

# Project Plan

## Pacific Senior Health Officials Network Nutrition Project

### Project statement

To undertake a scoping study to identify the current food environment and context, programs, resources and communication practices in Pacific Island countries.

### Relevant outcome/ partnership area/s

The project will inform the identification of possible niche areas of focus for the Pacific Senior Health Officials Network, with the aim of contributing to improved governance and a more strategic approach to the promotion of healthy eating.

The project has been funded under the Pacific Governance Support Program (PGSP) by the Australian Agency for International Development (AUSAID). The PGSP was established to provide funding for governance activities linking Australian Government Agencies directly with Pacific counterparts and supporting shared regional governance approaches.

### Document revision history

Version	Date	Prepared by	Comments
1	28/07/05	L White	
2	13/10/05	L White	Edited following project approval by PSHON

## Part A: Business Case

### Project scope

#### Purpose

The purpose of the project is to:

- Establish collaborative relationships at project officer level to improve implementation of public health nutrition interventions in the Pacific.
- Provide an area where the Pacific Senior Health Officials Network (PSHON) can best add value to public health nutrition in the region, contributing to good governance.
- Examine the feasibility of developing regional communications strategy and resources for use in health promotion activities.

#### *Key performance indicator/s*

- Countries participating in scoping study and providing relevant information and comments on draft report.
- Report provided to PSHON.

#### *Benefits*

Achievement of the project purpose should contribute to the following benefits:

- More accessible network of public health nutritionists to share information and resources across the Pacific.
- A clear indication of a beneficial role for the PSHON in public health nutrition.
- A picture of the need for and/or suitability of a regional approach to nutrition promotion in the Pacific.

#### Rationale

Adequate, nutritious food is fundamental to promote good health and help prevent disease. In the Pacific, the shift away from consumption of locally produced foods has been shown to increase obesity.

Poor nutrition comes at a significant cost – to individuals and to nations. In Australia, the financial burden of diet related heart disease, stroke and cancer was estimated in 2002 by the National Health and Medical Research Council to be about \$6 billion per year.

The significant health risks include:

- Type 2 diabetes
- coronary heart disease
- stroke; and
- some cancers, just to name a few.

Yet, chronic disease due to poor diet is largely preventable. That's why we need to promote healthy eating and physical activity, especially to young people, before their behaviours result in unhealthy weight or disease.

The Tonga Commitment to Promote Healthy Lifestyles and Supportive Environments (WHOWPR 2003) provides a context for activity targeting nutrition. The Commitment states:

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An obvious trend being experienced throughout the Pacific is the increasing prevalence of obesity and non-communicable diseases, including diabetes:

- Type 2 diabetes appears in Pacific Island countries at levels that exceed most other countries in the world.
- Cardiovascular disease is the predominant cause of death in most Pacific Island countries.
- Obesity is so common in Pacific societies as to appear normal. Overweight and obesity have been recorded at levels that exceed 80% (males) and 90% (females) of the adult population, and is being increasingly recorded in children.
- Up to 60% of the health budget in some countries of the Pacific is spent on overseas referrals of patients, often with chronic disease, particularly diabetes.

The evidence for prevention is overwhelming:

- Lifestyle interventions can reduce the incidence of Type 2 diabetes in high-risk populations by up to 58% in four to six years.
- Weight reduction through a combination of dietary and physical activity interventions can reduce obesity in high-risk populations within one year.

The Tonga Commitment made the following recommendations to promote healthy diets:

- National and community-level awareness-raising and advocacy for intervention.
- Assessment of the nutritional value of local foods leading to the promotion of healthy traditional food use and cooking methods.
- Implementation of national food and nutrition policies and legislation encompassing food security, safety, marketing practices, labelling, and nutritional standards.

This project may assist in addressing the first two recommendations.

