

**INTEGRATED SAFEGUARDS DATA SHEET
APPRAISAL STAGE**

I. Basic Information

Date prepared/updated: 12/30/2013

Report No.: 84082

1. Basic Project Data

Country: Timor-Leste	Project ID: P145491
Project Name: Community Driven Nutrition Improvement Project	
Task Team Leader: Eileen Brainne Sullivan	
Estimated Appraisal Date: January 8, 2014	Estimated Board Date: N/A
Managing Unit: EASHH	Lending Instrument: Trust Fund
Sector: Health (50%), General Agriculture, Fishing, and Forestry (25%); General Water, Sanitation, and Flood Protection (25%)	
Theme: Nutrition and Food Security (100%)	
IBRD Amount (US\$m.):	0
IDA Amount (US\$m.):	0
GEF Amount (US\$m.):	0
PCF Amount (US\$m.):	0
Other financing amounts by source:	
BORROWER/RECIPIENT	0.00
JSDF TF	2.71
Financing Gap	0.00
	2.71
Environmental Category: B	
Simplified Processing	Simple <input type="checkbox"/> Repeater <input type="checkbox"/>
Is this project processed under OP 8.50 (Emergency Recovery) or OP 8.00 (Rapid Response to Crises and Emergencies)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

2. Project Objectives

The proposed Project Development Objective (PDO) is to improve nutrition practices targeted to children under the age of two and pregnant and lactating women in targeted least developed communities.¹ In order to achieve this, the project will address the key underlying causes through: (i) community mobilization, awareness raising and participatory planning (about malnutrition, its causes and consequences); (ii) community led delivery of nutrition-specific interventions (focusing on the four interventions identified by the Lancet series that encourage changes in behavior to improve nutrition)²; and (iii) community led delivery of nutrition-sensitive interventions.³ By linking both

¹ Timor Leste has 13 districts, 66 sub-districts, 442 sucos (villages) and 2336 aldeias (hamlets). Community in this CN refers to aldeias

² Raew, Kathryn et al. (2012). A Life Free From Hunger: Tackling Child Malnutrition. STC. London.

³ As defined within the Scaling Up Nutrition (SUN) framework, nutrition-specific interventions are programs and plans that are designed to address the direct causes of malnutrition and to have a specific impact on nutrition outcomes. These include: support for exclusive breastfeeding; appropriate complementary feeding; micronutrient fortification and supplementation; and treatment of acute malnutrition. Nutrition-sensitive approaches are strategies and plans that address the underlying and basic

nutrition specific and sensitive interventions through multi-sectoral approaches, the proposed project will achieve wider and more sustainable improvement in the nutrition status of target populations.

3. Project Description

Component 1: Community Mobilization, Awareness Raising and Participatory Planning (USD 0.34 million). The objective of this component is to increase community's understanding and participation in identifying and addressing malnutrition. The Component 1 objective will be achieved through the following strategies: (i) district and sub-district level orientation of project objective and identification of target communities; (ii) orientation of project objective at suco level in consultation with suco councils; (iii) participatory mapping of key issues in child malnutrition at community level (e.g. types, causes and impact as well as options to address to malnutrition based on gender analysis to understand the roles of women and men in decision making); (iv) community-led participatory planning including nutrition-specific and sensitive interventions and selection of community volunteers to be members of each Care Group.⁴ Expected outputs under this component will include: (i) finalized detailed implementation plans; (ii) a complete list of district-endorsed target communities; (iii) completed participatory appraisal/assessment events by all target communities; (iv) a list of Care Group volunteers and existing community health volunteers/workers (e.g., *Promotor Saude Familia* (PSF)) from each community; and (v) action plans for community led interventions to be carried out under Components 2 and 3.

Under this component, the implementing agency, Catholic Relief Services (CRS) and its local partners (e.g., Civil Society Organizations⁵, etc.) will be responsible for facilitating project orientation, coordination and participatory planning processes at the national, district, suco, and aldeia levels. This component will take into account the roles and responsibilities of all actors and institutions at the different levels and leverage strengths of various actors to sustain the delivery mechanisms. The project will work in close consultation with the different entities including newly formed Council for Food and Nutrition Security and Sovereignty to compliment other initiatives addressing malnutrition; and the Nutrition Working Group at national level and district health and agriculture departments at district level.

causes of malnutrition and take into consideration the cross-sector impact of nutrition including those related poverty reduction, education, agriculture and improved sanitation.

