Partnership for Human Development
AUSTRALIA TIMOR-LESTE

ANNUAL PLAN 2017
FOREWORD

Australia is committed to working with Timor-Leste for the country’s development.

As a neighbour and a friend, Timor-Leste is important to us and, like the Government and people of Timor-Leste, we want to do all that we can to secure a peaceful and prosperous future for Timor-Leste.

Our Timorese friends have achieved so much in a short time. Timor-Leste is now almost 15 years young. It is justly proud of what it has achieved and it also knows that there is much more that needs to be done.

A key guiding principle of Australia’s development cooperation with Timor-Leste is that of partnership. We support Timor-Leste’s objectives and we work together in pursuit of them. This is evident in the title of this new initiative in the social sector: it is the Australia Timor-Leste Partnership for Human Development (PHD).

We share the commitment of the Government of Timor-Leste to invest in its people. As Timor-Leste’s strategic plans state clearly, a developed country needs its people to be educated and healthy. Without this, citizens will not only have more difficult lives, but they will be less well-equipped to contribute to the development of their country.

This investment in people needs to be long-term. It can be difficult, but with an integrated strategy, clarity of purpose and sensible prioritising, the results will more than repay the effort.

Just as in Australia, implementation of social sector policies can be challenging. Patience and persistence are needed, as it takes time to achieve results.

As Timor-Leste progresses on its development journey, committed to improving the lives of its people, Australia will continue our support, as Timor-Leste’s leading partner, especially in the fundamentally important area of human development.

Peter Doyle
Australian Ambassador
Australian Embassy Timor-Leste
ACRONYMS AND ABBREVIATIONS

ADTL  Asosiasaun Defisiensia Timor-Leste
ATLASS II  Australia-Timor-Leste Program of Assistance for Secondary Services Phase II
AUD  Australian Dollar
AVI  Australian Volunteers International
BESIK  Bee, Saneamentu no Ijiene iha Komunidade program
CBM  Christian Blind Mission Australia
CVTL  Cruz Vermelha de Timor-Leste
DFAT  Department of Foreign Affairs and Trade
EMBLI  Eukasaun Multilinge Bazeia ba Lian Inan | Mother-tongue Based Multilingual Education
GMF  Grupu Maneja Fasilidade | Water management committee or water user group
GPS  Global Positioning System
HAI  Health Alliance International
HMIS  Health Management Information System
ICFP  Instituto Catolico para a Formacao de Professores | Catholic Institute for Teacher Training
INFORDEPE  Instituto Nacional de Formacao de Docentes e Profissionais da Educacao | National Institute for Training of Teachers and Education Professionals
INS  Instituto Nacional da Saude | National Health Institute
M&E  Monitoring and Evaluation
MELF  Monitoring, Evaluation and Learning Framework
MoE  Ministry of Education
MoH  Ministry of Health
MSTL  Marie Stopes Timor-Leste
NGO  Non-Governmental Organisation
ODE  Office of Development Effectiveness
ODF  Open Defecation Free
PFM  Public Financial Management
PHD  Australia Timor-Leste Partnership for Human Development
PLMP  Professional Learning and Mentoring Program
PNDS  Programa Nasionál Dezenvolvimentu Suku | National Program for Village Development
PNP  President’s Nutrition Program
PRADET  Psychosocial Recovery and Development in East Timor
RACS  Royal Australasian College of Surgeons
RHTO  Ra’es Hadomi Timor Oan
SDG  Sustainable Development Goals
SIB  Sistema Informasaun Bee I Water Information System
SRH  Sexual and Reproductive Health
UNESCO  United Nations Education, Scientific and Cultural Organization
UNICEF  United Nations International Children’s Emergency Fund
USD  United States Dollar
WHO  World Health Organisation
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**HEALTH**
Quality healthcare for mothers and infants

**NUTRITION**
Good nutrition for all

**EDUCATION**
Literacy and numeracy for all children

**SOCIAL PROTECTION**
Safeguards for the poor and vulnerable

**WATER**
Sustainable access to safe rural water

**SANITATION**
Improved toilets and hygiene

**DISABILITY**
Inclusion of people with disabilities

**GENDER**
Empowered women & girls
INTRODUCTION

The vision of the Timor-Leste Strategic Development Plan 2011-2030 focuses on government priorities in 3 core areas: improving social capital; infrastructure development; and economic growth. This vision reflects the views of thousands of Timorese people who contributed to the national consultation on the Summary Strategic Development Plan, From Conflict to Prosperity.

The Australia Timor-Leste Partnership for Human Development

The Australia Timor-Leste Partnership for Human Development (PHD) is a partnership between the Government of Australia and the Government of Timor-Leste to provide key investments to support the Strategic Development Plan 2011-2030. It reflects the vision of the Government of Australia to enhance human development and to:

‘Support the people and Government of Timor-Leste to build and sustain healthy, educated and prosperous individuals and communities, who live with dignity and determine their own future.’

PHD provides a unique platform to support the Government of Timor-Leste to attain its Sustainable Development Goals (SDGs). The SDGs highlight the need for approaches that work across sectors. Rather than focusing on technical solutions and sector-based issues, PHD offers the potential for collaboration across sectors.

PHD will contribute to the following SDGs.

