

TOMAK Baseline Study

Component 1: Food Security & Nutrition

Summary Findings | May 2018

**Australian
Aid** 

 **TOMAK**
To'os ba Moris Di'ak

Abbreviations & acronyms

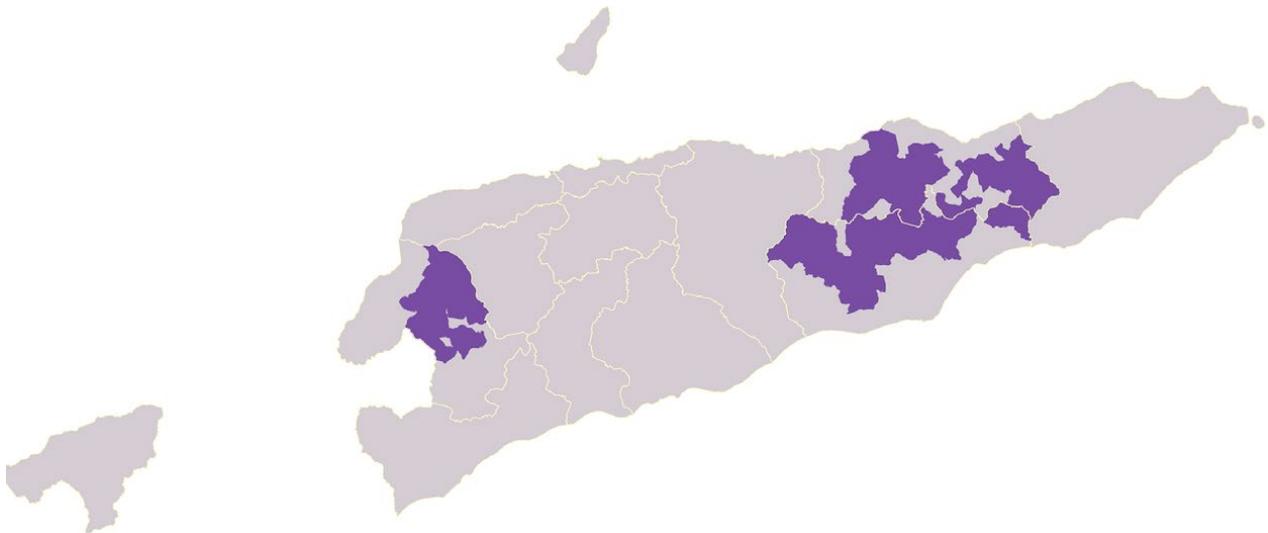
CRS	Catholic Relief Services
CSO	Civil society organisation
FAO	Food & Agriculture Organization of the United Nations
FCS	Food Consumption Score
FGD	Focus group discussion
HH	Household
MAD	Minimum acceptable diet
MDD	Minimum dietary diversity
MDD-W	Minimum dietary diversity for women
MFF	Minimum feeding frequency
MMF	Minimum meal frequency
NGO	Non-governmental organisation
NSA	Nutrition-sensitive agriculture
SBC	Social and behaviour change
SISCa	Integrated Community Health Services
TOMAK	To'os ba Moris Di'ak Program
WFP	World Food Program
WHO	World Health Organization
WRA	Women of reproductive age

About TOMAK

The To'os Ba Moris Di'ak (Farming for Prosperity) Program (TOMAK) is a five (plus five) year agricultural livelihoods program funded by the Australian Government in Timor-Leste.¹ Its goal is to ensure rural households live more prosperous and sustainable lives. TOMAK will achieve this through parallel and linked interventions that aim to:

- Establish a foundation of food security and good nutrition for rural households; and
- Build their capacity to confidently and ably engage in profitable agricultural markets.

The primary target area for Phase 1 comprises 66 inland mid-altitude suku (villages) with reasonable agricultural potential, located in Baucau, Viqueque and Bobonaro municipalities.



Implementation is based on a systems approach, working with and through a broad range of partners, including Government (across various ministries and administrative levels), NGOs, CSOs and the private sector.

Component 1 (Food Security and Nutrition) promotes nutrition-sensitive agriculture (NSA) approaches to improve the availability and utilisation of nutritious food. On the supply-side, this involves promoting improved production, storage, processing, preservation, and preparation of nutritious food; improved household purchasing and investment power; and more inclusive decision-making around nutrition within the home. On the demand-side, it involves working to influence the behaviour of households towards better nutritional practice through social and behaviour change (SBC) approaches.

To measure impact within Component 1, TOMAK will aim to increase the number of:

- Women of reproductive age and children under two years of age who are able to access sufficient amounts of diverse and nutritious food, year-round

So that greater numbers of:

- Children under two years have minimum acceptable diets
- Women of reproductive age have improved dietary diversity

¹ With a funding commitment of AUD25 million for the first phase (2016-2021).

Key findings

Minimum dietary diversity (MDD) for women

Dietary diversity levels for women of reproductive age (WRA) in TOMAK target municipalities is **very low at 15%**, with the vast majority of women consuming between 2 to 4 food groups a day (out of 10) and the largest proportion in each municipality consuming 3 food groups a day.

Minimum acceptable diet (MAD) for children aged 6 – 23 months

The proportion of children (breastfed and non-breastfed) aged 6-23 months consuming a minimum acceptable diet in TOMAK target municipalities is **very low, at 7.5%**. For breastfed children, this is primarily a function of dietary diversity. For non-breastfed children, this is a function of low dietary diversity and low minimum meal frequency, particularly for milk feeds.

The proportion of children (breastfed and non-breastfed) between ages 6-23 months reaching minimum dietary diversity in TOMAK target municipalities was also **low, at 15.6%**. Overall, the proportion of non-breastfed children receiving minimum dietary diversity is higher than breastfed children (20.2% non-breastfed versus 11.6% breastfed²). There is a high proportion of breastfed children reaching the minimum meal frequency (average 86.5%) compared to non-breastfed children (11%). For the latter, this is partly a function of insufficient minimum numbers of meals per day (4) and insufficient milks feeds within this.

Household food consumption

A **low 19%** of households reached an acceptable Food Consumption Score in TOMAK's target municipalities. Analysis shows a lack of regular diversity and the prevalence of cereals and tubers, dark leafy greens as well as oils/fats and sugar consumption. Meat, eggs, fish, fruit, orange flesh vegetables and pulses are less frequently consumed. The most common perceptions on how often meat, eggs and fish should be consumed was once a month.