⁴ A Care Group is part of a cascading health promotion model made up of beneficiaries (i.e., caregivers), care group volunteers (from target communities), community facilitators (from local partners) and overall supervisors (from local partners). Under the overall technical support of the implementing agency, communities facilitators trained in key health promotion messages will meet with care group volunteers twice a month to share a set of health promotion messages. In turn, each care group volunteer promotes positive behaviors to the target mothers/ caregivers the volunteer is responsible. In order to minimize turnover, care group volunteers will be selected by community leaders/beneficiaries. About 15-20% more volunteers will be trained to compensate turnover.

⁵ CSOs include local NGOs, faith-based organizations (FBOs), etc currently operating in the target areas. Local partners will be selected per the simplified World Bank Procurement/Consultant Guidelines for Fragile and Small States (FCS).

Component 2: Community Led Delivery of Nutrition Specific Interventions (USD 0.76 million). The objective of this component is to improve accessibility of community driven nutrition specific interventions by the target households. While the Integrated Community Health Services (SISCa) and clinic-based initiatives to address malnutrition in Timor-Leste have made some progress they have not been able to reach the outlying households. Most of these households do not have frequent contact with providers of health services.⁶ This project will incorporate aspects of the Care Group model that is able to multiply efforts through the use of community based volunteers that have shown promising results to improve the level of global under-nutrition scale at a low cost in Africa.⁷ CRS has experience in Timor Leste to reach large number of communities with high level of engagement from community facilitators/volunteers. This will be a mixed approach that will blend a volunteer-based strategy with the provision of incentives for CNE. The Component 2 objective will be achieved by: (i) providing Community Nutrition Coordinators (CNC's) with training of trainers (ToT) on nutrition and hygiene counseling and facilitating community led learning sessions; (ii) CNC's will train Community Nutrition Educators (CNE's) on nutrition and hygiene counseling and conducting home visits and small group discussions; and (iii) CNE's will build relationships with households and provide ongoing, individualized, dynamic counseling.

Nationally, CRS will engage with the Technical Working Group for Nutrition within the Ministry of Health (MOH) so that training materials and Behavior Change and Communication (BCC) materials used in the field are aligned with the national nutrition strategy and existing initiatives. Based upon this consultation, CRS will create/adapt training materials for the ToT provided to CNC's and training for CNE's, CNE's will be part of groups that meet monthly at the suco level for the nutritional learning sessions. They will also conduct home visits and small group sessions to provide promotion/counseling sessions, building awareness and inducing behavior changes around optimal infant and young child care and feeding, appropriate hygiene especially hand-washing, proper food preparation, disease prevention and treatment. A local partner implementing agency will be contracted to lead training of CNE's, with technical support provided from CRS in close collaboration with the MOH. The volunteers will also be responsible for encouraging households to attend monthly SISCa events and work to support and collaborate with existing community health promoters (PSF's). Expected outputs include: (i) training plan and finalized curriculum/manual for training of trainers; (ii) approximately 500 CNE trained on nutrition and hygiene promotion and facilitating counseling sessions; (iii) Community Nutrition Learning Sessions conducted in 50 sucos; and (iv) 70% of targeted households receive counseling either via home visits or small group sessions.

Component 3: Community Led Delivery of Nutrition-Sensitive Interventions (USD 1.14 million). The objective of this component is to improve accessibility of selected nutrition

⁶ TLSLS 2007

⁷ Davis, Thomas P. et al. Reducing child global undernutrition at scale in Sofala Province, Mozambique, using Care Group Volunteers to communicate health messages to mothers. *Global Health: Science and Practice* 2013.

sensitive activities that address the underlying causes of malnutrition and create an enabling environment for households and communities to engage in the behavior change for improved nutritional outcomes. Under this component, communities will implement their community action plans. The communities select one of three options that best address their needs, interests and natural resources. These three nutrition sensitive interventions have been identified as having the most promising effects on reducing maternal and child malnutrition⁸. CRS Timor-Leste experience with community based projects has shown increased participation and better outcomes when the community is provided with limited number of interventions to select from that address the community prioritized problems. A recent review of nutrition sensitive agriculture interventions of Timor-Leste⁹ identified the following as having positive impacts on nutritional outcomes at the household level: (a) increasing the availability and production of bio-fortified foods such as orange flesh sweet potato; (b) increasing vegetable production and homestead gardening combined with nutrition education; and (c) increasing aquaculture production, post-harvest handling and storage. This information was used to create the three nutrition sensitive intervention options for this component. The three options are 1) increased availability of nutritious staple and minor crops; 2) increased availability of vitamins and diversified food through homestead gardens; 3) increased availability of protein and Omega 3 through creation of household level fish ponds.