- **No Poverty**: end poverty in all its forms everywhere.
- **Zero Hunger**: end hunger, achieve food security and improved nutrition, and promote sustainable agriculture.
- **Good Health and Well-being**: ensure healthy lives and promote well-being for all at all ages.
- **Quality Education**: ensure inclusive and quality education for all and promote lifelong learning.
- **Gender Equality**: achieve gender equality and empower all women and girls.
- **Clean Water and Sanitation**: ensure access to water and sanitation for all.
- **Reduce Inequalities**: reduce inequality within and among countries.
- **Partnerships for the Goals**: revitalise the Global Partnership for Sustainable Development.

PHD brings together, under a single program, what were previously separate Australian Government investments in 8 sectors: health, education, sanitation, water, nutrition, gender equality, disability and social protection.

The rationale for this consolidation is to maximise the effectiveness, relevance and performance of Australia’s human development investments in Timor-Leste, and to efficiently continue work that was being delivered in previous programs.

Working together under one program will enable Australia’s investments to:

- be responsive to the Government of Timor-Leste’s human development priorities
- address development challenges that require collaborative interventions across sectors
- contribute to sustainable and holistic development outcomes
- share lessons, plan and implement cross-sectorally.

In 2017, PHD will direct its investments to:

- support improved quality healthcare for mothers and infants
- support improved literacy and numeracy for all children
- ensure sustainable access to safe rural water
- improve household toilets
- improve nutrition for all
- advise on safeguards for the poor and vulnerable
- support the empowerment of women and girls
- support the inclusion of people with a disability.
HEALTH

AUD 7,575,000

The Australian Embassy has established a strong partnership with the Government of Timor-Leste in the health sector and has been providing support through a high performing health program, endorsed by the Ministry of Health.

The Global Investment Framework for Investing in Women’s and Children’s Health provides powerful arguments for investing in affordable, evidence-based interventions that contribute to health, social and economic benefits, and address more than 95 percent of maternal and child deaths. The analysis identifies high impact areas, including:

- improving maternal and newborn health
- reducing child mortality
- making family planning and education services, and commodities available.

In 2017, PHD will support the Government of Timor-Leste to achieve its SDGs, with a particular focus on maternal, neonatal and child health, and focus investments in communication, outreach and health system strengthening.

Improving Maternal and Newborn Health through Communication

Through the Liga Inan program communication is facilitated between expectant mothers and healthcare workers using simple mobile phone technology. Implemented in partnership with Catalpa International and Health Alliance International (HAI), the program ensures that pregnant women can easily access information about their pregnancy, and how to maintain good health for herself and her baby.

Through mobile phone technology, text messages are sent to pregnant women and mothers who are registered in the program about care and nutrition for the first 6 months of their baby’s life. By June 2017, Liga Inan will be operating in 8 municipalities: Aileu, Ainaro, Baucau, Covalima, Ermera, Liquica, Manatuto and Manufahi.

When Liga Inan is rolled out nationally, around 25,000 to 30,000 expectant mothers will be registered each year. A public-private partnership will be developed with local mobile network providers to enhance the system’s sustainability.

Outreach – Family Planning

PHD will support family planning and sexual and reproductive health (SRH) service providers, such as Marie Stopes Timor-Leste (MSTL), to provide information and deliver improved family planning services to the Timorese people. Education and counselling will be provided to women, men and youth through a range of channels, including small group education sessions, couples counselling, and a national youth hotline, Lina Foin-Sae. It will also increase referrals and access to SRH and family planning services across all municipalities.

Health System Strengthening

There is a significant body of evidence that links health system strengthening to measurable impacts on health for vulnerable people.

1. Sector budgets are for financial year 2016-17
The following health system strengthening interventions have been found to have quantifiable effects on health:

- **Human Resources for Health:**
  - task sharing/task shifting;
  - healthcare worker training to improve service quality

- **Finance:**
  - supply-side performance-based incentive programs; user fee exemptions; conditional cash transfers; voucher programs; health insurance

- **Governance:**
  - contracting out service provision; community engagement/decentralisation

- **Information:**
  - information technology support (mHealth and eHealth)

- **Medicines, Vaccines and Technology:**
  - pharmaceutical systems strengthening initiatives

- **Service Delivery:**
  - bringing health services closer to community level; service integration.

PHD will continue to respond to Ministry of Health priorities for improvements in health systems, especially in relation to maternal and young children’s health, and water and sanitation.

### Human Resources for Health

**Training and supervision of healthcare workers**

PHD will focus on upskilling healthcare professionals\(^1\) and increasing their competencies in obstetrics, family planning, and neonatal and infant health services to 6 months of age.\(^2\) This will include the following activities.

- **Doctor training** – Delivering post-graduate training to build the clinical competency of junior doctors to deliver primary and tertiary healthcare services\(^3\), including in pediatrics and obstetrics, in conjunction with the National Hospital, Ministry of Health, and the National University of Timor-Leste. A three-tier supervision hierarchy has been developed and will be implemented at the National Hospital to support the delivery of the training programs. Timorese doctors will also receive ongoing training and mentoring to become teachers and mentors to others.

- **Midwife training** – PHD will support in-service training and on-the-job coaching (with the National Institute of Health) to junior and senior midwives, so they can provide services in family planning, obstetrics and newborn care. This will build both the clinical competencies and interpersonal skills of midwives. Learning labs on safe and clean delivery, and newborn care, will be conducted in Baucau, Ermera and Viqueque between January and June 2017.

