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ANNEX II

to the Commission Implementing Decision on the financing of the annual action plan in favour of Timor Leste for 2023

Action Document for “Strengthening Social Inclusion and Nutrition in Timor Leste”

ANNUAL PLAN

This document constitutes the annual work programme within the meaning of Article 110(2) of the Financial Regulation, within the meaning of Article 23 of the NDICI-Global Europe Regulation.

1 SYNOPSIS

1.1 Action Summary Table

1. Title CRIS/OPSYS business reference Basic Act	Strengthening Social Inclusion and Nutrition in Timor Leste OPSYS number: ACT-61793 Financed under the Neighbourhood, Development and International Cooperation Instrument (<u>NDICI-Global Europe</u>)
2. Team Europe Initiative	No
3. Zone benefiting from the Action	The Action shall be carried out in Timor Leste (Asia)
4. Programming document	Multiannual Indicative Programme for Timor Leste (2021-2027) ¹
5. Link with relevant MIP(s) objectives / expected results	MIP Priority Area 2: Good governance for sustainable development Specific objective 2.2: Strengthen social inclusion and nutrition in Timor Leste. Expected results per specific objective: 2.2.1. Reduce inequality and promote equal opportunities for all. 2.2.2. Pursue an end to hunger and malnutrition and systematically integrate resilience.
PRIORITY AREAS AND SECTOR INFORMATION	
6. Priority Area(s), sectors	Government and civil society (150), Other social infrastructure and services (160)
7. Sustainable Development Goals (SDGs)	Main SDG: SDG 1 No poverty Other significant SDGs and targets: SDG 2 Zero hunger, SDG3 Good health and well-being, SDG5 Gender equality, SDG16 Peace, justice and strong institutions, SDG 17 Partnerships for the goals
8 a) DAC code(s)	11250 – School Feeding - (50%) 12240 – Basic Nutrition - (25%) 16010 - Social protection – (25%)

¹ C(2021)9071 of 14.12.2021.

8 b) Main Delivery Channel	40000 – Multilateral Organisations 20000 – Non-Governmental Organisations (NGO) and Civil Society				
9. Targets	<input type="checkbox"/> Migration <input type="checkbox"/> Climate <input checked="" type="checkbox"/> Social inclusion and Human Development <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Biodiversity <input type="checkbox"/> Education <input checked="" type="checkbox"/> Human Rights, Democracy and Governance				
10. Markers (from DAC form)	General policy objective	Not targeted	Significant objective	Principal objective	
	Participation development/good governance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	Aid to environment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Gender equality and women's and girl's empowerment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	Reproductive, maternal, new-born and child health	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	Disaster Risk Reduction	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Inclusion of persons with Disabilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	Nutrition	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	RIO Convention markers	Not targeted	Significant objective	Principal objective	
	Biological diversity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Combat desertification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Climate change mitigation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Climate change adaptation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	11. Internal markers and Tags	Policy objectives	Not targeted	Significant objective	Principal objective
		Digitalisation @	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
digital connectivity digital governance digital entrepreneurship digital skills/literacy digital services		YES <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	NO <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Connectivity @		<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
		YES	NO		

	digital connectivity	<input type="checkbox"/>	<input type="checkbox"/>	/
	energy	<input type="checkbox"/>	<input type="checkbox"/>	
	transport	<input type="checkbox"/>	<input type="checkbox"/>	
	health	<input type="checkbox"/>	<input type="checkbox"/>	
	education and research	<input type="checkbox"/>	<input type="checkbox"/>	
	Migration @	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Reduction of Inequalities @	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Covid-19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BUDGET INFORMATION				
12. Amounts concerned	Budget line(s) (article, item): 14.020132 The Pacific Total estimated cost: EUR 12 million Total amount of EU budget contribution EUR 12 million			
MANAGEMENT AND IMPLEMENTATION				
13. Type of financing	Direct management through: - Grants Indirect management with the entity(ies) to be selected in accordance with the criteria set out in section 4.3.2.			

1.2 Summary of the Action

This action will contribute to priority area 2 “Good governance for sustainable development”, of the Multiannual Indicative Plan (MIP 2021-2027), with the specific objective 2 “Strengthen social inclusion and nutrition in Timor Leste”.

The **overall objective** of the Action is to contribute to reducing poverty by addressing malnutrition and social inclusion amongst children under five, pregnant mothers, and school age children.

The Action has two **specific objectives**:

1. To strengthen the capacity of the Government to deliver effective social inclusion and nutrition services.
2. To promote an integrated nutrition approach leading to the reduction of malnutrition amongst Timorese mother and children.

The **expected outputs** of this Action that contribute to the above specific objectives are:

1.1. The capacities of the Government to manage, implement, deliver, and monitor nutrition and social protection schemes targeting vulnerable people is increased.

2.1 Malnutrition among Timorese mothers and children is reduced with the support of local interventions.

Main SDG addressed by this action is SDG 1 No poverty while other significant SDGs and targets are SDG 2 Zero hunger, SDG3 Good health and well-being, SDG5 Gender equality, SDG16 Peace, justice and strong institutions, SDG 17 Partnerships for the goals due to the strong engagement with national and local authorities.

The DAC codes specifically targeted are 11250 – School Feeding, 12240 – Basic Nutrition and 16015 Social services (including youth development and women+children)

As nutrition and social protection are multifaceted challenges that require a concerted approach by multiple actors and Ministries, this project intends to bridge the gaps that have been identified for a more effective way to address them. Taking into account that the strategic framework is already in place, supporting the joint efforts of the most relevant institutions is a key aspect of this programme.

2 RATIONALE

2.1 Context

Timor Leste is situated in Southeast Asia. It is one of the world's youngest countries: Timor Leste gained its independence in 2002. According to the results of the 2022 Population and Housing Census, the country has about 1.34 million inhabitants, 64.6 % of the population is below age 30. The participation in the workforce is also unbalanced, with the large majority of women being involved in informal and unpaid labour². Also, Timor Leste Labour Force Survey from 2021, indicated that around 82,800 youth aged 15-24 years old were not in employment, education, and training (NEET), representing 30.5% of young people of this age group. Timor Leste is a low-income country with GDP per capita at USD 2,741.4 in 2021³, with 42% of the population still living in poverty.

The commitment to human development and social protection is explicit in the country's Constitution and policies. Since its independence, Timor Leste has achieved substantial progress on several SDGs, including a reduction of the under-five mortality rate, improved access to drinking water and access to basic education.

The importance of improving nutrition is highlighted as a priority area of intervention in several national strategic documents developed in recent years, and notably in the following plans:

- Timor Leste Strategic Development Plan 2011-2030 (TSLSDP) / VIII Constitutional Government Programme;
- The 8th Constitutional Government/Economic Recovery Plan;;
- The National Food and Nutrition Security Policy 2014-2020 (NFNSP);
- The National Action Plan for a Hunger and Malnutrition Free Timor Leste, (PAN-HAM-TL) 2015-2025;
- The National Health Sector Strategic Plan 2011-2030;
- The National Health Sector Nutrition Strategic Plan (NHSNSP) for 2022-2026;
- Timor Leste SDG2 Consolidated National Action Plan For Nutrition And Food Security for 2020-2030 (SDG2 CNAP-NFS) and
- The Prime Minister's National Nutrition Award programme launched in August 2021.

