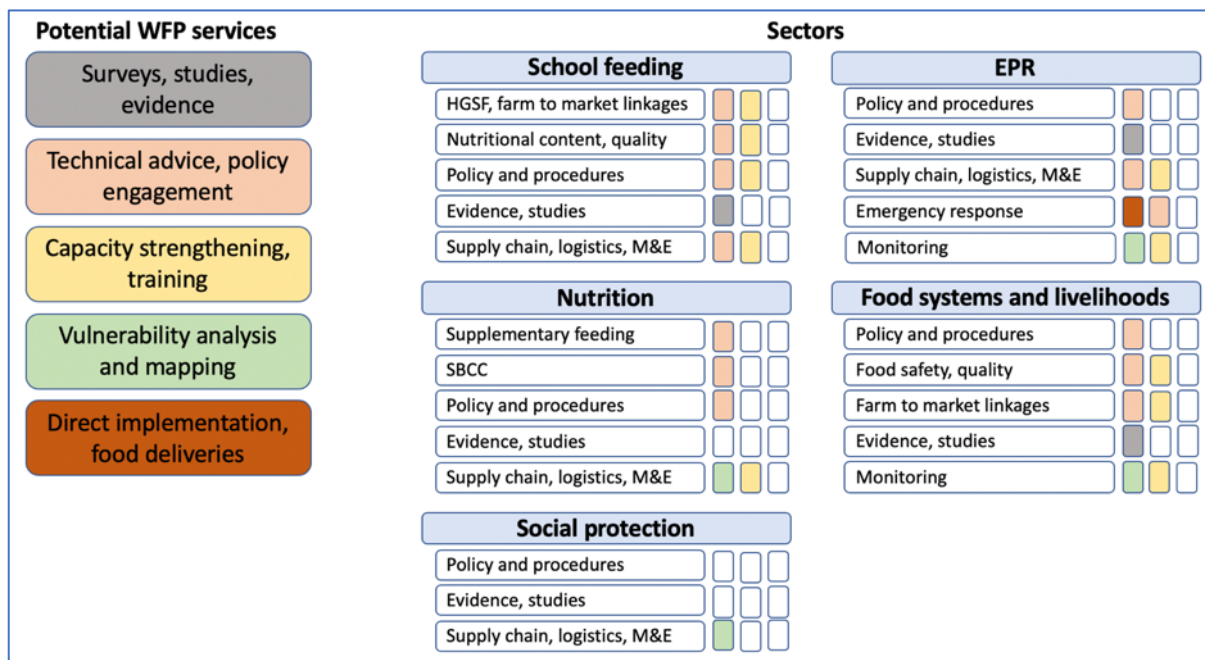
# Annex XVI. Potential Areas for WFP Focus in Timor-Leste

1. To support debate and planning ahead of the next country strategic plan for Timor-Leste, the evaluation team developed a highly simplified mapping of the types of contribution that WFP could offer, and the extent to which there are potential roles for WFP in doing those types of work, given the expertise, mandates and ongoing contributions of other development partners. They identified five potential areas of WFP service:

- **Surveys, studies and evidence:** recent examples include the Fill the Nutrient Gap study and the work on rice fortification. WFP has shown that, adequately resourced, it can do such work well, marshalling international and local expertise for the purpose
- **Technical advice and policy engagement** span a range of fields in which WFP has acknowledged expertise, notably in supply chain management, other fields of logistics, and data and cash management – as well as food and nutrition security fields like the treatment of moderate acute malnutrition, school feeding, social protection and food production and safety
- **Vulnerability analysis and mapping,** while arguably part of the area above, is presented separately because it is a leading trademark of WFP and an internationally valued, specialized service for which it currently has very limited capacity in Timor-Leste
- **Capacity strengthening for food and nutrition security** is meant to be the new trademark of WFP. It can, or should, span a range of services in relevant sectors, but needs to be kept conceptually and operationally simple enough for mid-level staff to deliver it effectively, moving beyond training outputs to capacity outcomes in the three domains of capacity strengthening
- There are still instances where WFP might, for specific (usually humanitarian) reasons, engage in the **direct implementation of field operations**, including field deliveries.