- **Nurse, paramedic and ambulance officer capacity building** – PHD will deliver in-service training and on-the-job coaching to nurses, paramedics and ambulance officers to improve their basic competencies in first aid, paramedic procedure, protocols and the use of equipment in ambulances.

### Finance and Governance

**Public financial management support**

PHD will continue to engage a Senior Public Financial Management (PFM) Adviser to work with the Ministry of Health. The focus of this work will be on resolving bottlenecks that impact on service delivery, including funding allocation, fund flows and quality of expenditure, and strengthening PFM processes in the context of decentralisation.

### Information

**Informed decision-making and more effective and efficient resource allocation**

A Principal Monitoring and Evaluation (M&E) Adviser will continue to support decision makers within the Ministry of Health to use health data and information for planning and decision-making. This support includes development of the Health Management Information System (HMIS) Strategic Plan, as well as customising, piloting, capacity building, and implementing the National Monitoring and Evaluation Strategy. The Adviser will also assist the Government of Timor-Leste to pilot community-based health service monitoring in selected locations.

### Medicines, Vaccines and Technology

**Warehousing and distribution**

PHD will provide support to the Ministry of Health in improving warehousing practices and processes through the Distribution team and the Principal Transport and Logistics Adviser.

### Service Delivery

**Ambulance and transport system**

The Timor-Leste National Ambulance Service has received long-standing support from the Government of Australia. A recent qualitative survey identified access to transport as one of the key constraints for pregnant women to access health services. PHD will support the national ambulance service to ensure families, particularly pregnant women and newborn babies, receive safe, respectful and timely care during an emergency.

With a view to ensure sustainability of the system, building the capacity of mechanics in the Ministry of Health is key to maintaining and managing the fleet of vehicles, including improving planning and financial management, procurement practices, fuel systems, and the use of computer aided dispatch and GPS tracking systems.

In 2017, the program will continue to support the maintenance of ambulances and multi-function vehicles, strengthen the 24 hour Operations Centre and ambulance dispatch system, and trial a microlet ambulance in Liquica.

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1. As set out in the Ministry of Health’s Comprehensive Guidelines for Primary Healthcare.
2. The program will investigate cost-effective options to increase the focus to 2 years of age noting that UNICEF and WHO are focused on children aged 6 months to 2 years.
3. This service is provided through the Family Medicine Program, which is a 2 year internship delivered by RACS. Between 20 and 40 doctors participate each year.
WATER AND SANITATION

AUD 1,890,000

Safe and accessible water facilities, improved sanitation practices and functioning water management are fundamental to good health. Almost one tenth of the global disease burden could be prevented by: increasing access to safe drinking water; improving sanitation and hygiene; and improving water management to reduce the risk of water-borne infectious diseases.

Rural Water

AUD 1,000,000

Poor access to safe water is linked to poor health and preventable diseases. Around 93 percent of urban households and 66 percent of rural households have access to improved water.1 For rural households without access to water, women spend on average up to 3 hours per day collecting water. Around 34 percent of rural households in Timor-Leste without access to improved water are at least 30 minutes from the nearest water supply.2 As water collection is largely seen as the work of women and girls, this places a significant burden on them and can be a barrier to paid work, childcare and accessing education.

In recent years, many communities have prioritised new or improved water systems through the Government of Timor-Leste’s National Program for Village Development (PNDS). Close to 400 investments in water infrastructure have been made through PNDS funding in the past 3 years.

Even though communities value water as an asset, rural water systems continue to break down at a high rate. The Ministry of Public Works, Transport and Communications has asked the Government of Australia to continue to assist in developing a sustainable and affordable system for operations and maintenance to protect investments in water assets. The Water and Sanitation teams will work together to improve the operation and maintenance of water systems through community-run Grupu Maneja Fasilidades (GMFs) or other responsible community committees, working closely with municipal and national government counterparts.

Sanitation

AUD 890,000

Poor sanitation is a large contributor to mortality for children under 5 years of age, with diarrhoea the second biggest cause of death in children after neonatal causes.3 The 2010 Demographic and Health Survey indicated that 19 percent of Timorese children had diarrhoea on the day of the survey.

Diarrhoea is linked to poor nutrition, lack of access to

1 Improved water source is defined as water piped into premises, measured by the WHO/UNICEF Joint Monitoring Program update 2013. The figure of 66 percent has been used for rural, which draws on the Ministry of Public Works, Transport and Communication database (SIBs).
clean water and a range of poor hygiene behaviours. Diarrhoea has an impact on children’s eating patterns and nutritional behaviour, and over the long term can contribute to malnutrition and stunting. Without changes in sanitation practices, health and well-being are undermined.

The lack of access to a toilet, and the use of inadequate toilets that do not provide an effective barrier between faeces and the environment, means that 51 percent of the Timorese population are practicing poor sanitation behaviours, including open defecation that compromise the health and well-being of the individual and the community.

In 2015, with support from BESIK1, the Bobonaro municipality used a model of community-led action to end open defecation. The municipality improved open defecation free (ODF) status from 47 percent to 91 percent in 11 months, with 67 percent of toilets classified as improved. The impacts of this community-led action motivated households to invest in improved toilets and hygienic behaviours (including handwashing with soap) to enable local authorities to declare most sucos ODF.

