

# **LESOTHO MULTI-SECTORAL NUTRITION GOVERNANCE CAPACITY ASSESSMENT REPORT**

**Food and Nutrition Coordination Office (FNCO)**

**FINAL REPORT**

**April 2018**

## LIST OF ABBREVIATIONS

<b>CA</b>	Capacity Assessment
<b>DFNCO</b>	District Food and Nutrition Coordination Office
<b>DHIS</b>	District Health Information System
<b>DHS</b>	Demographic Health Survey
<b>DMA</b>	Disaster Management Authority
<b>ECCD</b>	Early Childhood Care and Development
<b>FAO</b>	Food and Agriculture Organisation
<b>FNCO</b>	Food and Nutrition Coordination Office
<b>GDP</b>	Gross Domestic Product
<b>GHI</b>	Global Hunger Index
<b>GoL</b>	Government of Lesotho
<b>HDI</b>	Human Development Index
<b>IEC</b>	Information Education and Communication
<b>LDHS</b>	Lesotho Demographic Health Survey
<b>LUNDAP</b>	Lesotho United Nations Development Assistance Plan
<b>MoAFS</b>	Ministry of Agriculture and Food Security
<b>MoET</b>	Ministry of Education and Training
<b>MoH</b>	Ministry of Health
<b>MQ-SUN</b>	Maximising the Quality for Scaling Up Nutrition
<b>MUAC</b>	Mid Upper Arm Circumference
<b>NSDP</b>	National Strategic Development Plan
<b>NSFP</b>	National School Feeding Programme
<b>NSS</b>	Nutrition Surveillance System
<b>REACH</b>	Renewed Efforts Against Child Hunger and undernutrition
<b>SDG</b>	Sustainable Development Goal
<b>SUN</b>	Scaling Up Nutrition
<b>UN</b>	United Nations
<b>UNICEF</b>	United Nations Children's Fund
<b>WASH</b>	Water Sanitation and Hygiene
<b>WFP</b>	World Food Programme
<b>WHO</b>	World Health Organisation

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## FOREWORD

Lesotho's commitment to a healthy and well-developed human resource base is well articulated in the Vision 2020. The Food and Nutrition Security Policy (2016), proposed Food and Nutrition Strategy and the Zero Hunger Strategic Review Report (2018) all provide a framework to address the multi-dimensional causes and consequences of malnutrition. As a country, government has demonstrated its commitment to achieve the World Health Assembly Targets 2025, the African Union Agenda 2063 Goals as well as the Sustainable Development Goal (SDG) target 2.2 -to end all forms of malnutrition by 2030.

Lesotho's long-term commitment to prioritizing food and nutrition security through multi-sectoral action is thus well established. This Capacity Assessment Report is also another firm foundation on which stakeholders from a variety of sectors can engage, build partnerships and map comprehensive approaches to food and nutrition security. The government through the Food and Nutrition Coordinating Office(FNCO) and with support from Renewed Efforts Against Child Hunger and undernutrition (REACH) commissioned this multi-sectoral nutrition governance capacity assessment.

The purpose of the capacity assessment (CA) was to assess FNCO's capacity to leverage a multi-sectoral and multi-stakeholder nutrition coordination process while ensuring effective engagement of all key actors. The assessment was also to identify gaps in capacity in the line ministries and among stakeholders to effectively engage in the Scaling Up Nutrition (SUN) process at all levels. Addressing gaps in capacity for multi-sectoral nutrition coordination is of prime importance for Lesotho. Although trends in malnutrition indicate that chronic and acute malnutrition in children under five years have decreased since 2004, stunting remains high at 33.2 percent.

The CA identified a number of capacity and skills gaps in the set up of FNCO and other key Ministries, the enabling environment in terms of legal and policy frameworks, challenges in nutrition funding and inadequate information systems for evidence-based decision making. Findings of the CA reiterate similar issues from previous commissioned studies by government and development partners. Thus, making tackling these gaps an utmost priority for government.

I therefore urge all stakeholders, Government, Non-Governmental Organizations, Civil Society, Academia and our Development Partners, to join efforts in order to curb this endemic situation. Once we all work in partnership in implementation of the recommendations in the Capacity Assessment report, we can begin to tackle all the causes of malnutrition in a coordinated and synergistic way hence achieve the set targets of the SDG's.

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Honourable Minister to Prime Minister's Office  
**Mr. Temeki Tsolo (MP)**

## **ACKNOWLEDGEMENTS**

Capacity assessment was commissioned in August 2017, through REACH support with the aim of focusing primarily on the Food and Nutrition Coordinating Office's (FNCO) capacity to leverage multi-sectoral and multi-stakeholder nutrition coordination process while ensuring effective engagement of all key actors. The capacity assessment (CA) was also engaged to identify gaps in capacity for the line ministries and stakeholder to effectively engage in SUN process at all levels. This was one of the recommendations of the situation analysis of nutrition in Lesotho (2015) by Maximising the Quality for Scaling Up Nutrition (MQ-SUN)<sup>1</sup> conducted in 2015.

This Capacity Assessment was prepared by the national consultant Makholu Matete and edited by Sethabiso Gandure, under the stewardship of; Masekonyela Sebotsa (Director of Food and Nutrition), Maseqobela Williams (National REACH Facilitator). Additional thanks are extended to the following Lesotho UN Head of Agencies; Mary Njoroge (WFP), Marian Yan (WFP), Cornelia Atsyor (WHO), Yves Klompenhouwer (FAO) and Nadi Albino (UNICEF) for their guidance.

These efforts were spearheaded and jointly coordinated by Tania Goossens of the UN Network for SUN/REACH Secretariat, under the direct leadership of the then Regional REACH Facilitator Joyce Njoro.

Special thanks are given to the following REACH/UNN focal points, who through their seamless efforts provided with their technical expertise, information and guidance in terms of content of this document during the process of; shared drafts, validation and elicit feedback, they are: Merlyn Chapfunga (WFP), Lineo Mathule (UNICEF), Mantsane Bolepo Tsoloane (WHO), Mokitinyane Nthimo (FAO), Mpho Lifalakane (REACH Focal Point-FNCO), Ntebaleng Mothae (Capacity Assessment Focal Point-FNCO), all FNCO staff and the nutrition stakeholders- at- large , who participated fully, providing their views through which they constituted the findings and recommendations of this assessment.

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**Principal Secretary- Prime Minister's Office**

**Lechoo Setenane (MR.)**

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<sup>1</sup> The situation analysis of nutrition in Lesotho was conducted by Maximising the Quality for Scaling Up Nutrition (MQ-SUN), to increase understanding of governance, accountabilities and capacity related issues. It was conducted following a request for technical assistance by the SUN focal point to the SUN Movement Secretariat to advance multi-sectoral nutrition efforts in Lesotho.

## **EXECUTIVE SUMMARY**

### **Introduction**

The Government of Lesotho (GoL) is committed to addressing hunger and undernutrition. This has been demonstrated by the many policy frameworks and programmes that are in place, most importantly Vision 2020 that seeks to ensure a healthy and well-developed human resource base. The Food and Nutrition Security Policy (2017), the proposed Food and Nutrition Strategy and the Zero Strategic Review Report (2018) all provide a framework to address the multi-dimensional causes and consequences of malnutrition. All these high-level initiatives and many others symbolize GoL's willingness to achieve the World Health Assembly targets 2025, the African Union Agenda 2063 Goals as well as the Sustainable Development Goal (SDG) target 2.2 -to end all forms of malnutrition by 2030.

Indeed, Lesotho is among the seven countries in the world that has shown progress in improving child nutrition outcomes, as evidenced by the 6-percentage point reduction in stunting in the past five years. However, the stunting rates still remain unacceptably high at 33.2 percent among children under 5, indicating an underlying food and nutrition security challenge. Similarly, micronutrient deficiencies among children aged 6 to 59 months particularly iron deficiency anaemia stands at 51 percent. In addition, over 27 percent of girls and women and 14 percent of boys and men in the 15-49 age range are also anaemic. Hence, the GoL is intensifying efforts towards improving implementation of policies and programmes on the ground and through the Food and Nutrition Coordination Office (FNCO), and with support from Renewed Efforts Against Child Hunger and undernutrition (REACH), commissioned this multi-sectoral nutrition governance capacity assessment (CA).

### **The purpose of the Capacity Assessment**

The purpose of the capacity assessment was to assess FNCO's capacity to leverage a multi-sectoral and multi-stakeholder nutrition coordination process while ensuring effective engagement of all key actors. The assessment was also to identify gaps in capacity in the line ministries and among stakeholders to effectively engage in the Scaling Up Nutrition (SUN) process at all levels. Capacity was assessed at individual and organizational (FNCO and key Ministry focal points) levels. The capacity assessment dimensions investigated included the following: (i) Institutional set up of FNCO and key Ministries; (ii) Capacity and skills (functional and technical skills); (iii) Enabling Environment; (iv) Evidence-based decision-making. Data was collected through a participatory and highly consultative process at national, district and community levels.

### **Key Findings**

Nutrition programmes are located across several ministries that have food and nutrition security mandates. The key ministries with nutrition units are: Ministry of Health (MoH), Ministry of Agriculture and Food Security (MoAFS) and Ministry of Education and Training (MoET). The FNCO which is located in the Cabinet Office is responsible for providing strategic leadership and coordination to the sector.

*Institutional set up of FNCO and Key Ministries:* There is limited understanding of the official mandate for the FNCO and this has contributed to the non-functionality of several committees and taskforces related to nutrition activities. There are no systems of effective communication for internal and external stakeholders nor systems of feedback. In addition, FNCO is under-resourced in terms of basic communication infrastructure. Accountability systems that relate to the form of a performance management within government is weak. Financial resources, equipment and infrastructure are insufficient severely lacking to support operational activities of the FNCO. In fact, there is insufficient financial/budget support from the government.

*Capacity and Skills:* As a coordinating entity, the FNCO does not have the human resources or mandate to implement programmes at the community level. Sectors and NGOs serve as the primary implementers of nutrition-specific and sensitive interventions. FNCO has insufficient capacity with regards to coordination and harmonization of the multi-sectoral approach to planning, implementation, and monitoring of nutrition interventions. Lack of clarity and overlap in roles and responsibilities of nutrition staff in different sectors is resulting in inefficiencies and gaps; there is inadequate availability of skilled staff for nutrition coordination and governance. The nutrition units within key ministries have inadequate nutritionists at national and district levels. The structure of the FNCO lacks experienced senior managers with functional skills and lacks technical capacity at national and district levels to guide and direct staff and all key stakeholders in the sector.

*Enabling environment:* There is weak legal and policy framework in the country which do not adequately provide an enabling environment for multi-sectoral coordination of nutrition. This apparent gap emphasizes the need for nutrition to be mainstreamed in all policies, frameworks and strategies.

*Evidence based decision making:* FNCO is responsible for monitoring and tracking the progress of cross-sectoral actions in nutrition. There is an information management system but it functions only sporadically, has proven to be unreliable with regards to informing effective planning and continuous monitoring of programmes and it has also proven too demanding for FNCO to maintain. FNCO technical staff do not have the relevant skills capacity to manage all the components of the system and they still lack ability to trouble shoot and resolve most problems on their own.

## **Recommendations**

*Revitalize FNCO's overall coordination architecture:* There is a need to review and to reform the governance structures for multi-sectoral coordination as well as strengthening multi-sectoral coordination by redefining of roles and responsibilities of all stakeholders.

*Elevate the FNCO to a Food and Nutrition Commission:* To strengthen the governance structures for multi-sectoral coordination of nutrition, it is recommended that Government elevate the FNCO into a Food and Nutrition Commission/Authority which will be commissioned by an act of Parliament. It is recommended

that a board be constituted to play an oversight role over Food and Nutrition Commission. Under this arrangement, the current Food and Nutrition Coordinating Office (FNCO) will act as a Secretariat.