The last programme brings on board eight ministries in the country to achieve the Sustainable Development Goal 2 (SDG2) in the next ten years. The government clearly emphasises that nutrition actions should not only be seen as important for those working in the health sector, but that relevant ministries have to play an important role in combatting malnutrition.

On terms of Social Protection, a **National Strategy for Social Protection for 2021-2030** was approved by the Government of Timor Leste on 11th November, 2021. The strategy is inspired by the International Labour Organisation (ILO) Social Protection Floors Recommendation, 2002 (No. 202), the NSSP 2021-2030 and aims at addressing at least four basic social protection guarantees. These guarantees are:

- (i) access to a nationally defined set of goods and services, that meets the criteria of availability, accessibility, acceptability and quality - these include essential health care, such as maternity care;
- (ii) basic income security for households with children, at least at a nationally defined minimum level, that provides access to nutrition, education, care and any other necessary goods and services;
- (iii) basic income security, at least at a nationally defined minimum level, for persons in active age which cover individuals against risks, of sickness, unemployment, maternity, and disability; and
- (iv) basic income security, at least at a nationally defined minimum level, for elderly persons. Social protection refers to a set of public policies with the primary objective of protecting people, including the poorest and most vulnerable, and to ensure minimum standards of well-being.

Programmes being implemented in Timor Leste

The **Bolsa da Mãe Programme**, created in 2012, has an important role in reducing poverty, improving health, nutrition, and education outcomes. This programme gives support to pregnant mothers and children. One of the priorities under the **Economic Recovery Plan** was to “*create conditions for the Bolsa da Mãe Programme to*

² <https://iwda.org.au/Timor-Leste/>

³ <https://data.worldbank.org/country/TL>

increase its coverage recognizing that this programme may have a significant impact in poverty reduction among children, who are currently a particularly vulnerable group to poverty”.

On the 1st of September 2021, the Council of Ministers approved a Decree-Law for the “*creation of subsidies for pregnancy and children, collectively known as Bolsa da Mãe – Jersaun Foun*” and an amendment to Decree-Law 18/2012 of 4 April, with the intent to reform the Bolsa da Mãe and increase its impact on poverty reduction and human capital. The Bolsa da Mãe – Jersaun Foun *‘includes two additional benefits, which provide social support during pregnancy and early childhood, improve maternal and child health and nutrition, promote economic inclusion and foster the local economy’*⁴.

Currently the Bolsa da Mae - Jersaun Foun (BdM-JF) Programme is being implemented in the municipalities of Ainaro, Bobonaro and Oecusse. The plan of the Government is to have it extended to all municipalities by 2025. The programme is **universal, and it targets pregnant women and children**. Since cash has proved to be the most effective type of transfer for social assistance programmes in Timor Leste,⁵⁶ pregnant women receive USD 15 per month, and caregivers receive USD 20 per month per child. An additional USD 10 per month is provided if a child has a disability. People register at health clinics, encouraging them to seek maternal and child health care.

Early childhood is the most vulnerable stage of the human life cycle. The prevalence of stunting (chronic under nutrition) and wasting (acute under nutrition) indicates the high level of vulnerability that children in early childhood are exposed to.

The School Feeding Programme (SFP) in Timor Leste has been implemented since 2005 as part of WFP operations and targeted students from grade 1 to 6. The Government through the Ministry of Education, Youth and Sport (MoEYS) took over the programme in 2011. The Government is now implementing the SFP in all 14 municipalities, reaching school age children of 6-14 years old enrolled in pre-schools (320,000 children – 24% of total population age from 4 to 5) and primary schools (grades 1-9).

The primary objectives of the programme are to ensure students’ access to healthy nutritious diets and providing nutrition education in schools. The programme provides one hot cooked meal every day to each student who attends the school. The Government of Timor Leste considers the SFP as a key priority and has reinstated its commitment by the Prime Minister signing the School Meal Coalition in July 2021.

A quality education, combined with a guaranteed package of health and nutrition interventions at school, such as school feeding, and Nutrition education contributes to child and adolescent development and build human capital. School Feeding Programme can help get children into school, increasing enrolment and reducing absenteeism. ⁷It can also contribute to their learning by avoiding hunger and enhancing cognitive abilities. The benefits are especially relevant for the poorest and most disadvantaged children.

The National Health Sector Nutrition Strategic Plan (NHSNSP) for 2022-2026 recognizes the importance of nutrition education, community mobilisation and social behaviour change communication, and positive behaviour change (Strategy 4 of the NHSNSP). “*Human behaviour is at the core of poor nutrition. All the immediate and underlying causes of malnutrition are linked to the behaviours of individuals and their household members*”⁸. *Therefore, improvements in nutrition are not possible without broad, widespread changes in the everyday behaviours of people and population*”.⁹ The Ministry of Health, through the Partnership for Improving Nutrition in Timor Leste (PINTL), an EU financed project, and with the support of UNICEF, is scaling up the **Mother Support Groups model (MSG)** in 14 municipalities. MSGs target women, children, and their families, and promote social and behavioural changes in nutrition, maternal, new-born, and child health, as well as hygiene and sanitation in their respective communities.

⁴ Bolsa da Mãe – Jersaun Foun, Programme Profile. Technical Note, # 2-2021

⁵ Challenges and Ways Forward to Extend Social Protection to All in Timor Leste Assessment-Based National Dialogue report – ILO, MSS, 2018

⁶ Policy Note - Assessing the Bolsa da Mãe Benefit Structure 1A Preliminary Analysis – June

⁷ School Feeding Programme, Study report, HATUTAN education and Nutrition Programme, Care International

⁸ USAID. 2017. Multi-Sectoral Nutrition Strategy 2014–2025 Technical Guidance Brief: Effective At-Scale Nutrition Social and Behavior Change Communication. Washington, DC: U.S. Agency for International Development.

⁹ The National Health Sector Nutrition Strategic Plan (NHSNSP) for 2022-2026

Finally, the recently created Stunting Unit, directly under the Prime Minister, as a new Coordination Unit for Nutrition Sector activities, is a clear indication of the political priority of the Government on nutrition issues in Timor Leste.

The **Multiannual Indicative Programme (MIP) 2021-2027** for Timor Leste emphasises the multisectoral nature of nutrition programming, and proposes in the framework of *Priority area 2* “*Good governance for sustainable development, specific objective: “Strengthen social inclusion and nutrition in Timor Leste”*” to address malnutrition through social protection. Social Protection, Food Security and Nutrition are increasingly recognized as key priorities of the national development agenda. It is gaining a prominent space in the United Nations Sustainable Development Goals (SDGs) and in the government programmes, particularly with the approval of the first National Strategy for Social Protection (NSSP) 2021-2030. This is reflected by the increase in the allocation of national resources to reform social protection programmes towards universalisation, strengthening delivery systems, and building institutional capacity.