In 2017, PHD will support more municipalities to take a local authority-led approach to improving community sanitation. The PHD Sanitation team intends to work with the municipalities of Aileu, Ainaro, Liquica and Manufahi (pending funding) to support these municipalities to move to ODF status (all people in these municipalities to use improved toilets).

Once municipalities move to ODF status, the Water team will join to progress communities from ODF to ‘hygienic’ status. This means that households are not only using improved toilets, but that they also have access to water, and are handwashing with water and soap.

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1 BESIK (Bee, Saneamentu no Ijiene iha Komunidade programme), was funded by the Government of Australia from 2002 to 2016, and supported the Government of Timor-Leste to develop sustainable rural water supply and sanitation services. Support was provided to the National Directorate for Water Resource Management for water, sanitation and hygiene in rural communities to construct or rehabilitate new water systems.
NUTRITION

AUD 1,200,000

Good nutrition is a catalyst for enhanced human development and improved economic growth. Preventing and controlling all types of malnutrition, including micronutrient deficiencies, has human, social and economic benefits across generations for individuals, households and communities.

To this end, the Government of Australia has invested in the President's Nutrition Program (PNP) and the Hamutuk program. A Senior Nutrition Specialist supports these programs and provides specialist advice to the Australian Embassy and other stakeholders.

Australian funded nutrition programs are led by the Australian Embassy and operationally supported by PHD.

Advocating for Good Nutrition

The President’s Nutrition Program

Australia supports Timorese leaders to advocate for and implement programs to address malnutrition.

PNP raises the awareness of the nutrition situation in Timor-Leste by rewarding achievements at the community level, and motivating and inspiring others to implement healthy eating practices.

Addressing Poor Nutrition through a Multi-sector Approach

Hamutuk

The Hamutuk program aims to reduce the prevalence of stunting in children under 2 years of age through collective multi-sectoral actions.

Hamutuk is:
- strengthening nutrition capacity across partners
- utilising existing delivery platforms to improve a range of nutrition-promoting behaviours
- developing innovative technology to foster collaboration across sectors.

Hamutuk commenced in the Holarua suco, Manufahi, and works with over 20 existing partners already delivering nutrition-related programs. The model and tools will be trialed in Holarua, with an intention to scale-up to other sucos and use in other nutrition-relevant sector programs in the future.

The design of this program will be informed by a series of research activities, applying an approach of intervention development research. The lessons learned from Hamutuk will be documented and shared across the global nutrition community.

Priorities for investments in nutrition will be decided on an annual basis by the Australian Embassy, in consultation with members of KONSSANTIL. The Government of Australia will continue to support the Government of Timor-Leste’s leadership in the area of nutrition by working with the President’s Office, the Ministry of Health and KONSSANTIL.


2 Nutrition partners include both government partners and non-government organisations.
EDUCATION

AUD 3,443,611

The Government of Australia is supporting the Ministry of Education’s key reforms in basic education to improve early literacy and numeracy. This allows children to gain the foundational skills necessary to prepare them for later learning and for life.

Universal basic education reduces poverty and contributes to economic growth by increasing productivity. Evidence indicates that when girls receive even basic education, they are more likely to have smaller families and provide better care for their children. They are also more likely to send their children to school.

Improving Teaching and Learning

Professional Learning and Mentoring

PHD will support the Professional Learning and Mentoring Program (PLMP), which works with school leaders and teachers to improve the literacy and numeracy of primary school aged children. It complements the roll out of the Ministry of Education’s high quality basic education curriculum. PLMP is led by the Ministry of Education and INFORDEPE.

School leaders are provided with leadership training and are mentored to observe and correct teacher practices in the classroom. Teachers receive feedback on their teaching skills and ways to improve their teaching practices and approaches.

School leaders are issued with electronic tablets that have been uploaded with national curriculum materials, instructional videos and Ministry of Education scripted lesson plans. The tablets are used to record changes to teaching practice and collate student test scores.

Teachers form peer learning groups with other teachers from nearby schools to share best practice and continuously improve teaching approaches. Teachers work together to implement lesson plans prescribed by the national curriculum.

In 2017, PLMP will continue to provide leadership training, mentoring, support to peer learning groups, and conduct literacy and numeracy assessments in 7 municipalities (Aileu, Baucau, Bobonaro, remote Dili including Atauro island, Liquica, Manatutu and Viqueque). It is expected that PLMP will extend across 250 to 280 schools by the end of 2017. Data on PLMP will be collected through the electronic tablet system.

In 2017, PHD will work with the Inspectorate General to mainstream the monitoring practices into its work.

In inclusive education, PHD will focus on achieving positive impacts for students with disabilities by supporting school leaders and teachers to use inclusive practices. PHD will also provide technical support to the Ministry of Education’s Inclusive Education department.

PLMP will be evaluated by the Office of Development Effectiveness (ODE) in the Department of Foreign Affairs and Trade (DFAT) in 2017. A World Bank Early Grade Reading Assessment will take place which will report on literacy results for children in Grades 1 and 2.

Mother-tongue Multilingual Education

Research shows that the language spoken in a child’s home is the best starting point for building basic literacy and preparing children to learn other languages. PHD will support the Timor-Leste National Commission for UNESCO, which sits under the Ministry of Education, to train teachers in 3 pilot municipalities (Lautem, Manatuto and Oecusse) to instruct children in their mother-tongue.