Enhance high-level political commitment on nutrition: It is recommended that a cabinet sub-committee on multi-sectoral nutrition be formed and chaired by the Prime Minister to provide political support and guidance to scaling up nutrition efforts. In addition, a Principal Secretaries Committee for multi-sectoral nutrition can be established by the Government so that they may advise and support scaling -up actions through their respective ministries.

Implement a capacity building plan for FNCO and partners: The elevation of FNCO to the Food and Nutrition Commission should also include capacity building for staff through in-service training and long-term training where required, developing systems for effective operations of the secretariat and adequate resourcing for secretariat. The trainings should extend to staff of focal points in key Ministries who are members of the multi-stakeholder platform.

Strengthen integration of nutrition in key Ministries: There is need to support integration of nutrition in the Ministry of Agriculture and Food Security through the implementation of the food and nutrition strategy. A capacity assessment should be considered to assess the role of the Nutrition Unit in the Ministry of Health and the resources available. In the Ministry of Education, the Early Childhood Care and Training (ECCD) has developed a comprehensive policy and strategy to guide its actions but there is need for increasing the number of qualified human resources.

Increase funding towards nutrition: Government needs to earmark 3% of the annual budget towards nutrition activities in all key ministries to facilitate scaling-up of nutrition in all ministries. Development partners ought to be encouraged to commit themselves to supporting all key ministries to undertake capacity assessments, support capacity building of the units through providing technical expertise and financial resources for nutrition activities.

Strengthen nutrition Evidence-Based Decision Making: FNCO should be supported by government and development partners in the development of a robust and sustainable nutrition surveillance system. Nutrition studies must be undertaken in the interim periods to supplement the Demographic Health Surveys (DHS ). FNCO together with institutions of higher learning should review and develop a nutrition research agenda.

Develop an Advocacy and Resource Mobilization Strategy: An advocacy strategy and Resource Mobilization strategy will be required to address the nutrition funding limitations

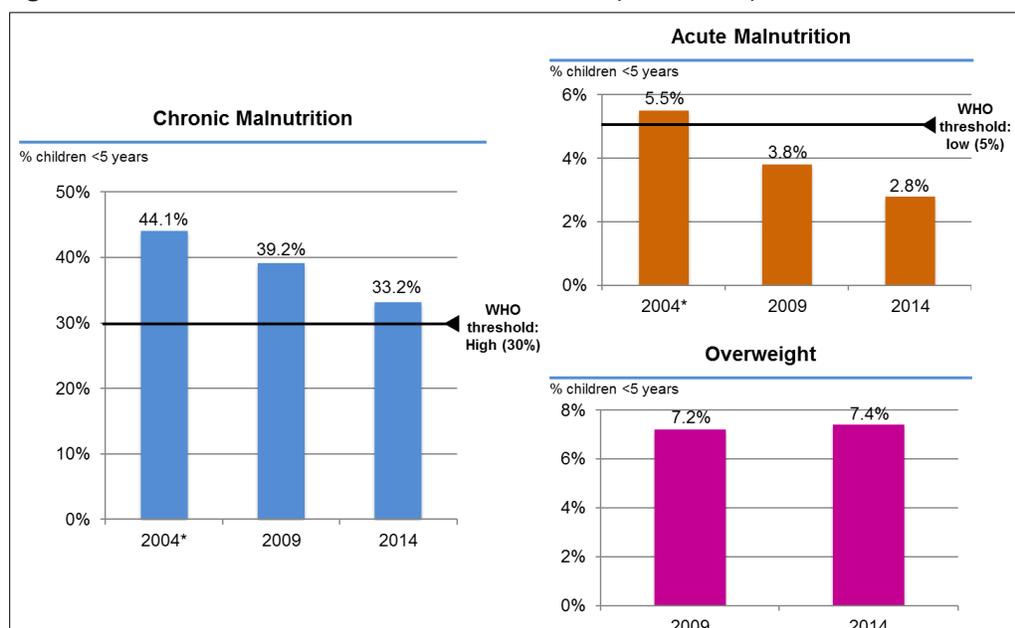
## SECTION 1. INTRODUCTION

### 1.1 Background

The Government of Lesotho (GoL) is committed to addressing hunger and undernutrition. This has been demonstrated by the many policy frameworks and programmes that are in place. The most important is the Vision 2020 that seeks to ensure a healthy and well-developed human resource base. The Food and Nutrition Security Policy (2017), proposed Food and Nutrition Strategy and the Zero Strategic Review Report (2018) all provide a framework to address the multi-dimensional causes and consequences of malnutrition. All these high-level initiatives and many others symbolize GoL's willingness to achieve the African Union Agenda 2063 Goals as well as the Sustainable Development Goal (SDG) target 2.2 -to end all forms of malnutrition by 2030.

Indeed, Lesotho is among the seven countries in the world that has shown progress in improving child nutrition outcomes, as evidenced by the 6 percentage point reduction in stunting in the past five years<sup>2</sup>. (see **Figure 1**) indicating an underlying food and nutrition security challenge.

**Figure 1:** Trends in chronic and acute malnutrition (2004-2014)



Note: The 2004 data was converted using the WHO Conversion tool on 2006 growth standards

Sources: DHS 2004, 2009, 2014

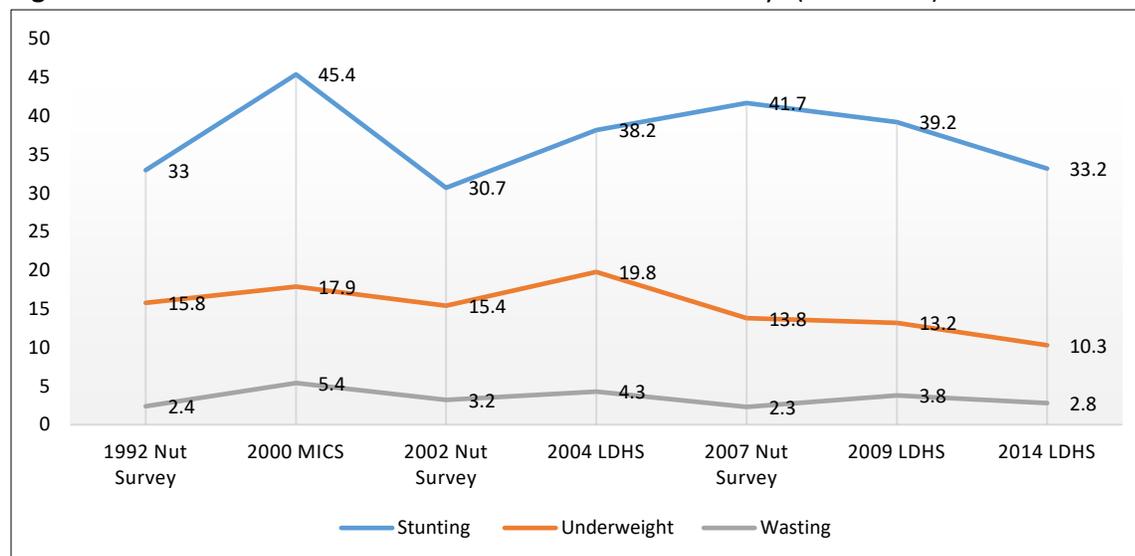
Trends in malnutrition indicate that chronic and acute malnutrition in children under five years have decreased since 2004, however stunting (HAZ<-2SD) still remains high at 33.2 percent<sup>3</sup>. The prevalence

<sup>2</sup> Cost of Hunger in Africa (COHA) -Social Economic Impact of Child Undernutrition in Lesotho Summary Report

<sup>3</sup> Lesotho Demographic Health Survey (LDHS), 2014

of severe acute malnutrition (severe wasting) (WHZ <-3SD) among children under five years old has declined from 1.8 percent to 0.6 percent<sup>4</sup>. Figure 2 below illustrates the trends of malnutrition in children since 1992 to 2014.

**Figure 2: Malnutrition trends in Lesotho based on various surveys (1992-2014)**



**Sources:** i) MICS, 1992; ii) Nutrition Surveys, 2007; and iii) LDHS, 2014.

Similarly, micronutrient deficiencies among children aged 6 to 59 months particularly iron deficiency anaemia stands at 51 percent<sup>5</sup>. In addition, over 27 percent of girls and women and 14 percent of boys and men in the 15-49 age range are also anaemic<sup>6</sup>. Assessed at a global level, Lesotho has a Global Hunger Index (GHI) of 24.1 which indicates that Lesotho faces a serious food and nutrition security situation.

The nutrition outlook is against a backdrop of the country's positive economic growth trajectory. The Gross Domestic Product (GDP) was recorded at 3.1% in 2016 compared to 2.8% in 2015 and good prospects of growth are expected for 2017 and 2018 of 3.5% and 4.6% respectively<sup>7</sup>. However, this growth has not translated into better living conditions for the majority of the people due to chronic poverty and high levels of unemployment. In fact, Lesotho is among the 10 most unequal countries in the world in terms of income distribution with a Gini Coefficient at 0.53<sup>8</sup>. The country's high poverty rate (57.1%) indicates that growth has not been inclusive. Furthermore, Lesotho is classified in the low human development category with an index (HDI) 0.497 recorded in 2015<sup>9</sup>. At this HDI level, Lesotho was ranked 160 out of 188 countries assessed in 2016.

<sup>4</sup> *ibid*

<sup>5</sup> MoH, 2015 and UNAIDS Country Profile, 2014

<sup>6</sup> *ibid*

<sup>7</sup> <http://www.africaneconomicoutlook.org/en/country-notes/lesotho>

<sup>8</sup> World Bank, 2015.

<sup>9</sup> Lesotho Human Development Report 2016. [http://hdr.undp.org/sites/all/themes/hdr\\_theme/country-notes/LSO.pdf](http://hdr.undp.org/sites/all/themes/hdr_theme/country-notes/LSO.pdf)

There are big consequences to not addressing malnutrition and all its forms. For example, total losses associated with undernutrition in Lesotho were estimated at 1.96 billion maloti, or USD \$ 200 million for the year 2014<sup>10</sup>. These losses are equivalent to 7.13 % of GDP of that year due to increased healthcare costs, additional burdens on the education system and lower productivity of the workforce.

Hence, the GoL is intensifying efforts towards improving implementation of policies and programmes on the ground. There is a global consensus that in-order to achieve global targets for reducing undernutrition, a multi-sectoral approach is required. Multi-sectoral coordination along with collaborative planning and programming across sectors at national, districts and local levels are necessary to accelerate and sustain interventions. The recent Global Nutrition Report (2017) reiterates that, the time of tackling problems in isolation is over and stakeholders must all stop acting in silos as people do not live in silos<sup>11</sup>. Therefore, the need for strengthening organisations tasked with multi-sectoral coordination is urgent.

In Lesotho, previous calls for strengthening the Food and Nutrition Coordination Office (FNCO) were highlighted in several studies. In 2014, Irish Aid Capacity Assessment Report (2014) showed that nutrition governance in Lesotho was lopsided in terms of organisational capacity and strength of management systems. The same report recommended a need for investment in the leadership and mentoring of the respective stakeholders and specifically FNCO<sup>12</sup>. Following this a study<sup>13</sup> on the situation analysis of Malnutrition in Lesotho conducted by Maximising the Quality for Scaling Up Nutrition (MQ-SUN) in 2015 recommended a capacity assessment of FNCO and other sectors. This was for the purposes of understanding governance and capacity-building capabilities and issues that may help or hinder a more holistic coordinated planning, implementation, monitoring, and evaluation of nutrition actions. These were highlighted as being: inadequate partner collaboration, inadequate accountability, weak sectoral structures, inadequate advocacy on nutrition, lack of quality control standards as well as lack of a nutrition information systems. Against this background, the GoL through the FNCO and with support from Renewed Efforts Against Child Hunger and undernutrition (REACH) commissioned this multi-sectoral nutrition governance capacity assessment.