Household food security

An average **60%** of households reported food insecurity³ over the last 12 months, with a marked difference between how this was reported between the genders – with 44% women and 76% men reporting this challenge. The proportions reporting food insecurity across the months spiked in February (19%) and August (21%).

Production

Relatively high proportions of households reported producing and consuming a range of nutritious crops including cereals (98%) and tubers (90%), orange flesh fruit (86%), dark green leafy vegetables (79%) and orange flesh vegetables (66%). Consumption of orange flesh fruit and vegetables was considerably higher for children, however, than for WRA or in the household Food Consumption Score.

2 Note: This is influenced by an outlier in Bobonaro, where there was higher consumption of legumes, nuts and eggs by non-breastfed children.

3 Respondents were asked to indicate whether there were periods in the preceding 12 months when it was difficult to access all the food required for the family. If the result was positive, respondents were asked to specify the months in which this was difficult.

Raising livestock

Chickens were raised for consumption by **92%** of respondents – by far the greatest number over other livestock, followed by pigs at 44%. Eggs were reportedly used for consumption by 40% of households, but this did not align with dietary diversity results for WRA and children which showed consumption of eggs was considerably lower.

Decision-making in the household

There was a relatively high incidence of reported discussion and joint decision-making between men and women across a variety of household decisions, including for food and larger household purchases. However, the data showed a complex picture of decision-making that may not provide sufficient nuance on the degree of involvement and authority of women and men in decision-making processes. In many instances, men appeared to have the final say in decision-making, even for choices identified as being a woman's responsibility.

Roles within households are gendered, with women largely seen as responsible for work within the home, and men seen as responsible for farming and income generation. Within this context however, men were reportedly involved in a range of household tasks, particularly collecting firewood, watching the children and collecting water although with low frequency.

Nutrition information

Nutrition information is being received by communities from a range of sources including NGOs, specific development programs, government, family and friends. The outreach occurring across TOMAK communities by NGOs and SISCa demonstrates potential opportunities for TOMAK to link with existing services and align approaches, materials, and key messages for communities - including within social groups and across age groups.

Recall of nutritious food for women and children was not overly detailed, which highlights opportunities to improve and reinforce information.

Baseline study

The baseline report presented here relates to Component 1, focussing on nutrition-sensitive agriculture (NSA) and social and behaviour change (SBC) approaches relating to nutrition. Interventions under Component 1 are primarily implemented through TOMAK's key NGO partners including **Catholic Relief Services** (CRS) in Eastern Baucau and Viqueque, **World Vision Timor-Leste** in Western Baucau and **Mercy Corps** in Bobonaro. Further activities will be undertaken directly by the TOMAK program, such as broader support to SBC approaches around NSA. Data was collected from 21 August - 16 September 2017, ahead of the implementation of TOMAK and partner activities. Respondents were as follows:

Tool	Women	Men
Survey respondents	240	240
Focus group discussions	45	39

To measure impact, TOMAK draws on globally recognised WHO and FAO indicators for nutrition

programs, focussing on access to nutritious food and dietary diversity for targeted households, women of reproductive age and children between 6-23 months. Key indicators include:

Minimum dietary diversity for women (MDD-W): Developed by the FAO, this tool is intended to measure the micronutrient intake of women aged 15-49 years - one key aspect of dietary quality. This is measured using a 24 hour recall period.

Minimum acceptable diet (MAD): Developed by the WHO⁴, the MAD measures the diets of children aged 6-23 months in terms of whether they received the minimum dietary diversity and also the minimum meal frequency, effectively combining quality and quantity measures of children's diets. This is measured using a 24-hour recall period.

Food Consumption Score (FCS): This tool (developed by the WFP) is intended to reflect access to a range of foods at the household level. The score is calculated on the frequency of consumption of particular food groups over the previous 7 days, and the source of the food. TOMAK complemented this score with supplementary questions that allow examination of the preceding 12-month period when respondents experienced difficulty accessing sufficient food for consumption.

The key objectives of the baseline were to:

- Establish dietary diversity levels for women of reproductive age
- Establish the proportion of children aged 6-23 months with minimum acceptable diets
- Establish food consumption scores in households
- Establish current food security levels of households over a 12-month period
- Describe decision-making roles and responsibilities relating to nutrition behaviours between men and women
- Explore specific knowledge, attitudes and practices of WRA and male heads of households

The study applied mixed methods, collecting quantitative survey and qualitative focus group discussion data from women of reproductive age (15-49 years) with a child aged between 6-23 months, grandmothers/mothers-in-law, male heads of household, grandfathers/fathers-in-law and local partners/facilitator/influencers in TOMAK's target municipalities of Bobonaro, Baucau and Viqueque. Survey sampling was designed to be representative at municipal level.

Demographic information

The Progress Out of Poverty Index results suggest there is a high likelihood that respondents in the TOMAK target municipalities are living under the \$2.50 International Poverty Line. Land is largely owned informally with cultivated areas typically less than one hectare per household.

Progress Out of Poverty Index results

Poverty Line	Average likelihood
\$2.50/day Upper International Poverty Line 2005	80.6%
\$1.25/day Lower International Poverty line 2005	29.7%

4 WHO: *Indicators for assessing infant and young child feeding practices. Part 2 – Measurement.* 2010

The head of the household is usually engaged in agricultural activities for their key occupation. The demographics of respondents reflect the characteristics of the majority of the rural population in Timor-Leste and TOMAK’s target beneficiaries being smallholder farmers.

Heads of households have relatively low levels of education, but interestingly a high proportion of children and young people in households are studying (72%), indicating a high value now being placed on education in Timor-Leste. This implies both that engagement of adults should suit the levels of education received (i.e. receipt of simple, repeated and reinforcing information) and also a potential opportunity to engage younger household members in learning about nutrition.

Impact

Women of reproductive age (WRA) have improved dietary diversity scores (MDD-W)

This indicator measures whether or not women 15–49 years of age have consumed a minimum 5 out of 10 defined food groups in the previous day or night. The proportion of women 15–49 years of age who reached this minimum in a population can be used as a proxy indicator for higher micronutrient adequacy.