The **European Commission Strategy on the Rights of the Child (2021-2024)** calls explicitly for ‘food systems to deliver nutritious, safe, affordable, and sustainable diets that meet the needs and rights of children’. The action will deliver on the EU’s pledges to reduce the number of stunted children under-five by 7 million by 2025¹⁰ and to invest EUR 2.5 billion globally over the period 2021-2024 to reduce all forms of malnutrition.¹¹ At the same time, the **Commission’s Communication on ‘Social Protection in European Union Development Cooperation’** stresses the importance of progressively moving from a fragmented set of schemes towards supporting social protection systems, encompassing life cycle protection for all children, people of working age in case of maternity, disability, illness, work injury or unemployment; and older persons. By supporting inclusive social protection systems within the framework of SDG 1.3, the EU also commits to promote social protection floors, the first level of protection in any national social protection system¹²

Lastly, on 23rd March 2022¹³ the European Commission decided to step up support for global action to transform food systems via its participation to eight Global Coalitions formed in the framework of the UNFSS. One of them, the **School Meals Coalition** focuses on improving the quality and encouraging the scale-up of school meals programmes globally. The Coalition intends notably to link school meals programmes with local farmers and sees school feeding as part of social protection schemes

2.2 Problem Analysis

Timor Leste has the world’s third highest stunting rate and high prevalence of underweight children under the age of five. According to an EU-supported survey carried out by UNICEF and the Ministry of Health in 2020, nearly half of all children under five (47.1%) were stunted. Food insecurity is clearly reflected in the poor nutritional status of children and women, which is also linked to bad care, poor sanitation and hygiene conditions and poor feeding practices.¹⁴

A high number of children continues to face the multiple burdens of malnutrition¹⁵ influenced by different factors like poor dietary intake, poor-quality health care services, low income, environment, and behaviour.

Significant challenges remain with Timor Leste: besides the high rates of undernutrition, 8.6% of children under five are suffering from acute malnutrition. 29.9 % of women of reproductive age (15-49 years) are anaemic¹⁶ and at the same time, overweight and obesity has risen since 2003 to 20.8% indicating the early signs of the country facing the triple burden of malnutrition. This situation has aggravated as a result of the COVID-19 pandemic and severe flooding in 2021, with half the population suffering from some form of food insecurity. It is estimated that only 15% to 37% of the households can afford a nutritious diet. Diet quality is poor with 65% of women of reproductive age meeting minimum dietary diversity, and only 14% of children under 5 years meeting the requirements of a minimum acceptable diet. These challenges are compounded by significant levels of poverty

¹⁰ Pledge included in the Action Plan on Nutrition

¹¹ https://ec.europa.eu/commission/presscorner/detail/en/ip_21_6644

¹² ILO, R202 - Social Protection Floors Recommendation, 2012 (No. 202)

¹³ https://ec.europa.eu/commission/presscorner/detail/en/ip_22_1971

¹⁴ National Nutrition Survey, MoH, 2020

¹⁵ Timor Leste SDG2 Consolidated national Action Plan For Nutrition And Food Security, July 2021

¹⁶ <https://globalnutritionreport.org/resources/nutrition-profiles/asia/south-eastern-asia/Timor-Leste/>

(46%), vulnerability to natural disasters and climate change affecting productivity, water supply and loss of biodiversity.¹⁷

The triple burden of malnutrition which maintains communities trapped in inter-generational cycles of poverty, requires an integrated approach involving relevant sectors such as social protection and education. These actions need to target vulnerable communities affected by the phenomenon with priority given to children and women and girls. Most probably, malnourished children will see their learning abilities reduced due to cognitive impairment, limiting their productivity and income potential when they reach adulthood¹⁸. Malnutrition - particularly maternal and child undernutrition - is the greatest risk factor driving the most death and disability combined in the country and presents an important development challenge and high public health risk¹⁹. Malnutrition can be prevented by ensuring adequate nutrition in the first 1,000 days - maternal nutrition before and during pregnancy and while breastfeeding. Optimal breastfeeding in the first two years of life together with nutritious, diverse, and safe foods in early childhood has proven to reduce malnutrition. In addition, the quality of food, especially for children of school age and adolescents, and a healthy environment, including access to essential health, water, hygiene, and sanitation services, contribute to reducing malnutrition.²⁰

The 2021 WFP country portfolio evaluation has identified implementation issues affecting the effectiveness and efficiency of the School Feeding Programme and made recommendations to address the quality and sustainability of the programme, by undertaking a comprehensive strategic review of the SFP, to map out a sustainable approach. It was also recommended that Government should lead inclusive multi-stakeholder approach to map out a sustainable pathway and lead the priority from all the partners that supporting the education and social protection sector strategies of Timor Leste. Another recommendation was to improve the quality of monitoring and evaluation, both of programme delivery and of its results, to meet the minimum standards required for assessing programme delivery and results. Late submissions of reports due to a lack of functionality of the Monitoring and Evaluation (M&E) system in place, as well as the need for capacity building of staff, have hindered the adequate implementation of the School Feeding Programme, to the extent of affecting budget transfer to the municipalities.

The MoEYS faces difficulty in ensuring that the cash for local purchases reaches schools, and in managing the logistics involved, including late distribution of rice, late transfer of money and/or unavailability of foods in local markets.

Another challenge is related to the limited availability of water, which hinders the delivery of quality services in health facilities and schools. Ensuring access to safe water is key to delivering quality services at schools, communities, and health facilities. Gains in sanitation beyond open defecation-free (ODF) towards “basic” and “safely managed” levels can be sustained only if water and other good practices are in place. Evidence shows that the sustainability of collective sanitation outcomes will also depend on the incorporation of other critical sanitation factors, namely institutional sanitation, improved handwashing with soap, solid and liquid waste management, and safe water management.

Key findings of a Review of 16 Mid-Term Evaluations of USAID-funded Food Security Development Programmes from 2015-2020, ²¹indicated that *“There was often poor understanding of the importance of the 1,000-day approach and how different interventions, e.g. food distribution to pregnant and lactating women (PLW), Care Group learning, cooking demonstrations, etc., were all linked together to achieve a common nutrition end. There were many recommendations related to the training and strengthening of community nutrition and health volunteers”*. Nevertheless, coordination mechanisms to strengthen response and accountability mechanisms for a multisectoral response to malnutrition remains a challenge.

Identification of main stakeholders and corresponding institutional and/or organisational issues (mandates, potential roles, and capacities) to be covered by the action:

¹⁷ Timor Leste SDG2 Consolidated national Action Plan For Nutrition And Food Security, July 2021

¹⁸ Neurodevelopmental, cognitive, behavioural, and mental health impairments following childhood malnutrition: a systematic review, Amir Kirolos, 2022

¹⁹ Institute for Health Metrics and Evaluation : <https://www.healthdata.org/Timor-Leste>

²⁰ Timor Leste SDG2 Consolidated national Action Plan For Nutrition And Food Security, July 2021

²¹ Mid-Term Evaluations of USAID-funded Food Security Development Programmes from 2015-2020, October 2020

- Ministry of Social Solidarity and Inclusion - Department of Social Protection. They will be in charge of extending social protection schemes to rural areas and ensuring that families are duly registered and followed-up.
- Ministry of Health – Nutrition Directorate. As the institution in charge of ensuring that nutritional supplements are available at municipal level and supervise the community groups dealing with pregnant mothers, it will have a key role in the implementation at municipal level.
- Ministry of State Administration and Ministry of Education, Youth and Sport will be key to ensure that schools at municipal level implement the School Feeding Programme.
- Local authorities. They will be a key stakeholder, either at the level of the municipality, Suco (group of communities) and community. Following the ongoing decentralisation process local Authorities will be responsible to provide the basic school infrastructure, sustaining the health facilities and even provide social services.
- International and local NGOs. International NGOs are key players as they have the knowledge and know-how that many local NGOs do not have. They will be complemented with local NGOs that have access to communities and young mothers. Their capacity to reach most vulnerable population will be key to ensure that they benefit from the action.
- International Organisations have been collaborating with the Government in the implementation of the national policies on Nutrition and Social protection for many years. They will have an important role in the implementation of the action and in supporting the government with the technical assistance to improve its management, implementation, and monitoring capacity.

