MULTI-SECTORAL APPROACHES TO NUTRITION

WHAT CAN THE DIFFERENT SECTORS AND ACTORS DO?
IMPROVING NUTRITION IN TIMOR-LESTE

A well-nourished child has reduced risk of illness, will perform better in school and will have a better chance at making a decent income as an adult and contribute positively to the GDP of the country.

Investing in nutrition will ensure good health, cognitive development and productivity. Undernutrition in Timorese children includes being underweight for one’s age, too short for one’s age (stunted), dangerously thin (wasted) and deficient in vitamins and minerals, known as micronutrient malnutrition.

Timor-Leste has one of the highest stunting rates in the world. One in every two children under age 5 is stunted. This means that half of the population of children who are below five years old are stunted.

Stunting among Timorese children has been decreasing by about 2% per year from 2010 to 2013. However stunting prevalence over 40% is considered a very high severity of public health concern based on WHO guidance and this tells us that while nutrition interventions are working, efforts need to be intensified and coverage and reach of the interventions increased.

Investing in nutrition will increase the country’s GDP. In addition to the benefits that good nutrition can bring to an individual child, investing in nutrition can help break the intergenerational cycle of poverty. It can increase the country’s GDP by up to 11% annually and recover millions of dollars in lost productivity and avoidable healthcare spending.
Achieving Nutrition’s Full Impact on Health and Development Outcomes Requires a Multi-Sectoral Approach

Nutrition-specific interventions are key to accelerating progress. It is critical that along with the health and nutrition sector, other sectors—like agriculture, education, and social welfare—develop nutrition-sensitive interventions. A truly multi-sectoral approach will achieve optimal nutrition outcomes through greater coverage, while also helping other programmes achieve more powerful results and demonstrate their own potential for impact.

By incorporating specific nutrition goals and actions in addition to their own sector goals, different ministries of government become nutrition-sensitive. The National Council for Food Security, Sovereignty and Nutrition in Timor-Leste (KONSSANTIL) is our nation’s consensus for an interministerial approach. With their collaboration and coordination we can begin to tackle the underlying causes of malnutrition in a synergistic way.

Across all the important sectors any nutrition-sensitive interventions should address the following principles:

i) Empower women as it has positive nutrition outcomes.

ii) Interventions should largely focus on the 1,000 day window of opportunity, from conception to 2 years of age, pregnant and lactating women and adolescent girls.

iii) Efforts should be prioritised on populations most affected or at most risk from undernutrition, which are often the poorest and most disadvantaged.

iv) Must specify clearly the route from intervention to impact, and develop indicators to monitor progress along this pathway.
ECONOMIC CONSEQUENCES

Global evidence shows that undernutrition drives a vicious cycle of poor health and increased mortality, retarded cognitive development, slow physical growth, diminished learning capacity, inferior school performance, and ultimately lower productivity and earnings as adults.

The negative impacts ripple across national economies – eroding human capacities that lay the foundation of national economic growth: peoples’ strength and energy, creative and analytical capacity, initiative and entrepreneurial drive.

A study of Economic Consequences of malnutrition in Timor-Leste was commissioned by the Ministry of Health. The study assessed the consequences of 11 nutrition indicators, taking data from Timor-Leste Food and Nutrition Survey 2013, Demographic and Health Survey 2010 and other national data.

The study concluded that:

1. Malnutrition impacts half a million people across all socio-economic classes of Timor-Leste.

2. More than one-third of all child mortality in Timor-Leste, about 1,000 deaths annually, are linked to poor nutritional status of the mother or child.

3. Undernutrition depresses Timor-Leste’s economy by $41 million annually. This loss amounts to 1% of GDP, 2% of non-petroleum GDP and a quarter of the projected 8% annual growth in non-petroleum sectors.

4. The high burden of malnutrition and its consequences have implications for policy and action, making investment in addressing malnutrition an economic and human development priority for the country.
UNDERSTANDING UNDERNUTRITION

Malnutrition is a broad term that refers to all forms of poor nutrition. People are malnourished if their diet does not provide adequate nutrients (calories, protein, micronutrients) for growth and maintenance or they are unable to fully utilize the food they eat due to illness (undernutrition). They are also malnourished if they consume excess calories and nutrients (overnutrition).

Undernutrition is an important concern because it increases a child’s chance of dying and their susceptibility to childhood infections, such as pneumonia, diarrhoea, and malaria. Recent research (lancet 2013) estimates 45% deaths among children under age 5 are attributed to undernutrition.

Undernutrition important to note is not only caused by insufficient intake of food. Childhood diseases, such as diarrhoea or intestinal worm infestation, can affect the absorption of, or requirements, for nutrients.

The latest Timor-Leste Food and Nutrition Survey (2013) shows that further reductions in stunting and other forms of undernutrition can be possible when efforts are made to reach the poorest and most vulnerable. To have maximum impact and to address underlying and root cause of malnutrition it is necessary to have both nutrition-sensitive and nutrition-specific interventions to be implemented in the same geographic areas targeting the same population.