The 10 food groups include:



1. Grains, white roots & tubers, plaintains



2. Pulses (beans, peas & lentils)



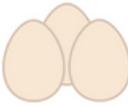
3. Nuts & seeds



4. Dairy



5. Meat, poultry & fish



6. Eggs



7. Dark green leafy vegetables



8. Other Vitamin-A rich fruits & vegetables



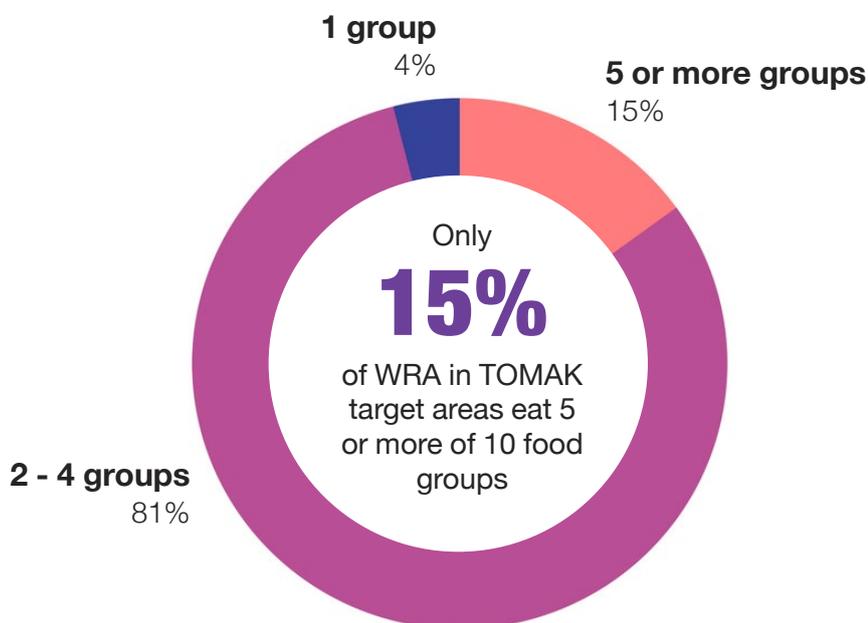
9. Other vegetables



10. Other fruits

The study found that dietary diversity levels for women of reproductive age (WRA) in TOMAK target

municipalities is very low, with only 15% of WRA (38 respondents) consuming at least 5 of the above food groups. The vast majority of women (81%) consume 2 to 4 food groups a day, falling well short of the recommended 5 groups to reach minimum dietary diversity. The largest proportion in each municipality consume 3 food groups a day. This highlights the importance of emphasising increased diversity in women’s diets.



A high proportion of women are consuming staple foods (grains, white roots and tubers, and plantains) and green leafy vegetables, above all other food groups.

MOST CONSUMED



Grains, white roots & tubers, plantains



Dark green leafy vegetables

Less consumed food groups included meat and seafood, vitamin A-rich fruit and vegetables, pulses, eggs, dairy, nuts and seeds.

LEAST CONSUMED



Meat, poultry & fish



Other Vitamin-A rich fruits & vegetables



Pulses (beans, peas & lentils)



Eggs

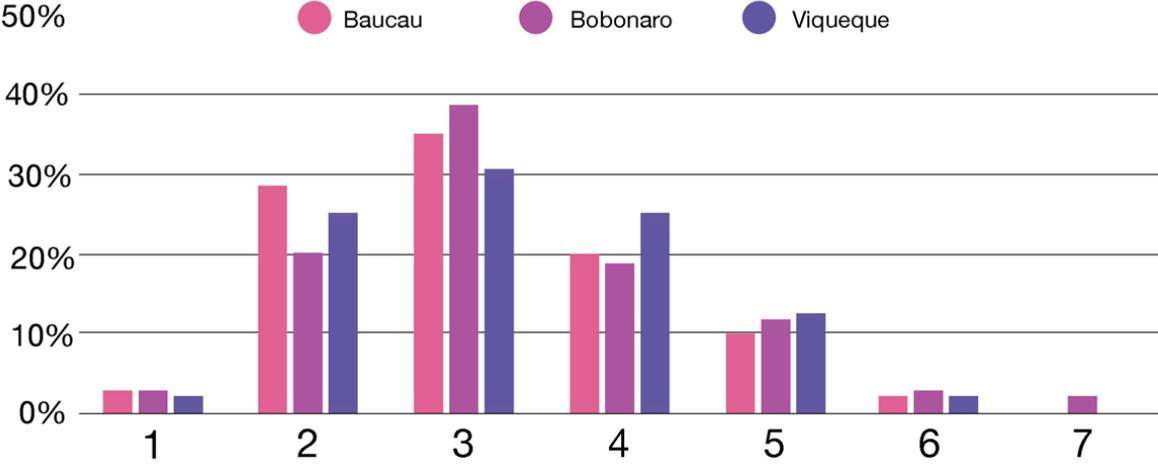


Dairy



Nuts & seeds

The breakdown of the number of food groups consumed by WRA each day by municipality is shown below.



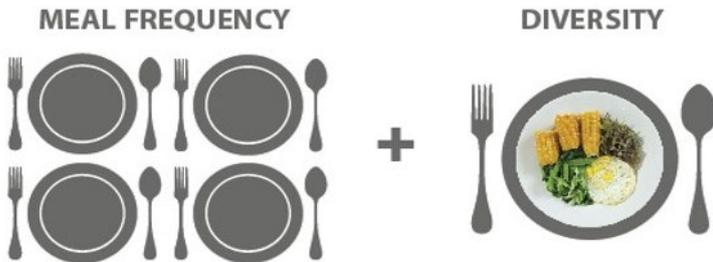
Number of food groups consumed by women of reproductive age, by municipality

What does this mean for TOMAK?

TOMAK should emphasise that diversity in women’s diets is critical to address the low diversity apparent from the MDD-W scores. Food groups that could be flagged for consumption include meat/ organs and seafood, vitamin-A rich fruits and vegetables, pulses, eggs, other vegetables, nuts and seeds and other fruits.

Proportion of children aged between 6-23 months years of age with minimum acceptable diet score (MAD)

This indicator measures the percentage of children aged 6-23 months of age who receive a minimum acceptable diet, apart from breast milk, during the preceding 24 hours. The MAD indicator measures both the minimum feeding frequency (MFF - for children aged 6-8 months and 9-23 months) and minimum dietary diversity (MDD - for children aged 6-23 months). If a child meets the minimum feeding frequency and minimum dietary diversity for his or her age group and breastfeeding status, the child is considered to be receiving a minimum acceptable diet.

