



Engaging Civil Society in Health System Strengthening in Timor-Leste: Recommendations from the USAID Health System Sustainability Activity

Local Health System Sustainability Project
Task Order 1, USAID Integrated Health Systems IDIQ



Local Health System Sustainability Project

The Local Health System Sustainability Project (LHSS) under the USAID Integrated Health Systems IDIQ helps low- and middle-income countries transition to sustainable, self-financed health systems as a means to support access to universal health coverage. The project works with partner countries and local stakeholders to reduce financial barriers to care and treatment, ensure equitable access to essential health services for all people, and improve the quality of health services. Led by Abt Associates, the five-year project will build local capacity to sustain strong health system performance, supporting countries on their journey to self-reliance and prosperity.

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Introduction

The National Health Sector Strategic Plan 2011-2030 is a guide to ensure all people in Timor-Leste, of whatever gender, age, place of residence or socio-economic status, will have equitable access to good-quality, basic and essential health services provided in (and beyond) facilities that are well equipped and staffed by competent health professionals, and information that empowers them to make informed choices about matters affecting the health and well-being of themselves, their families and their communities.¹¹ The Ministry of Health (MoH) has a crucial leadership role in achieving the health sector agenda and improving health outcomes. For MoH policies and health programming to be responsive, the MoH must understand communities' health needs, hear the voices of citizens, and engage in dialogue with them. Civil society organizations (CSOs) are positioned to play an intermediary role, facilitating relationships and enabling information sharing from the grassroots to national policymakers, and vice versa, thereby contributing vitally to the MoH's aims and objectives.

Timor-Leste has a thriving civil society, with many local CSOs working across communities to deliver social services, conduct research on the changing development context, and advocate for key public policy issues. The country has an umbrella body for NGOs, called *Forum Organizaçao Naun Governental Timor-Leste* (FONGTIL), with more than 200 local CSOs as its registered members. Of these, 43 CSOs are engaged in health-related programming and contribute to improving water, sanitation, and hygiene; maternal and child health; and nutrition. The USAID Health System Sustainability Activity in Timor-Leste is working with FONGTIL and its health CSO members to enable their improved collaboration with the MoH for health system strengthening. In May 2022, the USAID Activity and FONGTIL came together to establish *Rede Ba Saude Timor-Leste* (REBAS-TL, or the Timor-Leste Health Network). REBAS-TL will help to convene health CSOs, create space for CSOs to share their activities, coordinate and learn from one another. In addition, REBAS-TL will strengthen CSOs to better engage with their communities and constituents, conduct research to inform evidence-based policies, and jointly advocate with lawmakers and health program managers to shape a sustainable health system in Timor-Leste.

This document, prepared by the USAID Health System Sustainability Activity in consultation with REBAS-TL members, explores the issues facing the Timorese health system, identifies the existing mechanisms for engagement between the MoH and CSOs, and offers recommendations to improve the engagement. The document is based on the Activity's desk review and key informant interviews with REBAS-TL members.

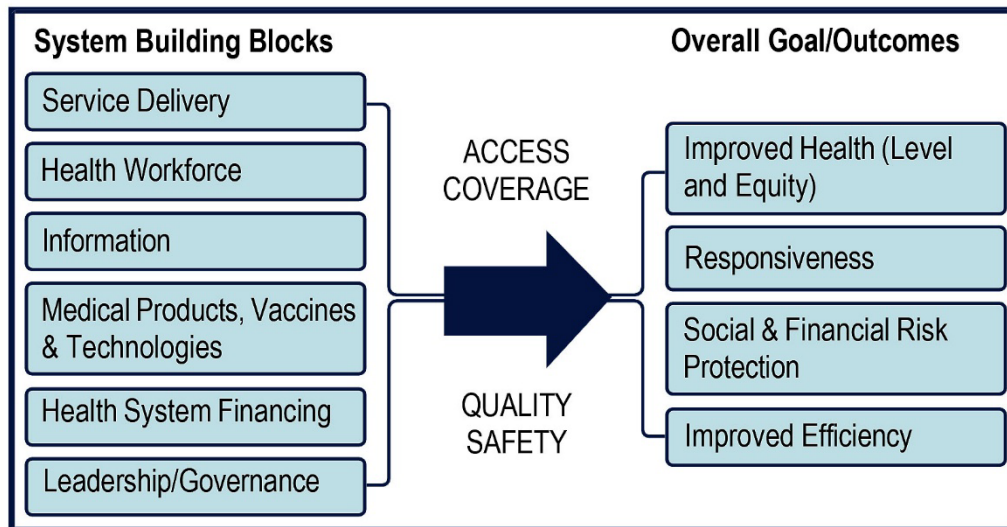
¹¹ Timor-Leste Ministry of Health. 2020. National Health Sector Strategic Plan 2020-2030 towards a healthy East Timorese people in a Healthy Timor-Leste. Timor-Leste Ministry of Health.