3 DESCRIPTION OF THE ACTION

3.1 Objectives and Expected Outputs

The Overall Objective (Impact) of the action is to contribute to reducing poverty by addressing malnutrition and social inclusion amongst children under five, young pregnant mothers, and school age children.

The Specific Objectives (Outcomes) of this action are to:

1. Strengthen the capacity of the Government to deliver effective social inclusion and nutrition services.
2. Promote an integrated nutrition approach leading to the reduction of malnutrition amongst Timorese mother and children.

The Outputs to be delivered by this action contributing to the corresponding Specific Objectives are:

- 1.1. Contributing to Outcome 1 (or Specific Objective 1): Increased capacity of the Government on the management, implementation, delivery, and monitoring of nutrition and social protection schemes for vulnerable people.
- 2.1 Contributing to Outcome 2 (or Specific Objective 2): Malnutrition among Timorese mothers and children is reduced with the support of local interventions.

3.2 Indicative Activities

Activities Related to Output 1.1.:

Activity 1.1.1. Development and delivery of training courses to MSSI and INSS staff and its relevant partners, on social security systems, nutrition, and WASH.

Activity 1.1.2. Develop and implement a monitoring and evaluation module for social security and School Feeding Programme with key social security indicators.

Activity 1.1.3. Conduct trainings on nutrition and social security systems to central and municipality staff.

Activity 1.1.4. Provide technical assistance to the Government on quality nutrition services, including breastfeeding promotion, protection, and support.

Activities Related to Output 2.1.:

Activity 2.1.1. Implement communication and awareness campaigns on social protection and nutrition, using the products and materials developed by the Government or other organisations.

Activity 2.1.2. Provide inter-personal counselling on optimal maternal nutrition and infant and young child feeding practices, basic sanitation, and waste management given to caregivers, families, mother support groups (MSG), community-based organisations and communities.

Activity 2.1.3. Support the activities of mother support groups (MSG) and community-based organisations in counselling mothers in maternal nutrition and infant and young child feeding practices, basic sanitation, and waste management and following up cases under treatment (home visits).

Activity 2.1.4. Support the MSSSI in the monitoring system of social cash transfers to ensure effective and efficient social cash transfer process.

Activity 2.1.5. Conduct trainings and promote awareness on the importance of safe and nutritious school meals through the School Feeding Programme to children, parents, and communities.

Activity 2.1.6. Provide technical assistance to relevant supply chain actors on production, conservation, transport, and consumption of agriculture products in the School Feeding Programme.

Activity 2.1.7. Support local farmers groups and cooperatives in the production, conservation, and distribution of diversified food ingredients to increase the basket of the School Feeding Programme.

Activity 2.1.8. Support local authorities in the development of community plans to address the need for water systems in schools and health facilities.

Activity 2.1.9. Support and finance the construction, upgrading and supply of WASH facilities and waste disposal systems in schools and health facilities.

Activity 2.1.10. Support and finance selected schools in the construction of model kitchens, provision of high-quality locally sourced kitchen equipment, and reducing access barriers for people with disabilities.

3.3 Mainstreaming

Environmental Protection & Climate Change

Environmental protection and climate change are not targeted by this action. Nevertheless, the resource to local production as well as the provision of safe water sources could have some impact on the local environment and the use of nearby water sources, as well as the availability of water. Deforestation of areas close to school because of the use of nearby fuel wood for cooking will be addressed during the implementation of the Action. Similarly, the careful management of the school waste and waste coming from the packaging of nutrition supplements will be taken into consideration.

Sanitary features of wastewater will be duly taken into account in order not to pollute local water sources.

The provision of water has to be based on a careful assessment of the possibilities including water harvesting and the provision of safe water storage facilities. Ensuring a sustained source of water is becoming an issue in many parts of Timor Leste, therefore if a sustainable water source is identified during the implementation of the programme, local communities will also be able to benefit from it (not just the health facility or school).

Outcomes of the SEA screening (relevant for budget support and strategic-level interventions)

The Strategic Environmental Assessment (SEA) screening concluded that no further action was required.

Outcomes of the EIA (Environmental Impact Assessment) screening (relevant for projects and/or specific interventions within a project)

The EIA screening classified the action as Category C (no need for further assessment).

Outcome of the Climate Risk Assessment (CRA) screening (relevant for projects and/or specific interventions within a project)

The CRA screening concluded that this action is no risk or low risk (no need for further assessment).
<p>Gender equality and empowerment of women and girls</p> <p>As per the OECD Gender DAC codes identified in section 1.1, this Action is labelled as G1. This implies that the action will have specific activities with women as main target and that gender will be mainstreamed throughout the different components and stages.</p> <p>The action will contribute to address and promote gender issues in Timor Leste by targeting specifically young and pregnant mothers. The action will be aligned with the GAP III, thus addressing nutrition needs of women and children and, more specifically the young and pregnant women, and supporting women and their children, through education on sanitation and hygiene conditions and feeding practices that will contribute to improve nutrition.</p>
<p>Human Rights</p> <p>The action will directly address issues of human rights and social protection through the promotion of social protection systems and ensuring the health of the population by improving their nutrition and primary physiological needs. This action will apply the working principles of the human rights-based approach (HRBA): applying all human rights for all, meaningful and inclusive participation and access to decision-making, non-discrimination and equality, accountability and rule of law for all, and transparency and access to information supported by disaggregated data.</p>
<p>Disability</p> <p>As per OECD Disability DAC codes identified in section 1.1, this action is labelled as D1. This implies that the action will support people with disabilities and will improve their daily lives by facilitating their access in schools. One of the actions of the project is to reduce barriers for people with disabilities. But even if people with disability are not a main target of this action, the project will take into account their needs and will integrate them in the training courses as much as possible, to ensure a proper integration of people with disabilities and that they benefit accordingly of the social protection schemes. Specific awareness and sensitisation actions in schools will be developed to facilitate the integration of people with disability in the communities from childhood. Disaggregated data by disability status will also be privileged whenever possible to make more visible the situation of PLWD in Timor Leste.</p>
<p>Reduction of inequalities</p> <p>Reduction of inequalities is the key area addressed in this action. The relationship between inequality, food security and nutritional outcomes is evident. Sustained disparities between vulnerable and other social can slow growth and lead to political instability, migration fluxes and to low levels of investment in the provision of public goods and services, with related adverse consequences on food security and nutrition. Stark inequalities – including between rural and urban areas – in access to basic services and assets lead to unequal processes of economic growth and transformation. These inequalities affect households' prospects for overcoming rural poverty, food insecurity and malnutrition. The relation between inequality, food security and nutritional outcomes has been described many times.²²</p>
<p>Democracy</p> <p>Closely linked to the reductions of inequalities.</p>
<p>Conflict sensitivity, peace, and resilience</p> <p>Closely linked to the reductions of inequalities.</p>
<p>Disaster Risk Reduction</p> <p>This action will not have a direct impact on Disaster Risk Reduction (DRR), however schools are traditionally a shelter in case of emergency as it happened during the flooding in April 2021. Therefore, it will be suggested that</p>