## **1.2 Purpose of the Capacity Assessment**

The purpose of the capacity assessment (CA) was to assess FNCO's capacity on to leverage a multi-sectoral and multi-stakeholder nutrition coordination processes required for while ensuring effective engagement of all key actors. The assessment was also to identify gaps in capacity in the line ministries and among stakeholders to effectively engage in the Scaling Up Nutrition (SUN) process at all levels.

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<sup>10</sup> The Cost of Hunger in Africa (COHA) -Social Economic Impact of Child Undernutrition in Lesotho Summary Report

<sup>11</sup> Global Nutrition Report, 2017. [https://www.globalnutritionreport.org/files/2017/11/Report\\_2017.pdf](https://www.globalnutritionreport.org/files/2017/11/Report_2017.pdf)

<sup>12</sup> Irish Aid – LESOTHO Corporate Governance/Management Systems/Organisational Capacity Assessment FINAL REPORT – September 2014

<sup>13</sup> Situation Analysis of Nutrition in Lesotho- MQSUN Report, 2015.

### **1.3 Objectives**

#### **Overall Objective**

The overall objective of this CA was to identify individual, organizational and enabling level capacity gaps for FNCO to effectively coordinate nutrition actions, engage key stakeholders at national and district levels, and define sustainable capacity development actions to address existing gaps.

#### **Specific Objectives**

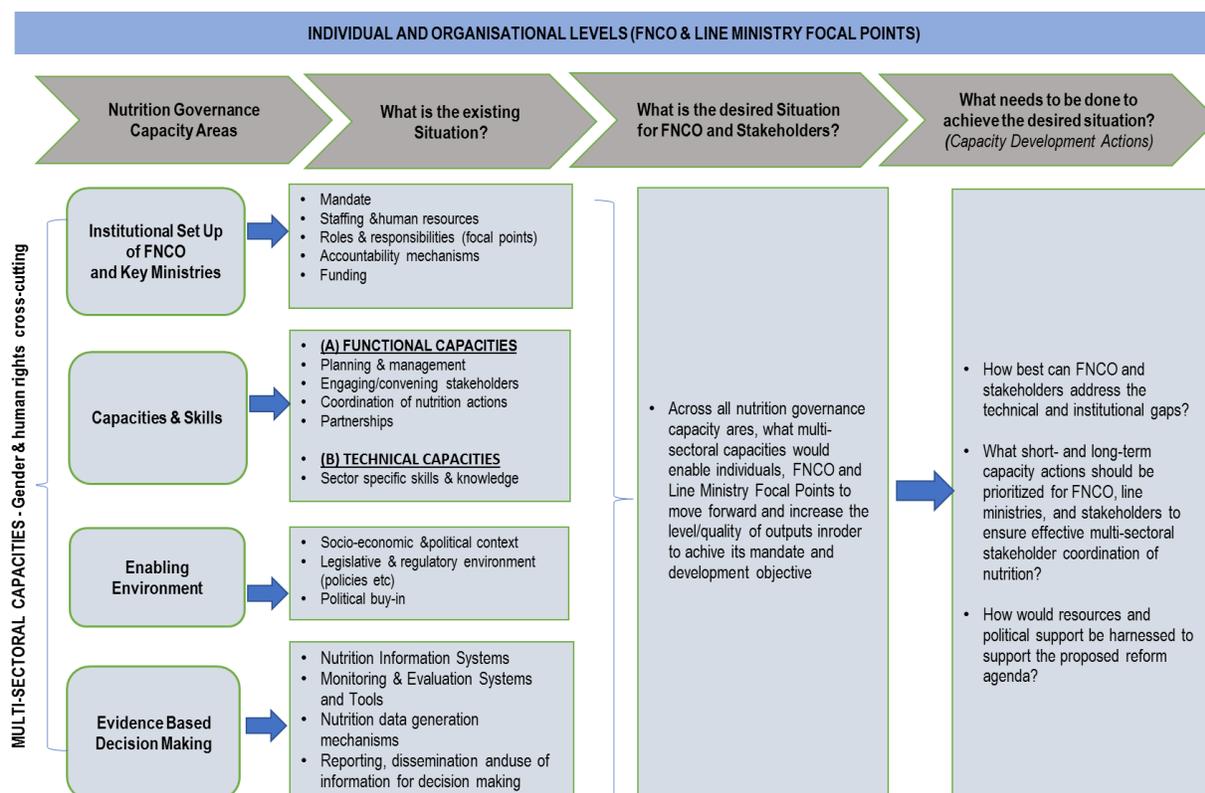
- i. Conduct an assessment to identify capacity gaps for FNCO to support multi-sectoral nutrition coordination and engagement of key sectors and stakeholders at national and district level (individual, organizational and enabling environment level).
- ii. Define sustainable capacity development actions to be implemented to address capacity needs identified in the Capacity Assessment at all levels (short-, medium- and long-term).
- iii. Define an appropriate monitoring and evaluation framework for identified actions.
- iv. Conduct advocacy with key decision-makers in the Prime Minister's Office and line ministries to support capacity development actions aimed at strengthening multi-sectoral nutrition actions.

## SECTION 2: METHODOLOGY

### 2.1 Conceptual Approach to the Assessment

The capacity assessment was conducted using guidance from the UN Network for SUN Nutrition Capacity Assessment Guidance Package<sup>14</sup>. This guidance package is intended to support countries to comprehensively assess capacity needs for effective scale up of nutrition actions. It provides a holistic multi-sectoral, multi-stakeholder, multi-dimensional and multi-level model for assessing capacity with the objective of sustainable capacity development in nutrition. The capacity assessment was performed at the national, district and community levels and across four nutrition governance capacity areas reflected in **Figure 3**.

**Figure 3: Capacity Assessment Framework**



Source: UN Network for SUN Nutrition Capacity Assessment Guidance Package

Capacity was assessed at individual and institutional (FNCO and key Ministry focal points). Capacity issues were understood in terms of technical skills (knowledge and technical know-how) and functional skills (mandate, staffing, roles and responsibilities, accountability mechanisms and funding). The capacity assessment dimensions investigated included the following: (i) Institutional set up of FNCO and Key

<sup>14</sup> Nutrition Capacity Assessment Guidance Package- Part 1 Guidance Note- 12 September 2016

Ministries (ii) Capacity and skills (functional and technical skills) (iii) Enabling Environment (iv) Evidence-based decision-making.

Within each of these dimensions, the CA sought to answer the following questions:

#### **Institutional Set Up of FNCO and Key Ministries**

- Does FNCO have an appropriate organizational structure, relevant procedures and clearly defined roles that are aligned with its functions?
- Does the FNCO culture facilitate fulfillment of its mandate?
- Does FNCO have the necessary financial and logistical resources to fulfill its functions?
- Are the roles and responsibilities of each line ministry clearly defined?
- Do line ministries have adequate human resources to implement their nutrition related resources?

#### **Capacity and Skills**

- Does FNCO have the capacity to ensure evidence-based decision-making to define its strategic direction?
- Is FNCO staffed with people who have appropriate qualifications and skills to ensure optimum performance of the organization?
- Do nutrition focal points have the relevant skills, knowledge, authority and support to effectively represent their line ministries in nutrition multi-sectoral and multi-stakeholder processes?
- Do line ministries have the capacity to make evidence-informed decisions regarding food and nutrition issues?

#### **Enabling Environment**

- Are there structures in place to ensure that there is a multi-sectoral engagement in nutrition at national and district level?
- Is there an accountability mechanism in place to ensure performance by all actors?
- How are financial resources that support nutrition actions allocated?
- Do the legal framework, nutrition policies and other policies that contribute to nutrition provide an enabling environment for multi-sectoral nutrition?
- Is there political buy-in to support and strengthen the allocation of resources?

#### **Evidence-based decision-making**

- Assessment of nutrition information systems; monitoring and evaluation systems and tools; nutrition data generation mechanisms; reporting, dissemination and use of information for decision making.

The capacity assessment also analyzed the performance and effectiveness of responses in terms of:

- What progress has been achieved towards the establishment and operationalization of SUN structures?
- What specific capacity strengthening actions need to be directed to the SUN networks to ensure their effective engagement in SUN processes?
- What short- and long-term capacity actions should be prioritized for FNCO, line ministries, and stakeholders to ensure effective multi-sectoral stakeholder coordination of nutrition?
- How would resources and political support be harnessed to support the proposed reform agenda?

## **2.2 Approach and Methods**

The capacity assessment used a mixed research approaches which comprised of a desk-top reviews and key informant interviews. A number of nutrition documents were reviewed which included studies, policies and legal instruments. The literature review informed the development of data collection tools. Key informant interviews were conducted with relevant stakeholders at various levels. Key guiding questions were developed to guide these interviews. National level consultations were conducted with different ministries in Maseru and district consultations and assessments were done in two districts of Mafeteng and Thaba Tseka. The list of stakeholders consulted is shown in **Annex 1**. The interview approach also provided an opportunity to raise awareness about nutrition issues among senior government officials. In addition to key informant interviews, a workshop was organized with all FNCO staff from the national and district level including key stakeholders to triangulate some of the findings. Focus Group Discussions were also conducted with two SUN networks (media and academia).

Data was analyzed against the four nutrition governance capacity areas with assistance from the Nutrition Governance Task Team to ensure accuracy and relevance. Feedback meetings were also held with the Director of FNCO and staff to share the recommendations during the process. Key findings of the report were shared and validated in the Food and Nutrition Strategy Development Workshop.

## SECTION 3: KEY FINDINGS

### 3.1 Introduction

Nutrition programmes are located across several ministries that have food and nutrition security mandates. The key ministries with nutrition units are: Ministry of Health (MoH), Ministry of Agriculture and Food Security (MoAFS) and Ministry of Education and Training (MoET). The FNCO which is located in the Cabinet Office is responsible for providing strategic leadership and coordination to the sector.

The MoH Nutrition Unit, which is located in the Family Health Division, has a policy on Infant and Young Child Feeding, which informs their work. It implements nutrition-specific programmes through the clinics and at community level through village health workers. The MoAFS Nutrition Division in the Department of Field Services is responsible for implementing nutrition-sensitive actions implemented at community level. This is done through the support of Nutrition Subject Matter Specialists and Agriculture Assistants at community level. The work of the Nutrition Division is guided by the MoAFS Food Security Policy. The MoET has an Early Childhood Care and Development (ECCD) Policy, which has informed activities in the care of children under five years through the ECCD network of schools at community level. In addition, the MOET has the National School Feeding Policy that sets the framework for implementation of the national school feeding programme, including both the Integrated Early Childhood Care and Development (IECCD) component and the primary schools.

Key findings of the nutrition governance capacity areas analyzed in the following pages will thus focus on the FNCO and the key stated ministries (MoH, MoAFS and MoET).

### 3.2 Institutional Set Up of FNCO and Key Ministries

In assessing the current FNCO structure, set up of FNCO, it is essential to learn from history in terms of the **evolution of the institution** and its related structures. The FNCO was part of the Lesotho Food and Nutrition Council (LFNC). The Lesotho Food and Nutrition Council (LFNC) was established in the Prime Minister's Office in 1977 through a cabinet memorandum to facilitate multi-sectoral coordination of nutrition. As established, LFNC comprised of the following structures:

- Cabinet sub-committee on Nutrition: Comprised of Ministers and chaired by the Prime Minister
- Food and Nutrition Coordinating Office (FNCO): LFNC secretariat
- National Food and Nutrition Advisory Group: Policy level representatives from all major ministries and donor/voluntary agencies involved in nutrition
- Technical Support Group: Technical resource persons and agencies to be consulted for day to day operations.