Each of these interventions will contribute to dietary diversity (measured as number of food groups from which individuals consume) and increased meal frequency. They will increase the availability of carbohydrates, micronutrients, proteins, and essential fats. Additionally, these options contribute to two of the five objectives of the Strategic Development Plan of the Ministry of Agriculture: Objective 1 - *sustainable increase in the production and productivity of selected crops, livestock species, fisheries and forestry*; and Objective 5 - *enhance sustainable resource conservation, management and utilization*.

Community led delivery of nutrition-sensitive interventions chosen by the target communities will only be initiated after verifying that (i) targeted beneficiaries in the communities have been mapped; (ii) communities have selected volunteers and participating households under Component 2; (iii) selected volunteers have been trained; and (iv) communities have organized at least three CNEs sessions and at least 70% of participating households engaged in either home visits or small group sessions (for which multiple members of households are expected to attend). All Component 2 relevant activities will nonetheless continue upon triggering Component 3. Verification of successful completion of the conditional criteria set forth in Component 2 will be the responsibility of the implementing agency. The conditionality of this component is based on the premise that the proven interventions in Component 2 for improving nutrition are necessary and urgent during the first 1000 days of life. Since existing structures, incentives and health schemes have not been sufficient to adequately increase their

⁸ Tung, Curran and Fanzo (2013) "Nutrition Sensitive Agriculture for Timor-Leste: A Compendium of Resources"

⁹ Tung, Curran and Fanzo (2013) "Nutrition Sensitive Agriculture for Timor-Leste: A Compendium of Resources"

adoption at the household and community level, this project will pilot the effects of conditionality on community development initiatives that have shown to have a higher demand.

Execution of the component will be done by community members encompassing all members of the households targeted, assisted by Agricultural Coordinators (AC), CNEs, consulted with suco councils¹⁰ and facilitated by the local NGO with support from the Ministry of Agriculture (MAF), MOH (including District Health Teams) and others as needed. Expected outputs include: (i) technical specifications and guidelines for each option of interventions; (ii) 200 communities with necessary inputs, training and demonstrations provided; and (iii) 200 communities completed the intervention(s) per plan.

Component 4: Monitoring, Evaluation, and Project Management (USD 0.48 million) The objectives of this component are to: (i) provide technical advisory services and other material support to facilitate implementation of nutrition specific and sensitive interventions by target communities; (ii) improve coordination among various actors through creation of communication flow map (e.g., ministerial counterparts, district teams, sucos, aldeias, etc.); and (iii) strengthen monitoring and evaluation activities associated with the verification and measurement of project results at the community level. Monitoring implementation plans, supervision, and verification of deliverables lies with CRS. Expected outputs include: (i) a simple results framework to direct supportive supervision of project implementation and monitoring system to facilitate systematic data collection, project implementation, coordination of multiple local implementing agencies, and ensure beneficiary accountability through feedback mechanisms for community use of monitoring data; (ii) quarterly progress reports including unaudited financial reports; and (iii) implementation completion and results report incorporating results of the final evaluation. The Monitoring and Evaluation (M&E) system will incorporate the community monitoring component to ensure beneficiary accountability and community ownership of information gathered and analyzed. The output indicators will be verified and finalized under Component 1 of this project, allowing communities to decide what information they want to record and monitor throughout the subsequent components of the project.

CRS will be responsible for contracting services for carrying out baseline and end-line surveys to measure the effects of the intervention on the targeted communities and households. Secondary data from existing sources such as the Demographic and Health Survey as well as the National Nutrition Survey for Timor-Leste conducted by UNICEF will also be used in the analysis of project level data so as assess the strategies to be scaled up after the completion of the pilot period.

¹⁰ Suco Councils are made up of the Suco Chief, the Aldeia Chiefs, two women representatives, two youth representatives (one male and one female) and one representative of the Lia Nain, who are traditional authorities in each Suco.

4. Project Location and salient physical characteristics relevant to the safeguard analysis

The project will target all communities (i.e. 287 aldeias) in 50 sucos that fall in the two lowest living standard groups¹¹ in the two eastern districts of Baucau and Viqueque.¹² These two districts have significantly higher proportion of sucos with the lowest living standard group.¹³ The project will primarily benefit an estimated number of 4,470 children under the age of two and 5,503¹⁴ pregnant and lactating women by increasing demand for and utilization of nutrition specific and sensitive interventions. The project will aim to achieve universal targeting of all children under the age of two and all pregnant and lactating women in targeted aldeias. Adding in the nutrition sensitive interventions, the project will benefit an estimated 70,000 people within those target communities, as well as 1,000 service providers¹⁵ who will also benefit from a community driven interventions(s) indirectly improving nutritional status and training, respectively.