The active involvement of different sectors like agriculture and education is essential to make long and lasting impact on malnutrition. Intensifying communication efforts to influence proper nutrition practices during pre-pregnancy and pregnancy, infant and young child feeding and care, hygiene and sanitation and ensuring health workers’ inclusive health and nutrition service delivery will ensure that the marginalized are reached and are able to access available services.
The Government of Timor-Leste is a signatory to international declarations and has pledged to contribute to the progressive reduction of food security, hunger and malnutrition and their ill effects.

The commitment to end hunger and malnutrition in Timor-Leste is explicitly declared in October 2010 by concerned Ministries that signed the Comoro Declaration, namely, the Ministries of Agriculture and Fisheries, Health, Finance, Commerce, Industry and Environment, Education, Public Works, State Administration, Foreign Affairs and Cooperation and Social Solidarity. These line ministries are now working under the structure of the KONSSANTIL, (the National Council for Food Security, Sovereignty and Nutrition in Timor-Leste). The National Action Plan for a Hunger and Malnutrition Free Timor-Leste (PAN-HAM-TIL) has been built around 5 strategic pillars. Pillar 2, Zero stunted children less than 2 years of age is the Nutrition SPECIFIC strategic pillar. The other 4 pillars are NUTRITION SENSITIVE strategic pillars.

Besides other roles, the KONSSANTIL could take on the following key NUTRITION SPECIFIC functions:

- National level nutrition related policy and strategy implementation coordination between various sectors of the government;
- Providing direction for inter-sectorial coordination at all levels;
- Negotiating budget for Nutrition Specific and Nutrition Sensitive interventions;
- Reviewing and endorsing nutrition related policies, strategies and proposed legislations if any; and
- Nutrition strategy implementation monitoring.
NUTRITION SPECIFIC - ADDRESS IMMEDIATE CAUSES

PROMOTING GOOD HEALTH, HYGIENE, AND WATER AND SANITATION PRACTICES. Adequate health care i.e. full immunization and timely treatment of childhood illness and good hygiene and sanitation are vital. Poor sanitation leads to repeated bouts of diarrhoea and damages the gut, preventing absorption of food, which further contributes to stunting.

MATERNAL NUTRITION FOR PREGNANT AND LACTATING WOMEN through antenatal and postnatal counselling. Pregnant mothers need vital nutrients like iron and folic acid, deworming, and nutritional counselling on adequate diet and food supplements in food insecure areas; they also need good health care, well-spaced births and social support in the household and community.

INFANT AND YOUNG CHILD FEEDING. Newborn babies need breastfeeding in that first fragile hour after birth and then exclusive breastfeed for the next six months (180 days). No other food or liquid is needed for the first 6 months except prescribed medicines. From the age of six months (181 days), babies need to be introduced to appropriate quality and diverse variety of local foods, with continued breastfeeding to 2 years of age.

PREVENTING AND TREATING MICRONUTRIENT DEFICIENCIES, through providing vitamin A, iron, folic acid, zinc, and other micronutrients to women – pregnant and children, and using iodized salt.

PREVENTING AND TREATING SEVERE ACUTE MALNUTRITION at the community and facility level.
NUTRITION SENSITIVE PROGRAMMING PROMOTES NUTRITION AND ADDRESSES UNDERLYING CAUSES OF UNDERNUTRITION

Such as:

In **AGRICULTURE**: Make diversified, nutritious food available and accessible to everyone; support small farms and community gardens to diversity the diet of children and a source of income for women and families.

In **SOCIAL PROTECTION**: Ensure that social safety nets, including cash transfers, are nutrition-sensitive and benefit the most vulnerable and disadvantaged populations.

In **EDUCATION AND EMPLOYMENT**: ensure girls are educated, as educated mothers have better nourished and healthier children and make sure children have the energy they need to learn and earn sufficient income as adults.

In **HEALTH AND NUTRITION CARE**: Improve access to and demand for services to ensure that women and children stay healthy.

In **GENDER EQUITY AND WOMEN’S EMPOWERMENT**: At the core of all efforts, promote gender equity and empower women within their families and communities toward a healthier and stronger Timor-Leste, specifically intervene to improve women’s ability to control resources for care of herself and her children through skills development, income earning and educations interventions.
WHAT CAN THE DIFFERENT MINISTRIES DO
MINISTRY OF FINANCE

- Coordinate all relevant government ministries to ensure nutrition-sensitive planning, programming and budgeting;
- Allocate and track resources for nutrition-specific and nutrition-sensitive interventions across sectors.
MINISTRY OF STATE ADMINISTRATION

- Nutrition is included in local development plans and that nutrition situation and actions reporting are a standing agenda item in District and Suco committee meetings;
- Recognize deserving sucos and community groups as “Nutrition Champions” for being good role models in nutrition promotion;
- Foster inter-sectoral collaboration with other relevant ministries at district, sub-district and suco level.
MINISTRY OF HEALTH

• Strengthen access to and demand for health and nutrition services;
• Increase delivery of nutrition-specific interventions, like counseling to promote appropriate maternal, infant and young child feeding, care, and hygiene and sanitation practices; and treatment and management of childhood illnesses and malnutrition;
• Develop appropriate nutrition related policies, standards, laws and regulation and acts.
Address underlying factors particularly food security;