Pre-service Teacher Training

PHD will support high quality pre-service teacher training through the Instituto Catolico para a Formacao de Professores (ICFP). Each year around 50 students graduate with a Bachelor of Basic Education.

Education System Strengthening

PHD will continue to provide support to the Ministry of Education for the timely distribution of teachers’ manuals and learning materials to all primary schools in Timor-Leste.

PHD will also provide responsive technical assistance to the Ministry of Education to build an evidence-base for planning and advocacy to improve educational outcomes.

1 ODE builds evidence for more effective aid.
There is strong evidence that social protection contributes to poverty reduction and sustainable economic growth. It has the potential to empower the most vulnerable, including single-headed households and people living with a disability, to enable them to make better decisions over the course of their life.

Demonstrating the Government’s forethought and commitment to protecting its poorest citizens, Timor-Leste has an established social protection system including a world class aged pension. However, work remains to ensure equitable coverage, particularly for vulnerable children and people living with a disability.

*Bolsa da Mãe* is Timor-Leste’s conditional cash transfer program targeting poor families with children. It was initially established for poor single and widowed women with children, and in 2008 covered 7,050 households. Since then, the program has grown rapidly and now covers 50,742 poor households (approximately 250,000 people). Beneficiaries receive USD 5 per month per child (to a maximum of 3 children), paid annually, on the condition that they demonstrate a number of health and education seeking behaviours (such as check-ups, vaccinations, enrolling children in school and ensuring 80 percent attendance). Single female-headed households are still 90 percent of *Bolsa da Mãe*’s recipients. The annual investment for *Bolsa da Mãe* is USD 8.5 million, around 5 percent of Timor-Leste’s social cash transfer expenditure.

Evidence demonstrates that there is significant scope to reduce the poverty rate and improve well-being, particularly for single female-headed households, with relatively modest increases in funding. Small changes to the transfer distribution system could also better support development outcomes, for example making biannual transfers before the beginning of each school semester.

In 2017, the Government of Australia will offer advisory support to the Government of Timor-Leste to improve information on the performance and implementation of its social protection programs.

**PHD assistance will include:**
- the provision of technical advice to ensure evidence-based decision-making and programming
- improving identity documentation to ensure accurate targeting and enrolment, for example birth registration which is a precondition to enrolment for social protection
- research and analysis to gather evidence on the impacts of current social protection programs.

The key barrier to disability inclusive development globally is social stigma. Despite positive steps by the Government of Timor-Leste and disability advocacy bodies, this stigma remains due to a lack of understanding of disability issues and a lack of support services for people living with a disability.

Disability affects a significant minority in Timor-Leste. The limited reach of NGOs and service providers into rural areas constrains the participation of people living with a disability in community and economic activities.

PHD will work with the following organisations: Asosiasaun Defisiensia Timor-Leste (ADTL), the peak body for disability organisations; Ra’es Hadomi Timor Oan (RHTO), a national disabled people’s organisation; and Psychosocial Recovery and Development in East Timor (PRADET). These organisations have been effective in advocating for policy changes, raising awareness, identifying people living with a disability and arranging referral for specific rehabilitation services. In 2017, Australia will continue its long-standing support to these organisations.

Other significant obstacles to disability inclusive development include:

- the absence of robust data on the prevalence of impairment types and access to basic services
- the almost exclusive focus of non-government and government organisations, and development partners on physical impairments at the expense of sensory (blindness and deafness), intellectual and psychosocial disabilities.

In 2017, PHD will incorporate disability inclusive development approaches.

- **Education:** provide specialist mentors with experience in the area of disability, who will help teachers to improve education practices and support learning for students with disabilities.
- **Health:** work with the National Training Institute to develop in-service training for the health workforce on disability inclusion.
- **Water and Sanitation:** ensure disability partners are involved in a disability model to maximise engagement in community action processes.
- **Multi-sector:** engage the Christian Blind Mission Australia (CBM) to provide overarching disability support and advice to PHD sector teams to ensure that disability inclusive strategies are embedded in sector activities.

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1 The disability budget includes AUD 750,000 from the Disability Inclusive Development fund – a targeted DFAT initiative.
2 The 2010 Census identified 48,243 people with disability (4.53 percent of the population). This is likely to be a significant underestimate with the real figure more likely to be close to 175,000 if global averages are applied.
1 Program of the VI Constitutional Government 2015-17.
2 PHD will use the findings of two reports from the Nabilan program 2016 Health and Life Experiences Study on the prevalence and perpetration of gender-based violence and the 2015 study Beyond Fragility & Inequity: Women’s Experiences of the Economic Dimensions of Domestic Violence in Timor-Leste.
Focus on Gender and Disability Mainstreaming

In 2017, PHD will work to ensure that each of the sectoral priorities in health, education, water and sanitation, social protection, and nutrition are working to embed and enhance gender impacts and inclusion through their programs and partnerships.

Monitoring and evaluation will ensure that gender or disability constraints that impede access by women, men, girls and boys to quality health, education and other services are captured systematically and are addressed through PHD investments.

PHD will consider both gender and disability together in the following activities.

- **Education:**
  - Ensuring school facilities cater for both the needs of women and men, girls and boys, including those with disabilities.

- **Health:**
  - Seeking to train healthcare workers to recognise and support survivors of violence and people with mental health issues.
  - Improving reach and access to maternal and child health services, including for women with disabilities, for example, through Liga Inan (which will target more women with disabilities).