²² FAO, IFAD, UNICEF, WFP and WHO. 2022. The State of Food Security and Nutrition in the World 2022. Repurposing food and agricultural policies to make healthy diets more affordable. Rome, FAO. Holleman, C. & Conti, V. 2020. Role of income inequality in shaping outcomes on individual food insecurity. Background paper for The State of Food Security and Nutrition in the World 2019. FAO Agricultural Development Economics Working Paper 19-06. Rome, FAO

improved schools with the right WASH systems could be included in the Emergency Response Plans by the municipal authorities.

Other considerations if relevant

Governance

The implementation and management of the cash transfer system also implies the use of the right economic governance systems in place. Cash transfers and economic transfers will be audited as part of the activities of the MSSSI and that of the local authorities.

3.4 Risks and Lessons Learnt

Category	Risks	Likelihood (High/ Medium/ Low)	Impact (High/ Medium/ Low)	Mitigating measures
People and Organisation	Changes in the political landscape and related priorities.	Medium	High	Ensure continuous political and policy dialogue with the Government and local authorities.
People and Organisation	Manipulation of the proposed action to serve specific political interests.	Medium	High	Promote regular visits by the EU Delegation staff to the project activities
People and Organisation	Resistance to new approaches of local communities and lack of interest at community level.	Medium	High	Awareness-raising activities and efficient communication. Close involvement of non-state actors (including at the local level).
External environment	Environmental disasters, natural disasters, climate change fragility.	High	High	Implementation of an integrated coordination mechanism, legal framework, circumscription of strategic and operational responsibilities of the different government institutions with responsibilities in the prevention and response to natural disasters, humanitarian crises, and other covariate shocks drafted.
Communication, and information	Lack of effective coordination across public agencies/institutions and overlaps/duplications of donor efforts.	Medium	High	Close sectoral and project monitoring underpinned by sound political economic analysis and capacity to adapt (built-in project flexibility). Proactive donor coordination. To provide technical assistance and capacity building to strengthen the coordination and consultation mechanisms.

Lessons Learnt:

Malnutrition cannot be addressed through the health sector alone. It needs multi sectoral approach. The Timor Leste SDG2 -Consolidated National Action Plan (CNAP) For Nutrition and Food Security is addressing the problem outlining a set of 19 priorities across seven sectors, as requested by the Prime Minister and aligned with existing

policies: Health, Education, Youth and Sports, Agriculture and Fisheries, Social Solidarity and Inclusion, Tourism, Trade and Industry, Public Works, Equity, and Inclusion aiming to form a common and long-term national alliance for nutrition and food security.

The coordination between the different governmental organisations addressing malnutrition, namely Social Protection Schemes (under National Institute of Social Security (INSS)), nutrition specific interventions (under Ministry of Health) and National School Feeding (Ministry of Education) is crucial for an integrated approach to address food (in)security, malnutrition and social inclusion and to tackle this long-standing challenge in Timor Leste.

Empowerment of families and communities with the knowledge and resources necessary to demand optimum nutrition and growth for their children is crucial. Improvements in nutrition are not possible without close engagement with families and communities to reduce stunting and other forms of malnutrition. Appropriately crafted messages must reach communities through a variety of channels, supported by a motivated community workers/Family Health Promotor (FHP) of motivated community workers who can build the dialogue on how to take the recommendations forward.

Village structures (i.e. Suco councils) provide the platforms for bringing communities together to promote behaviour change. Most families belong to community or thematic groups, be it religious, farming, savings, social, health organizations, etc. These groups provide a platform for community mobilisation and awareness raising. There is a commonly reported lack of ability for communities to identify stunting and to engage in optimum infant and young child feeding behaviours. A recent report prepared by the World Bank suggests that a combination of advocacy, social mobilisation, and behaviour change communication is necessary to improve community-level practices.²³

Community-based strategies are particularly critical for delivering health, nutrition, and hygiene interventions, especially those which require household and individual behaviour change. Given the low rate of rural population with easy and regular access to health facilities, community-based platforms will be essential to increase nutrition intervention coverage in Timor Leste.

Social Behaviours Change (SBC) and social and counselling is highly contributory factor to nutrition outcomes. It is complex and there are multiple factors that influence daily decisions to test, adopt, and eventually internalise and sustain new or modified behaviours. MSGs play a significant role in the SBC counselling in breastfeeding practices, caregivers of children 6 months to two years old for complementary feeding, dietary diversity, family planning and WASH.

To strengthen and improve the governance system enhancing and increase effectiveness of nutrition interventions, evaluation, monitoring, advocacy strategies, accountability, incentives regulation, capacity building, domestic resources mobilization and multisectoral coordination are crucial.

The mid-term evaluation of the PINTL programme in April 2022 provided two key elements that need to be addressed:

- Improvement of the management of nutrition programmes within the Ministry of Health and among health facilities and MSSl supported actions at local level and to
- Strengthened multi-sectoral coordination of nutritional programs and interventions including KONSSANTIL meetings, and SUN movement at national and international levels.

At the same time, two of the key Lessons Learnt that were presented at the “Symposium workshop report on review of national nutrition strategy (2014-2019) towards the development of the health sector nutrition strategic plan (2020-2024)”²⁴ are a translation of the relevance of the activities identified in this action, amongst others:

- Successful nutrition strategies are those in which the identified interventions are conceived, planned, and implemented with communities as key partners for development.
- Social protection programme “Bolsa da Mae” vulnerable households are in place but linkages with nutrition remain weak.

²³ Malnutrition in Timor Leste: A review of the burden, drivers, and potential response, WB

²⁴ symposium workshop report on review of national nutrition strategy (2014-2019) towards the development of the health sector nutrition strategic plan (2020-2024), UNICEF 07.03.2020

3.5 The Intervention Logic

The intervention logic follows a two-pronged approach; on the one hand supporting the Timorese Government on the implementation of their two most relevant strategies in this area: National Health Sector Nutrition Strategic Plan (NHSNSP) for 2022-2026 and the National Strategy for Social Protection for 2021-2030; and on the other supporting the concrete and direct actions at local level to the most vulnerable people.

The underlying intervention logic for this action is that if the government capacity on management, implementation and monitoring of social protection actions, the mechanisms and approaches to deliver social benefits to the most vulnerable people, in particular mothers and children, will be improved and more accessible to communities, thus the nutrition and social inclusive practices will have more impact in the beneficiaries.