5. Environmental and Social Safeguards Specialists

Mr. Virza S. Sasmitawidjaja (EASIS)

Ms. Francisca Melia Setiawati (EASIS)

¹¹ Asian Development Bank (2012). Timor-Leste's Least Developed Sucos

¹² While Oecussi has the highest proportion of sucos in lowest living standards, the proposed Project will target Viqueque and Baucau given the fact that it is a pilot project requiring a lot of technical assistance by the implementing agency and travel time between Viqueque and Oecussi is substantial.

¹³ The total number of population within the target area (i.e., sucos falling in the two lowest quintile in Baucau and Viqueque) is 72,305. The estimated number of children under the age of two living in the target areas based on DHS 2009/2010 and the Asian Development Bank's analysis is 4,470, while Census 2010 shows a higher number of children under the age of two (~7,000).

¹⁴ An average rate of women aged 15-49 currently pregnant in the lowest two wealth quintiles is 7.35% (DHS 2009/2010). Based on the population within those two quintiles in the target area, an additional 1,033 pregnant and lactating women will be targeted, in addition to the 4,470 households with children under age two. Adolescent girls aged 15-19 within the targeted communities will also be encouraged to attend any nutrition education/counseling sessions.

¹⁵ Service providers include community health workers (PSFs), agricultural extension workers (SEOs), community facilitators from implementing partner staff and Care Group volunteers.

6. Safeguard Policies Triggered	Yes	No
Environmental Assessment (OP/BP 4.01)	X	
Natural Habitats (OP/BP 4.04)		X
Forests (OP/BP 4.36)		X
Pest Management (OP 4.09)		X
Physical Cultural Resources (OP/BP 4.11)		X
Indigenous Peoples (OP/BP 4.10)	X	
Involuntary Resettlement (OP/BP 4.12)		X
Safety of Dams (OP/BP 4.37)		X
Projects on International Waterways (OP/BP 7.50)		X
Projects in Disputed Areas (OP/BP 7.60)		X

II. Key Safeguard Policy Issues and Their Management

A. Summary of Key Safeguard Issues

1. Describe any safeguard issues and impacts associated with the proposed project. Identify and describe any potential large scale, significant and/or irreversible impacts:

The project focuses on community mobilization/awareness raising (Component 1), community-based health and nutrition education and promotion (Component 2), and other interventions that will help the community members exercise practices that can eventually improve their nutritional status (Component 3 – i.e., nutrition sensitive interventions).

The physical investment of the project will be in small scale or households scale type of agricultural activities to improve the nutritional content of the communities. The likely types of investment that will be supported under Component 3 are promotion of organic and environmentally friendly garden farming, such as self-generating compost and organic pest control (integrated pest management); small garden size fish ponds and/or tank/used drums aquaculture in community lands. No pesticides or herbicide will be supported under the project; this and other activities that are not allowed by the project are listed in the project's negative list. The potential environmental impacts of the investments will be minimal, localized, and will be managed by adopting the best environmental practices. The implementing partner will prepare the ECOPs (environmental code of practices) as the environmental instrument, for each activity that will be promoted to the communities as a menu of options, upon which they will decide which one is more appropriate to their respective environmental conditions, as well as local livelihood practices. The ECOPs will be disclosed in both English and Tetum Language, and included in the Project Operation Manual (POM).

Given that this is a CDD project no involuntary land acquisition and resettlement is envisioned. Thus the project does not trigger OP 4.12. Most of the physical investment of the project will be on household scale in the form of small scale homestead gardening or fish pond by utilizing the beneficiary's own land/home garden to increase existing vegetable/livestock/aquaculture production. Any land acquisition, if needed, will be done on voluntary basis. If community demonstration plot is included in the final list of

interventions to be supported by the project, the project will use small pieces of government or community land, or if government land is not available, the project will temporarily rent voluntarily individual land for demonstration plots. The process of determining land for community demonstration plots will be conducted through a participatory process to ensure that all stakeholders are involved. The project will document step-by-step the consultation process in the Project Operation Manual (POM) to ensure any transactions are indeed voluntary. All consultation processes will be documented.