Among all these structures, it is only FNCO that is currently functioning, therefore adversely affecting multi-sectoral coordination of nutrition efforts. The FNCO is headed by a Director who reports to the Permanent Secretary in the Prime Minister's Office. The position of the FNCO within the Prime Minister's

Office is considered too low in the organizational structure, therefore lacking the necessary clout and authority to facilitate multi-sectoral coordination, a situation that is worsened by the absence of an active LFNC. This has created a leadership vacuum at the political level. Visionary leadership to drive multi-sectoral and multi-stakeholder processes will need to be re-cultivated. Stakeholders and previous assessments have recommended the need to review and update the 1977 cabinet memo with a view to re-activating the coordination structures. However, the whereabouts of the original memorandum are not known.

The Advisory Committee was a high-level committee able to influence government and international development partners. The Prime Minister's Private Secretary and the United Nations Resident Representative were part of the Advisory Committee. All the structures had terms of reference that clearly outlined the roles and responsibilities. As secretariat, the FNCO enjoyed political support and authority to convene other ministries on nutrition issues and received financial technical support from USAID.

At that time, FNCO had a well-established documentation centre that was accessed by partners. It regularly published a nutrition surveillance bulletin with nutritional status, information, food production data and meteorological data. In addition, FNCO published annual food and nutrition policy reports. In addition, a multi-sectoral programme monitoring and evaluation function was operational which provided mapping and inventory of nutrition and nutrition related interventions. There was an Information, Education and Communication (IEC) strategy and subcommittee which developed a standard basic nutrition kit – a field nutrition education package for service providers. Key achievements of the FNCO included 1) The establishment of the breastfeeding Network which conducted 2) Research on breastfeeding practices. dealt with key areas in nutrition such as breastfeeding. One of the key achievements was the 3). establishment of the 1992 national nutrition survey and the micronutrient baseline research under the Research subcommittee which informed led to the Lesotho Nutrition and Plan of action and Programme that was integrated into the Poverty Reduction Strategy in 1993. The legal framework for importation of iodized salt for control of iodine deficiency and goitre was also developed.

At the time of the military coup which ousted the government in 1986, FNCO was relocated from the Office of the Prime Minister to the Ministry of Agriculture. During that time, FNCO staff were redeployed to serve in other positions in the Ministry of Agriculture and, therefore, the experienced staff were no longer available and this led to the decline of its effectiveness. In 1994, the proposal to return the FNCO to its original location in the Office of the Prime Minister was approved but the multi-sectoral governance system established in 1977 was no longer functional and many of the activities no longer existed

The **FNCO mission** is to provide an environment appropriate for every citizen to access adequate nutrition in order to attain optimum potential. The **role of FNCO** is however still not clearly understood internally and externally by all stakeholders, and this seems to create conflict and sometimes duplication of interventions, thus affecting relationships. During the CA, the role of FNCO seemed to converge around facilitating multi-sectoral coordination and collaboration; supporting integration of nutrition efforts,

capacity building, advocacy and awareness as well as generating nutrition data and information management including research and reporting using different multisectoral thematic subcommittees. The roles are highlighted in **Box 1**.

#### **Box 1: Role of Food and Nutrition Coordination Office**

- Provide strategic multi-sectoral nutrition direction at the national and district levels.
- Lead stakeholders in ensuring integrating of nutrition in the National Development Plans.
- Coordinate implementation of the national food and nutrition policy and strategy.
- Support other sectors to integrate nutrition into their policies and plans.
- Develop and maintain a national information system for nutrition to track implementation and progress and use the evidence generated to inform policy, planning and advocacy.
- Prepare regular reports on nutrition status and progress of implementation of the policy and strategy for government and all stakeholders.
- Support the development of SUN networks and ensure that they are engaged effectively in the nutrition scale-up agenda.
- Engage with all stakeholders through established networks and facilitate coordination and collaboration among all key actors.
- Develop a national training plan and training materials for nutrition; and a strategy for implementation.
- Lead advocacy efforts for multi-sectoral nutrition for increased political commitment and investment at all levels, including supporting the work of nutrition champions.
- Raise awareness on malnutrition and its harmful effects.
- Identify needs for nutrition research.

#### **FNCO culture and work ethic**

In terms of **FNCO culture and work ethic**, a number of characteristics were noted. For many years, the FNCO was operating without a policy and a strategy to guide the organization. This means that without a purpose, there was no source of direction and inspiration to engage employees and key stakeholders. There are no systems of effective communication for internal and external stakeholders nor systems of feedback and accountability in the form of a performance management system. The staff is generally demoralized and apathetic, and their level of engagement is low due to a non-supportive environment. Staff feel undervalued and think their work is of low priority. In rare cases when motivation is very high, staff go to an extent of using their own resources to support official work.

Psychological safety is also lacking, mainly due to lack of clarity of roles and basic resources. In some instances, disengagement with certain tasks has been observed when the level of motivation is at its lowest. Staff do not always feel secure and self-confident to perform some tasks due to lack of skills in some areas. They have expressed concern about inadequate remuneration and lack of upward mobility. FNCO however, seems to be doing well when it comes to teamwork. This is a positive part of the culture

that the FNCO can build on as they transform the organization. Most of their work requires the staff to work in teams, a key attribute essential for multi-sectoral coordination.

### **Resources and infrastructure**

In terms of **resources and infrastructure**, at the national level, FNCO is housed in the Disaster Management Authority (DMA). This set up suffers from many inconveniences such as extended periods of time without electricity due to poor management by the building property owners. Similarly, at the district level, there are no offices allocated to FNCO staff. The District Food and Nutrition Coordination Office (DFNCO) staff are housed in various locations, for example, the District Administrator's conference rooms or they rent space in other departments. Often, they are not able to pay for the rent due to financial constraints.

FNCO is severely under-resourced in terms of office equipment. Although each staff member has a computer, they are not fully functional. There is also no information and communication system, including internet and landline telephone services. FNCO offices at national level have not had internet access for over three years. Repeated requests for internet access have not been successful. Secondly, there is no telephone access, as telephone communication was terminated.

The infrastructure situation in other key Ministry Focal Points, although old is in a better condition. The Nutrition Division of Ministry of Agriculture and Food Security (MoAFS) is the oldest nutrition division in government, established in the early 1960s. It has national and district levels offices. In both locations, the offices have access to internet and telephone services. The Ministry of Health (MoH) Nutrition Division is located in the relatively new MoH building, and they have access to internet and telecommunication that is available to all other departments of the Ministry. The Nutrition Unit of Early Childhood Care and Development (ECCD) in MoET is housed in the ECCD offices. Even though the offices are old, they are in a relatively good condition. At national and district level, MoH and the MoET are resourced with basic office equipment. The Nutrition Division in MoAFS is not adequately resourced with office equipment especially demonstration materials.

### **Funding**

**Funding** is a major constraint, thus presenting challenges for scaling up nutrition. It was difficult to obtain all the figures on funding for nutrition and nutrition-related areas, as it is not separated from the full budget of departments under which nutrition falls in the various ministries. The findings from stakeholder consultations show that significant programme funding is from international development partners. The government mainly funds salaries in MoH, MoAFS and FNCO while the nutritionist in MoET responsible for IECCD is funded by UNICEF. The budget for FNCO is M5,000,000 and 60 percent of this goes to salaries and operating expenses. FNCO does not have complete control of funds, as it is sometimes allocated for other activities that are not nutrition related. FNCO is currently receiving financial support from UN agencies for various activities and through REACH for capacity building initiatives in nutrition governance. The MoH Nutrition Unit receives considerable funding from a variety of partners i.e. WHO, UNICEF, WFP, PEPFAR, and CHAI.

### 3.2.1 Key Capacity Gaps

- The FNCO was not established by an Act of Parliament and, therefore, does not have the power to enforce compliance with regard to nutrition strategies and requirements.
- Although the FNCO is placed under the PMO, it no longer has the same structure and authority as other parallel authorities, such as the National AIDS Commission (NAC), Disaster Management Authority (DMA) and the Food Management Unit (FMU), which are also coordinated by the Office of the Prime Minister.
- There is limited understanding of the official mandate for the FNCO and this has contributed to the non-functionality of several committees and taskforces<sup>15</sup> related to nutrition activities. There is strong push for the revival of these committees in-order to improve coordination and enhancing convening powers of the FNCO.
- There is a feeling that the FNCO at present is exclusively focused on nutrition and with little attention placed on food security. Therefore, future work plans must emphasise the cross-cutting nature of food and nutrition and include all relevant government sectors, UN agencies, NGOs, and the private sector.
- Inadequate advocacy for nutrition at the national and district levels, including a focus on nutrition among government investment programmes.
- There are no systems of effective communication for internal and external stakeholders nor systems of feedback and accountability in the form of a performance management system.
- FNCO is under-resourced in terms of basic communication infrastructure. Financial resources, equipment and infrastructure are severely lacking. In fact, there is insufficient financial/budget support from the government.

## 3.3 Capacity and Skills

### 3.3.1 Introduction

The capacity and skills were assessed from two fronts: functional skills and technical skills. Functional skills include an analysis of capacities in terms of planning and management, engagement and convening of stakeholders; coordination of nutrition actions as well as facilitating partnerships. Under technical skills, sector specific skills and knowledge relevant for nutrition programming were analyzed.

### 3.3.2 Functional Skills

To better facilitate cross-sectoral coordination, the Food and Nutrition Coordination was created and housed under the Prime Minister's Office. As already discussed in section 3.2 above, FNCO is still functioning even though its authority has been severely curtailed because of the non-functioning of supporting structures. The FNCO nutrition multi-sectoral agenda is supported through several Task Teams such as the Sub-committee for National Strategic Development Plan (NSDP)- Nutrition. Despite joining the

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<sup>15</sup> These committees are: the nutrition technical committee; the nutrition advisory committee; the policy sub-committee; the information sub-committee; the research sub-committee; the planning and coordination sub-committee; and the micronutrients taskforce.

SUN Movement in 2014, the country has not yet managed to put in place a multi-sectoral platform made up of all stakeholders.

The **key ministries** that play a leading role include, but are not limited to: MOH, MoAFS and MOET. MOH is responsible for a number of nutrition specific interventions under Clinical Services and Primary Health Care: infant and young child feeding, vaccinations, vitamin A supplementation and deworming, the management of acute malnutrition, HIV/AIDS and Nutrition programming, water and health sanitation for good nutrition, nutrition interventions delivered through family planning services, micronutrient supplementation.

MoAFS is responsible for food security, including small-scale food production and income generation, nutrition education which included food preparation and preservation, promoting infant and young child feeding.

MoET, on the other hand, implements comprehensive development programmes for children under five years of age, including access to antenatal and neonatal services, access to services by vulnerable children with developmental delays, HIV and AIDS or disability. The Ministry of Forestry, Range and Soil Conservation; Ministry of Water; Ministry of Tourism, Environment and Culture; Ministry of Trade and Industry; Bureau of Statistics/Ministry of Development Planning; Ministry of Local Government and Chieftainship Affairs; Ministry of Gender, Youth, Sports and Recreation; and Ministry of Social Development have a role to play towards contributing to nutrition, and should be encouraged to join multi-sectoral committees, and work closely with the FNCO.

The key ministries participate in multi-sectoral processes through nutrition focal points. Nutrition focal points have been established in key ministries such as MOH, MoAFS and MOET only.