Nutrition-sensitive programmes can enhance access to diverse diets in poor populations, foster women’s empowerment, and support livelihoods;

Agriculture sector could improve production and availability of animal source foods and diversity of crops at household level, and promote their consumption by young children, adolescent girls and mothers.
• Develop policies and guidelines on food fortification of food stuff such as salt (with iodine), oil (with vitamin A);
• Enforce the law on food fortification, law on marketing breastmilk substitutes to protect, promote and support breastfeeding;
• Regulate and monitor trade practices related to food;
• Implement laws and regulations that ensure food are safe and healthy.
Ministry of Education

• Improves academic achievement - with the potential for substantial gains in the cost, efficiency, and effectiveness of programmes;
• Keeping girls in school for longer is proven to delay the age of first marriage, and prepares young women to be more informed and empowered mothers;
• Deworming, micronutrient (including iron) supplementation, food fortification, and expanded pre-school education programmes all show potential for impact;
• Educating children and adolescent girls to be the agents of change for appropriate feeding and care of infant and young children, and educating parents about child nutrition could improve the coverage of nutrition specific interventions over the long term.
• Address factors that influence undernutrition, like ensuring safe and hygienic environments;
• Support programmes that promote sanitation, open defecation free communities and safe drinking water;
• Timor-Leste Food and Nutrition Survey 2013 revealed that around one in two households do not have access to improved latrine and 35% of households do not have access to improved source of drinking water.
Poor families will not be lifted out of poverty unless good nutrition is part of the investment;

Ministry of Social Solidarity could institute or expand Bolsa da mãe conditional cash transfer programmes for poor and marginalized families to motivate parents to use health and nutrition services, enroll and keep their children in school, and participate in non-formal education activities;

Nutrition-sensitive social protection programmes can improve diet quantity, quality, and diversity; decrease vulnerability to food insecurity; decrease child mortality; and help children reach their full potential.
Harness the mass media – National and community radio, TV, print and digital media have the potential to reach and invite participation from key audiences for nutrition information toward improving family and community practices, particularly the information-poor and marginalized, who have the highest malnutrition rates;

- Timor-Leste Media Survey 2011 found that 70% households have access to radio, 61% to mobile telephones, and 30% to TV.
SECRETARIAT OF STATE FOR YOUTH AND SPORTS

- Involve children, adolescents and youth in school-based and community-based mobilization for nutrition;
- Through Youth Parliament members, young people can organize community and school-based health and nutrition activities that educate boys and girls, particularly adolescent girls and women of reproductive age about recommended practices during the 1,000 days window of opportunity, the impact of undernutrition on physical and mental development and on economic growth.
SUB-NATIONAL AUTHORITIES (DISTRICT, SUB-DISTRICT ADMINISTRATOR AND HEALTH SERVICES)

• Invest on programme planning, implementation, and monitoring at sub-national level;

• District and sub-district health services and administrator could strengthen nutrition programming through district planning involving respective sectors and partners in the district to avoid duplication and identifying nutrition gaps and mobilizing partners and resources to fill gaps;

• Engage all Suco and Aldeia Xefe’s to put up Community Information Boards (CIB) in every Aldeia and Suco with indicators that track quarterly progress on maternal and child health and nutrition status in sucos.
RELIGIOUS-BASED ORGANIZATIONS

- Engage with lay leaders and religious organizations in preparing and communicating appropriate, religious-based messages and communication materials;
- Establish partnership with the religious leaders such as bishops, priests, nuns, mullahs and other religious workers toward their involvement in district orientations about the nutrition situation and their role in implementation of National Nutrition Strategy;
- Engage the religious leaders to integrate key messages on nutrition in their sermons and in pre-marriage counseling.

NON-GOVERNMENTAL ORGANIZATIONS AND CIVIL SOCIETY ORGANIZATION

- Participate in coordination mechanisms in the implementation of the National Nutrition Strategy by setting up home grown models for influencing adaptation of improved nutrition behavior and practices.
• Support Districts in identifying and showcasing nutrition champions, good practices/role models among households, Aldeias and Sucos;
• Use appropriate participatory monitoring tools that bring out before-and-after family stories of formerly malnourished children, and on improved scores on recommended health, nutrition and WASH practices and nutrition indicators.
PROGRAMMES CAN BECOME MORE NUTRITION-SENSITIVE BY:

STRENGTHENING THEIR NUTRITION GOALS, DESIGN, AND IMPLEMENTATION. Health programmes can often deliver nutrition services through antenatal care services, routine immunisation, and family planning.

USING CONDITIONS TO STIMULATE DEMAND FOR PROGRAMME SERVICES. Conditional cash transfer programmes can set conditions on payments that require families to utilize key nutrition services, enforce school enrolment and attendance, or require parent participation in health and life skills education.
WE MUST ACT NOW

Policy-makers and programme implementers from across sectors can help ensure a brighter future by developing inclusive nutrition-sensitive interventions that help individuals, families and communities particularly from the poorest and vulnerable groups benefit from the full impact of optimal nutrition.

Together, we can break the cycle of undernutrition among Timorese children for generations to come.