Furthermore, the actions expected to be conducted at local level, by NGOs and CBO, will ensure an active participation and involvement of local beneficiaries and will promote a social change behaviour related to nutrition, health and hygiene conditions. The demonstration of good examples in feeding practices, basic sanitation, and waste management and the follow up cases under treatment will contribute to change the mind-set of mothers, children and communities towards a better understanding of the effects of malnutrition in human development.

By publicising and extending the reach of the social security systems being done at the same time as actual delivery of social support will be an advantage for the population. The school feeding programmes with delivery of social services and cash transfers provide an opportunity to link those in need of such social services to children that could be dropping out of schools, if it was not for the meals provided. The establishment of monitoring systems, both at health facilities and schools, will give a clearer picture of nutritional failures at family level. Furthermore, MSSI and INSS staff at local level will be better capacitated and able to improve the service delivery capacity. In this way, the capacity of the Government officials to monitor, assess and eventually adapt the strategy action programmes can be better focused on the needs of the beneficiaries.

With these strategies in place and also with ongoing programmes, such as Bolsa da Mae or the INSS initiatives, social delivery at local level is key to ensure a successful implementation of the strategies. Actual implementation and service delivery should take place at local level. Therefore, capacitating local officials in the municipalities and in the communities, together with local support to deliver the services, will have a clear impact in the targeted population. All of the actions at local level, such as publicising the social protection schemes, supporting young mothers, both at social services centres and health facilities, together with supporting young children in the nutritional need can have big impact on the overall well-being of the population.

Very much interlinked to school feeding and nutritional outcomes is the need to have the right infrastructure in place. Provision of kitchens, once the sustainability is ensured by the municipal authorities, as well as the improvement of water supply sources and sanitary infrastructures will be key to ensure that safe drinking and sanitary practices take place at school. The impact of sanitary infrastructures on malnutrition must be stressed, not only at school level but also needs to be addressed at the level of the municipal authorities and communities.

Another element that has to take place at local level is the actual cash transfers to beneficiaries of social protection schemes. The cash transfer process is a very relevant one that will have to be monitored at municipal level with all relevant local participants involved. This programme does not intend to actually deliver funds to beneficiaries but to support the actions of the Government in this regard. In any event, the involvement of the municipal authorities is key to the success in the coordination of this action given that, under the new decentralisation legislation, which transfers power to the municipal authorities, they will be in charge of the actual delivery of all these services.

The role of the NGOs will be key to deliver specific trainings, counselling and socialisation of these initiatives with the local population. The local cultural specificities and even local languages could only be effectively delivered by organizations that know the right language and practices that can trigger the interest of local populations and ensure the sustainability of new practices in their own context.

Lastly, key to local welfare is to have a thriving local economy. Having local products as the main source of the school feeding actions can provide a further income for local farmers and cooperatives. This programme will support local farmers and cooperatives with the difficulties faced on production, supply, storage facilities and access to markets to make available locally produced food for the school feeding and also trigger a process of resorting more to local production rather than just imported cheap and non-nutritious rice.

Therefore, through supporting actions at Government level so the key elements that are required from the central government are available at local level, together with the delivery of social protection and nutrition-related actions

at local level, this programme expects to contribute to reducing poverty levels by supporting social inclusion and addressing malnutrition.

3.6 Logical Framework Matrix

This indicative LogFrame constitutes the basis for the monitoring, reporting and evaluation of the intervention.

On the basis of this LogFrame matrix, a more detailed logframe (or several) may be developed at contracting stage. In case baselines and targets are not available for the action, they should be informed for each indicator at signature of the contract(s) linked to this AD, or in the first progress report at the latest. New columns may be added to set intermediary targets (milestones) for the Output and Outcome indicators whenever it is relevant.

- At inception, the first progress report should include the complete logframe (e.g. including baselines/targets).
- Progress reports should provide an updated logframe with current values for each indicator.
- The final report should enclose the logframe with baseline and final values for each indicator.

The indicative logical framework matrix may evolve during the lifetime of the action depending on the different implementation modalities of this Action.

The activities, the expected Outputs and related indicators, targets and baselines included in the logframe matrix may be updated during the implementation of the action, no amendment being required to the Financing Decision.

Results	Results chain (a): Main expected results (maximum 10)	Indicators (a): (at least one indicator per expected result)	Baselines (values and years)	Targets (values and years)	Sources of data	Assumptions
Impact	To contribute to reduce poverty by addressing malnutrition and social inclusion amongst children under five, young pregnant mothers and at school age children	1. Number of individuals directly benefiting from EU interventions that aim to reduce social and economic inequality (GERF 2.39)	1. 0	1. To be defined during inception phase	Progress Report	Not applicable
		2. Number of women of reproductive age, adolescent girls, and children under 5 reached by nutrition-related interventions supported by the EU (GERF 2.33)	2. TBC	2. To be defined during inception phase	Progress report	
		3. Proportion of population below the international poverty line (GERF 1.23 SDG 1.1.1)	3. TBC	3.	Progress report	
Outcome 1	Strengthened capacity of the Government to deliver effective social inclusion and nutrition services	1.1 Number of government organisations which have benefitted from EU support to strengthen their social protection systems (adapted from GERF 2.31)	1.1. TBC	1.1	1.1 Progress Report	The indicators will be achieved if all the expected activities are implemented in effective and efficient ways during the duration of the actions
Outcome 2	An integrated nutrition approach leading to the reduction of malnutrition amongst Timorese mothers and children is promoted	2.1 Prevalence of stunting among children under 5 years of age (GERF 1.25 SDG 2.2.1)	2.1. TBC	2.1	2.1	
		2.2 Prevalence of undernourishment (SDG 2.1.1)	2.2. TBC	2.2	2.2	
Output 1 relating to Outcome 1	1.1. Increased capacity of the Government on the management, implementation, delivery, and monitoring of social protection schemes for vulnerable people is increased.	1.1.1. a. Number of training courses developed on social security, nutrition, and WASH	1.1.1.a. 0	To be defined during inception phase	1.1.1 a. Progress report	
		1.1.1.b. Number of policy makers trained by the EU-funded intervention on social security, nutrition and WASH by sex and age.	1.1.1.b. 0		1.1.1.b. Database from training participants and Progress Report	
		1.1.2. Number of organisations using the monitoring and	1.1.2. 0	1.1.2.	1.1.2 Progress Report	

		evaluation module for social security				
		1.1.3. Number of people from government and local authorities trained by the EU-funded intervention trained on nutrition and social security, by sex and age	1.1.3. 0	1.1.3 To be defined during inception phase	1.1.3 Database from training participants and Progress Report	
		1.1.4.a. Number of government and local organisations benefitting from technical assistance on quality nutrition services	1.1.5.a. 0	1.1.5. To be defined during inception phase	1.1.5.a. Database from training participants and Progress Report	
		1.1.4.b. Number of people from government and local authorities trained by the EU-funded intervention who increased their knowledge and/or skills for integrating nutrition into health systems to promote healthier eating, and prevent malnutrition in all its forms, disaggregated by sex	1.1.5.b. 0			
		1.1.4.c. Extent to which the EU-funded intervention contributed to more systematic multi-sectoral planning, strategies, policies, regulations and legal frameworks for nutrition and gender	1.1.5.c.		1.1.5.c Data source Baseline and endline studies to be conducted	
Output 1 relating to Outcome 2	2.1 Malnutrition among Timorese mothers and children is reduced with the support of local interventions	2.1.1. Number of communities benefiting from communication and awareness campaigns on social protection and nutrition	2.1.1. 0	2.1.1 To be defined during inception phase	2.1.1 Data source Baseline and endline report	
		2.1.2.a. Number of CSOs providing counselling on maternal nutrition, child feeding practices and WASH	2.1.2.a. 0	2.1.2. a. Baseline report	2.1.2.a Data source Baseline and endline report	
		2.1.2.b Number of beneficiaries receiving counselling on maternal	2.1.2.b 0	2.1.2.b Baseline Report	2.1.2.1b Data source Baseline	