The project is triggering the Bank's Indigenous People Policy (OP 4.10). Ethnicity in Timor Leste is bound by language. Seventeen languages, derived from one of two broad language groups – Austronesian (Malaya – Polynesian) and Papuan (Melanesian) – are spoken across the country. The project will prepare a Social Assessment based on an existing, thorough and informative Social Assessment carried out by ADB indicating that no significant difference of cultural and social identity exist among the people who speak different languages. Since the project will have Indigenous People as overwhelming beneficiaries, a separate Indigenous People's Plan (IPP)/Indigenous Peoples Policy Framework (IPPF) is not required. Since the overwhelming majority of the beneficiaries are IPs, the project design will incorporate the elements of policy requirements, such as in Project Operational Manual (POM). The project uses an existing ADB's social assessment that provides thorough and informative social and economic profile of all districts in Timor Leste as a baseline.

The project location is in the two Eastern Districts of Baucau and Viqueque. The Macasae language is mother tongue of 70% of the population in Baucau District and the rest of the population speaks "other" language. About two-thirds of households are engaged in subsistence production, while less than half of the population having access to drinking water from an improved source. In Viqueque District there are three mother tongue groups, Mambae (40%); Tetum-terik (25%) and the rest speak "other" language. More than three-quarters of households are engaged in subsistence production and have access to drinking water.

Most of the poor are concentrated in rural areas and about three-quarters of the poor live in rural areas. Most of the poor are engaged in low-productivity farming. The proportion of poor engaged in the agriculture sector is very high at 78% and almost 90% of the rural poor depend on the agriculture sector. Thus increasing availability and diversity of farming inputs as well as improving access to markets have credible contributions toward poverty reduction.

Baucau District is located in the east of Timor Leste with the area's district is at 1,506 km². The district is divided into six sub-districts (Baguia, Baucau, Laga, Quelicai, Vemase, and Venilale), and a 2004 census population of 100,748. The average population density of the district is 67 people per km² and highest in Baucau sub-district (101 people per km²). An average household consists of 4.4 people. The district consists of 59 sucos, among them 26 sucos fall in the lowest living standard group. Baguia, Laga and Quelicai are sub-districts that have almost 60-70% of their suco with the lowest living standards. Only in Baucau sub-district do sucos fall in the middle and highest living standards.

Venilale sub-district has 12.5% sucos with the lowest living standards and Vemase sub-district has 28.6% sucos with lowest living standards. The Macasae language is the mother tongue of 70% of the population and is spoken in five of the six sub-districts. Other language such as Waima'a and Midiki are spoken in two sub-districts. Three-quarters of the population can speak Tetum and 40% can speak Bahasa Indonesia. Tetum and Bahasa Indonesia together are the main languages of a third of the population. Literacy levels are low but not the lowest; 47% of the population 18 years and older cannot read or write, slightly higher than the national figure of 46%. Disaggregating by sex shows that 54% of females and 40% of males are illiterate. In Baucau the poverty incidence is 22.3%, the second lowest poverty rate (after Lautern) in the country. The district accounts for 11.3% of the total population but only 5.1% of the total poor. While a third of the population does not consume enough food, this district has the second highest food security.

About two-thirds of households are engaged in subsistence production, with 68% involved in maize, 61% cassava and 70% in coconut. Baucau is the second largest rice producing district (57%). Some 39% grow various vegetables and some 67% grow various fruits, but only 16%, a relatively small proportion, grow coffee which makes Baucau along with Oecussi the third smallest coffee producing district. The economic activity of 39% of the population aged 12 years and older is farming, and accounts for the activity of 27% of females and 51% of males. Housework is the main economic activity of 17% of the population, accounting for a third of female activities and none of the activities of males. The unemployment rate in the district is the highest nationally at 14%.

Less than half of the district's population (41%) has access to drinking water from an improved source; this represents the third smallest proportion in the country. Some 41% of the population has access to basic sanitation (pit latrine, septic tank, flush toilet); and 29% of the population has electricity supplied from the national grid. In terms of dwelling type, some 59% of the population lives in houses with an iron or tin roof, and 31% of the population lives in dwellings which have walls made of bamboo, and some 22% of the population lives in dwellings with concrete walls.

Taking both public and private schools, there are 71 primary schools, 20 junior high schools and six secondary schools. With regard to health facilities, there are 16 health posts and six community health centers and a hospital in Baucau town. Access to facilities, based on average traveling times and average distance, is good with both the nearest health center and secondary school being between half and three-quarters of an hour away and the nearest primary school being half an hour away. The district has the lowest malnutrition rate for children under five years old, but the morbidity rate is one of the highest in the country at 24%.