2. Figure 29 sums up the sectors in which WFP has the strongest opportunities and most appropriate roles in Timor-Leste. For each, again in a preliminary and exploratory manner, it offers a rough categorization of the types of work it comprises. The small boxes on the right-hand side of each sector cluster are a schematic attempt to show what types of WFP service could be offered for each work category in that sector. They are colour-coded to match the five areas of service. The more coloured small boxes there are, the stronger the assessed potential for a WFP role during the next country strategic plan period.

Figure 29. Potential areas for WFP focus in Timor-Leste



# Annex XVII. Recommendations: Links to Findings and Conclusions

Table 51. Recommendations: links to findings and conclusions

	Recommendation	Related findings: paragraph(s)	Related conclusions: paragraph(s)
1	<p><b>In order for WFP to remain relevant and effective in Timor-Leste, headquarters should ensure a threshold of sustainable and predictable funding to guarantee a minimum core stable team in the country office.</b> The latter should be configured to engage in high-level policy dialogue and advocacy with the Government and other partners, and to focus on leveraging of domestic and international resources. Additional technical expertise and support services should be mobilized for specific initiatives once non-core funding is secured.</p>	<p>173 205-212 197, 169, 171</p>	<p>213 220 228 231 229</p>
2	<p><b>Supported by RBB and headquarters, the country office should work to strengthen country strategic plan implementation through partnerships, focusing on the following:</b></p> <ul style="list-style-type: none"> <li>WFP should build a closer, more focused relationship with the Government that benefits from stronger strategic interaction and a revised understanding of capacity strengthening and handover opportunities. Its core partners should be the Ministry of Health; SAMES; the Ministry of Agriculture and Fisheries; and the Ministry of Education, Youth and Sport.</li> <li>WFP should work for stronger integration of its programming with that of other United Nations agencies within the UNSDCF: specifically, with UNICEF in working with the Government to build and implement a multisectoral nutrition strategy, and within that framework for further work on moderate acute malnutrition and related SBCC; with WHO for support to school (including adolescent) health and nutrition and food safety; and with FAO for ongoing promotion of food security and nutrition sector coordination across Government.</li> </ul>	<p>174-194          80 182 186</p>	<p>235 236</p>

	Recommendation	Related findings: paragraph(s)	Related conclusions: paragraph(s)
3	<p><b>Supported by RBB, the country office should ensure focused technical advisory and capacity-strengthening contributions by WFP in Timor-Leste that build on established WFP strengths and contribute effectively through broader sectoral and partnership frameworks in the following areas:</b></p> <ul style="list-style-type: none"> <li> <b>Selected, focused elements of a multisectoral, gender-sensitive nutrition strategy:</b> <ul style="list-style-type: none"> <li>The strengthening of SBCC and other nutrition services at field level (including the SISCa system), with support for capacity strengthening and linkages with other sectors' community outreach (such as agriculture and social protection)</li> <li>Supply chain and related logistics for the distribution of supplementary feeding commodities</li> <li>The treatment of moderate acute malnutrition, possibly through a new integrated protocol for moderate and severe acute malnutrition (starting with collaboration with UNICEF on the proposed operational research study).</li> </ul> </li> <li> <b>Vulnerability analysis and mapping:</b> building on recent initiatives, developing full vulnerability analysis and mapping and associated capacity-strengthening services for Timor-Leste through a small dedicated unit within the country office, supported by other regional WFP vulnerability analysis and mapping capacity, linked to appropriate technical inputs to national food security monitoring and emergency preparedness and response systems. </li> <li> <b>School feeding:</b> developing a strong advisory support role and associated capacity-strengthening services with the Ministry of Education, Youth and Sport, with particular emphasis (always aimed to maximize benefits for GEWE) on food and nutrition standards, home-grown school feeding and its links to food systems development; supply chain and related logistical issues; the appropriate use of (fortified) commodities produced in Timor-Leste; school (including adolescent) health, with special attention to its gender dimensions; support for monitoring and data management; and prioritizing school feeding in national budget allocations. </li> <li> <b>Specific, focused elements of food systems development:</b> food fortification, food safety standards and regulation (in collaboration with WHO), and farm-to-market linkages for supplementary and school feeding purposes. </li> </ul>	<p>60 105 142</p> <p>71-72, 106-107 118</p> <p>75, 95,152,161</p> <p>62</p> <p>110-111</p> <p>100 102</p>	<p>233</p> <p>230</p>
4	<p><b>Supported by RBB and headquarters, the country office should reappraise and reinforce the approach of WFP and its methods for capacity strengthening of relevant government and civil society agencies</b> to support achievement of SDG 2. It should undertake comprehensive capacity assessments in advance of future programming. To ensure sustainable outcomes, it should ensure, in consultation with the beneficiary organizations, that capacity-strengthening work is carefully monitored, using</p>	<p>70 99-120</p>	<p>223-225 232</p>

