

Effectiveness of Technical Assistance:

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to SUN countries by MQSUN+
(2017–2020) contributed to
efforts to scale up nutrition?



Guinea

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Key Findings

- Involving sub-national stakeholders in technical assistance (TA) design is essential to ensure their TA needs are considered and to improve their ownership of the process.
- Providing a dedicated expert in gender, equity and social inclusion (GESI) and nutrition would help ensure GESI is better incorporated into national plans.
- Having a core country team to liaise with the TA consultant, including women and representatives of other marginalised groups, can improve the timeliness of the process and help ensure better uptake and utilisation of the TA products in future.
- A costed and funded validation and dissemination plan for all relevant TA outputs would help in the dissemination and utilisation of the TA outputs, particularly at sub-national level.
- Continued TA support should be considered to support country stakeholders in disseminating TA outputs and establishing systems for effective use of the TA outputs.

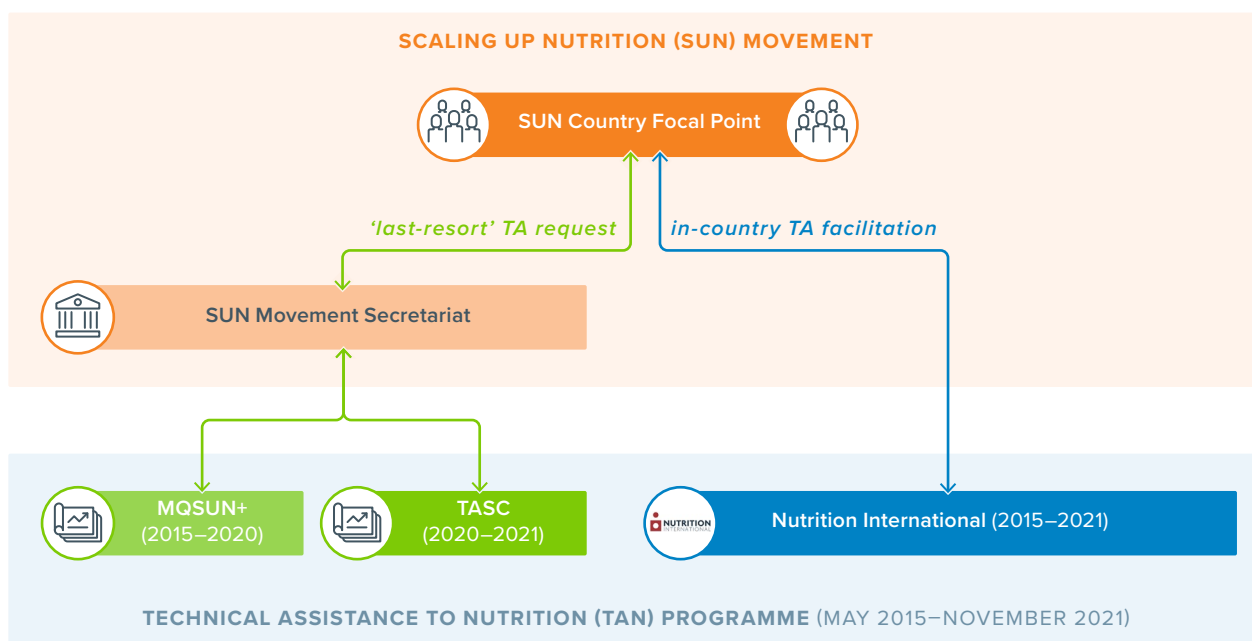
1. Introduction

1.1. Technical Assistance for Nutrition programme

The Technical Assistance for Nutrition (TAN) programme is a 6.5-year (May 2015–November 2021), £35.8 million Foreign, Commonwealth and Development Office (FCDO)-funded initiative that provides support to the Scaling Up Nutrition (SUN) Movement and FCDO staff. The Maximising the Quality of Scaling Up Nutrition Plus (MQSUN+) programme was a Technical Assistance (TA) facility within the larger TAN programme which SUN countries could access from 2015 to 2020. MQSUN+ was designed a last-resort TA provider (i.e., where no other options or capacity for meeting TA needs were available at country level) and received context-specific expertise requests from the SUN Focal Points through the SUN Movement Secretariat (SMS). This facility promoted a ‘demand-driven’ model, whereby technical support and expertise were available to overcome capacity gaps in the design and delivery of national multisector nutrition plans and other key elements of the government’s planning and implementation cycle. Following the end of MQSUN+ in 2020, the Technical Assistance to Strengthen Capabilities (TASC) project was established as a follow-on TA facility with a similar approach, led by DAI with NutritionWorks and Development Initiatives as consortium partners.