Viqueque District is located in the eastern region and is the largest district in Timor Leste, accounting for 14% of the total area of the country, at 1,879 km². The district is divided into five sub-districts (Lacluta, Ossu, Uatucarbau, Watulari and Viqueque), and has a 2004 census population of 65,449. The average population density of the district is low at 35 people per km² and is highest in Watulari sub-district (58 people per km). Average household size is 4.3 persons. The district consists of 37 sucos, among them 17 sucos fall in the lowest living standard group. All sucos in Lacluta sub-district have the

lowest living standard, while other sub-districts (Ossu, Uatucarbau, watulari and Viqueque) more than half of the suco's number is suco with the lowest standard of living.

There are three mother tongue groups in the district: Mambae (40%); Tetum-terik (25%); and "other" language (32%). Some 88% of the population can speak Tetum and 45% can speak Bahasa Indonesia. Tetum-terik is spoken in two sub-districts, Nauti language is spoken in another two sub-districts, and Macasae is spoken in one sub-district. Literacy is slightly lower than the national rate at 51%; 49% of the population 18 years and older cannot read or write. 56% of females and 40% of males are illiterate. The poverty incidence in Viqueque is 43.4% and is the third lowest in the country. The district accounts for 5% of the total population but 4.4% of the total poor.

More than three-quarters of households are engaged in subsistence production, 86% in cassava, 87% in coconut, and 84% in maize. Households are also involved in production of higher-value crops such as vegetable (71%) and fruit (88%). The district is one of the largest fruit producing districts and is the district with the largest proportion of population engaged in rice production (78%). Less than a quarter of the population (21%) grows coffee. The agricultural sector accounts for 89% of the labor force (aged between 15 and 64 years), and the economic activity of 40% of the population aged 12 years and older is farming, and accounts for the activity of 20% of females and 60% of males. Housework is the main economic activity of a quarter of the population, accounting for 51% of female's activities (highest rate in the country). The unemployment rate in the district is 4.4%.

More than three-quarters of the population (82%) has access to drinking water from an improved source. Nearly half of the population (46%) has access to basic sanitation (pit, latrine, septic tank, flush toilet). Some 45% of the population has electricity supplied from the national grid, compared to the national rate of 37%. In terms of dwelling type, permanent houses make up half of the housing stock, a third of the population live in semi-permanent dwellings, and 19% of the population lives in traditional houses. About 60% of the population lives in houses with an iron or tin roof, and 19% live in dwellings with a palm or leaf roof. A large proportion of the population (41%) live in dwellings which have walls made of bamboo and some 39% of the population lives in houses with walls constructed of "other" materials (mostly earth/clay and timber).

There are 35 primary schools, including public and private schools, 10 junior high schools and four secondary schools. With regard to health facilities, there are 15 health posts and five community health centers. The closest hospital is located in Baucau. Access to facilities, is comparatively good with both the nearest health centre and secondary school being less than an hour away (43.3 and 47.4 minutes respectively), and the nearest primary school being 20 minutes away. The district has the lowest malnutrition rate for children under five years old in the country, but the morbidity rate is 26% and is higher than the national rate of 22%.

The project was designed to ensure the participation and inclusion of various groups (women, the poor, indigenous) in local level decision making process. In accordance with OP 4.10 the Bank task team conducted community consultations with a variety of stakeholders throughout Timor Leste (December 5, 2012) in order to provide free, prior

and informed consultation to broad community support for the project and fully explore the underlying causes of and varied responses to the challenge of maternal and child malnutrition. The recommendations from those findings are as follows:

- A real need and demand for a consistent production of consumables across the entire span of the year. Supporting the development of household kitchen gardens responds to this need (such as the 'keyhole garden').
- Storage of perishables is problematic. The great majority of households do not have access to refrigeration and rely on traditional drying and smoking of a limited number of staples such as corn. Provision of education in short-medium term storage options for perishables is a priority.
- Access to and storage of seeds is also problematic. Facilitation of access to a diversity of seeds and provision of simple seed storage technologies is prioritized, and will be closely coordinated with household kitchen garden activities.
- Surplus and storage values and habits are not usually oriented over the long-term. Food surpluses are generally consumed quickly, and the use of stored food (such as dried corn) when no fresh food is available results in a poor diet. Further, local perceptions of sufficiency mean that people will acknowledge insufficiency only in relatively extreme circumstances. Education on both these facets of nutrition is prioritized.