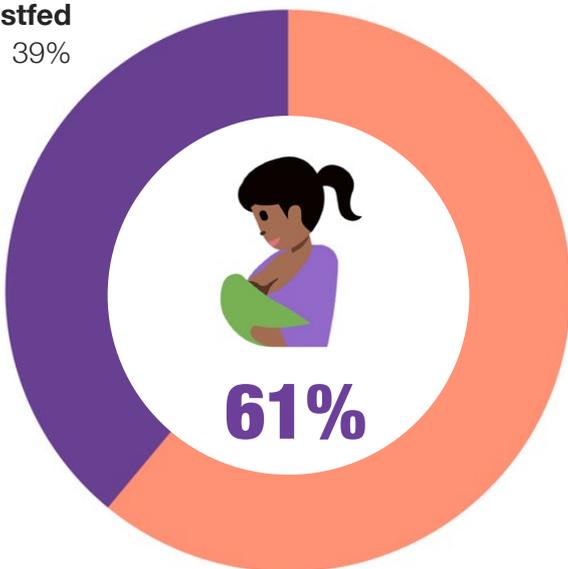


Requirements for a minimum acceptable diet⁵

5 Infographic developed by the Australian Department of Foreign Affairs and Trade (DFAT), presented at the President’s Roundtable Dialogue, 2015.

Overall, the proportion of children (breastfed and non-breastfed) aged between 6 and 23 months with minimum acceptable diets in TOMAK target municipalities is very low, at 7.5%. For breastfed children, this is primarily due to low dietary diversity. For non-breastfed children, this is due to low dietary diversity and low minimum meal frequency, particularly for milk feeds.

Non-breastfed



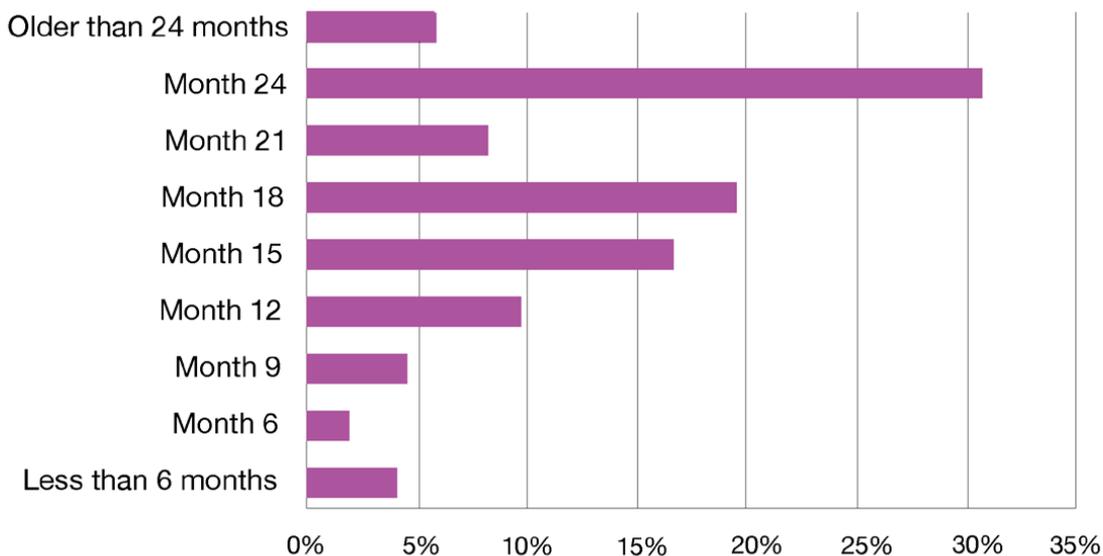
Breastfeeding

Overall, 61% of respondents reported their child (between 6-23 months) was breastfed, and this proportion was mirrored across the districts (Baucau 63%, Bobonaro 60%, and Viqueque 60%).

Breastfed

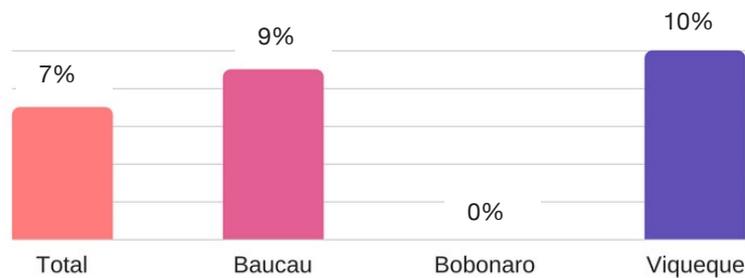
61%

Thirty-one percent of female respondents reported they stopped or planned to stop breastfeeding of their children at age 24 months, followed by 18% at month 18 then 16% at month 15.

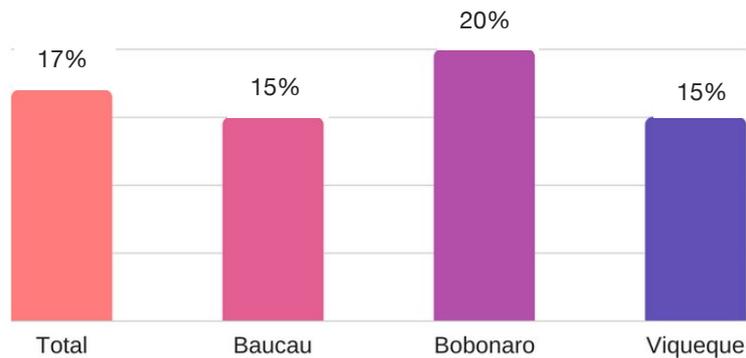


Age when women stopped or planned to stop breastfeeding

For breastfed children aged 6-23 months in TOMAK’s target municipalities, 12% are reaching the criteria for MAD. The proportion of breastfed children reaching MAD scores per municipality are shown on the following page. The 0% score for 6-8 month old breastfed children in Bobonaro is due to the insufficient MDD for these children.