In addition to MQSUN+, countries were able to access TA through Nutrition International’s Nutrition Technical Assistance Mechanism (NTEAM), under the TAN programme. Nutrition International (NI) provides longer-term in-country support, responding to direct requests from the SUN Focal Point and agreed through prioritisation exercises with members of multi-stakeholder platforms.

Figure 1: Country Requests to MQSUN+, TASC and NI



1.2. Purpose / objectives of the case study

To understand the effectiveness of TA design and provision, TASC undertook a series of case studies of TA provided by MQSUN+ to a number of countries, selected according to a set of pre-defined criteria.¹ The studies were undertaken in consultation with PATH, the MQSUN+ consortium lead, but without their direct involvement. These case studies will be used to identify best practices and lessons learned, to inform the future design and provision of TA.

Using the pre-defined criteria, the review team selected six case study countries from a list of 14 countries where MQSUN+ provided TA between 2017 and 2020. Guinea was selected based on the range of deliverables produced (Nutrition Policy, Nutrition Strategic Plan, Nutrition Stakeholder Mapping, and an advocacy and communication plan).

The case studies aimed to assess effectiveness across the TA process, including design, provision, production of outputs and onward uptake and utilisation and considered the following elements:

- Relevance and responsiveness to country context, priorities and needs
- Country capacity to contribute to and absorb TA outputs
- Quality and accessibility of outputs
- Contribution of TA outputs to: scale, enhancing GESI outcomes, governance, multisectoral coordination and collaboration, enhanced quality of programmes and policies, improved monitoring of progress in nutrition, effectiveness at leveraging resources.

Key lessons learned from this study will feed into a synthesis report and a guidance note for use by those requesting TA (e.g. country governments and other partners) and those providing TA (SMS, national and international TA providers, United Nations (UN)).

¹ Stable/fragile conflict-affected context; long-term/short-term TA provision; types of support provided (national nutrition plans/policies, advocacy/communication strategies, M&E plans, costing, development of roadmaps etc.); 'remote' versus in country provision; geographical location and language

2. Case Study Background

2.1. Nutrition situation in Guinea

The Guinean economy is largely dependent on mining and agriculture. However, low productivity, poor farming techniques and significant post-harvest losses undermine the agricultural sector, while poor road infrastructure hinders access to markets. Moreover, Guinea faces major socioeconomic and political challenges, leaving 20% of the Guinean population living in extreme poverty and more than 17% of households being food insecure.² This situation is exacerbated by the high prevalence of infectious diseases and limited care-seeking behaviours of the population following the 2014 Ebola outbreak.³

The nutritional situation of women and children in Guinea remains precarious. As of 2020, 30.3% of children under five years of age are stunted, 9.2% of children under the age of five are wasted, and 50.6% of women of reproductive age are anaemic.⁴

Guinea joined the SUN Movement in 2013, with a joint letter of commitment from three government ministers from the Ministries of Health, Agriculture and Social Welfare. A multisectoral platform, the Technical Group for Nutrition and Food (GTNA),⁵ was set up and was functional until the 2014 Ebola outbreak, when it became the food security and nutrition cluster.⁶ In March 2016, the multisectoral platform successfully transitioned back to the GTNA, led by the Ministry of Health.⁷ The GTNA is made up of approximately 35 representatives from government sectoral ministries (both nutrition-sensitive and nutrition-specific), civil society (international and local non-government organisations), UN agencies and the private sector.

2.2. MQSUN+ technical assistance to Guinea

MQSUN+ provided TA to Guinea between May 2018 and April 2020 to develop a series of products, collaborating closely with the SUN Focal Point based in the Ministry of Health in the capital, Conakry. The TA products included:

1. Guinea's Multisectoral National Nutrition Policy (2018–2030)⁸
2. Guinea's Multisectoral National Nutrition Policy (2018–2030) Budget
3. National Multisectoral Nutrition Strategic Plan (2019–2024),⁹ which was costed
4. Mapping of nutrition stakeholders in Guinea and proposals for scaling up¹⁰
5. Communication and Advocacy Strategy – Activity Plan 2019–2020¹¹

The review of the Multisectoral National Nutrition Policy and the National Multisectoral Nutrition Strategic Plan was completed in October 2018, and the other products were completed at the end of October 2019. However, additional quality control inputs were needed by the PATH team, and the finalised products were not delivered until May 2020.