nutrition, child feeding practices and WASH, by group, sex and age			and endline report	
2.1.3.a. Number of mother support groups (MSG) and community-based organisations (CBO) receiving support for development of activities	2.1.3.a 0	2.1.3.a Baseline Report	2.1.3.a Data source Baseline and endline report	
2.1.3.b. Number of mothers being followed by the MSG and CBO, by age and number of children	2.1.3.b 0	2.1.3.b Baseline report	2.1.3.b Data source Baseline and endline report	
2.1.3.c Number of home visits conducted by the MSG and CBO	2.1.3.c 0	2.1.3.c Baseline report	2.1.3.c Data source Baseline and endline report	
2.1.4. Monitoring system of social cash transfers working in an efficient and effective way	2.1.4. 0	2.1.4. 1	2.1.4 Data source Baseline and endline report	
2.1.5. Number of trainings conducted through the School Feeding Programme	2.1.5. a. 0	2.1.5. a. Baseline report	2.1.5. a Data source Baseline and endline report	
2.1.5.1 Number of beneficiaries participating in the trainings through the School Feeding Programme by group, age, and sex	2.1.5.b 0	2.1.5.b Baseline report	2.1.5.b Data source Baseline and endline report	
2.1.6. Number of smallholder farmers, cooperatives and producers that received technical assistance on agriculture supply chain improvement, by group and sex	2.1.6 0	2.1.6. Baseline report	2.1.6 Data source Baseline and endline report	
2.1.7. a. Number of community plans developed at the local level	2.1.8. a. 0	2.1.8.a To be defined during inception phase	2.1.8.a Data source Baseline and endline report	
2.1.7.b. Number of people from Local authorities trained on	2.1.8.b. 0		2.1.8.b Data source Baseline	

	community planning linked to needs of WASH and waste disposals			and endline report	
	2.1.8.a. Number of WASH facilities and waste disposal systems constructed, upgraded, or supplied	2.1.9. a. 0	2.1.9.a To be defined during inception phase	2.1.9.a Data source Baseline and endline report	
	2.1.8.b. Number of people with access to improved drinking water source and/or sanitation facility with EU support (GERF 2.38)	2.1.9.b. 0	2.1.9.b To be defined during inception phase		
	2.1.9. a. Number of schools with model kitchens constructed and equipped	2.1.10. a. 0	2.1.10.a To be defined during inception phase		
	2.1.9.b. Number of schools supported with constructions to facilitate the access for people with disabilities	2.1.10.b. 0	2.1.10.b To be defined during inception phase		

4 IMPLEMENTATION ARRANGEMENTS

4.1 Financing Agreement

To implement this action, it is envisaged to conclude a financing agreement with the partner country.

4.2 Indicative Implementation Period

The indicative operational implementation period of this action, during which the activities described in section 3 will be carried out and the corresponding contracts and agreements implemented, is **66 months** from the date of entry into force of the financing agreement.

Extensions of the implementation period may be agreed by the Commission's responsible authorising officer by amending this Financing Decision and the relevant contracts and agreements.

4.3 Implementation Modalities

The Commission will ensure that the EU appropriate rules and procedures for providing financing to third parties are respected, including review procedures, where appropriate, and compliance of the Action with EU restrictive measures²⁵.

4.3.1 Direct Management (Grants)

Grants: (direct management)

(a) Purpose of the grant(s)

The purpose of the grant is to support part of the activities foreseen under specific objective 2 (outcome 2) and related output 2.1, as described in section 3.1, to promote an integrated nutrition approach, at local level, which leads to a reduction of malnutrition amongst pregnant mothers and children in Timor Leste. Such activities will include:

1. Providing inter-personal counselling on optimal maternal nutrition and infant and young child feeding practices, basic sanitation, and waste management given to caregivers, families, mother support groups (MSG), community-based organisations and communities.
2. Supporting the activities of mother support groups (MSG) and community-based organisations in counselling mothers in maternal nutrition and infant and young child feeding practices, basic sanitation, and waste management, and following up cases under treatment (home visits).
3. Conducting trainings and promoting awareness on the importance of safe and nutritious school meals through the School Feeding Programme to children, parents, and communities.

(b) Type of applicants targeted

The targeted applicants will be legal entities, public and private sector organisations, civil society organisations (CSOs), international organisations, local and international NGOs.

The part of the action under the budgetary envelope reserved for grants may, partially or totally and including where an entity is designated for receiving a grant without a call for proposals, be implemented in indirect management with an entity, which will be selected by the Commission's services using the criteria defined in section 4.3.2 below.

4.3.2 Indirect Management with an entrusted entity

A part of this Action may be implemented in indirect management with an entity(ies), which will be selected by the Commission's services using the following criteria:

²⁵ www.sanctionsmap.eu. Please note that the sanctions map is an IT tool for identifying the sanctions regimes. The source of the sanctions stems from legal acts published in the Official Journal (OJ). In case of discrepancy between the published legal acts and the updates on the website it is the OJ version that prevails.

- Specialisation in providing nutrition and social inclusion related technical assistance and having all the expertise required for the delivery of the results expected under this project;
- Specific expertise in the sectors covered by this action;
- Capability to ensure coordination and operating coherently at all levels with Timorese public institutions as well as other organisations and stakeholders and donors dealing with these topics (including civil society, associations, media, etc.);
- Strong track record of nutrition and social inclusion implementations;
- Knowledge of the country context and prior experience in Timor Leste;
- Experience in promoting alignment of EU interests, policies and values in partner countries.

The implementation by this entity/these entities entails a contribution to the achievement of the specific objective 1 (outcome 1) and of part of specific objective 2 (outcome 2) and related outputs 1.1 and 2.1, as described in section 3.1.

4.3.3 Changes from indirect to direct management mode (and vice versa) due to exceptional circumstances (one alternative second option)

In case, due to circumstances outside of the Commission's control, it is not possible to implement the action in indirect management with a pillar-assessed entity/ies described under section 4.3.2, the alternative implementation modality will be direct management (procurement).

4.4 Scope of geographical eligibility for procurement and grants

The geographical eligibility in terms of place of establishment for participating in procurement and grant award procedures and in terms of origin of supplies purchased as established in the basic act and set out in the relevant contractual documents shall apply, subject to the following provisions.