- **Sanitation:**
  - Ensuring women and girls, and people living with a disability, are actively engaged in community-triggering events, and are taking leadership roles in the community regarding open defecation.

- **Social Protection:**
  - Increasing advocacy efforts, particularly in Boșa da Mãe registration, ensuring wider coverage of social protection to women and children, and people living with a disability.
  - Raising awareness of the value of an inclusive social protection system, and working with civil society organisations and communities to increase their knowledge of rights for women, children, and people living with a disability.

- **Water and Sanitation:**
  - Ensuring women’s participation in community management groups, including those with a disability, especially in GMFs for community water management.
  - Ensuring designs for toilets are appropriate for women and children, including people living with a disability.

- **Multi-sector:**
  - Building capacity to respond to issues relating to violence against women (including collaborating with the Nabilan program).
  - Ensuring data collection is both sex-disaggregated and includes collection of disability information.

PHD’s sector activities will:

- better target services to women and girls (including those with disabilities)
- increase numbers and capacity of female RHTO members in all 13 municipalities in an effort to support better targeting and access to services for women with disabilities.
WORKING ACROSS SECTORS

In 2017, PHD will continue implementing actions in existing work streams, but will increasingly review activities to move from a sector-focused approach, towards a more integrated and cross-sectoral program.

In the first 6 months of 2017, PHD will begin to work cross-sectorally, starting in Bobonaro. Engagement will focus on sectors that have already implemented activities in Bobonaro or which logically can interact with pre-existing programs and activities in that municipality.

By exploring this new approach, PHD will investigate ways to efficiently target its resources across sectors to deliver better development outcomes for the people of Timor-Leste.

In line with the Government of Timor-Leste’s policy for decentralisation, PHD will begin to work in coordinated ways at the municipality level.

People need to be engaged in their own development, so that it both meets their needs and is sustainable. PHD will take a balanced approach that will include engaging people and communities, as well as local service providers and leaders.

MONITORING, EVALUATION AND LEARNING FRAMEWORK

To ensure that PHD is regularly reviewing and evaluating its program activities, a Monitoring, Evaluation and Learning Framework (MELF) will be in place by the end of March 2017. The MELF will:

- provide accountability to the Government of Australia and the Government of Timor-Leste for the outcomes achieved with the resources provided, as outlined in the PHD sector implementation strategies
- give particular attention to opportunities for learning and knowledge generation, and contribute to a dialogue among stakeholders about how to best support and facilitate effective human development in line with the Government of Timor-Leste’s plans and aspirations
- contribute to effective communication about PHD activities and outcomes and support evidence-based decision-making.

CONCLUSION

The consolidation of pre-existing Australian Government investments into one collaborative, integrated program has the potential to increase the efficiency and impact of Australia’s investments. This will support the Government of Timor-Leste to achieve its Strategic Development Plan priorities and SDG targets, and benefit the Timorese people.

The PHD team are looking forward to this journey over the next 10 years together.
ANNEX 1 - PHD SUPPORT ACROSS THE LIFE CYCLE OF A TIMORESE WOMAN
ANNEX 2 - IMPLEMENTING PARTNERS

Health
Catalpa International
Catalpa works in partnership with HAI and the Ministry of Health, to deliver services through the Liga Inan program. Built on Catalpa’s Connect technological platform, the service combines a web-application with simple mobile phone technology to link pregnant women and mothers with healthcare workers to facilitate communication dissemination and information management through text messages for the Liga Inan program. Catalpa’s key components of work are service delivery, health information management, sustainability and integration, pilots, research and design, and gender equality.

Health Alliance International
HAI is improving the quality of birthing and safe postnatal care through formal Safe and Clean Delivery training and Essential Newborn Care training through learning labs. HAI also works with Catalpa to build on their successful capacity building program and mHealth platform (Liga Inan), which builds trusted relationships between pregnant women and Ministry of Health service providers. The program results in positive changes to the health-seeking behaviours of women.

Royal Australasian College of Surgeons
The Royal Australasian College of Surgeons (RACS), through the ATLASS II program, provides hospital-based medical education and training to Timorese doctors, nurses and allied health personnel.
RACS provides mentoring and support to the Timorese medical faculty and supports quality improvement in areas that include obstetrics, gynaecology, maternity, paediatrics, surgery, anaesthesia and emergency care.

Marie Stopes Timor-Leste
MSTL supports the provision of family planning to 11 municipalities in Timor-Leste and the delivery of the capacity building pilot of government midwives in one municipality. MSTL provides quality, comprehensive, non-judgmental SRH services to women and men in Timor-Leste, with a focus on increasing scale and impact at a lower cost per client served. MSTL’s focus is on reaching high impact clients, including families, young people, the poor, and women and men with a disability.

Christian Blind Mission Australia
CBM provides strategic and technical advice to support the Ministry of Health and PHD to plan and implement activities that are inclusive of and benefitting people with disabilities, particularly women and children, on an equal basis with others.

Cruz Vermelha de Timor-Leste
The Ambulance and Transport Project works with Cruz Vermelha de Timor-Leste (CVTL) to run the Operations Centre. The Operations Centre is undergoing expansion to improve the 24 hour call centre operations and ambulance dispatch, in particular for patients requiring additional support and assistance.
Response and dispatch services are now underpinned by a computer aided dispatch system developed by Catalpa.