	<b>Recommendation</b>	<b>Related findings: paragraph(s)</b>	<b>Related conclusions: paragraph(s)</b>
	meaningful indicators from the Corporate Results Framework (and additional indicators if needed), and thoroughly implemented at local as well as national levels.		

# Annex XVIII. Persons Met and Interviewed

1. Listed below are the persons with whom the evaluation team held meetings and remote discussions.

Surname	First name	Position/unit	Organization	Location
<b>Internal stakeholders</b>				
Aboobacker	Noor	SBCC Specialist	WFP RBB	Bangkok
Andersen	Jeppe	Consultant	WFP RBB	Bangkok
Baptista	Denita	Communications Associate	WFP CO	Dili
Belo	Maria	Administrative Associate	WFP CO	Dili
Betigeri	Arvin	Senior Rice Fortification Adviser for Asia and Pacific	WFP RBB	Bangkok
Correia	Francisco	Logistics Assistant	WFP CO	Dili
Correia	Maria	Human Resources Associate	WFP CO	Dili
da Araujo	Crispin	Activity Manager	WFP CO	Dili
da Cruz	Dionisio	Programme Assistant (FSU)	WFP CO	Bobonaro
De Bonis	Dominique	Senior Policy & Programme Officer Technical Assistance & Country Capacity Strengthening Service OSZI	WFP HQ	Rome
Deni	Kimberly	Head of Programme	WFP RBB	Bangkok
dos Santos	Inacio	Programme Assistant (FSU)	WFP CO	Dili
Fouda	Fatema	M&E Officer, School Feeding Unit OSF	WFP HQ	Rome
Frank	Nadya	Regional School Feeding Officer	WFP RBB	Bangkok
Gago	Terezinha	Finance Assistant	WFP CO	Dili
Goldwyn	Rachel	Senior Adviser, Peacebuilding and Conflict Sensitivity, Emergencies and Transition Unit (OSZPH)	WFP HQ	Rome
Guterres	Apolinario	Finance Officer	WFP CO	
Hood Cattaneo	Kelsey	Information Management, Reporting and Partnerships Officer	WFP CO	Dili
Kerney	Stephen	Country Directors, WFP Palestine, former Country Director in Timor-Leste	WFP CO	Jerusalem
Khan	Javeed	Nutrition Adviser	WFP CO	Dili
Kingori	James	Nutritionist	WFP RBB	Bangkok
Kohler	Jean Luc	Head of Logistics	WFP RBB	Bangkok
Lenci	Sergio	CSPE and Regional Unit Coordinator, Office of Evaluation	WFP HQ	Rome
Lim	Yunseul	Supply Chain Officer	WFP CO	Dili
Liu	Dageng	Representative and Country Director	WFP CO	Dili
Lukyanova	Maria	Senior Programme Officer, Technical Assistance & Country Capacity Strengthening Service OSZI	WFP HQ	Rome
Lloydevans	Edward	Policy and Research Officer, School Feeding Unit, OSF	WFP HQ	Rome
McWhinney	Deborah	Senior Evaluation Officer, Office of Evaluation	WFP HQ	Rome