Areas for CSO action in Timor-Leste’s health system

The need for health system strengthening is evident, given the slow progress Timor-Leste has made on key health indicators such as nutrition, child mortality, and family planning.² To identify health system strengthening priorities for Timor-Leste, the USAID Health System Sustainability Activity (the Activity) used the World Health Organization’s health system building blocks³³ framework (see Figure 1) to do the orientation to Health CSOs and raise their understanding about their roles to strengthen it. The Activity collected information from health CSOs through discussions at the REBAS-TL workshop and key informant interviews to identify issues in each of the six building blocks with an eye on aspects where CSOs can contribute and advocate for improvement.

Figure 1: WHO’s health system building blocks framework



Source: World Health Organization. <https://extranet.who.int/nhptool/BuildingBlock.aspx>

Health service delivery

Health service provision and delivery of interventions, such as to enable safe motherhood, prevent child malnutrition, promote reproductive health, etc., are crucial to improved health outcomes. CSOs have an important role to play in ensuring the health system remains accountable, equitable, affordable, and delivers quality health services. Discussions with health-sector stakeholders, including CSOs, highlighted the following as some major challenges impeding people’s access to quality health care:

² The Local Health System Sustainability Project (LHSS) under the USAID Integrated Health Systems IDIQ. 2022 (forthcoming). “Building better community behaviors: A review of social and behavior change interventions and recommendations for government stakeholders and local communities in Timor-Leste to maximize effectiveness of social and behavior change programs.” Rockville, MD: Abt Associates.
³ World Health Organization. <https://extranet.who.int/nhptool/BuildingBlock.aspx>



- Lack of public awareness about citizens' right to health services and health products which health managers and providers can take advantage of, lack of information among citizens leading to less demand, and limited information sharing between health providers and clients putting the clients in a poor position to evaluate the quality of care;
- Absence of practices (such as client complaint box) to receive and follow-up on client's grievances/feedback about services.

Human resource for health

A country's ability to achieve its health goals depends in large part on the availability of a skilled and motivated health workforce to organize and deliver health services, including in remote, rural areas. Timor-Leste has done significant work to increase the capacity of its health workforce, but there continue to be challenges in recruiting, maintaining, and monitoring human resources for health (HRH), especially in rural areas. Two of the key challenges CSOs articulated about HRH are:

- Provider absenteeism, which is a major obstacle to public health service delivery in rural areas; and
- Lack of infrastructure (place of stay) at health facilities for medical professionals at health sites, especially in rural areas; this contributes to absenteeism and poor quality of care.

Health management information system

Data should be the basis for decision-making about health policies and programs. The health management information system (HMIS) should provide policymakers reliable and timely information about the progress health interventions are making toward achieving targets, meeting objectives and assisting health managers in their day-to-day decision making. The key challenges on this front are:

- Poor or inaccurate data entry would not represent the actual delivery and quality of services unless it is independently verified; and
- Absence of established practices to regularly share health information and data publicly, including CSOs.

Medicines and essential medical supplies

Essential medicines, medical supplies, and medical products are fundamental to the reliable performance of the health care delivery system. The health system's goal should be to ensure timely, affordable, and equitable access to safe, quality, and effective medicines, vaccines, and other consumables. The health CSOs we interviewed mentioned the following barriers in this regard:

- Stock-outs of drugs and medical supplies;
- Long drug approval process by SAMES (National agency for drug procurement) which prevents people from accessing potentially life-saving drugs;



- Shortage of essential drugs at public hospitals, while being available at private clinics; this leaves people with no choice than to spend out-of-pocket to purchase essential drugs from private clinics; and
- Lack of public awareness about people's right to quality health products.