Stakeholders such as UN agencies, NGOs, private sector, academia and civil society provide financial and technical support to implement the nutrition interventions. These include but are not limited to policy and strategy development, advocacy and research, with NGOs mostly mandated to implement nutrition interventions at community level. There is also the UN Network for SUN (UNN) membership which comprise UNICEF, WFP, FAO and WHO. The UNN was established to strengthen national capacity for nutrition governance, the scaling- up of nutrition actions, as well as to increase UN effectiveness in support of national efforts to reduce hunger and malnutrition. In Lesotho, the UNN's work is guided by the Lesotho United Nations Development Assistance Plan (LUNDAP), which has already integrated nutrition. The Terms of Reference (TOR) for the team have been drafted and it has held several meetings. The UNN has a unique opportunity to align the UN plans in nutrition with national priorities.

The academia network has potential for greater engagement with nutrition issues but it is not yet well established. Lesotho's institutions of higher learning have programmes in nutrition, home economics, health science, teacher training, vocational and technical training, and hospitality training. These institutions have an opportunity to align their curriculum to national priorities. Some institutions must reposition themselves to address the current needs of nutrition, as spelled out in the strategy. Nutrition

courses for the training of health personnel also need to be strengthened. Academia can advise FNCO on nutrition research needs and priorities and undertake some through their institutions. There is potential for the academia to develop in-service training for community-based volunteers to strengthen nutrition counselling and education at community level. In addition, the academia can also serve on other FNCO multi-sectoral committees that are established when required.

During stakeholder consultations, the media expressed a desire to participate in FNCO events and disseminate new information on nutrition. They requested FNCO to maintain a close relationship and provide them with nutrition information in a timely manner for dissemination through various media channels (print, radio, television). Further, there was need for sensitizing media personnel in general on the value of reporting nutrition stories and news items. The media is a strategic partner for awareness creation and advocacy for nutrition. Media studies can also incorporate nutrition and in-service/ training workshops for media practitioners. After consultations with the media, two articles on nutrition were reported in the newspapers. This was a clear indication of the media's readiness to write articles on nutrition.

Civil society organizations play an active role in advancing nutrition, and some have already mainstreamed nutrition into their programmes. The majority worked closely with FNCO during the development of food and nutrition policy and have been represented on the task force committee. They also participate in district multi-sectoral teams and support multi-sectoral initiatives by organising campaigns and sharing their resources for the events. However, civil society organizations have a limited number of nutritionists, which limits their effectiveness. There is no system established yet for civil society to report to FNCO on nutrition activities and to share baseline information which they collect to monitor their projects.

The business sector is organised into associations and foundations for small and large businesses. Some parastatals license and regulate large businesses and, therefore, have convening powers over the private sector. They can facilitate meetings of members of a specific section of the private sector. Among other things, the business umbrella organisations work on policy and advocacy, and are willing to join the SUN Business Network. They can work with parastatal organisations which control and coordinate large businesses to advocate for policy reform to mainstream nutrition into their businesses and operations.

### **District level coordination**

In terms of **district level coordination**, the District Administrative Officers (DAs) are responsible for oversight of FNCO activities as well as all other district activities. The DAs play a pivotal role in calling meetings of the multi-sectoral nutrition team as they have the convening powers at district level. There are Food and Nutrition officers in nine (9) out of the ten districts. The DFNCOs is supervised by Regional Food and Nutrition Officers (RFNCO) who are based at national level. The role of the DFNCOs is to provide direction and coordination of the planning of multi-sectoral nutrition at all levels in the district, including data collection for the surveillance plan. The position of DFNCO is too junior at Grade E to perform such a coordination function when compared to similar positions of other offices such as the DMA whose District Disaster Manager is at Grade I.

FNCO has established advisory multi-sectoral committees in some districts even though they are not fully operational. Currently, the multi-sectoral teams do not have guidelines, and are working on an informal basis. The composition of the teams varies from place to place, depending on the availability and motivation of the members.

#### **At area and community level**

**At area and community level**, no formal teams have been formally established, but there is cooperation and collaboration in some areas and communities. Implementation of nutrition specific actions are done at the clinic level by clinic staff and at community level, by village Health workers. The nurses at clinics are overburdened with work and report writing. Village health workers receive training through the MOH with the use of manuals for proper infant and child care practices. Growth monitoring activities are still limited to Village Health Workers as they are the only ones who are trained and mandated by MOH. Other methods for recording growth on growth charts should be explored as others outside the health practitioners are not permitted to access the health booklets due to patient confidentiality.

#### **3.3.3 Technical Skills**

There are not enough human resources in FNCO and the key ministries to implement nutrition interventions. There was consensus across all stakeholders consulted that there are insufficient numbers of trained human resources in nutrition in all government ministries. The situation is further exacerbated by a very high vacancy rate in the key implementing departments – notably in the Ministries of Health and Agriculture and Food Security. For example, the MoH's most senior post in nutrition is vacant and the person currently acting on the post is not qualified for the position.

The level of **staffing and related level of education** in FNCO and the three key ministries is shown in **Table 1**. The FNCO has nine Nutritionists with a degree in nutrition, one Home Economist with a degree in Home Economics and five Home Economists with a diploma level at national and district levels (see Table 1). There are disparities in the level of qualifications that are required for positions of Nutritionists at the district level as some are degree holders whereas some are diploma holders in Home Economics. Moreover, the current job descriptions for staff are outdated, and do not reflect the current needs and conditions. Furthermore, they are not aligned to the mandate of the organization. The job descriptions are also not linked to performance management, and therefore do not provide clear direction on the roles of staff. The staff are not always aware about the overall vision and mission of the organization, and this has been identified as one of the demotivating factors. The staff generally lack skills in current issues on nutrition, which is necessary to develop competencies in evidence-based strategies for nutrition sensitive and nutrition specific interventions. In addition, staff lack skills in management, data collection and processing, monitoring and evaluation and report writing.

The MoAFS has a greater mix of nutrition capacities located at all levels (national, district and community levels), which is commendable. The downside is that extension agents working at community level end up focusing more on agriculture with little attention on nutrition. Considering the level of interventions implemented by MoH, having only two nutritionists at national level and 10 at district levels is undoubtedly inadequate. There are plans for elevating the nutrition unit into a division under Primary

Health Care and increase the number of nutritionists including at facility level. Similarly, there is an inadequate number of nutritionists in ECCD at the national level. In general, all other ministries except for MoAFS, MoH and MoET do not have any nutritionists operating as part of the structures that implement nutrition actions.

**Table 1:** Summary of Nutrition Personnel in FNCO and Key Ministries

Level of Education	FNCO	MOH		MoAFS		MoET	
		National	District	National	District	National	District
PHD	1	-	-	-	-	-	-
Masters		2	-		1	1	-
Degree (Nutrition/Home Economics/Dietetics)	9	1	10	5	10	-	2
Diploma	5	-	-	-	6-7 per districts	-	
Certificate	-	-	-			-	

There is serious shortage of Agriculture extension staff in the districts, especially in the mountain regions. In Mafeteng and Thaba Tseka, there is a high vacancy rate for extension staff. In Thaba Tseka, which is a mountainous district, staff does not honor transfers due to remoteness coupled with lack of transport, lack of housing and most recently for security reasons. Staff tends to stay at the resource centers and at district level and not go out to the areas where they are assigned. This compromises the mandate of the Nutrition Division extension staff as they are forced to assume responsibilities of agriculture extension staff. In general, there is a higher shortage of extension staff in mountainous regions and compromises the level service delivery which is essential in this region with high incidence of malnutrition.

### 3.3.4 Key Capacity Gaps

- As a coordinating entity, the FNCO does not implement programmes at the community level. Sectors and NGOs serve as the primary implementers of nutrition specific and sensitive intervention. Therefore, the FNCO should facilitate the efficient utilization of community-based human resources for nutrition through multi-sectoral collaboration.
- FNCO has an insufficient capacity with regards to coordination and harmonization of the multi-sectoral approach to planning, implementation, and monitoring of nutrition interventions.
  - For example, FNCO is ineffective in coordinating approaches among United Nations (UN) agencies and NGOs, which are more vulnerable to working in “silos”.
  - Discussion of nutrition issues among multi-sectoral audiences such as academia, partners and donors are poorly coordinated.
- Lack of clarity and overlap in roles and responsibilities of nutrition staff in different sectors resulting in inefficiencies and gaps;
- There is inadequate availability of skilled staff for nutrition implementation and governance. The nutrition units within key ministries have inadequate nutritionists at national and district levels.

- Limited technical capacity within the FNCO - The structure of the FNCO lacks experienced senior managers with functional skills and lacks technical capacity at national and district levels to guide and direct staff and all key stakeholders in the sector.
- The collaboration mechanisms are also weak and cannot facilitate effective multi-sectoral collaboration. The structures are also weak due to their low positions in the ministries and lack decision making power and other resources to effectively implement sectoral nutrition policies and strategies. The limited capacity of nutritionists and their diminished power to engage effectively in the policy process negatively influences the cause of nutrition.

### 3.4 Enabling Environment

The enabling environment has been defined as “*political and policy processes that build and sustain momentum for the effective implementation of actions that reduce undernutrition*”<sup>16</sup>. There are three linked factors<sup>17</sup> deemed crucial for building and sustaining of momentum and for conversion of that momentum into results and these include:

- (i) **Knowledge and evidence** - timely and reliable information about nutrition status and its determinants in programmatic contexts is crucial. Further, rigorous research is needed to capture the long-term intergenerational benefits of undernutrition prevention, with evidence communicated clearly to generate pressure on politicians to act. In the case of Lesotho, this will be elaborated in the section on evidence- based decision making.
- (ii) **Politics and governance** - various stakeholders and agencies, each with different and frequently competing agendas, need to work together to reduce undernutrition. Nutrition governance in Lesotho has already been covered in the preceding sections. How high-level political momentum has been generated in Lesotho and what needs to happen to turn this momentum into results is the subject of this section on enabling environment.
- (iii) **Capacity and resources** - Human and organisational capacity need to encompass not only nutrition know-how, but also a set of soft-power skills to operate effectively across boundaries and disciplines, such as leadership for alliance building and networking, leveraging of resources, and being able to convey evidence clearly to those in power has been covered in the preceding sections.

In addressing the enabling environment in Lesotho, several initiatives have been undertaken at the highest level of political leadership. The Scaling Up Nutrition (SUN) movement that Lesotho joined in 2014, is the most important symbol of the increased interest in nutrition. As SUN nears its 4<sup>th</sup> year, Lesotho has made some advances in terms of building multi-stakeholder platforms, aligning nutrition-relevant programmes within a common results framework, and mobilising national resources, but more is still required.

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<sup>16</sup> Gillespie, S, Haddad, L, Mannar, V, Nisbett, N, Menon, P. The politics of reducing malnutrition: Building commitment and accelerating progress. Lancet 2013; 382:552–69. [http://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736\(13\)60842-9.pdf](http://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736(13)60842-9.pdf)

<sup>17</sup> ibid

Furthermore, the role of His Majesty King Letsie III as the African Union Champion for Nutrition and FAO Special Ambassador for Nutrition globally has generated high level political momentum. Her Majesty the Queen is also the patron for Breastfeeding and nutrition of children under 2 years age (0-23 Months) in Lesotho, which is commendable. In turning this momentum into results, the GoL recently launched its Zero Hunger Strategic Review that will be followed by the development of a road map. The Zero Hunger Road Map will outline concrete steps and stakeholder roles in addressing food and nutrition challenges. Other previous milestones in 2016 were the launch of the Cost of Hunger in Africa (COHA) study and the Food and Nutrition Policy.

In addition to this high level political momentum, the GoL has demonstrated its national commitment in strengthening the enabling environment for food and nutrition security through the enactment of policy and legislative frameworks. Some of the key policies are outlined in the following pages.