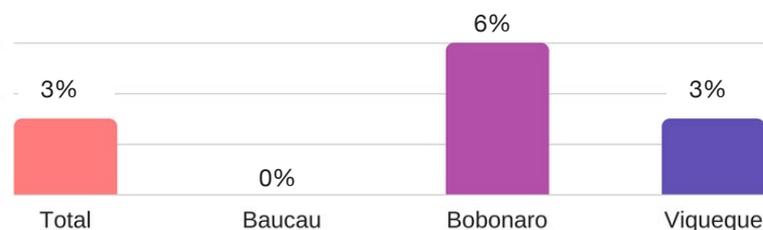


MAD by municipality: Breastfed children aged 6-8 months



MAD by municipality: Breastfed children aged 9-23 months

On average, 3% of non-breastfed children aged 6-23 months in TOMAK’s target municipalities are reaching MAD.⁶ The 0% score for non-breastfed children in Baucau has resulted from children either having insufficient MDD or MMF, and therefore no children in this group reached the minimum criteria for MAD.⁷



MAD by municipality: Non-breastfed children aged 6-23 months

6 This is comparable with national figures in the Timor-Leste Food and Nutrition Survey 2013 which showed that 3.5% of non-breastfed children aged 6-23 months reached the minimum acceptable diet. Ministry of Health, Democratic Republic of Timor-Leste: *Timor-Leste Food and Nutrition Survey 2013, Summary of Key Findings and Recommendations, April 2015*.

7 The findings from the TOMAK baseline differ from the findings of the CRS CDNIP Program Baseline Report (Monash University: *Community-Driven Nutrition Improvement Program (CDNIP) – Baseline Study Final Report November 2015, CRS*). In this study across across Baucau and Viqueque, 3.1% of breast-fed children and 0% of non-breastfed children met the minimum acceptable diet, significantly below the TOMAK findings. This could be a function of the CRS report focussing on the poorest suku, while the sampling in the TOMAK baseline aimed to be representative at a municipal level. Nonetheless, both studies indicate a very low percentage of children meeting the MAD criteria.

Minimum dietary diversity

The MDD for breastfed children aged 6-23 months is defined as 4 or more food groups out of 7 food groups. These food groups include:



1. Grains, white roots & tubers, plantains



2. Legumes & nuts



3. Dairy



4. Flesh foods (meat, poultry, fish, organs)



5. Eggs



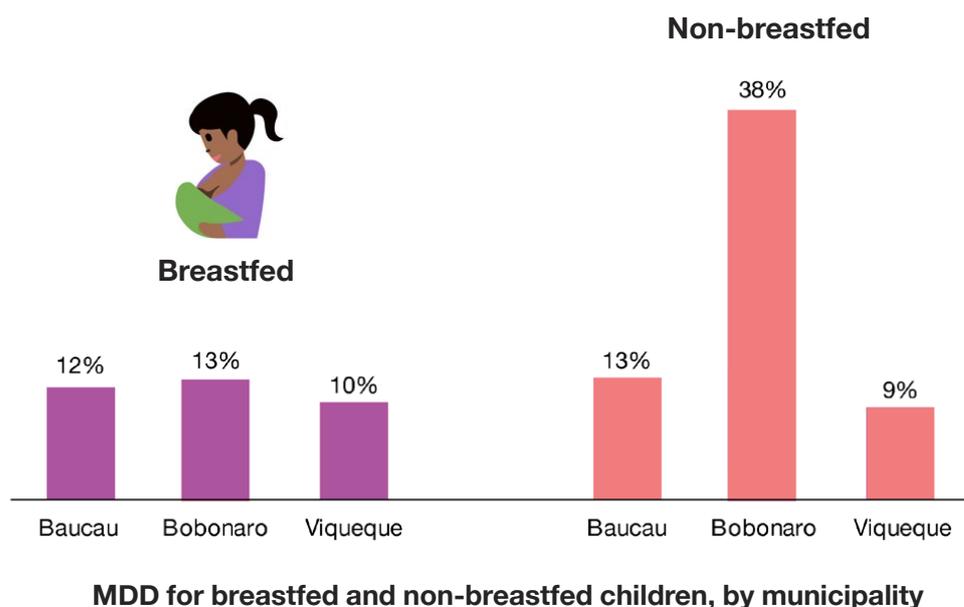
6. Vitamin-A rich fruits & vegetables



7. Other fruit & vegetables

The proportion of children (breastfed and non-breastfed) between ages 6-23 months reaching the minimum dietary diversity in TOMAK target municipalities was low, at 15.6%. Overall, the proportion of non-breastfed children receiving minimum dietary diversity is higher than breastfed children (20.2% non-breastfed versus 11.6% breastfed⁸).

The average proportions reaching MDD were 13% in Baucau, 25% in Bobonaro and 10% in Viqueque. The breakdown between the MDD of breastfed and non-breastfed children per municipality⁹ is shown below.



⁸ Note: This is influenced by an outlier in Bobonaro, where there was higher consumption of legumes, nuts and eggs by non-breastfed children.

⁹ Note that percentages per municipality are calculated on the numbers for that municipality i.e. breastfed children with sufficient MDD in Bobonaro, out of the total breastfed children in Bobonaro.

The breakdown of food groups eaten by breastfed and non-breastfed children shows a high consumption of cereals and tubers and vitamin A-rich fruit and vegetables, but low diversity overall. More non-breastfed children are consuming vitamin A-rich fruit and vegetables and meat/seafood than breastfed children. Meat and seafood, eggs, legumes and nuts, other fruits and vegetables and dairy products were consumed by considerably fewer children. For both groups of children the number of food groups peaks at 3, but then drops out at 4.

Overall, minimum dietary diversity is generally low across TOMAK’s target municipalities, with an exception in Bobonaro for non-breastfed children.

Food group	Breastfed children %				Non-breastfed children %			
	BCU	BBO	VQQ	Overall	BCU	BBO	VQQ	Overall
Grains, roots and tubers	98	90	100	96	93	94	100	96
Vitamin A rich fruits and vegetables	56	29	69	55	73	81	97	84
Meat (flesh), organs and seafood	28	31	21	27	40	44	31	38
Eggs	22	25	25	24	17	38	16	23
Legumes and nuts	12	17	15	14	7	31	19	19
Other fruits and vegetables	10	4	13	9	27	25	13	21
Dairy products (milk, yoghurt, cheese)	4	4	2	3	10	3	6	6