Surname	First name	Position/unit	Organization	Location
Mejia	Carla	Regional Food Technologist	WFP RBB	Bangkok
Nadazin	Natasha	Chief Performance Management and Monitoring Division (RMP)	WFP HQ	Rome
Paula	Madalena	Business Support Assistant	WFP CO	Dili
Pinto	Paulino	Activity Manager	WFP CO	Dili
Saldanha	Elizete	Business Support Assistant	WFP CO	Dili
Schaller	Peter	Regional Supply Chain Officer	WFP RBB	Bangkok
Schumacher	Brita	Senior Nutritionist	WFP RBB	Bangkok
Sebastio da Costa	Henrique	Programme Assistant, Budget & Programming	WFP CO	Dili
Shin	Seoyoon	M&E Officer	WFP CO	Dili
Soares	Natalio	IT Operations Associate, ICT Unit	WFP CO	Dili
Soriano	Anastacio	Activity Manager	WFP CO	Dili
Suvanto	Janne	Regional Partnership Officer	WFP RBB	Bangkok
Teixeira	Jean Patrick	Deputy Country Director Cote d'Ivoire, former Deputy Country Director Timor-Leste	WFP	Abidjan
<b>Resource partners</b>				
Altangerei	Munkhtuya	Resident Representative	UNDP	Dili
Amaral da Cruz	Armando	Programme Officer	JICA	Dili
Barduagni	Paolo	Head of Health Programme	European Union Delegation	Dili
Belo	Imaculada	Nutrition Officer	WHO	Dili
Bosco	Johanes	Programme Officer	European Union Delegation	Dili
Chiwile	Faraja	Nutrition Specialist	UNICEF	Dili
Gleeson	Erin	First Secretary, Development	Australian Embassy	Dili
Kim	Sikhyon	County Director	KOICA	Dili
Lehec	Solal	Policy Officer	FAO	Dili
Lopes da Cruz	Paula	Assistant Representative	FAO	Dili
Martins	Pedro	Senior Country Economist	World Bank	Dili
Oshiro	Hana	Representative	JICA	Dili
Paiella	Giorgia	Nutrition Consultant	WHO	Dili
Pandav	Rajesh	Representative	WHO	Dili
Skaleskog	Troy	First Secretary (Education and Nutrition)	Australian Embassy	Dili
Taton	Valerie	Representative	UNICEF	Dili
Trivedi	Roy	United Nations Resident Co-ordinator	United Nations	Dili
Yu	Dongbao	Medical Officer	WHO	Dili
Alda da Silva	Maria Isabel	Operational Analyst	World Bank	Dili
<b>Policy &amp; governance partners</b>				
Alfonso	Domingos	GAT Coordinator	EBC	Bobonaro
Araujo	Dinis	Nutrition Officer	Ministry of Health CHC	Balibo
Babo	Luciano	Director	EBC	Ermera
Baptista	Joao	Director	District Health Office	Bobonaro
Barreto Joao	Alcino	Director of Education	District Education Office	Bobonaro

Surname	First name	Position/unit	Organization	Location
Barros	Luisa Maria	Reproductive Health and Adolescence Officer, Public Health Department	Ministry of Health	Dili
Bere Koli	Louriano	Nutrition Officer	District Health Office	Bobonaro
Borges	Francisco	GAT Coordinator	EBC	Aileu
Cardoso	Belchior Nunes	Adviser to President	National Logistics Centre	Dili
Claudio	Estanislao	Technical Adviser for Cooperatives	Department of Cooperatives, Ministry for Administrative Reforms and Parliamentary Affairs	Dili
Coimbra	Joao	Head of Partnerships	Ministry of Social Solidarity and Inclusion	Dili
da Conceicao	Cristina	Director of Education	District Education Office	Aileu
da Conceicao	Alianca	Cook	EBC	Aileu
da Costa	Felipe	Adviser	Prime Minister's Office	Dili
da Costa	Jose	Director	EBC	Ainaro
da Costa	Saturnina	Cook	EBC	Ainaro
da Costa Babo	Ismael	Director General, Disaster Preparedness and Response	Secretary of State for Civil Protection	Dili
da Costa Cruz	Graciano	Director, Municipal Health Service	District Health Office	Ermera
da Cruz	Antonio	Nurse	CHC	Dili
da Cruz	Marcos	Technical Adviser	Department of Co-operatives, Ministry for Administrative Reforms and Parliamentary Affairs	Dili
da Silva	Henrique	Coordinator School Feeding Programme	District Education Office	Aileu
da Silva	Arcanjo	Executive Director	Investment and Export Promotion Agency	Dili
de Araujo	Antonio	Technical Adviser	Ministry of Education, Youth and Sport	Dili
de Araujo	Avelina	Cook	EBC	Ermera
de Araujo	Filomeno	Health Promotion Officer	District Health Office	Ainaro
de Araujo	Matias	Warehouse Manager	SAMES	Dili
de Araujo	Octavia Maria	GAT Member	EBC	Ainaro
de Araujo	Saturnina	Cook	EBC	Ermera
de Neri	Paulina AP	Malaria Officer	District Health Office	Maliana
do Rego Mendonca	Bendita	Cook	EBC	Ainaro
dos Reis Albino	Olinda	Head of Nutrition Department	Ministry of Health	Dili
dos Reis Soares	Rafael	Deputy Director	EBC	Bobonaro
dos Santos	Francisco	Deputy Director	EBC	Balibo
dos Santos	Maria Jose	GAT Coordinator	EBC	Balibo
dos Santos Maia	Maria Emilia	Cook	EBC	Balibo