At the top is Lesotho's **National Strategic Development Planning process. The outgoing (NSDP) I (2012-17)** emphasized economic growth as the most important indicator of the plan's success. It provided a basis for a cross-sectoral approach to tackling undernutrition. Amongst the NSDP's six strategic goals geared towards the achievement of the National Vision 2020, three of them had actions that relate to nutrition. In keeping with these goals, nutrition is also being emphasized in the NSDP II (2018-2023), which is currently being developed. This comes at a time when the country has just completed a comprehensive multi-sectoral nutrition overview that helped stakeholders to clearly articulate and build consensus on the nutrition problem, as well as identify core nutrition actions to be scaled up.

Another policy that has been developed recently is the **National Food and Nutrition Policy (LFNP)**. It calls for a multi-sectoral approach at all levels, to address the contributing factors of malnutrition by all key stakeholders, including government ministries, civil society organisations, media, academia, United Nations agencies, and international development agencies. To operationalise the LFNP, a strategy and costed action plan to translate the policy goals and objectives into action is being finalised. What would be needed is concerted advocacy by FNCO and other stakeholders to ensure political commitment and support towards its implementation.

The National **Policy for Integrated Early Childhood Care and Development (IECCD) 2013** recognises that high levels of malnutrition contribute to developmental delays, hence inclusion of activities to cover the 1000 days up to 5 years. IECCD has articulated all the nutritional needs of the population with regards to mothers of infants and children under 5 years and has further demonstrated strategies that can guide and support all stakeholders to contribute to the development of early childhood.

**The Food Security Policy and Action Plan 2006** articulates the contribution of agriculture to food security at different levels. The Policy has categorized community members by different levels of vulnerability and has developed different interventions by level of vulnerability. It embraces three pillars (availability, accessibility and affordability) and nine sets of actions needed to achieve food security. These include: employment promotion; promotion of agricultural and food production; promotion of support services

and infrastructure; land tenure and food security; public transfers and social nets; HIV and AIDS and food security; ensuring availability and stability of food utilization at the national level; food utilization and nutrition; and food security information (improvements to emergency food security information systems and structures, including Lesotho Vulnerability Assessment Committee and the Early Warning Unit). A major gap is that the policy does not target nutritionally vulnerable groups – child-bearing families, families with pregnant and lactating mothers, and children under the age of two, thus completely missing the window of opportunity.

A growing body of evidence indicates that access to safe drinking water, sanitation, and hygiene (WASH) services has an important positive impact on nutrition<sup>18</sup>. Lack of access to WASH can affect a child's nutritional status in at least three direct pathways: via diarrhoeal diseases, intestinal parasite infections and environmental enteropathy<sup>19</sup>. Hence, policies that ensure universal access to adequate water and sanitation are essential. Lesotho's **National Water and Sanitation Policy 2007** undertakes to provide safe water and sanitation services to all Basotho through an inclusive participatory approach. The policy however, is still lacking in terms of explicitly recognising the contribution of the water and sanitation sector to nutrition. It does not provide guidance on how to link district and community structures to multi-sectoral food and nutrition coordination mechanisms to enable a better focus on target groups who are most at risk of malnutrition.

The **National Social Protection Strategy (2014/15 – 2018/19)**<sup>20</sup> provides a broad framework for development and implementation of a harmonised and coordinated social protection agenda. It ensures that programmes implemented by different government and non-government agencies complement each other for sustainable development of the vulnerable groups. The strategy embraces complementary programmes in other sectors such as school feeding, nutrition support, free primary education and healthcare. These are deemed not core social protection but have a secondary objective of providing a degree of protection against deprivation and risk.

In 2014, the GoL formulated the **National School Feeding Policy (NSFP)** which was later approved by the Cabinet of the GoL in July 2015. The NSFP sets the framework for implementation of the national school feeding programme; including both the IECCD component and the primary schools. The School Feeding Programme (SFP) provides school meals to learners from 1,425 public primary schools across the country. Anecdotal evidence suggests that school feeding has had positive impact on enrolment, stabilised attendance, increased concentration and reduced dropout levels<sup>21</sup>. The National School Feeding Policy advocates for Home Grown School Feeding (HGSF) where food commodities for the programme are sourced within the schools' localities. In an effort to achieve this, there are efforts to link smallholder farmers to schools thus creating markets for their produce—the product of which would be increased

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<sup>18</sup> WHO, 2015: Improving nutrition outcomes with better water, sanitation and hygiene: practical solutions for policies and programmes.

<sup>19</sup> *ibid*

<sup>20</sup> <http://www.developmentpathways.co.uk/resources/wp-content/uploads/2015/02/Lesotho-National-Social-Protection-Strategy-v8-260514-with-Foreword1.pdf>

<sup>21</sup> Lesotho Zero Hunger Strategic Review, 2018

incomes for farming households and increased agricultural productivity. However, this component remains weak due to lack of capacity for monitoring and evaluation systems.

The **Health Sector Strategic Plan (2012/2013-2016/17)**<sup>22</sup> has a vision of a healthy population living a quality and productive life by 2020. By so doing, the strategy contributes to improvement in the nutritional status of the population and to socio-economic development. It does this through promotion of interventions that reduce childhood and maternal malnutrition and micronutrient deficiencies for attainment of improved health and nutrition. The **Infant and Young Child Feeding (IYCF) Policy 2010** and **National Guidelines on Infant and Young Child Feeding 2013** focus on infant and child survival for optimal feeding practice and other related maternal health and nutrition interventions. The **National HIV and AIDS Strategic Plan (2011/12 - 2015/16)**<sup>23</sup> recognises food and nutrition as critical enablers of successful programmes and treatment outcomes. Food and nutrition play a role in improving quality of life while improving patient's immunological status. In addition, the strategy states that food and nutrition facilitate access to care, as well as retention and adherence to treatment especially for malnourished HIV patients.

Another important policy is the **Lesotho National Decentralization Policy (2014)**<sup>24</sup> that aims at increasing the citizens' access to public services, ensuring quality and accountable service delivery at local levels, increasing the participation of citizens and non-state organisations in governance and service delivery, promoting equitable economic development, livelihood and economic security. Widespread access to public services lead to better levels of health care, access to water and, in turn, better levels of nutrition amongst the general population.

As noted above, many sectoral policies and plans reflect a commitment and intent to reverse the current nutrition situation. However, the overarching gap is that some of the policies and plans do not clearly articulate how sectors will contribute towards addressing the nutrition problem. Gaps in current policies and plans will need to be addressed through revision and updating and/or development of new policies where they do not exist.

Apart from policies and strategies, the GoL have developed legal frameworks that relate to nutrition although some still have gaps. The **Constitution of Lesotho 1993**, although being the highest legal instrument in the country does not make provision for the right to food and/ or water in the Bill of Rights and Principles of State Policy.

Other legal frameworks such as the **Land Act (2010)** and **Legal Capacity of Married Person's Act (2006)** have good intents towards contributing to nutritional outcomes but they lack implementation. The Land Act 2010 provides for access to land to men and women who did not previously have the right to own land. This could mean better opportunities for subsistence farming and engagement of more women in

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<sup>22</sup> GoL, 2013: Lesotho Health Sector Strategic Plan 2012/2013-2016/2017.

[http://www.nationalplanningcycles.org/sites/default/files/country\\_docs/Lesotho/19\\_04\\_2013\\_lesotho\\_hssp.pdf](http://www.nationalplanningcycles.org/sites/default/files/country_docs/Lesotho/19_04_2013_lesotho_hssp.pdf)

<sup>23</sup> [https://www.k4health.org/sites/default/files/2011-2015\\_nsp\\_revised\\_2013.pdf](https://www.k4health.org/sites/default/files/2011-2015_nsp_revised_2013.pdf)

<sup>24</sup> Kingdom of Lesotho National Decentralisation Policy, 2014.

[http://www.undp.org/content/dam/lesotho/docs/Other/Final\\_Decentralization\\_Policy\\_\(PDF\).pdf](http://www.undp.org/content/dam/lesotho/docs/Other/Final_Decentralization_Policy_(PDF).pdf)

farming, particularly in the rural areas, which would in turn promote nutrition. Similarly, the **Legal Capacity of Married Person's (LCMP) Act No 9 of 2006** provides for the removal of minority status of married women and enables them to carry out certain acts provided for in section 3 independently, such as the right to enter alone into contracts, to act as executrix of a deceased estate, to register immovable property in their name, and to act as directors of companies.

**The Children's Protection and Welfare Act 2011** promotes the best interests of the child in various ways, including the child's right to food, water and a caring environment. Section 11 of the Act provides that a child has a right to access education, adequate diet, shelter and medical attention. Section 11 arguably makes the most significant contribution to child nutrition in the country as it places immense emphasis on the right to an adequate diet.

**The National AIDS Co-ordination Framework** provides for the acceleration and enactment of the Public Health Bill. A Public Health Bill, including, regulations have been drafted and awaits enactment by Parliament. This Bill provides for the establishment of the national health system in Lesotho in order to create an adequate legal environment for the provision of health services in Lesotho.

**The Disaster Management Act 2 1997** makes provision for emergencies arising from disasters. The mitigation of collateral damage created by natural disasters can contribute to the prevention of malnutrition and diseases resulting from disasters such as severe climatic fluctuations.

### **3.4.1 Overarching Capacity Gap**

The main finding is the existence of weak legal and policy frameworks in the country which do not adequately provide an enabling environment for multi-sectoral nutrition. This apparent gap emphasizes the need for nutrition to be mainstreamed in all policies, frameworks and strategies.

## **3.5 Evidence Based Decision Making**

In the previous section, the focus was on how Lesotho is increasing commitments towards nutrition through various policies and legal frameworks. While this is essential, several factors have been found to prevent effective leadership and evidence-based decision making for nutrition in many countries. These can include a lack of national and local level knowledge of undernutrition and its causes, as well as a lack of evidence and data on nutrition to inform policy, programming and advocacy<sup>25</sup>. Moreover, country decision-makers also face challenges to the effective use and interpretation of the nutrition data and information that does exist<sup>26</sup>.

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<sup>25</sup> Nisbett, N; Wach, E; Haddad, L & Arifeen, S. E. What drives and constrains effective leadership in tackling child undernutrition? Findings from Bangladesh, Ethiopia, India and Kenya. Food Policy 2015

<sup>26</sup> International Food Policy Research Institute. 2014 Global Nutrition Report (2014). <http://globalnutritionreport.org/thereport/the-report-2014/><sup>26</sup> Nisbett, N; Wach, E; Haddad, L & Arifeen, S. E. What drives and constrains effective leadership in tackling child undernutrition? Findings from Bangladesh, Ethiopia, India and Kenya. Food Policy 2015

<sup>26</sup> International Food Policy Research Institute. 2014 Global Nutrition Report (2014). <http://globalnutritionreport.org/thereport/the-report-2014/>

The situation is not different in Lesotho. FNCO is responsible for monitoring and tracking the progress of cross-sectoral actions in nutrition. Yet, to date the national nutrition programmes do not have a reliable information management system to inform effective planning and continuous monitoring of the programmes. This is despite the availability of raw information such as data on birth registrations and on the growth of children under-five collected through all health facilities and by Village Health Workers<sup>27</sup>. It has not been possible to consolidate and compile data due to inadequate staffing and transport facilities.

An attempt was made in 2002 to establish a National Nutritional Surveillance System (NSS) in Lesotho, which was managed by FNCO, with financial and technical support from UNICEF. At its best, the NSS collects, analyses and disseminates information on nutritional status on a quarterly basis; identifies areas and groups at risk of malnutrition; and issues early warning to relevant stakeholders on nutrition related problems<sup>28</sup>. However, the system functioned sporadically and proved to be too demanding for FNCO to maintain. The key challenges with the nutrition surveillance system are listed below:

- a) FNCO technical staff do not have the relevant capacity to manage all the components of the system and they still lack ability to trouble shoot and resolve most problems on their own.
- b) Not all indicators and associated variables are practical, relevant or easy to collect and compile without overstressing FNCO's human and financial resources, as well as logistics.
- c) The surveillance task team needs to complete the manual and operationalise it. The team will require training and technical support to complete the task.