At the meeting of Pacific Senior Health Officials Network in November 2004 members expressed interest in:

- strategic approaches to promoting good nutrition,
- collaboration to promote healthy eating amongst Pacific Island peoples, and
- promoting consumption of local foods.

The Nutrition Project was proposed to address these areas of interest and to help with progress against the Tonga Commitment.

## **Objectives**

The aim of the Nutrition Project is to work in collaboration with Pacific Ministries of Health to:

1. Examine options for healthy eating promotion through:
    - assessing the feasibility of a regional healthy eating communication strategy based on the needs and culture of member countries and existing activities,
    - study of regional resources for promoting healthy eating and potential for common communications messages, and
    - researching the role of local nutritionists in health promotion activities.
  2. Recommend areas for collaborative action for the Network by identifying regional needs and gaps in existing measures.
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The Project would acknowledge the need to:

- coordinate with existing strategies, committees and health promotion centres,
- involve Pacific Islander people with nutrition expertise,
- involve Departments of Agriculture and Fisheries regarding local food promotion,
- focus on nutrition issues rather than weight, and
- consider different requirements in individual Pacific countries.

By the end of the project we will have:

- Established collaborative relationships with key personnel to foster long-term links,
- Identified existing initiatives to promote healthy eating in the Pacific (existing programs, activities and resources/publication),
- Gathered information on food supply, eating patterns and nutrition of key population groups,
- Considered gaps in the available information and made recommendations for further studies,
- Determined communication objectives and shared needs within the region,
- Identified a potential regional response, and
- Made recommendations for further action based on findings.

*Key performance indicators*

- Links established with major partners.
- Identified programs/initiatives relating to healthy eating promotion.
- Showcase of programs identified and information documented.
- Project report written, which includes analysis and recommendations for the PSHON.

### **Strategies**

- Contact and establish working relationships with key nutrition staff in participating countries,
- Utilise existing expertise to share and access information (ie SPC and WPRO),
- Join relevant mailing lists and discussion groups if available,
- Research relevant topics to inform reporting,
- Visit Fiji, Papua New Guinea and Kiribati to highlight focus of study,
- Partner with Pacific Island colleagues to prepare and finalise reports, and
- Consider opportunity of progress with high level support from PSHON.

### **Assumptions**

- That all stakeholders will be actively involved and support the PSHON Nutrition Project.
- That funding will be available to implement recommendations.

### **Constraints**

- Funding at present is only secured for 5 months.
  - Not all stakeholders may want to be actively involved.
  - The scope of the Nutrition Project may be difficult to obtain agreement from all members of PSHON.
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- Communication with Pacific Island staff may be difficult (due to technology, timeframes and cultural preferences).

### **Exclusions**

- The project will not be able to address issues around economic trade and import/export of food between Pacific Islands and Australia or New Zealand. This has been raised as a significant issue but is outside the scope of the project.
- The preparation of nutrition strategies for countries without them is also outside the scope of the project.

### **Related activity/projects**

- A proposal, Global Strategy on Diet, Physical Activity and Health (DPAS) Implementation from the WHO has been received by AusAID. The requested budget is A\$150,000 to support countries in the Western Pacific Region to implement the strategy for the prevention and control of chronic, non-communicable diseases. Activities are based on the WHRO DPAS implementation plan developed by Marion Dunlop and Western Pacific Regional Office staff.

## **Project partners/clients/stakeholders**

### **Partners/clients**

- Pacific Senior Health Officials Network (PSHON)
- Australian Government Health Department colleagues (PHD & International Branch)
- AusAID
- Pacific Island Governments/Health Departments
- Current Pacific Island nutrition workforce

### **Other stakeholders**

- WPRO – WHO
  - Secretariat of the Pacific Community
  - Universities and Training Institutes
  - Food industry
  - NGO's: Diabetes Australia, ANF, Heart Foundation
  - DAA
  - PHAA
  - Local Governments in Pacific
  - Pacific Island Governments/Agriculture and Fisheries Departments
  - Pacific Island Governments/ Environmental Departments (health)
  - Pacific Island Governments/Education Departments
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## Project timeframe

5 months (August 2004-December 2005)

Note: Project timeframes have been affected by the delay in endorsement of the project and in selection of the countries to be analysed. A report to the PSHON at the meeting to be scheduled in March 2006 is required.