Surname	First name	Position/unit	Organization	Location
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Gago Exposito	Rui Manuel	Director General	Ministry of Social Solidarity and Inclusion	Dili
Gama	Adalzira N.S.S.	Director	EBC	Bobonaro
Gil	Bernardo	Health Promotion Officer	District Health Office	Bobonaro
Godinho	Joao	Cook	EBC	Bobonaro
Goncalves	Joao Bartolomeo	Head of M&E Unit	Office of Ombudsman	Dili
Gunda	Tomas	Director	EBC	Aileu
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Kono	Gregorius	Director	EBC	Balibo
Lasi	Rui Manuel	Parents Council Member	EBC	Bobonaro
Leite	Martins	GAT Member	EBC	Aileu
Lopes	Mouzinho	GAT Member	EBC	Aileu
Lurdes	Antonia	Cook	EBC	Aileu
Magno Pereira	Celestino	Director of Education	District Education Office	Ainaro
Mariano Reis	Domingas	Health Promotion Officer	District Health Office	Ermera
Mario Pires	Mario	Coordinator School Feeding Programme	District Education Office	Bobonaro
Martins	Filomena	Director	EBC	Aileu
Martins	Samuel	Nutrition Promotion Officer	District Health Office	Aileu
Maunu	Daniael	Director of Education	Ministry of Education, Youth and Sport	Oecusse
Mendonca	Emilia da J.A	Director of Warehouse and Distribution	SAMES	Dili
Mendonca	Jaume	Director	EBC	Ainaro
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Moreira	Juliana	Cook	EBC	Aileu
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Pereira	Joel	Special Adviser, Civil Protection	Ministry of Interior	Dili
Pereira	Ramiro	Head of School Health	Ministry of Education, Youth and Sport	Dili
Piedade	Aleixo	Director	EBC	Aileu
Pires	Antoninho	Director General of Policy, Planning and Cooperation	Ministry of Education, Youth and Sports	Dili
Rata Martins	Ona	Coordinator	EBC	Ermera
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Surname	First name	Position/unit	Organization	Location
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Soares	Dirce Maria	Director	INS	Dili
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Soares de Jesus	Henrique	GAT Member	EBC	Aileu
Soares Gomes	Mateus	Nutrition Officer	District Health Office	Ermera
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Thompson	Sandra	Consultant	Secretary of State for Civil Protection	Dili
Trindade	Augusto Junior	President, NLC	National Logistics Centre	Dili
Ximenes	Saturlina	Warehouse Manager	SAMES	Dili
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Boavida	Joao	Executive Director	CEPAD	Dili
Fernandes Augusto	Josh	Project Officer	Agora Food Studio	Dili
Guterres	Maria Inmaculada	Acting Chief Executive Officer	Alola Foundation	Dili
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Lay	Bobby	Managing Director	Timor Global	Railaco
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Lopes	Cesaltino	Agribusiness Specialist	Avansa Agrikultura	Dili
Mason	Paul	Chief of Party	Avansa Agrikultura	Dili
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Seibel	Nicole	Chief of Party	CARE	Dili
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# Abbreviations