Health financing

Health financing is fundamental to a health system's ability to maintain its health care services, health facilities, and health workers. A health system should aim to mobilize, accumulate, and allocate its resources optimally and efficiently to ensure that citizens get the required health services without risking financial hardship. As articulated by health CSOs, the following issues impede the Timor-Leste health system's ability to use its health resources optimally:

- Lack of public information about how the government funds for health are being spent to meet health priorities and goals;
- Inaccessibility of budget documents to ordinary citizens, making it difficult for them to understand whether budget allocations are honoring the government's policy commitments; and
- Limited number of CSOs undertaking health budget analysis.

Governance

Effective health system governance ensures that strategic policy frameworks exist and are combined with effective oversight, coalition building, regulation, attention to system design, and accountability.⁴⁴ Timor-Leste's National Health Sector Strategic Plan 2011–2030 defines the MoH's stewardship roles in governance, including decentralization and health services configuration. Different roles under governance were identified in review as shown (Fig 2). As the MoH strives to improve health governance, including by partnering with stakeholders such as CSOs, it must consider and address the following challenges:

- Limited formal structures or processes (such as health boards both at national and sub-national levels) for CSOs to participate and have their voices heard;
- Absence of a partnership or coordination strategy in health sector, making it difficult for CSOs to effectively engage; and
- Absence of health governance-specific systematic engagement mechanisms like meetings and forums.

⁴ WHO (World Health Organization). Everybody's business: Strengthening health systems to improve health outcomes, WHO's framework for action. Geneva: World Health Organization; 2007.



Figure 2. Aspects of Good Governance



Action points for CSOs

- To be able to raise people’s concerns before relevant authorities, CSOs need to understand the roles, functions, and structure (organogram) of the MoH’s directorates, units, and agencies responsible for various elements and functions of the health system.
- CSOs need to themselves understand citizens’ health rights in order to inform and support communities on citizens’ rights to basic health services and on mechanisms to share their experiences of care and register grievances.
- Timorese civil society would benefit from raising their understanding of the health care system in Timor-Leste, the National Health Sector Strategic Plan 2011–2030, and the Health Financing Strategy 2019–2023. This will help CSOs with information in their health advocacy activities.
- CSOs ability to advocate for improved health financing would be improved by gaining a better understanding of how public health finances are managed and how financing decisions are made in Timor-Leste.
- CSOs and the MoH agreement on meaningful engagement mechanisms and forums would promote regular dialogue and action for health system strengthening. CSOs could use such forums to do pre- and post-budget hearing, provide advice on budget priorities, advocate for people’s right to quality medical services and products, secure access to health information/data, promote social audit, and communicate about the status/functioning of health facilities to relevant authorities.



Existing Mechanisms for CSO Engagement

Several mechanisms already exist to promote regular dialogue and information sharing between CSOs and the MoH. Figure 3 summarizes the different mechanisms the MoH already has in place that CSOs can participate in and advocate to influence health-sector priority setting and policymaking. These MoH mechanisms include municipal consultative and *Conselho do Suco* (village council) meetings, MoH's thematic working groups, and the parliament committee on state budget, among others. CSOs would benefit from familiarizing themselves with these mechanisms and actively seeking to participate in them to highlight and address the community's health needs and issues.