Attempts are underway by the MoH and its implementing partners to integrate/strengthen the nutrition surveillance within the Health Management Information System as part of the District Health Information System (DHIS2). The absence of reliable information stored in appropriate formats has made assessing the impact of implementation of nutrition interventions difficult. In the absence of electronic growth monitoring and/or nutrition surveillance programme, the assessment of nutrition status relies on the periodic population-based studies to inform the impact and trends of nutritional status, which unfortunately give only periodic information.

At a broader level, the Lesotho Vulnerability Assessment Committee in its 2016 annual assessment deliberately integrated nutrition indicators. To achieve this, a household questionnaire collected information on anthropometric measurements [weight in kilogrammes, height in metres, mid upper arm circumference (MUAC) in centimetres and presence of oedema], livelihoods, and access to health, HIV, gender, water and sanitation. Further the Lesotho Demographic Health Survey (LDHS) is undertaken by MoH, with the support of the Government of Lesotho, and a host of international development partners. The LDHS (2014)<sup>29</sup> was the third health survey to be conducted in Lesotho, in collaboration with the worldwide Demographic and Health Surveys Programme. It provides updated estimates of basic demographic and health indicators, some nutrition indicators for children under five, as well as some indicators of maternal nutrition. The LDHS is by far the most used source of nutrition data, as it is readily

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<sup>27</sup> Lesotho Zero Hunger Strategy Review, 2018

<sup>28</sup> Isaacson, B (2008): Scoping Study on Food Security Information; Consultancy Report

<sup>29</sup> Ministry of Health (2014): 2014 Lesotho Demographic Health Survey

available even though it is conducted periodically every five years. In the future, the LDHS would do well by expanding some of the nutrition indicators.

Nutrition surveys are not a permanent fixture in Lesotho, primarily due to limited financial resources. The last nutrition survey was conducted in 2007 following a drought emergency<sup>30</sup>. The survey estimated the acute malnutrition rate of children aged from 6 to 59 months; the mortality rate of under 5 and population and was meant to provide a baseline for the strengthening of the surveillance system in Lesotho. It specifically determined the levels of measles, Vitamin A, deworming and immunization coverage, assessed food consumption among children aged from 6 months to 17 years; assessed prevalence of morbidity (diarrhoea, cough) in children aged from 6 to 59 month and information on women's nutritional status. The survey was done using the Standardised Monitoring and Assessment of Relief and Transition (SMART) methodology. The survey has not been conducted since then due to funding constraints. Similarly, nutrition research studies are limited. Even the few that are available are not easily accessible. Currently, a research agenda for nutrition has not been developed.

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<sup>30</sup> WFP Factsheet- Lesotho Nutrition Survey (Nov – Dec 07): <http://documents.wfp.org/stellent/groups/public/documents/vam/wfp172173.pdf>

## **SECTION 4: RECOMMENDATIONS**

### **4.1 Introduction**

The assessment has reiterated the governance challenges that previous studies and reports have highlighted. In general, the FNCO is relevant to lead and coordinate the multi-sectoral structures responsible for nutrition actions but needs to be capacitated to effectively discharge its mandate. The governance structures that were established in 1977 are no longer functioning and must be resuscitated to meet the present-day realities in the country. All key units responsible for nutrition (FNCO, MOH, MOAFS and MOET) lack capacity due to shortage of human resources, effective structures, financial resources, office equipment and transportation.

There is progress in that some key legal frameworks and policies are available to direct nutrition actions to scale up nutrition within several government ministries. The Lesotho Food and Nutrition Policy and the much-anticipated nutrition strategy are currently being developed and will further clarify the roles of key stakeholders and set targets and a monitoring framework. The development of NSDP II provides a further opportunity to elevate nutrition to the development agenda, and it is important that FNCO leads stakeholders in articulating the nutrition component in alignment with Lesotho Food and Nutrition Policy and strategy.

### **4.2 Recommendations**

#### **4.2.1 Revitalize FNCO's overall coordination architecture**

There is a need to review and to reform the governance structures for multi-sectoral coordination of nutrition as they are no longer functional. The Lesotho Food and Nutrition Council which was composed of a Cabinet Sub Committee and chaired by the Prime Minister no longer exists and has not existed for many years. The Nutrition Advisory Team composed of Principal Secretaries of key ministries and chaired by Government Secretary no longer exists either. The government has grown in size and complexity since 1977 when these structures were established and there is a commitment to scale-up nutrition. It is, therefore, recommended that the government considers an alternative structure to strengthen nutrition delivery in the country.

- The national level coordination mechanisms should be strengthened through the establishment or strengthening of a National Food and Nutrition Advisory Team, and the multi-sectoral task teams and the SUN networks should also be developed, reviewed and strengthened.
- District level structures should be formed at district, council and community levels and aligned to the Local Government Structures established in each district. The Heads of Departments who are organized through the Heads of Department Meetings should take an active role in overseeing the implementation of multi-sectoral nutrition actions. The District Food and Nutrition Officers will give regular updates of plans, activities and progress report to the Heads of Departments. Heads of Departments will in turn report and give updates to their principals at national level

using established communication and reporting structures so that the national level is aware of plans and activities at district level

- Multi-sectoral coordination should be strengthened by a redefining of roles and responsibilities of all stakeholders. Joint planning and management of programmes needs to be improved to avoid duplication of effort by different agencies and partners working in silos and to enhance effective use of resources.

#### **4.2.2 Elevate the FNCO to a Food and Nutrition Commission**

The Food and Nutrition Coordination Office (FNCO) has capacity gaps caused by ineffective governance structures and inadequate human and financial resources to effectively discharge its mandate. The elevation of the FNCO into a Commission will strengthen strategic leadership and coordination of nutrition interventions. It is therefore recommended that:

- Government elevates the FNCO to a Food and Nutrition Commission/Authority which will need to be commissioned by an act of Parliament. The elevation of FNCO will need to be undertaken by government and led by the Cabinet Office using procedures that are already in place.
- A board should be constituted to play an oversight role over Food and Nutrition Commission on behalf of government and report to the Prime Minister on the status of malnutrition in Lesotho. Under this arrangement, the Food and Nutrition Commission will act a Secretariat of the board.

#### **4.2.3 Enhance high-level political commitment on nutrition**

- A cabinet sub-committee on multi-sectoral nutrition will need to be formed and chaired by the Prime Minister. This sub- committee ought to provide political support and guidance to scaling up nutrition efforts.
- It is recommended that a multi stakeholder platform which comprises principal secretaries of key ministries and SUN network representatives be established by the Government so that they may advise and support scaling -up actions through their respective ministries and programmes.

#### **4.2.4 Implement a capacity building plan for FNCO and partners**

- The transformation of FNCO should also include capacity building for staff through in-service training and long-term training where required, developing systems for effective operations of the secretariat and adequate resourcing for secretariat.
- Senior managerial and technical positions for people with relevant skills in policy development and implementation, programme planning and implementation, monitoring and evaluation and data management, behavior change communications and material development for nutrition education should be established. These positions have been recommended for the new FNCO secretariat in line with the new food and nutrition security policy. Senior management positions in finance and administration have also been recommended to develop and implement effective systems.
- Implement training courses based on the list of training topics provided for in the nutrition strategy currently under development, particularly for FNCO staff and for the key ministries, as well as other key stakeholders at national, district, council and community levels.

- The focal persons should be individuals who are senior in their organisations and are able to make decisions. At least two focal persons per institution should be appointed to ensure consistent participation and continuity. Nutrition focal points can be invited to serve in any of the multi-sectoral structures based on their expertise.
- Apart from MoH, MoAFS and MoE, there are no nutritionists in all other ministries. Therefore, nutrition focal points in other ministries would have to be capacitated in nutrition.

#### **4.2.5 Strengthen integration of nutrition key Ministries**

##### **Ministry of Agriculture and Food Security**

- The Nutrition Division currently does not have a policy and strategy to guide the district level structures. There is therefore an urgent need to develop a new policy and strategy for nutrition and food security to enable the unit to function at a more strategic level and to guide the ministry on how to mainstream nutrition in the Food Security Policy.
- A capacity assessment of the Nutrition Division should be undertaken together with the development of a strategy to inform a capacity building strategy for the Division. The main challenge at community level is lack of adequate numbers of nutrition field staff to implement nutrition activities. As has been highlighted, the other challenge is that the role of nutrition extension agents has been augmented to perform all agriculture services leaving little time for nutrition. The Ministry needs to appreciate the role of the nutrition division which goes beyond food security but is concerned with nutrition of all vulnerable groups including children, pregnant and lactating women, people living with HIV and AIDS, youth and the elderly.
- Training manuals on nutrition sensitive actions should be developed by the national office with the support of FNCO and other key stakeholders. Training should be rolled out to nutritionists at district level who will then train nutrition field staff and other stakeholders at community level. The nutrition division can lead in the training areas that include small scale food production, storage, processing and preparation as well as in income generation activities at community level.

##### **Ministry of Health**

- A capacity assessment should be considered to assess the role of the Nutrition Unit and the resources available and to make recommendations on improving the structures and adequacy of resources as well as the location of the unit. The Ministry of Health has developed guidelines on infant and young child feeding practices which can be used to train all other key stakeholders through the recommended capacity building plan. The nutritionists in the MOH can facilitate training in all areas concerned with infant and young child feeding and maternal and child health and nutrition.

##### **Ministry of Education**

- ECCD has developed a comprehensive policy and strategy to guide its actions. The most limiting factor is a severe lack of human resources. There is one nutritionist working in the Ministry of Education under the National Curriculum Development Department (NCDD). The MOET has

initiated a process of curriculum review for the ministry, and a curriculum task force composed of institutions of higher learning should be formed to provide technical expertise and support to the process. The school feeding unit has no nutritionists at national level and is supported by the ECCD nutritionists. At district level there are 2 nutritionists based at district level in the school feeding programme in Thaba Tseka, Butha Buthe and Maseru.

- There was no evidence that the high-level government structures that were formed to support the programme are still functioning. The school feeding programme has been supported by a school feeding task force at FNCO. Transportation for monitoring the suppliers is severely limited. An assessment of the capacity of the school feeding structures was undertaken in 2014 in line with the development of the school feeding policy and recommendations made on proposed structures was not approved. The assessment of the school feeding programme should be re-visited and should include an assessment of the ECCD and should be undertaken to determine NCDD structures to determine their effectiveness and to make recommendations for strengthening the structures. NCDD has experience in early childhood care and development strategies and can lead training in these areas.

#### **Nutrition Focal Persons**

- Focal persons for nutrition do not exist in all other government ministries except in ministries who have nutrition units and within key partners. Focal persons should be appointed by FNCO and a training programme on introduction to nutrition must be developed and implemented to give the focal persons basic skills on malnutrition problems in Lesotho and strategies to combat them. The training should also incorporate planning and monitoring and evaluation aspects. The focal person for nutrition should also be identified at district level, and they should constitute the district multi-sectoral nutrition teams.

#### **4.2.6 Increase funding towards nutrition**

- Government is recommended to earmark 3% of the budget towards nutrition activities in all key ministries to facilitate scaling-up of nutrition.
- Development partners are encouraged to commit themselves to supporting all key ministries to undertake capacity assessments and support capacity building of the units through providing technical expertise and financial resources for nutrition activities.
- Government need to also advocate for budget increase to support scaling-up of nutrition in parastatals, civil society organizations, United Nations Agencies, international Agencies, academia and media through an allocation of a minimum of 3% of their budgets.
- Transportation is a limiting factor in all government ministries at national and district levels due to financial constraints. Sharing of transportation by the key stakeholders is an issue that needs to be discussed and a strategy developed on a more efficient use of transport by multi-sectoral nutrition programmes.