<b>AAP</b>	Accountability to Affected Populations
<b>ACR</b>	Annual Country Report
<b>BMI</b>	Body Mass Index
<b>CCA</b>	Common Country Analysis
<b>CCS</b>	Country Capacity Strengthening
<b>CEDAW</b>	Convention on the Elimination of all forms of Discrimination Against Women
<b>CEPAD</b>	Centre of Studies for Peace and Development
<b>CEQAS</b>	Centralized Evaluation Quality Assurance System
<b>CFM</b>	Complaints and Feedback Mechanism
<b>CHC</b>	Community Health Centre
<b>CO</b>	Country Office
<b>COMP</b>	Country Operations Management Plan
<b>CPB</b>	Country Portfolio Budget
<b>CPE</b>	Country Portfolio Evaluation
<b>CRF</b>	Corporate Results Framework
<b>CSO</b>	Civil Society Organization
<b>CSP</b>	Country Strategic Plan
<b>CSPE</b>	Country Strategic Plan Evaluation
<b>CU5</b>	children aged under five years
<b>DEV</b>	Development Operation
<b>DFAT</b>	Department of Foreign Affairs and Trade (Australia)
<b>DHO</b>	District Health Officer
<b>DHS</b>	Demographic and Health Survey
<b>DSC</b>	Direct Support Costs
<b>EB</b>	Executive Board
<b>EBC</b>	central primary school (Eskola Basica Central)
<b>EBF</b>	branch primary school (Eskola Basica Filial)
<b>ECD</b>	Early Childhood Development
<b>EM</b>	Evaluation Manager
<b>EQ</b>	Evaluation Question
<b>ER</b>	Evaluation Report
<b>EU</b>	European Union
<b>FAO</b>	Food and Agriculture Organization of the United Nations

<b>FIRST</b>	Food and Nutrition Security Impact, Resilience, Sustainability and Transformation programme
<b>FLA</b>	Field-Level Agreement
<b>FNG</b>	Fill the Nutrient Gap
<b>FNS</b>	food and Nutrition Security
<b>FSU</b>	Field Support Unit
<b>FUAT</b>	follow-Up After Training
<b>GAM</b>	Gender and Age Marker
<b>GAT</b>	technical support office (Gabinete de Apoio Técnico)
<b>GBV</b>	Gender-Based Violence
<b>GDP</b>	Gross Domestic Product
<b>GDS</b>	General Directorate of Statistics
<b>GEWE</b>	Gender Equality and the Empowerment of Women
<b>GOTL</b>	Government of Timor-Leste
<b>GRN</b>	Gender Results Network
<b>GTP</b>	Gender Transformation Programme
<b>ha</b>	Hectare
<b>HDP</b>	Humanitarian – Development - Peace
<b>HMIS</b>	Health Management Information System
<b>HQ</b>	Headquarters
<b>HR</b>	Human Resources
<b>HSS</b>	Health Systems Strengthening
<b>HV</b>	Health Volunteer
<b>IEC</b>	Information, Education and Communication
<b>ILO</b>	International Labour Organization
<b>IMAM</b>	Integrated Management of Acute Malnutrition
<b>INS</b>	National Health Institute (Instituto Nacional da Saúde)
<b>IPC</b>	Integrated Phase Classification
<b>IR-EMOP</b>	Immediate Response Emergency Operation
<b>IRM</b>	Integrated Road Map
<b>ISC</b>	Indirect Support Costs
<b>IT</b>	Information Technology
<b>JICA</b>	Japan International Co-operation Agency
<b>km</b>	Kilometre
<b>KOICA</b>	Korea International Co-operation Agency
<b>KONSSANTIL</b>	Konselho Nacional Seguransa Aihan no Nutrisaun Timor-Leste (National Council for