The Commission's authorising officer responsible may extend the geographical eligibility on urgency or unavailability of services in the markets of the countries or territories concerned, or in other duly substantiated cases where application of the eligibility rules would make the realization of this action impossible or exceedingly difficult (Article 28(10) NDICI-Global Europe Regulation).

4.5 Indicative Budget

Indicative Budget components	EU contribution (amount in EUR)
Implementation modalities – cf. section 4.3	
<i>Indirect management with an entrusted entity</i> - cf. section 4.3.1, contributing to Objective 1 and Objective 2	9 900 000.00
<i>Grants</i> – cf. section 4.3.1, contributing to Objective 2	2 000 000.00
Evaluation – cf. section 5.2 Audit – cf. section 5.3	100 000.00
Contingencies	0
Totals	12 000 000.00

4.6 Organisational Set-up and Responsibilities

Implementation of the action will require effective coordination at different levels under the leadership of the selected organization, through the Programme Management Team (PMT) and the oversight and direction provided by the Project Steering Committee (PSC).

The PSC will be composed of senior representatives of all the Ministries involved in the implementation of the “Strengthen Social Inclusion and Nutrition” project, Municipalities, other relevant government stakeholders, relevant development partners, relevant implementing partners including representatives of international NGOs,

local NGOs/CSOs. The PSC will be co-chaired by the Ministries of Timor Leste government, the EU Delegation and a representative of the implementing partner(s).

The PSC will provide overall direction and strategic oversight of the project, general coordination, and communication among all the stakeholders. The PSC will meet at least once per year to review the progress, performance, and alignment of the action with the intended objectives and to approve the work plan and progress reports. The implementing selected partner will serve as the Secretariat to the PSC meetings. The PSC will be essential to keep the project centred on its objectives and results. The Implementing Agency will play the role to provide overall technical secretariat for both PSC and PMT.

The PMT will allow technical and managerial programme dialogue focusing on the management and implementation of the project's foreseen activities. It will be co-chaired by the Ministry of Education of Timor Leste government and the selected entrusted entity. The PMT will meet every two months to discuss progress, and challenges, quickly address eventual bottlenecks and ensure a smooth implementation of the project. It will be composed of stakeholders involved in the action, including ministries, the implementing partners (pillar-assessed entities and NGOs), programme beneficiaries and any other relevant actors. Each beneficiary institution will nominate a focal point to attend those meetings.

The administrative and technical work of the PMT, to follow and coordinate all the foreseen activities in the timing agreed upon and needed for Timor Leste, will be of utmost importance. The ministries must be involved in the continuous monitoring the project.

The PMT must support the Government on the coordination between all the implementing agencies of the project activities and promote the synergies with other projects and donors within the project activities, as also support the government in keeping the project in line with the national strategies and programs.

As part of its prerogative of budget implementation and to safeguard the financial interests of the Union, the Commission may participate in the above governance structures set up for governing the implementation of the action and may sign or enter into joint declarations or statements, for the purpose of enhancing the visibility of the EU and its contribution to this action and ensuring effective coordination.

5 PERFORMANCE MEASUREMENT

5.1 Monitoring and Reporting

The day-to-day technical and financial monitoring of the implementation of this Action will be a continuous process, and part of the implementing partner's responsibilities. To this aim, the implementing partner shall establish a permanent internal technical and financial monitoring system for the Action and elaborate regular progress reports (not less than annual) and final reports. Every report shall provide an accurate account of implementation of the Action, difficulties encountered, changes introduced, as well as the degree of achievement of its results (Outputs and direct Outcomes) as measured by corresponding indicators, using as reference the logframe matrix.

The Commission may undertake additional project monitoring visits both through its own staff and through independent consultants recruited directly by the Commission for independent monitoring reviews (or recruited by the responsible agent contracted by the Commission for implementing such reviews).

Roles and responsibilities for data collection, analysis, and monitoring:

- At the outset, each of the implementing entities will review the indicators and modify the baseline and target data during the inception phase of the part of the action each one would be implementing (first three months of project implementation). Then, a Performance Measurement Framework (PMF) will be set up during the inception phase. This PMF will include the annual workplans and semi-annual reporting processes that will capture the results achieved and lessons learnt.
- The implementing entities will be advised to set up an internal Project Implementation Monitoring System (PIMS) to monitor and report the progress and performance of the project during the entire span of the project implementation.
- The implementing entities should prepare progress reports and submit those to the PSC two weeks prior to the PSC meetings. Each progress report should provide an accurate account of activities implemented,

results (outputs and outcome) achieved, difficulties encountered, and mitigating measures adopted. The results (outputs and outcomes) should be measured by the corresponding indicators used in the logframe.

Key stakeholders should be actively encouraged to participate in the data collection and results reporting exercise. The implementing entity should monitor the project progress, performance, and results through its internal PIMS on a continuing basis.

The monitoring system should include both quantitative and qualitative indicators to facilitate participation and understanding by all stakeholders. Further, the indicators to be used should reflect the contextual drivers of inequality and provide information on changes in these drivers.

All monitoring and reporting shall assess how each components are considering the principle of gender equality, human rights-based approach and rights of persons with disabilities including inclusion and diversity. Indicators shall be disaggregated at least by sex and age, and disability if possible.

5.2 Evaluation

Having regard to the importance of the action a final evaluation may be carried out for this action or its components via independent consultants contracted by the Commission.

It will be carried out for accountability and learning purposes at various levels (including for policy revision) taking into account in particular the fact that the action is expected to assess the impact of the actions and provide lessons for future interventions.

The Commission shall inform the implementing partner at least two months in advance of the dates envisaged for the evaluation missions. The implementing partner shall collaborate efficiently and effectively with the evaluation experts, and inter alia provide them with all necessary information and documentation, as well as access to the project premises and activities.

The evaluation reports may be shared with the partners and other key stakeholders following the best practice of evaluation dissemination. The implementing partner and the Commission shall analyse the conclusions and recommendations of the evaluations and, where appropriate, apply the necessary adjustments.

Evaluation services may be contracted.

5.3 Audit and Verifications

Without prejudice to the obligations applicable to contracts concluded for the implementation of this action, the Commission may, based on a risk assessment, contract independent audit or verification assignments for one or several contracts or agreements.

6 STRATEGIC COMMUNICATION AND PUBLIC DIPLOMACY

The 2021-2027 programming cycle will adopt a new approach to pooling, programming and deploying strategic communication and public diplomacy resources.

In line with the 2022 “[Communicating and Raising EU Visibility: Guidance for External Actions](#)”, it will remain a contractual obligation for all entities implementing EU-funded external actions to inform the relevant audiences of the Union’s support for their work by displaying the EU emblem and a short funding statement as appropriate on all communication materials related to the actions concerned. This obligation will continue to apply equally, regardless of whether the actions concerned are implemented by the Commission, partner countries, service providers, grant beneficiaries or entrusted or delegated entities such as UN agencies, international financial institutions, and agencies of EU member states.

However, action documents for specific sector programmes are in principle no longer required to include a provision for communication and visibility actions promoting the Programmes concerned. These resources will instead be consolidated in Cooperation Facilities established by support measure Action documents, allowing Delegations to plan and execute multiannual strategic communication and public diplomacy actions with sufficient critical mass to be effective on a national scale.