#### **4.2.7 Strengthen nutrition Evidence-Based Decision Making**

- FNCO will require support from government and development partners in the development of a robust and sustainable nutrition surveillance system.
- Nutrition studies must be undertaken in the interim period, at the least once in two years to supplement the DHS surveys.
- FNCO together with institutions of higher learning should review and develop a research agenda and partner with international institutions of higher learning at regional and international level to conduct studies in specific areas where they are gaps in knowledge. Currently there is a need to conduct a micronutrient survey.
- There are inadequate national systems in place for monitoring nutrition and reporting to the Ministry of Planning, to the Prime Minister and another national structure. The ongoing development of the nutrition strategy will develop a nutrition monitoring framework which can be used by all key stakeholders at all levels. FNCO ought to develop a system for all stakeholders to report against the national nutrition monitoring framework.

#### **4.2.8 Develop an Advocacy and Resource Mobilization strategy for the Capacity Development Plan**

- An advocacy and resource mobilization strategy for the implementation of the capacity development plan should be developed. The proposed strategy should include advocacy and resource mobilization actions for the capacity development plan.
- Advocacy and sensitization on the needs to reduce levels of malnutrition to achieve national development efforts should be undertaken at all senior levels of government, especially by the office of the Prime Minister and all key ministries, by ministers, the Government Secretary, Principal Secretaries, parliament, senate and other national bodies and structures.

### 5.1 List of stakeholders interviewed

NAME & SURNAME	POSITION	MINISTRY / DEPARTMENT	EMAIL ADDRESS	CONTACT NUMBER
Mr. Setlaba Monaheng	Director	Ministry of Small Business and Develop	<a href="mailto:Setlaba084@gmail.com">Setlaba084@gmail.com</a>	58855554
Mr. Lekhoee Machate		"		58747458
Mrs. Kholumo		World Vision		
Ms. Mantopi Lebofa		Technologies for Economic Development (TED)	<a href="mailto:mantopi@yahoo.com">mantopi@yahoo.com</a>	57255899
Ms. Moipone Raphuthing		LNDC	<a href="mailto:raphuthing@Indc.org.ls">raphuthing@Indc.org.ls</a>	
Mr. Thabo Rakhetsi				
Ms. NtitiaTuoane	DFS	MoAFS	<a href="mailto:ntitia@hotmail.com">ntitia@hotmail.com</a>	
		Ministry of Education	<a href="mailto:Mmohlotsane25@gmail.com">Mmohlotsane25@gmail.com</a>	63926028/ 59075330
Mr. Phamotse	Director Secondary Education	"		
Mr. Semoli	Nutritionist ECCD	"		
Mr. Mafaesa	Inspector Home Economics	"		
Mr. Lenesend	Financial Controller	Cabinet Office		62860282
Ms. Mapeo Matlanyane	Director	"	<a href="mailto:reinm@yahoo.com">reinm@yahoo.com</a>	
Dr. Maile	Director Family Health Division	Health		62322788
Ms. Thithili Liaho	Senior Nutritionist	Ministry of Health	(Appointment not confirmed)	58993627/ 58932362
Dr. Ramatlapeng	Director Primary Health Care	"	(Appointment not confirmed)	62851085
Ms. Nkaloseng Monaheng	Director Planning	"	(appointment not confirmed)	58960054
Mr. Ratlala Monts'i	N/A	National AIDS Commission (NAC)		5882774
Ms Masechaba Mahlapha		NAC	<a href="mailto:mahlapha.m@nac.org.ls">mahlapha.m@nac.org.ls</a>	
Ms. Lieketseng Mosenyetse	Research and Statistics	"		
Ms. Malijahlooho Matsoha (Maja)	Policy and Strategy Manager	"		
Mr. Haretsebe Mahosi	CEO	DMA	<a href="mailto:Ntate.mahosi@gmail.com">Ntate.mahosi@gmail.com</a>	62003568
Mr. Moremoholo	Corporate Affairs	Central Bank	<a href="http://www.centalbank.org.ls">www.centalbank.org.ls</a>	
Mr. Mopeli	Health and Safety	Central Bank		
Dr. Masekonyela Sebotsa	Director	FNCO, Cabinet Office		
Nteboheleng Mothae	RFNCO	FNCO		

NAME & SURNAME	POSITION	MINISTRY / DEPARTMENT	EMAIL ADDRESS	CONTACT NUMBER
Nthabeleng Sefako	Information Officer	FNCO		
T. Elias	RFNCO	FNCO	qondaelias@gmail.com	58907765
Dr. M. Moteetee	Independent consultant	FNCO	mmoteetee@gmail.com	58855359
Mr. Pitso	Driver	FNCO		
Mr. Ramashamole	Driver	FNCO		
Ms Mamotebang	Procurement	FNCO		
Ms karbelo	Registry	FNCO		
Nt Tsepo	Registry	FNCO		
Ms Morongoe	Office Assistant	FNCO		
Ms Mantsebo	Office Assistants	FNCO		
Ms Nthoamehla	Office Assistants	FNCO		
Ms Mamathetho	Switchboard	FNCO		
Ms Matsepang	Resource Center	FNCO		
Tebello Mothabeng	IBC College	IBC College	<a href="mailto:Tebello.mothabeng@yahoo.com">Tebello.mothabeng@yahoo.com</a>	63038994
Ms M. Mphakela	Instructor	LAC	Getrude_tseole@yahoo.com	58815879
N. Mopeli	Instructor	LAC	<a href="mailto:nthisanamopeli@yahoo.com">nthisanamopeli@yahoo.com</a>	58059675
Ms. Matsietso Phafane	Nutritionist/former Director FNCO	Retired		58017016
Ms Mamra Ntsike	Nutritionist/former Director FNCO	Independent consultant		63167837
Ms Mary Njoro spelling	Resident Representative	WFP		
Mrs Mantsane	WHO			
Dr. Phiney Hanson	Independent consultant/Nutritionist			
Mr. Mohato Sekonyela	It specialist			58695151
Mr. Folojeng	IT specialist	Cabinet Office		63893411
Ms. Rose Taxan	Lecturer	NUL – Nutrition Department	<a href="mailto:prafrose@yahoo.com">prafrose@yahoo.com</a>	59501023
Mr. Setenane	P.S. Admin Cabinet	Cabinet Office		62999302
Ms. Mataeli Sekhant'so	P.S. Economic Cabinet Office	“		
Mr. Mafechane Lene	Financial Controller	Cabinet Office		62860282
Mr. Rajake	Human Resources Manager	Cabinet Office		
Mr. Mathabathe Hlaele	Principal Secretary	Ministry of Works		
Mr. Aal Nthunye				56402701
Ms. Lebohang Ntsasa				58965498
Mr. TseleTauhali				58411868

NAME & SURNAME	POSITION	MINISTRY / DEPARTMENT	EMAIL ADDRESS	CONTACT NUMBER
Mr. Manteboheleng Khasake				59921854
Mr. Marelebohile Paka	VHW			59359664
Mr. Malerato Khuele	WHW			57019802
Mr. Malefu Khyanyapa	Director Monitoring and Evaluation	Ministry of Planning		22320913/ 58690772
VMs. Nts'iuoa Jase	Director Aid Coordination	"		
Ms. Limakatso Makoae	Horticulturalist		<a href="mailto:makoaelimakatso@yahoo.com">makoaelimakatso@yahoo.com</a>	6302236/ 58859366
Mr. Sekonyela Mahase	Agronomist		<a href="mailto:nsmahase@hotmail.com">nsmahase@hotmail.com</a>	63022361
Mr. Lebone Molahlehi	Director Crops		<a href="mailto:sekhantso@gmail.com">sekhantso@gmail.com</a>	58963956
Mr. Mokuoane	Chief Decentralization Officer	Ministry of Local Government		58000314
Ms. Mahali Makhotso Malibeng	Chief Poultry Production Officer	Agric Research/Livestock	malibengmahali@yahoo.com	58002941
Mr. Malefetsane Masasa	Principal Secretary	Ministry of Social Development		
Ms. Mabataung Khalane	Director / Principal Secretary	Ministry of Gender	khalanemabataung@gmail.com	58084199
Ms. Libuseng	Chief Nutrition Officer	Ministry of Agriculture	libusengb@yahoo.com	58862873
Ms. Matebang Napo	Principal Nutrition Officer	"	mabatebangnapo@yahoo.com	58059403
Ms. Lineo Ramabele	Deputy Principal Secretary	Majesty's Office	ramabele.s@gmail.com	57030258 / 22320258
Ms Matsenki Mohapeloa	Senior Economic Planner	Ministry of Small Business	matsenkim@gmail.com	63012482/ 58695053
Ms. Pontso Duplessis	Nutritionist	CRS	pontsoduplessis@crs.org	58828054
Ms. N Nthimo		Caritas	mnthimo@caritas.org.ls	58865262
Ms Teboho Lesei		NHTC		
<b>Stakeholders in Mafeteng</b>				
Mahlompho Ntai	Senior Nutritionist	MOH		51921563
Lihlong tjokosela	District Special Education Officer	MOET		58502462
Motselisi Ramakhula	Sanitation and Hygiene President	Nutri-Power		59003132
Mamolemo Molikoe	Intelligence Officer	NSS		53889817
Tsabo Lephoi	Marketing	MSBCM		63278218
Mmpho Mafereka	DPHN	MOH		58719919
Mamorakane Rafeeea	RFNCO	FO district Office		58703095

NAME & SURNAME	POSITION	MINISTRY / DEPARTMENT	EMAIL ADDRESS	CONTACT NUMBER
Maleshoane Mache	Reporter	LENA		50779363
Paulina Mokoroane	Public Health Nurse	MOH		58993454
Moselantja Shemane	Correctional Officer	Correctional Services		58565349
Molefi Ramochela	District Education Officer	MOET		58855687
Lebohang Motlalane	District Nutrition Officer	MoAFS		58855687
Mamonyake Koloti	DDM	DMA		63174497
<b>Stakeholders in Thaba Tseka District Level</b>				
Muso Jane	District Administrator (DA)	MOLG		58467272
Mafisa Ntaoleng		Ministry of Gender		58082237
Makuena Linake		LENA		58067757
Matsepo Lebelo		DRWS		58928968
Malikopo Malataliana		MOLG		59111250
Kali Molefe		Urban council		66105862
Tlaleng Makhang		MOH		5870982
Matsepo Khau		MGYSR		53678672
Rethabile Motake		MoAFS		59790747
Lerato Ramarou		Small Business Coops		53238768
Khopotso Rakolobe		DMA		58492760
Mamoiketsi Leete?		MOET		57526010
Limakatso Koea		FNCO		58457604
Washi Mokati		WFP		58019466
Khau Matsepo		Sports and Recreation		53678672
Motlatsi Pitso		NSS		62320500
Matsepo Motjoloane		LRCS		6312776
<b>Stakeholders in Thaba Tseka Community Level</b>				
Rethabile Motake	Area Technical Officer (Nutrition)			
Makheekhe Mokhotho	Agriculture Assistant (AA) Nutrition			
Kolitsoe Shao	AA Nutrition			
Mamonyane Letoane	Farmer Extension Facilitator (FEF)			
Mantsoaki Humane	Village Health worker (VWH)			

<b>NAME &amp; SURNAME</b>	<b>POSITION</b>	<b>MINISTRY / DEPARTMENT</b>	<b>EMAIL ADDRESS</b>	<b>CONTACT NUMBER</b>
Makatleho Letsie	VHW			
Mathabo Lekhooba	FEF			
Masetlaka Rametse	FEF			

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## Notes

- Capacity Development Plan
- M&E Framework