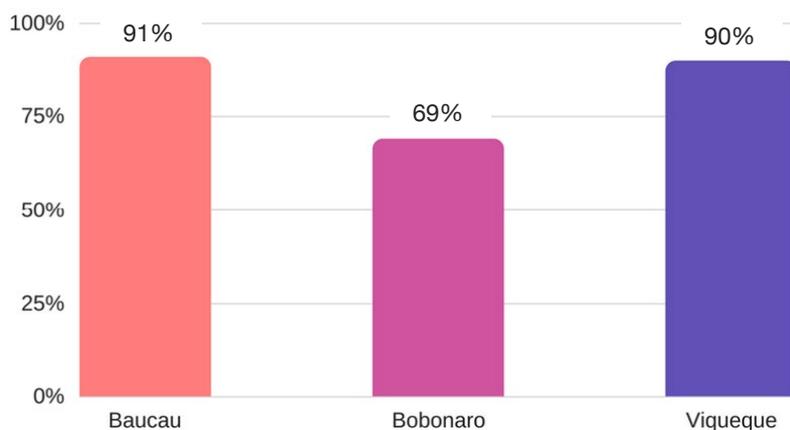
Minimum meal frequency (MMF)

There is a high proportion of breastfed children reaching the minimum meal frequency (average 86.5%) compared to non-breastfed children (11%). For non-breastfed children, this is partly a function of insufficient minimum numbers of meals per day (4) and insufficient milk feeds within this.

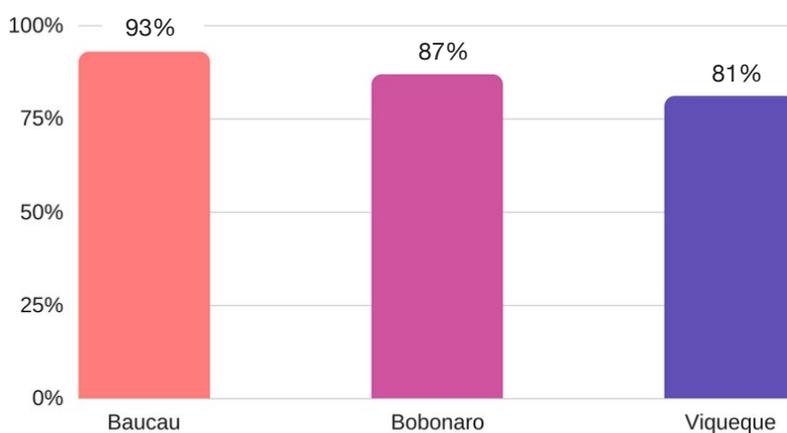
Breastfed children

The minimum meal frequency for breastfed children is defined as 2 or more feedings of solid, semi solid or soft food for children aged 6-8 months, and three or more feedings of solid, semi solid or soft food for children aged 9-23 months.

For 6-8 month old breastfed children across TOMAK’s target municipalities, 85% received the minimum meal frequency. For those aged 9-23 months, 88% of breastfed children received the minimum meal frequency. The municipality breakdowns for breastfed children in the two age brackets are shown on the following page.



MMF by municipality: Breastfed children aged 6-8 months



MMF by municipality: Breastfed children aged 9-23 months

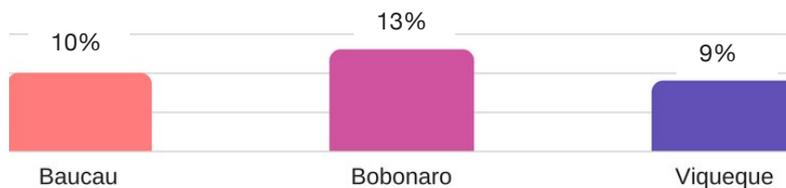
Non-breastfed children

Minimum meal frequency for non-breastfed children is defined as 4 or more feedings of solid, semi-solid, soft food, or milk feeds (substitute milk or formula) for children 6-23 months, with at least 2 of these feedings being milk feeds.¹⁰

There was a stark contrast on minimum meal frequency for non-breastfed children, with only 11% of non-breastfed children receiving the minimum meal frequency. This appears to be partly due to a lack of sufficient milk feeds within the required 4 or more feedings each day - only 26% of non-breastfed children received this minimum requirement of milk feeds as well as a high proportion of children only consuming 3 meals a day.

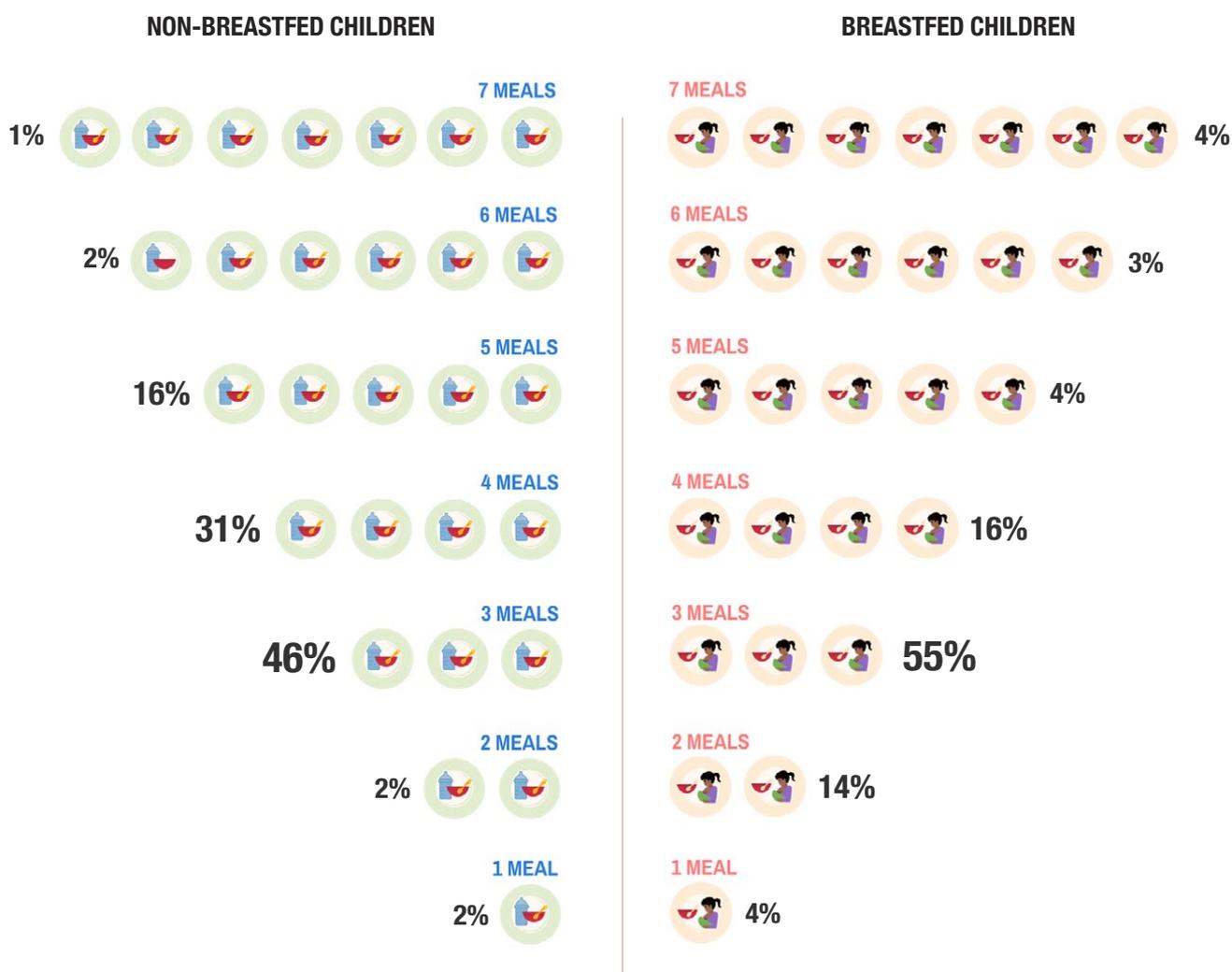
The municipality breakdowns for the minimum meal frequency for non-breastfed children are shown on the following page.