	Food Security, Sovereignty and Nutrition in Timor-Leste)
<b>LBW</b>	Low Birthweight
<b>LMIC</b>	Lower Middle-Income Country
<b>LTA</b>	Long term Agreement
<b>MAD</b>	Minimum Acceptable Diet
<b>M&amp;E</b>	Monitoring and Evaluation
<b>MAM</b>	Moderate Acute Malnutrition
<b>MCHN</b>	Maternal and Child Health and Nutrition
<b>MDCA</b>	Mobile Data Collection and Analytics
<b>MDD</b>	Minimum Dietary Diversity
<b>ME</b>	Merenda Eskolar
<b>MIYCN</b>	Maternal, Infant and Young Child Nutrition
<b>MNP</b>	Micronutrient Powder
<b>MOU</b>	Memorandum of Understanding
<b>mt</b>	metric ton
<b>MUAC</b>	Mid-Upper Arm Circumference
<b>nd</b>	not dated
<b>np</b>	no page number
<b>NGO</b>	Non-Governmental Organization
<b>NLC</b>	National Logistics Centre
<b>NNS</b>	National Nutrition Strategy
<b>NSFP</b>	National School Feeding Programme
<b>NZHSR</b>	National Zero Hunger Strategic Review
<b>OECD</b>	Organisation for Economic Co-operation and Development
<b>OEV</b>	Office of Evaluation
<b>OH</b>	Outcome Harvesting
<b>PACE</b>	Performance Assessment and Competency Assessment
<b>PAN-HAM-TIL</b>	National Zero Hunger Action Plan
<b>PLW</b>	Pregnant and Lactating Women
<b>RAEOA</b>	Special Administrative Region of Oecusse Ambeno (Região Administrativa Especial de Oecusse Ambeno)
<b>RBB</b>	Regional Bureau for Asia and the Pacific
<b>RBM</b>	Results-Based Management
<b>RMP</b>	Performance Management and Accountancy

<b>RUSF</b>	Ready-to-Use Supplementary Food
<b>RUTF</b>	Ready-to-Use Therapeutic Food
<b>SAM</b>	Severe Acute Malnutrition
<b>SAMES</b>	Servico Autonomo de Medicamentos e Equipamentos de Saude (medical and pharmaceutical supply agency)
<b>SBCC</b>	social and behaviour change communication
<b>SCOPE</b>	System for Cash Operations
<b>SDG –</b>	SDG – Sustainable Development Goal
<b>SER</b>	Summary Evaluation Report
<b>SFP</b>	Supplementary Feeding Programme
<b>SIPRI</b>	Stockholm International Peace Research Institute
<b>SISCa</b>	integrated community health service (Servisu Integrado du Saude Comunidade)
<b>SNIP</b>	Specific Nutrition Interventions Package
<b>SO</b>	Strategic Outcome
<b>SOP</b>	Standard Operating Procedure
<b>SPR</b>	Standard Project Report
<b>SRAC</b>	Strategic Resource Allocation Committee
<b>STH</b>	Soil-Transmitted Helminth
<b>SUN</b>	Scaling Up Nutrition
<b>TA</b>	Technical Assistance
<b>TLFNS</b>	Timor-Leste Food and Nutrition Survey
<b>TLHIS</b>	Timor-Leste Health Information System
<b>TOMAK</b>	To'os ba Moris Di'ak (farming for prosperity)
<b>TOR</b>	Terms of Reference
<b>TSFP</b>	Targeted Supplementary Feeding Programme
<b>U5</b>	Under five years of age
<b>UN-CERF</b>	United Nations Central Emergency Response Fund
<b>UNCT</b>	United Nations Country Team
<b>UNDAF</b>	United Nations Development Assistance Framework
<b>UNDP</b>	United Nations Development Programme
<b>UNEG</b>	United Nations Evaluation Group
<b>UNESCO</b>	United Nations Educational, Scientific and Cultural Organization
<b>UNFPA</b>	United Nations Population Fund
<b>UNHCR</b>	United Nations High Commissioner for Refugees
<b>UNICEF</b>	United Nations Children's Fund

<b>UNN-REACH</b>	United Nations Nutrition Network REACH
<b>UNSDCF</b>	United Nations Sustainable Development Cooperation Framework
<b>UNTL</b>	Universidade Nacional de Timor-Leste
<b>US</b>	United States
<b>VAM</b>	Vulnerability Analysis and Mapping
<b>WASH</b>	water, sanitation and hygiene
<b>WEF</b>	World Economic Forum
<b>WFP</b>	World Food Programme
<b>WHO</b>	World Health Organization
<b>WINGS</b>	WFP Information Network and Global System
<b>WRA</b>	women of reproductive age
<b>ZEESM</b>	Special Zones of Social Market Economy (Zonas Especiais de Economia Social de Mercado)

# Photocredits

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