Inputs from these consultations were used in the design of the project. In-depth interviews were also conducted with a range of participants selected purposively from three districts, namely Aileu, Baucau and Ermera. Concurrent with the community consultations, a rapid mapping of relevant Civil Society Organizations (CSO) working in the field of nutrition and/or agriculture was also conducted. The consultation process will continue to be held during project implementation through participatory planning processes at aldeia/village level. Specific measures in the project design have translated into the use of an experienced non-governmental organization (NGO) as the implementing agency (Catholic Relief Service (CRS)) and community facilitators who will be trained by CRS to ensure that people's participation in and benefit from the project is through free, prior and informed consultations. As a Community-Driven Development project, the community will engage in every project stage to be able to participate, plan and implement nutrition specific interventions and nutrition specific interventions. The project will ensure that vulnerable people have the same chances of inclusion in all project cycles and in project benefits as others who are better off. Inclusion of the vulnerable groups in project implementation will be operationalized and detailed in the project operational manual.

The project will also promote local/indigenous knowledge and practices in improving farming/livestock/aquaculture productivity rather than introduce the new ones so that it will not adversely affect the social and economic conditions of the beneficiaries.

2. Describe any potential indirect and/or long term impacts due to anticipated future activities in the project area:

No indirect and/or long term impacts due to anticipated future activities in the project area are envisaged.

2. Describe any potential indirect and/or long term impacts due to anticipated future activities in the project area:

No indirect and/or long term impacts due to anticipated future activities in the project area are envisaged.

3. Describe any project alternatives (if relevant) considered to help avoid or minimize adverse impacts.

N/A

4. Describe measures taken by the borrower to address safeguard policy issues. Provide an assessment of borrower capacity to plan and implement the measures described.

The implementing agency is Catholic Relief Service (CRS) - Timor Leste who will be supported by CRS regional and HQ teams. CRS is considered well qualified with long experience on community based projects and has been implementing provisions underlying the Bank's safeguard policies such as consultation and community participation as a foundation for project implementation. The project will also build upon CRS's experience during the Community Based Adaptation (CBA) and Community Based Disaster Risk Management (CBDRM) projects that utilize participatory planning methodologies to allow communities to not only be at the forefront of problem analysis and identification but to ensure that integrated and participatory community action plans directly relate to the actual needs of project participants. CRS also has more than thirty years' working experience in Timor Leste.

5. Identify the key stakeholders and describe the mechanisms for consultation and disclosure on safeguard policies, with an emphasis on potentially affected people.

The key stakeholders are all communities living at project location (i.e. 287 aldeias in 50 sucos). At community level, the project will involve field staff and use facilitators/volunteers to reach a large number of communities in an efficient manner. Further consultations will be undertaken with the communities in the project locations, including translating project document such as project operation manuals in to local language and disclosing them at project location.

B. Disclosure Requirements Date

Environmental Assessment/Audit/Management Plan/Other:

Was the document disclosed prior to appraisal?	Yes
Date of receipt by the Bank	01/06/2014
Date of "in-country" disclosure	01/17/2014
Date of submission to InfoShop	01/17/2014
For category A projects, date of distributing the Executive	

Summary of the EA to the Executive Directors

Resettlement Action Plan/Framework/Policy Process:	
Was the document disclosed prior to appraisal?	N/A
Date of receipt by the Bank	
Date of "in-country" disclosure	
Date of submission to InfoShop	
Indigenous Peoples Plan/Planning Framework:	
Was the document disclosed prior to appraisal?	Yes
Date of receipt by the Bank	01/08/2014
Date of "in-country" disclosure	01/17/2014
Date of submission to InfoShop	01/17/2014
Pest Management Plan:	
Was the document disclosed prior to appraisal?	N/A
Date of receipt by the Bank	
Date of "in-country" disclosure	
Date of submission to InfoShop	
* If the project triggers the Pest Management and/or Physical Cultural Resources, the respective issues are to be addressed and disclosed as part of the Environmental Assessment/Audit/or EMP.	
If in-country disclosure of any of the above documents is not expected, please explain why:	
N/A	

C. Compliance Monitoring Indicators at the Corporate Level

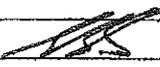
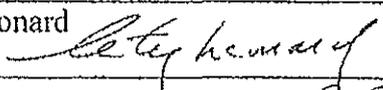
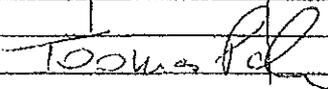
The project design has been reviewed and approved for incorporating OP 4.10 provisions.

