# INDEPENDENT REVIEW OF THE TONGA HEALTH PROMOTION FOUNDATION’S IMPLEMENTATION OF RESPONSIBILITIES UNDER THE NATIONAL NCD STRATEGY

# Summary of management response:

DFAT welcomes this review, which was commissioned to consider the effectiveness of Tonga Health Promotion Foundation’s (TongaHealth) contribution to the implementation of Tonga’s National Non-Communicable Diseases Strategy at its mid-point. The review considered advice, opinions and experiences from a wide range of stakeholders and provided a considered analysis of the evidence that was available.

DFAT notes that the majority of the recommendations relate to actions required by TongaHealth. DFAT may support agreed recommendations through existing technical advisor mechanisms or via other, established development investments. For those that are agreed in principle, DFAT will continue ongoing dialogue with TongaHealth around ways to address the recommendations, however will not provide additional resources.

Australia has supported TongaHealth since 2009, with the current partnership ending in June 2025. DFAT will take a pragmatic approach to the future partnership with TongaHealth as DFAT notes there has been little improvement from the previous [evaluation](https://www.dfat.gov.au/sites/default/files/tonga-health-systems-support-program-phase-2-evaluation-report.pdf). DFAT will undertake a design for the next phase of Australian support to Tonga’s Health Sector by the end of fiscal year 2024-25, informed in part by this review.

# Individual management responses to the recommendations:

|  |  |  |  |
| --- | --- | --- | --- |
| **Recommendation** | **Response** | **Advice / Next Steps** | **Timeframe** |
| 1. TongaHealth should seek to strengthen its technical capacity by finalising and implementing an organisational capacity assessment, identifying sources of external technical assistance (e.g. volunteers, TASP), and strengthening the partnership with the Ministry of Health’s Health Promotion Unit (HPU) given their significant technical and implementation expertise in the health field. | Agree in principle | DFAT agrees that TongaHealth requires additional technical public health capacity. We will continue to discuss pathways with TongaHealth to address these capacity gaps, however DFAT will not fund additional resources to implement this recommendation.  *Comment: The DFAT grant arrangement included technical resources to address TongaHealth capacity gaps, however extending this investment is not considered good value for money at this time.* | N/A |
| 1. TongaHealth should seek to strengthen partnership and communication with MoH, particularly the HPU. | Agree | DFAT agrees with this recommendation and will use existing, short-term technical assistance to support TongaHealth to develop and map a practical forward workplan extending to June 2025, including engagement with MoH. | July 2024 – June 2025 |
| 1. TongaHealth should lead on identifying an alternative governance mechanism for NCDs. | Disagree | DFAT does not agree with this recommendation. TongaHealth, as the responsible organisation for delivering the National NCD Strategy, should drive the existing National NCD Committee to sit regularly.  *Comment: DFAT understands the current governance mechanism has been ineffective, however establishing a new mechanism will duplicate efforts and is unlikely to deliver results.* | N/A |
| 1. TongaHealth should reduce its grant administration workload, for example by simplifying grant application processes, introducing an annual grant management cycle, and reducing the overall number of grants. | Agree | DFAT agrees with this recommendation and will use existing, short-term technical assistance to support TongaHealth to develop and map a practical forward workplan extending to June 2025, including simplifying grant management. | July 2024 – June 2025 |
| 1. TongaHealth should revise the grant selection process to ensure grants are allocated to projects that are evidence-based, have a population-level focus, and cover a broader range of NCD risk factors. | Agree | DFAT agrees to this recommendation and will use existing, short-term technical assistance to support TongaHealth to develop and map a practical forward workplan extending to June 2025, including improving targeting of grants. | July 2024 – June 2025 |
| 1. TongaHealth should transition away from a near-exclusive focus on grant administration, and reorient toward delivering other functions and activities mandated in the NCD Strategy. This should particularly involve TongaHealth positioning itself as a convenor and facilitator of multisectoral dialogue and collaboration to progress priority activities. | Agree in principle | DFAT agrees that TongaHealth should reorientate its functions and activities to better align with the NCD strategy and will continue to encourage TongaHealth to consider steps towards this.  *Comment: DFAT understands a similar recommendation was made during the last phase of Tonga Health Sector Support and little progress has been made.* | N/A |
| 1. TongaHealth should develop and implement a strategic approach to supporting stakeholder engagement and collaboration. | Agree in principle | DFAT agrees with the recommendation and will consider ways to support TongaHealth through existing or complementary programming. | N/A |
| 1. TongaHealth should strengthen its internal M&E system, with a focus on generating evidence of TongaHealth’s progress against the NCD Strategy and Statement of Corporate Intent, generating evidence of outcome-level change as a result of grants, and producing timely and quality progress reports. | Agree | DFAT agrees with the recommendation and will seek to provide M&E support through to the end of the current grant agreement, through the DFAT funded M&E officer and the Tonga Australia Support Platform. | July 2024 – June 2025 |
| 1. TongaHealth should adopt a stronger focus on GEDSI, including by building the capacity of the TongaHealth team, strengthening engagement of Organisations of People with Disabilities (OPDs) and other GEDSI-focussed organisations, and strengthening inclusiveness in grants. | Agree | DFAT agrees with the recommendation and will consider ways to support TongaHealth through existing or complementary programming, such as through the established Tonga Australia Support Platform through to the end of the current agreement. This may include facilitating cross-learning with civil society and OPDs. | July 2024 – June 2025 |
| 1. DFAT, as the major funder of TongaHealth, should provide stronger strategic oversight, and introduce stronger accountability for delivering against the NCD Strategy and Statement of Corporate Intent. | Agree in part. | DFAT agrees that closer oversight is required over the remaining grant period. Specifically, this relates to the implementation of Australian development funding for activities to support TongaHealth in its role to implement the National NCD Strategy. However, it is not within DFATs sphere of control to ensure accountability for delivering against the Strategy, or TongaHealth’s Statement of Corporate Intent. | July 2024 – June 2025 |