Education
Instituto Catolico para a Formacao de Professores
ICFP provides a pre-service teacher training program that focuses on improving teacher quality, especially in the preparation of lessons and positive approaches to classroom management and discipline, and providing career opportunities and pathways for qualified graduates.
ICFP will support PLMP activities in some school clusters in Baucau and Viqueque.

Alola Foundation
The Alola Foundation provides scholarships to disadvantaged girls in Timor-Leste to complete tertiary education to improve their employment opportunities.
Alola also provides mobile library vans that take resources and information right to the teachers, students and parents, and shares children’s books with schools across Timor-Leste. This contributes to children developing their reading skills and promotes children and parents sharing time together to read. Alola’s mobile vans also share other important messages about nutrition and health with parents and communities.

Australian Volunteers International
Australian Volunteers International (AVI) recruits and provides ongoing support for international mentors who work alongside school leaders, teachers and national Timorese mentors. The international mentors provide support for leaders and teachers to improve their skills in providing child-focused education.

Water and Sanitation
Plan International
Plan International will work in Aileu and Ainaro to achieve ODF status. Their key objectives include: empowering local government authorities to pursue improved sanitation in their municipalities and continue to maintain the ODF status while pursuing hygienic suco status; and building capacity of Ministry of Health staff to replicate the ODF initiative in other municipalities.
Plan International aim to reach 18,200 households (approximately 111,970 women, men, girls and boys) in the two target municipalities, to enable increased
access to toilets and/or improved hygiene knowledge, contributing to improved overall household health, particularly contributing to reducing stunting of children under age 5.

In total, 52 sucos and 8 administrative posts will gain greater understanding of the importance of achieving ODF and the systems required to achieve and maintain this.

WaterAid Timor-Leste
WaterAid will work to achieve ODF status in Liquica through focusing on: improving access to and use of an improved toilet in every household; and ensuring that all people in the community stop defecating in the open.

WaterAid will aim to reach 71,900 people who would benefit from a defecation-free environment, including 11,885 people without toilets. This would further reduce the disease burden related to open defecation.

Gender
Ba Futuru
Ba Futuru is creating public awareness of gender equality, challenging social norms and behaviour change of men and boys, creating awareness of respectful relationships, and empowering women through a production of short films.

The short films will, through engaging men and boys, aim to increase public awareness of gender equality and work towards ending violence against women.

Disability
Asosiasaun Defisiensia Timor-Leste
ADTL is the peak body for disabled people’s associations and one of two peak bodies advocating and supporting disability inclusiveness in Timor-Leste. ADTL works at the national level to advocate for the rights of people with disabilities.

Ra’es Hadomi Timor Oan
RHTO, the peak disability body for people with a disability, will be supported to provide services to people with disabilities, and raise awareness of disability rights.

Disability officers will provide services in all municipalities, with a particular focus on recruiting female disability officers to support women with a disability to access health services.

PHD will be working closely with AVI to recruit international volunteer advisers to work specifically with RHTO as part of broader organisational strengthening. PHD will provide ongoing support to RHTO in specific areas, such as finance and program development.

Psychosocial Recovery and Development in East Timor
PRADET works nationwide and provides safe houses in Baucau, Dili, Maliana, Oecusse and Suai. As the only organisation providing psychosocial services in Timor-Leste, support will continue for people who have experienced trauma, mental illness, domestic violence, sexual assault, child abuse, abandonment, trafficking, imprisonment and torture.

PRADET’s programs focus on mental health and psychosocial support, treatment, rehabilitation and education. PRADET also supports youth in juvenile detention and women in prison.

Christian Blind Mission Australia
CBM will provide high-quality technical support, advice and training to PHD sector teams to ensure disability is mainstreamed through all PHD activities. CBM also supports disability partners in Timor-Leste.

CBM has received funding from the DFAT Disability Inclusive Development fund to provide technical assistance to disability organisations and train program staff in disability inclusion. In 2017, CBM will use part of the funding it receives through PHD to provide capacity support to RHTO and ADTL.

CBM will also work with the Disability team and the Agape Sign Language School for the Deaf to continue advocating for a Timor-Leste national sign language. The existing sign language developed by Timorese deaf teachers will be used and PHD will work with the Government of Timor-Leste to support the development of a Tetum sign language. This work will also help the deaf community to establish a Timor-Leste Deaf Association.

CBM will be working with the Disability team and PRADET to support the existing mental health clients who have gone through treatment and are undertaking rehabilitation, to come together and form a self-help group. The self-help group will support discussion around issues affecting mental health clients and help build their confidence to re-engage with their family and the community.

Nutrition
Catalpa International
As a member of the Hamutuk technical working group, Catalpa is responsible for the development of the Hamutuk online platform, and the design and implementation of online and mobile phone technology to increase collaboration between partners, and increase the reach and impact of social and behavioral design tools and resources to improve nutrition promoting behaviors at the household level.