¹⁰ US Agency for International Development Learning Lab, Nutrition Indicator Reference Sheets: External source data, <https://usaidealn-inglab.org/sites/default/files/resource/files/Nutrition%20Indicator%20Reference%20Sheets.s2.pdf>



MMF by municipality: Non-breastfed children aged 6-23 months

The number of meals consumed by children aged 6-23 months shows the highest proportion consuming 3 meals a day - 55% of breastfed and 46% of non-breastfed children. Following this, the next highest proportion is of non-breastfed children consuming four meals a day (31%), compared with 16% of breastfed children. Sixteen percent (16%) of non-breastfed children consume 5 meals a day. The proportion of children and meals consumed each day is shown in below:



No. of meals consumed each day by breastfed and non-breastfed children aged 6-23 months

Per municipality, the proportion of breastfed and non-breastfed children aged 6-23 months reaching minimum meal frequency was 64% in Baucau, 56% in Bobonaro and 60% in Viqueque. The average across TOMAK target municipalities was 60%, noting that this hides the low score for non-breastfed children.

Minimum meal frequency for breastfed children is relatively high across the municipalities, with room for improvement, in contrast to MMF for non-breastfed children, which is very low.

Feeding Practices

Seventy-two percent (72%) of WRA reported introducing semi-solid or solid foods at 6 months of age which was mirrored across the TOMAK target municipalities. Thirty-one percent (31%) of female respondents reported they stopped or planned to stop breastfeeding of their children at age 24 months, followed by 18% at month 18 then 16% at month 15.

What does this mean for TOMAK?

TOMAK needs to communicate the importance of diversity in children’s diets. The program can emphasise consumption across the following food groups: meat (flesh), organs and seafood, eggs, legumes and nuts, other fruits and vegetables. As scores are currently peaking at 3 food groups consumed per day, TOMAK could focus on increasing the consumption of one other food group for children to reach minimum dietary diversity.

TOMAK could further highlight that 6-8 month olds need two or more feedings of solid, semi solid or soft food a day in Bobonaro. Meal frequency could also be improved in Bobonaro and Viqueque for 9-23 month olds, who require 3 or more feedings of solid, semi solid or soft foods per day. MMF in Baucau is the highest of the three municipalities (over 90% for each age bracket).

There is significant work needed to increase the minimum meal frequency for non-breastfed children across all TOMAK municipalities. TOMAK messaging needs to highlight the importance of 4 or more feedings of solid, semi-solid, soft food or milk feeds, with at least two of these being milk feeds.

Proportion of households with improved year-round food security

An average 60% of households reported food insecurity over the last 12 months. The proportions reporting food insecurity across the months spiked in February (19%) and August (21%).

These responses are broken down for each municipality below.

Municipality	Proportion (average)
Baucau	62.5%
Bobonaro	53.5%
Viqueque	64.5%

The August peak was particularly influenced by the responses of WRA. This spike was predominantly from WRA respondents in Baucau and Viqueque.

A breakdown showing the months of difficulty in sourcing foods (focussing on rice and vegetables) shows a peak for rice insecurity from January to April and a peak in August and September for vegetables. This was also reflected in the foods TOMAK respondents reported eating. In February, women and men reported a shortage particularly of cereals (rice) and plantains. In August, women and men reported a shortage of cereals (rice), plantains, dark leafy vegetables and orange fruits. The second peak in August and September may relate to vegetable shortages due to increasing

water shortages during the dry season. The reporting spike in women’s responses may relate to their primary responsibility for food preparation.

When asked why food shortages occurred, the most commonly cited reasons were due to long dry seasons and lack of water, natural disasters and climate change. Less cited reasons included too much rain, death of farm animals and households with only one harvest per year.

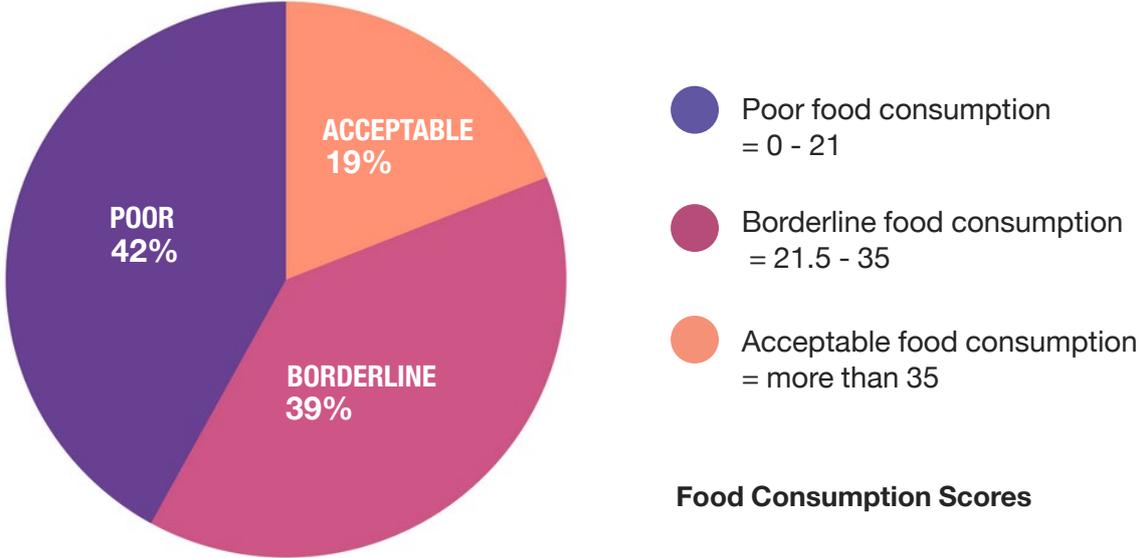
Overall, 56% of respondents reported a shortage of maize, rice and other cereals during these periods, 27% reported lacking cassava, white potatoes, plantains and other tubers and 20% reported a lack of dark green leafy vegetables.