2 IFAD, Investing in rural people in Guinea, June 2019

3 SPRING Guinea Nutrition Assessment 2015 <https://www.spring-nutrition.org/publications/reports/guinea-nutrition-assessment> [accessed 28/08/2021]

4 Global Nutrition Report 2020

5 Groupe Technique de nutrition et alimentation

6 SUN website for Guinea <https://scalingupnutrition.org/sun-countries/guinea/> [accessed 26/08/2021]

7 Guinea SUN Movement Annual Progress Report 2016

8 Politique Nationale Multisectorielle de Nutrition de la Guinée (2018–2030)

9 Plan Stratégique National Multisectoriel de Nutrition (2019–2024)

10 Cartographie des intervenants des actions en nutrition en Guinée et propositions de la mise à l'échelle

11 Stratégie de communication et de plaidoyer – Plan d'activités 2019–2020

3. Methods and Limitations

An outline framework was developed for consultation with country stakeholders through key informant interviews and focus group discussions. This was based on the review objectives and key areas (as detailed above), and tailored according to the country's context, the type of TA provided, and the stakeholders concerned. Due to the COVID-19 pandemic, the interviews were conducted remotely, via Microsoft Teams.

The SMS Country Liaison Team representative for Guinea facilitated the connection with the SUN Focal Point in Guinea, Dr Diény Kaba, who is also the National Director of Family Health and Nutrition. Dr Kaba delegated the task of responding to the interview to Dr Mamady Daffé, the former SUN Focal Point at the time of the TA support. Furthermore, the list of participants at the launch of the National Multisectoral Nutrition Policy was reviewed to identify additional potential interviewees.

A total of 18 stakeholders were invited to participate in this exercise, including the former SUN Focal Point, representatives from government ministries (nutrition-sensitive and nutrition-specific sectors), civil society (international and local non-government organisations), UN agencies, a member of PATH, and TA providers. Nobody from the donor community responded to the request for interview. A total of 11 people responded and participated in the interviews.

Seven stakeholders could not be reached or did not attend scheduled appointments. Several respondents who participated in the validation of the final TA products had not previously been involved in the TA design and process, either because they were not asked to participate, or due to staff turnover. The TA was completed just before the COVID-19 pandemic, and as such, much of the follow-up work was not initiated until 2021.

4. Findings

4.1. TA design

4.1.1. Demand for TA and priorities

The government conducted a situational analysis which was used to help define the TA needs. These were then discussed during the 2016 SUN Joint Annual Assessment (JAA), led by the SUN Focal Point with the participation of GTNA members. To help countries identify their needs, the SUN self-assessment report template outlines the services available to support SUN countries in achieving their national nutrition priorities. Using this list as a starting point, Guinea's priorities for 2016–2017 were identified. These included:

- Fourteen priorities relating to 'Managing the policy and budget cycle'
- Twelve priorities relating to 'Social mobilisation, advocacy and communication'
- Five priorities relating to 'Coordination'

Further details can be found in Guinea's 2016 Annual Progress Report of the SUN Movement.¹²

The identified TA needs were further refined and prioritised by country stakeholders in consultation with the SMS during the SUN Global Gathering in Abidjan in 2017. Guinea subsequently submitted their request for TA to the SMS, and a Terms of Reference (ToR) was developed and shared with MQSUN+, who identified a team of international consultants to support Guinea in developing the products described in section 3.

Guinea updated the 2005 National Nutrition Policy and developed a National Multisectoral Nutrition Plan, although the participants of the self-assessment workshop all felt a review of these documents would be beneficial, to ensure they reflected the latest global evidence and were truly multisectoral. In addition, participants agreed that mapping stakeholders and costing the plan

¹² <https://scalingupnutrition.org/wp-content/uploads/2016/06/Guinea-Conakry-Joint-Assessment-2016-Fran%C3%A7ais.pdf> [accessed 4/10/2021]

would be essential to its roll out. Given the renewed interest in nutrition and the urgent need to attract funding (from both the government budget and donors), all participants noted the need for a clear advocacy document as a key priority. Many respondents stated that as nutrition in Guinea is chronically under-funded, the need for fundraising underpinned the development of the whole set of products.