Figure 3: MoH's engagement mechanisms for CSOs

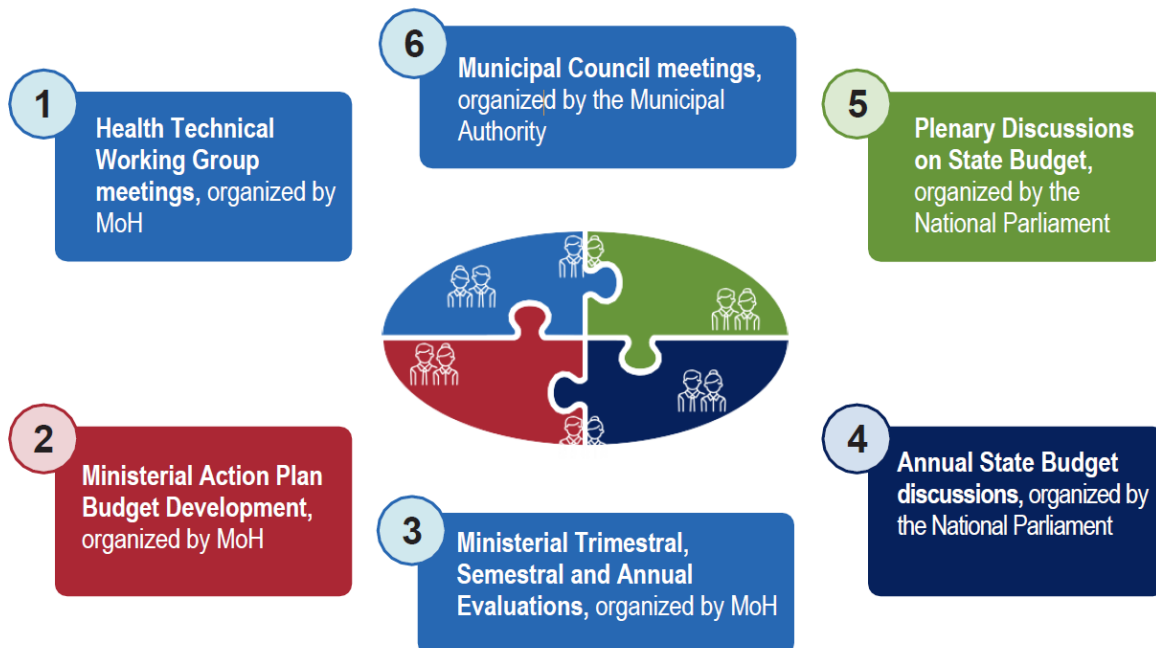
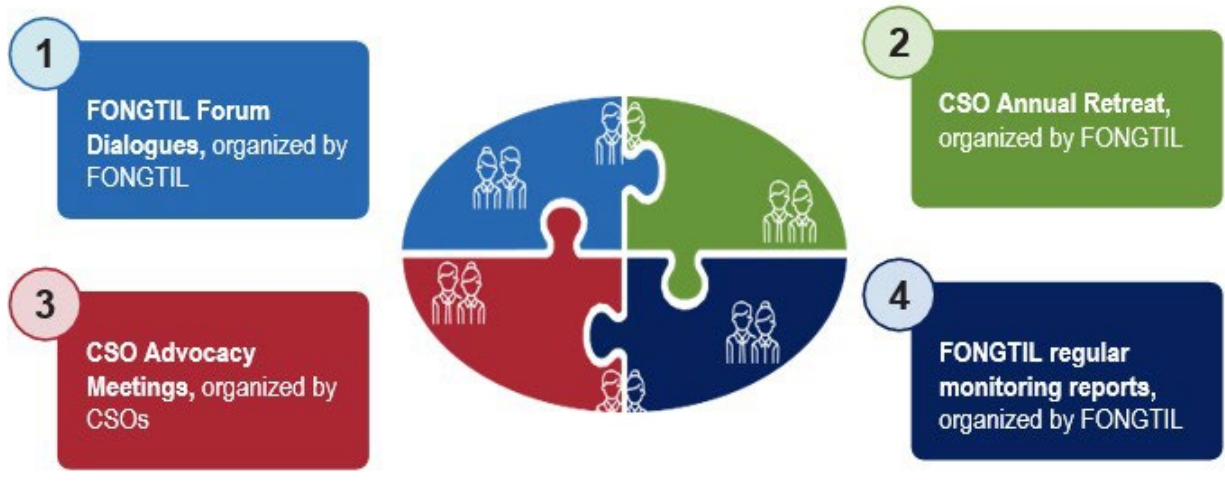


Figure 4 summarizes the mechanisms FONGTIL provides for CSOs to participate in dialogues with the government and to learn from each other's work. These forums provide health CSOs the opportunity to bring in community voices and put forward their issues before government officials. The forums include FONGTIL's annual national retreat between CSOs and government and sectoral dialogues between CSOs and line ministries. In addition, in the Special Administrative Region of Oecusse-Ambeno, CSOs have established an advocacy forum to facilitate local community leaders to engage with the Regional Secretary for Health and raise the health care-related problems the community encounters. Through the forum there is collective ownership between community, CSOs and government in jointly responding to basic needs including health.