OP/BP 4.01 - Environment Assessment			
Does the project require a stand-alone EA (including EMP) report?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
If yes, then did the Regional Environment Unit or Sector Manager (SM) review and approve the EA report?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Are the cost and the accountabilities for the EMP incorporated in the credit/loan?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
OP/BP 4.04 - Natural Habitats			
Would the project result in any significant conversion or degradation of critical natural habitats?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
If the project would result in significant conversion or degradation of other (non-critical) natural habitats, does the project include mitigation measures acceptable to the Bank?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
OP 4.09 - Pest Management			
Does the EA adequately address the pest management issues?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Is a separate PMP required?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>

Does the EA include adequate measures related to cultural property?	Yes []	No []	N/A [X]
Does the credit/loan incorporate mechanisms to mitigate the potential adverse impacts on physical cultural resources?	Yes []	No []	N/A [X]
OP/BP 4.10 - Indigenous Peoples			
Has a separate Indigenous Peoples Plan/Planning Framework (as appropriate) been prepared in consultation with affected Indigenous Peoples?	Yes []	No [X]	N/A []
If yes, then did the Regional unit responsible for safeguards or Sector Manager review the plan?	Yes []	No []	N/A [X]
If the whole project is designed to benefit IP, has the design been reviewed and approved by the Regional Social Development Unit?	Yes [X]	No []	N/A []
OP/BP 4.12 - Involuntary Resettlement			
Has a resettlement plan/abbreviated plan/policy framework/process framework (as appropriate) been prepared?	Yes []	No [X]	N/A []
If yes, then did the Regional unit responsible for safeguards or Sector Manager review and approve the plan/policy framework/process framework?	Yes []	No []	N/A [X]
OP/BP 4.36 - Forests			
Has the sector-wide analysis of policy and institutional issues and constraints been carried out?	Yes []	No []	N/A [X]
Does the project design include satisfactory measures to overcome these constraints?	Yes []	No []	N/A [X]
Does the project finance commercial harvesting, and if so, does it include provisions for certification system?	Yes []	No []	N/A [X]
OP/BP 4.37 - Safety of Dams			
Have dam safety plans been prepared?	Yes []	No []	N/A [X]
Have the TORs as well as composition for the independent Panel of Experts (POE) been reviewed and approved by the Bank?	Yes []	No [X]	N/A []
Has an Emergency Preparedness Plan (EPP) been prepared and arrangements been made for public awareness and training?	Yes []	No [X]	N/A []
OP/BP 7.50 - Projects on International Waterways			
Have the other riparians been notified of the project?	Yes []	No []	N/A [X]
If the project falls under one of the exceptions to the notification requirement, has this been cleared with the Legal Department, and the memo to the RVP prepared and sent?	Yes []	No []	N/A [X]
What are the reasons for the exception? Please explain:	Yes []	No []	N/A [X]
Has the RVP approved such an exception?	Yes []	No []	N/A [X]
OP/BP 7.60 - Projects in Disputed Areas			

Has the memo conveying all pertinent information on the international aspects of the project, including the procedures to be followed, and the recommendations for dealing with the issue, been prepared	Yes []	No []	N/A [X]
Does the PAD/MOP include the standard disclaimer referred to in the OP?	Yes []	No []	N/A [X]
The World Bank Policy on Disclosure of Information			
Have relevant safeguard policies documents been sent to the World Bank's Infoshop?	Yes [X]	No []	N/A []
Have relevant documents been disclosed in-country in a public place in a form and language that are understandable and accessible to project-affected groups and local NGOs?	Yes [X]	No []	N/A []
All Safeguard Policies			
Have satisfactory calendar, budget and clear institutional responsibilities been prepared for the implementation of measures related to safeguard policies?	Yes [X]	No []	N/A []
Have costs related to safeguard policy measures been included in the project cost?	Yes [X]	No []	N/A []
Does the Monitoring and Evaluation system of the project includes the monitoring of safeguard impacts and measures related to safeguard policies?	Yes [X]	No []	N/A []
Have satisfactory implementation arrangements been agreed with the borrower and the same been adequately reflected in the project legal documents?	Yes [X]	No []	N/A []

D. Approvals

Signed and submitted by:	Name	Date
Task Team Leader:	Eileen Brainne Sullivan 	01/07/2014
Environmental Specialist:	Virza S. Sasmitawidjaja	01/07/2014
Social Safeguard Specialist	Francoisca Melia Setiawati	01/07/2014
Additional Environmental and/or Social Development Specialist(s):		
Approved by:		
Regional Safeguards Coordinator:	Peter Leonard 	01/15/2014
Comments:		
Sector Manager:	Toomas Palu 	01/16/2014
Comments:		