## Costs

### Project costs

Item	Costs <sup>1</sup>
1. Investment by permanent staff (FTE estimates only)	1.0
2. Project budget:	
a) Temporary project staff – APS EL1	\$30,810
b) Associated non labour and corporate overheads (includes on costs)	\$5,085
c) Other – travel and production of reports	\$9,800
<b>Project budget-total</b>	<b>A\$46,108</b>

(Including \$413 for salary/on-cost variance from AUD\$45,695).

Additional funding of \$10,000 will be provided by AUSAID to support travel for a regional expert to participate in the research tour of selected Pacific Island countries to facilitate local ownership of the Project and improve communication.

### Resource contribution from stakeholders

Staff time of PSHON committee and Pacific Departmental staff.  
Assistance where required from AusAID staff.

### Estimated margin of error

+/- 5%

### Cost implications post-project

Costs will not be identified as part of this project.

## Overall project risk

The overall risk to this project is low-moderate.

<sup>1</sup> If project is multi-year, add additional columns and provide costs for each financial year.

## Part B: Project Management

### Human resource management

#### Governance

##### a) Structure

This project will be managed by the Nutrition Section, DoHA in collaboration with the Pacific Island Regional Expert. Advice will be provided to the section through the Pacific network staff involved.

##### b) Roles and responsibilities

Project role	Name/s	Responsibilities
Project Sponsor	Pacific Senior Health Officials Network	<ul style="list-style-type: none"><li>• Provide representation on behalf of their country.</li><li>• Advise country contacts.</li><li>• Consider recommendations provided.</li></ul>
Project Officer	Leticia White	<ul style="list-style-type: none"><li>• Develop and agree project objectives and brief with AusAID and Network members.</li><li>• Collaborate with identified Pacific Island stakeholders to undertake the project.</li><li>• Provide nutritional expertise.</li><li>• Visit selected countries to inform preparation of the report.</li><li>• In collaboration with the Network member countries develop a report with recommendations on possible areas of focus for the Network.</li></ul>
Pacific Island Regional Expert	Wila Saweri	<ul style="list-style-type: none"><li>• Work with the Australian Health Department project officer to provide expertise, information and advice on existing activities.</li><li>• Assist in developing a program of appointments for the detailed analysis in nominated countries.</li><li>• Take part in the study tour of up to three selected countries.</li><li>• Work with the small group and the Australian Health Department project officer to develop recommendations on possible further work for consideration by the Network.</li><li>• Collaborate with the Australian Health Department project officer to prepare and comment on the report.</li></ul>

Project role	Name/s	Responsibilities
Detailed Analysis Selected Countries – Project Advisory Group	Republic of the Fiji Islands – Nisha Khan Papua New Guinea – Wila Saweri Kiribati – Tinai iuta Metai	<ul style="list-style-type: none"> <li>• Work with the Australian Health Department project officer to provide expertise, information and advice on existing activities.</li> <li>• Assist in developing a program of appointments for the detailed analysis.</li> <li>• As part of a small group work with the Australian Health Department project officer to develop recommendations on possible further work for consideration by the Network.</li> <li>• Provide strategic advice regarding the progress of the project.</li> <li>• Collaborate with the Australian Health Department project officer to prepare and comment on draft reports.</li> <li>• Provide timely feedback on drafts</li> <li>• Ensure the information about the project is shared with other internal and external partners including Network representatives.</li> </ul>
Network member Pacific Ministries of Health	Samoa Vanuatu Republic of Nauru Solomon Islands <i>Kingdom of Tonga</i> <i>Tuvalu</i> <i>New Zealand</i>	<ul style="list-style-type: none"> <li>• Work with the Australian Health Department project officer to provide expertise, information and advice on existing activities.</li> <li>• Collaborate with the Australian Health Department project officer to comment on the report.</li> <li>• Provide ongoing feedback to the Network</li> </ul> <p><i>Italicised countries not confirmed.</i></p>
Manager	Lesley Paton	<ul style="list-style-type: none"> <li>• Provide day to day supervision and guidance.</li> </ul>
Liaison Point	Policy & International Branch Beth Slatyer Anna Bauze	<ul style="list-style-type: none"> <li>• Provide liaison point to PSHON.</li> <li>• Provide liaison point with AUSAID.</li> <li>• Provide advice on international liaison.</li> <li>• Manage funds provided for project and travel.</li> </ul>