Figure 4: FONGTIL's forums for CSO-government engagement

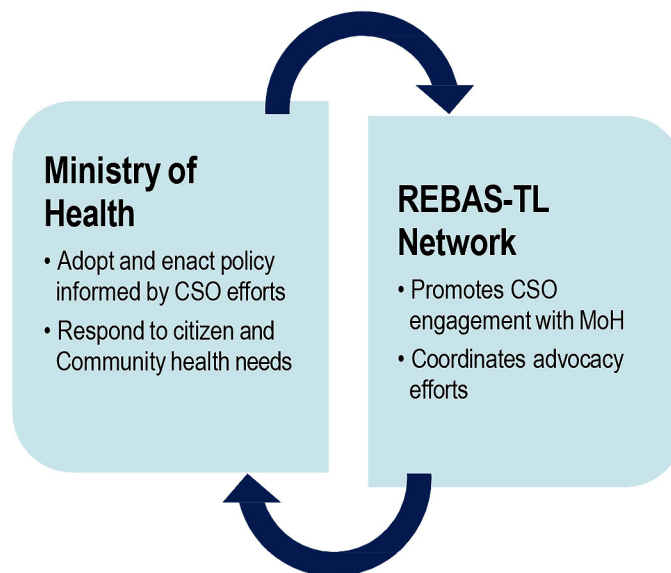




Recommendations

CSOs can bring forward the voices of citizens and communities, including those marginalized by society, to policy circles and can thus be vital partners for the MoH's efforts to strengthen and transform the health landscape. Realizing the full potential of MoH-CSO collaboration requires regular engagement, mutual trust, and commitment. This section presents recommendations for both the MoH and CSOs, represented by REBAS-TL, the health CSO network that was formally launched in May 2022. REBAS-TL will promote regular and systematic engagement between health CSOs and the MoH, amplifying the voices of communities in the design, planning, and budgeting of health programs at all levels.

Figure 5: Civic Engagement Model in Health System strengthening



Recommendations for the MOH:

For the Health CSOs and MoH to engage more effusively in health system strengthening, the Activity has collected information from Health CSOs and recommend for MoH to raise the awareness of its directorates and units about the important role CSOs can play in health system strengthening. The specific effort to improve CSO engagement for each health system building block is summarized below:

- **Health governance:** Establish a process to include CSOs' inputs in policy design and program implementation, and welcome feedback from CSOs to improve health governance.
- **Health service delivery:** Include CSOs in program planning, implementation, monitoring, and evaluation.
- **Medicines and essential medical supplies:** Mobilize CSOs to interact with the community about their access to drugs and medical supplies, and to check on health facilities to ensure drug availability.
- **Health management information system:** Share data with CSOs to improve their awareness of health interventions' progress and challenges, thereby enabling them to undertake evidence-based advocacy with the government.



- Human resources: Enable CSOs to regularly interact with human resources directors of the MoH and medical professionals to better understand the roles and benefits attributed to the medical professionals and issues encountered. CSOs could then assist citizens to properly demand their rights to quality health services. Likewise, CSOs could contribute in advocating to the national government to protect and promote the rights of medical professionals in the field.
- Health financing: Increase interactions between CSOs with Directors of Health Budgeting and Planning on how government funds are being budgeted and utilized; this can enable CSOs to assist in monitoring health sector budget implementation and to advocate to the national government for increased health sector budget allocation.

Recommendations for REBAS-TL

- Work closely with member health CSOs to improve their capacities to engage with health authorities at national and municipality levels.
- Plan for capacity building of CSO members to build their understanding of health system strengthening, skills for evidence-based advocacy, and technical knowledge on such aspects as how public health finances are managed and how budgeting decisions made.
- Support CSO members in understanding the role of each directorate and unit at the MoH and facilitate interactions.