Proportion of households with improved dietary diversity Food Consumption Score (FCS)

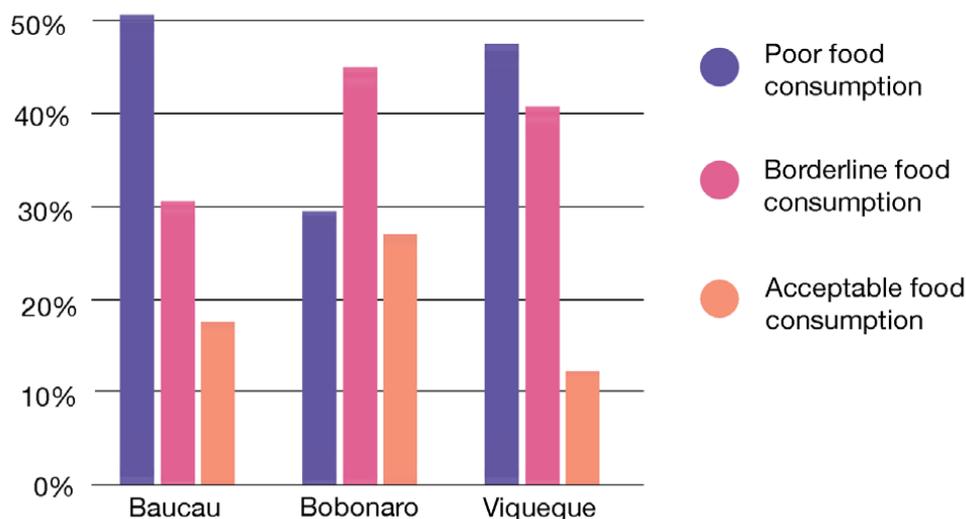
The FCS is a composite score based on relative nutritional importance of different food groups and consumption frequency. The respondent (normally a female responsible for food preparation for the household) is asked about food group consumption and frequency of consumption (in days) over a recall period of the past seven days for the household. Food items are grouped into 8 standard food groups and weighted to create the FCS calculations with the frequency of consumption.

Within the thresholds of the Food Consumption Score (FCS), only 19% of households in the TOMAK target municipalities reached an acceptable FCS. The proportional breakdowns against poor, borderline and acceptable food consumption are shown below.

Analysis shows a lack of regular diversity and the prevalence of cereals and tubers, dark leaf greens as well as oils/fats and sugar consumption. Meat, eggs, fish, fruit, orange flesh vegetables and pulses are less frequently consumed. The most common perceptions on how often meat, eggs and fish should be consumed was once a month (women 34%, men 47%). Far fewer respondents felt more regular consumption of these foods was needed.



This is broken down by municipalities below, with Baucau and Viqueque demonstrating higher proportions of poor food consumption in households compared with Bobonaro.¹¹



Proportion of household food consumption scores, by municipality

When asked about the primary source of each food group, on average 66% responded it is purchased from the market with cash, with 28% reportedly coming from household crops/garden production. The remaining sources included from hunting/fishing or gifts from family or friends.

During FGDs, participants reported very little consumption of meat. Chicken was consumed with greater frequency, but large animals such as pigs and goats were frequently cited as being used for cultural events (“lia”) or to sell when cash was needed.

Relatively high proportions of households reported producing and consuming a range of nutritious crops including cereals (98%) and tubers (90%), orange flesh fruit (86%), dark green leafy vegetables (79%) and orange flesh vegetables (66%). Consumption of orange flesh fruit and vegetables was considerably higher for children, however, than for WRA or in the household Food Consumption Score.

Chickens were raised for consumption by 92% of respondents – by far the greatest number over other livestock, followed by pigs at 44%. Eggs were reportedly used for consumption by 40% of households, but did not align with dietary diversity results for WRA and children which found egg consumption was considerably lower.

Decision-making in the household

Men tend to lead on farming decisions such as which animals to raise or which crops to grow on the farm, while women initially seemed to lead on decisions relating to food purchases and healthcare. However, findings indicate that men often have the final say in decision-making, even for choices where women are viewed as having primary responsibility. Respondents reported a relatively high incidence of discussion and joint decision-making between men and women across a variety of

¹¹ The TOMAK figures contrast with the national figures reported in the Timor-Leste Food and Nutrition survey 2013, which included Baucau 36.1% reaching acceptable food consumption in Baucau, 70.3% in Bobonaro and 55% in Viqueque. Ministry of Health, Democratic Republic of Timor-Leste: *Timor-Leste Food and Nutrition Survey 2013, Summary of Key Findings and Recommendations*, April 2015.

household decisions, including for food and larger household purchases. There may be opportunity to leverage these areas to provide information on specific, nutritious foods to purchase for the family.

Roles within households seem gendered, with women largely seen as responsible for work within the home and men seen as responsible for farming and income generation. Within this context however, men were reportedly involved in a range of household tasks but at low levels of frequency. Overall, women and men reported being satisfied with their roles in the household.

Men are engaged in providing advice and decision-making around nutrition, particularly for food that children should be consuming, but less so for their wives. However, the information being provided by men suggests that this involvement is not extensive.

Nutrition information

Information is being received by communities on nutrition from a range of sources particularly NGOs and SISCa, specific development programs, government, family and friends. This demonstrates that outreach is occurring and that the alignment of information amongst a range of stakeholders is very important. Recall for nutrition information is not detailed, which highlights opportunities to improve and reinforce information.



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