**c) Key decision points** (ie. higher authority)

<b>Key project decision points</b>	<b>Higher authority for approval/sign-off</b>
Approval of project plan	Manager & Project Advisory Group
Status reports	Manager
Draft reports	Project Advisory Group/ Manager
Significant variations to project plan	Manager and Liaison Point
Approval to progress to finalisation phase (final report)	Project Advisory Group/ Manager and Liaison Point
Project completion report	Liaison Point
Release of project funds	Liaison Point

## Project Schedule

Strategy/Activity	Accountable Officer/s	Duration	Months											
			Jul	Aug	Sep	Oct	Nov	Dec	Jan 06	Feb	Mar	Apr	May	Jun
Project management activities														
	Officer/s	Duration	Jul	Aug	Sep	Oct	Nov	Dec	Jan 06	Feb	Mar	Apr	May	Jun
1.0 Project paper developed	LW													
1.1 Project paper agreed and selections made	PSHON													
1.2 Project Advisory Group established and TOR agreed	PAG													
2.0 Project plan developed and agreed	LW & LP													
2.1 Reporting mechanisms agreed	LP													
2.2 Status reports written and distributed	LW													
2.3 Draft report prepared and agreed	LW, WS & PAG													
2.4 Write and deliver project report to PSHON	LW & WS													
3.0 Liaise with AusAID via Internationals Branch for project reporting	LW													
3.1 Report to AusAID regarding ROU	International Branch													

<i>Project strategy implementation / administration activities</i>														
	Officer/s	Duration	Jul	Aug	Sep	Oct	Nov	Dec	Jan 06	Feb	Mar	Apr	May	Jun
<b>1.0 Establish collaborative relationships</b>														
1.1 Contact nominated country representatives	LW													
1.2 Establish working relationships with staff in countries to be visited which will lead to Project Advisory Group	LW													
1.3 Secure information required for visas and make arrangements for travel	LW & WS													
1.4 Collaborate with Pacific Island Regional Expert to undertake project	LW & WS													
1.5 Prepare project overview for country contacts	LW													
1.6 Engage key stakeholders in process	LW & WS													
<b>2.0 Identify existing activities to promote healthy eating in the Pacific</b>														
2.1 Identify key papers and relevant reports as background information to the study	LW													
2.2 Consult SPC, WHO and New Zealand regarding activities in the region	LW													
2.3 Prepare and consult on short questionnaire for PICs to complete to capture information in each country	LW & WS													

	Officer/s	Duration	Jul	Aug	Sep	Oct	Nov	Dec	Jan 06	Feb	Mar	Apr	May	Jun
2.4 Seek responses from PICs on 2.3	LW													
2.5 Expand information collection for key 3 PICs during visit	LW & WS													
2.6 Incorporate outcomes of 2.1, 2.2, 2.4 and 2.5 in report	LW & WS													
<b>3.0 Gather information on food supply, eating patterns and nutrition of key population groups</b>														
3.1 Identify key papers and reports relevant as background information to the study	LW													
3.2 Consult SPC, WHO and New Zealand regarding activities in the region	LW													
3.3 Prepare and consult on short questionnaire for PICs to complete to capture information in each country	LW & WS													
3.4 Seek responses from PICs on 3.3	LW													
3.5 Expand information collection for key 3 PICs during visit	LW & WS													
3.6 Incorporate results from 3.1, 3.2, 3.4 and 3.5 in the report	LW & WS													
<b>4.0 Consider gaps in the available information and make recommendations for further studies</b>														
4.1 Collate information and note the resulting gaps across the region	LW & WS													