Alola Foundation
As a strategic partner of Hamutuk Alola delivers infant and young child feeding counselling to mothers and referrals to health facilities where women and children need more support in Manufahi. Alola works closely with other sector partners to deliver key nutrition promoting messages to families.
# ANNEX 3 - PHD IMPLEMENTATION PLAN

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## ANNEX 4 - LINKS TO STRATEGIC PRIORITIES

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<td>Goal 1. Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all</td>
<td>Part 2: Social Capital - Education and Training&lt;br&gt;By 2030, the people of Timor-Leste will be educated and knowledgeable, able to live long and productive lives, and have access to a quality education that will allow them to participate in the economic, social and political development of our nation.</td>
<td>Education&lt;br&gt;• Professional learning and mentoring program for teachers and school leaders, including tablets with pre-loaded new curriculum information (Ministry of Education, AVI, ICDFP and Alola Foundation)&lt;br&gt;• Warehouse management and new curriculum distribution&lt;br&gt;• Pre-service teacher training (ICDFP)&lt;br&gt;• Mobile library (Alola Foundation)&lt;br&gt;• Mother Tongue Multilingual Education (TLMCU/Ministry of Education)&lt;br&gt;&lt;br&gt;Disability and Gender&lt;br&gt;• Training of disability mentors for teachers (CBM Australia and AVI)&lt;br&gt;• Girls education scholarships (Alola Foundation)</td>
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<td>Goal 2. End hunger, achieve food security and promote sustainable agriculture</td>
<td>Part 2: Social Capital - Health&lt;br&gt;By 2030, Timor-Leste will have a healthier population as a result of comprehensive, high quality health services accessible to all Timorese people. In turn, this will have reduced poverty, raised income levels and improved national productivity. &lt;br&gt;• Maternal health&lt;br&gt;• Child health&lt;br&gt;• Nutrition&lt;br&gt;• Mental Health&lt;br&gt;• Human Resources</td>
<td>Health&lt;br&gt;• Ambulance and transport (Principal Transport &amp; Logistics Adviser and CVTL)&lt;br&gt;• Family planning (MSTL)&lt;br&gt;• Midwife training (HAI)&lt;br&gt;• Liga Inan – connecting pregnant women to safe delivery information via mobile phones (Catapla and HAI)&lt;br&gt;• Junior doctor postgraduate diploma training (RACS)&lt;br&gt;• Health information Management and Public Financial Management system strengthening&lt;br&gt;&lt;br&gt;Nutrition&lt;br&gt;• Nutrition-sensitive programming&lt;br&gt;• Operational support to President’s Nutrition Awards and Hamutuk pilot&lt;br&gt;• Maternal and child health (Alola Foundation)&lt;br&gt;&lt;br&gt;Disability&lt;br&gt;• Disability inclusion (CBM Australia)&lt;br&gt;• Mental health support through PRADET</td>
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<td>Goal 3. Ensure healthy lives and promote well-being for all at all ages</td>
<td>Part 2: Social Capital - Social Inclusion&lt;br&gt;By 2030, Timor-Leste will be a strong, cohesive and progressive nation where the rights and interests of its most vulnerable citizens are protected. &lt;br&gt;• Social security system&lt;br&gt;• Vulnerable children, people and families&lt;br&gt;• Gender equality</td>
<td>Social Protection&lt;br&gt;• Education on social protection approaches and social policy reform&lt;br&gt;• Support to Bolsa da Mae reform and SIGAS database&lt;br&gt;• Support improved identity documentation, such as birth registration&lt;br&gt;&lt;br&gt;Disability&lt;br&gt;• Inclusive activities (RHTO, ADTL and CBM Australia), and mental health support (PRADET).&lt;br&gt;&lt;br&gt;Gender&lt;br&gt;• Gender mainstreaming across all sectors, and gender-based violence behaviour change film (Ba Futuru).</td>
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<td>Goal 4. Ensure availability and sustainable management of water and sanitation for all</td>
<td>Part 3: Infrastructure Development - Water and Sanitation&lt;br&gt;A vitally important element in the economic and social development of Timor-Leste – and in the health and wellbeing of our people – is access to safe drinking water and sanitation systems. &lt;br&gt;• Clean water supply and sanitation in rural areas&lt;br&gt;• Water for schools</td>
<td>Water and Sanitation&lt;br&gt;• Sustainable access to clean water&lt;br&gt;• Behaviour change campaigns in toilet use and hygiene&lt;br&gt;• Open defecation free and handwashing with soap activities in rural areas (WaterAid and Plan International)&lt;br&gt;• Financial Management Strengthening for Water Management Groups (GMPS)&lt;br&gt;&lt;br&gt;Cross-cutting&lt;br&gt;• Effective and targeted capacity-building across program areas&lt;br&gt;• Professional learning and mentoring program in education&lt;br&gt;• Financial management system strengthening&lt;br&gt;• Assessment of demand and supply for schooling from 2015 to 2030&lt;br&gt;• Strengthening data collection and analysis</td>
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<td>Goal 5. Achieve gender equality and empower all women and girls</td>
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<td>Goal 7. Strengthen the means of implementation and revitalize the Global Partnership for Sustainable Development</td>
<td>Part 5: Institutional Framework - Public Sector Management and Good Governance&lt;br&gt;Good governance and a professional, capable and responsive public sector are essential for the delivery of government services and the implementation of the Strategic Development Plan. &lt;br&gt;• Human Resources Development and Training&lt;br&gt;• Leadership and Management&lt;br&gt;• Workforce planning&lt;br&gt;• Public Financial Management&lt;br&gt;• Statistics</td>
<td>Cross-cutting&lt;br&gt;• Working across sectors and through multi-stakeholder partnerships&lt;br&gt;• Sharing information and encouraging innovation</td>
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