	Officer/s	Duration	Jul	Aug	Sep	Oct	Nov	Dec	Jan 06	Feb	Mar	Apr	May	Jun
4.2 Consult with PAG on which of the gaps are appropriate for further study/activity by the PSHON	LW & WS													
4.3 Make recommendations based on outcomes of above	LW & WS													
4.4 Incorporate 4.1 and 4.3 outcomes in the report	LW & WS													
<b>5.0 Determine communication objectives and shared needs within the region</b>														
5.1 From the results of 2.6 and 3.6 highlight the communication objectives of nutrition promotion in PICs across the region	LW & WS													
5.2 From the results of 2.6, 3.6 and 4.4 highlight the shared needs for nutrition communication	LW & WS													
<b>6.0 Identify a potential regional response</b>														
6.1 From the results of 5.1 and 5.2 identify, if appropriate, opportunities for the PSHON to contribute to improved nutrition promotion in the region	LW & WS													
<b>7.0 Make recommendations for further action based on findings</b>														
7.1 Consider all the above activities and provide recommendations for further action by the PSHON.	LW & WS													

## Risk management

Risk	Risk Management Activities
	Preventive
Key stakeholders won't support/commit to project	Actively communicate benefits from being involved with project and ensure key stakeholders are kept informed of progress
Project partners/ Project Advisory Group members do not actively contribute	High level advocacy and active promotion of value of being involved with PSHON

## Quality management

### Quality standards/benchmarks/guidelines

- Good communication practices
- Timely dissemination of information/reports

## Communication management

### Communication

What	How	With/To Whom	When/how often
PIC Contacts	Email/fax		As needed
Project Advisory Group meetings	Teleconference? Email		Monthly? As needed
Progress Reports	Email/paper		As scheduled

### Information management

Document Type/Name	Electronic Location	Hard copy location
Nutrition Project Plan	S/Subsections/Nutrition/Pacific Nutrition Project PSHON/Project Admin/ Nutrition Project Plan	File, Health CO
Nutrition Project Report	S/Subsections/Nutrition/Pacific Nutrition Project PSHON/Project Papers/ Nutrition Project Report	File, Health CO

## Procurement and cost management

### Procurement

N/A

### Costs

Costs will be managed by Internationals Branch with liaison with AusAID when necessary.

## Recommendations and decisions

<b>Recommendations</b> (project manager)	
<b>Next Step</b> <input type="checkbox"/> Progress to implementation <input type="checkbox"/> Cease  <i>Comments:</i>	<b>Prepared by</b>  Name: Unit/Network: Date:
<b>Cleared by</b> (if relevant)	
Name: Position:	Signed: Date:
<i>Comments:</i>	
<b>Approval/decision</b> (higher authority)	
<b>Next Step</b> <input type="checkbox"/> Progress to implementation phase <input type="checkbox"/> Revise project plan and present again <input type="checkbox"/> Cease  <i>Comments:</i>	<b>Project manager<sup>2</sup></b>   <b>Project sponsor<sup>2</sup></b>
<b>Resources approved?</b> <input type="checkbox"/> Yes      Amount \$ <input type="checkbox"/> No <input type="checkbox"/> N/A	<b>Parameters of project manager authority</b> Time: Cost: Quality: Other:
Name: Position:	Signed: Date:

<sup>2</sup> This is most often and ideally the same person who has been performing this role to date but may not be.