4.1.2. Capacity considerations

Guinea's in-country capacity to respond to prioritised TA needs was considered in the final request for TA submitted to the SMS, who in turn contacted MQSUN+. One respondent highlighted weak in-country capacity for nutrition, as the country had only started prioritising nutrition in recent years, meaning international consultants were needed to develop strong multisectoral strategic documents for the country. Several respondents noted the important and indispensable added value of international consultants in bringing the various stakeholders together and fostering multisectoral dialogue among participants.

In response to the request, MQSUN+ hired four international consultants to provide TA to Guinea: two consultants for the revision of the National Multisectoral Nutrition Strategic Plan, the policy and the mapping exercise; one consultant for budgeting the plan; and one consultant for the development of the communication and advocacy document. A local consultant was also recruited to provide in-country support and follow-up. All respondents reported that the international consultants had excellent experience in their areas of expertise, and their inputs were well received.

In addition, UNICEF and WHO supported logistical costs not covered by MQSUN+, such as meeting venues, workshop costs, and participants' transport costs and per diems.

4.1.3. Involvement of stakeholders

Respondents believed that the process of identifying TA was conducted in an inclusive manner involving different stakeholders at national level. However, sub-national stakeholders were not included, and nor were women or representatives of other potentially marginalised groups. The reasons given for not including these participants were time and cost, although one sub-national level respondent stated that they would have been willing to travel to the meeting had they been invited.

A workshop to jointly develop inputs for the 2016 SUN Movement JAA report brought together 17 of the GTNA's 35 members. These comprised seven government staff from nutrition-sensitive and nutrition-specific sector ministries; four members from civil society; one university representative; three UN staff; one private sector representative; and one person from the National Assembly.¹³ Nutrition-related TA needs and in-country capacity to meet these needs were discussed during this workshop. Based on a review of action plans of other countries in the Economic Community of West African States (ECOWAS), the GTNA recognised the need to recruit an international consultant to support the revision of the Multisectoral National Nutrition Policy and the National Multisectoral Nutrition Strategic Plan. The UN network was approached to see if they were able to fund these consultants, however, many agencies lacked both the in-country capacity or funds to support the request. Therefore, as TA provider of last resort, MQSUN+ were contacted to fill this much-needed capacity gap.

Several respondents noted the lack of donor participation in TA definition as a hindrance to developing the products and to subsequent fundraising for the Multisectoral Nutrition Action Plan.

As mentioned above, sub-national stakeholders were not involved in defining TA needs, and as a result, their needs were not represented in its design. One respondent stated they would have liked to have received training on effective communication for fundraising and advocacy, which they could have used at their local level. Several respondents noted the importance of including these stakeholders in future TA processes.

13 2016 SUN Movement Annual Progress Report

4.1.4. Gender, equity and social inclusion

Consideration of gender, equity and social inclusion was included in the TA terms of reference, and respondents mentioned that sex-disaggregated data was used in the most recent situational analysis that guided the identification of TA needs. However, despite the participation of the Ministry of Social Welfare in the TA identification, the only GESI-specific needs identified were:

1. Engage parliamentarians in legislative advocacy, budget monitoring and public awareness (support to the Forum of Women Parliamentarians to accompany legislative engagement).
2. Establish decentralised structures and/or processes that support local planning and action and create a feedback loop between the central and local levels, including community groups and vulnerable groups.
3. Support vulnerable households with agricultural inputs and equipment, although this was partially supported by the Ministry of Agriculture, FAO and WFP.

No further information was available on whether these identified GESI-specific TA needs were met.

4.2. TA provision process

4.2.1. Timing and relevance

All respondents confirmed that the TA provided by MQSUN+ for Guinea was highly relevant and timely, as the National Nutrition Policy was outdated and other strategic documents for the implementation of multisectoral nutrition actions only existed in draft form. Therefore the TA support arrived at the right time to help the country to finalise these documents. The Multisectoral National Nutrition Policy was designed to be in line with the National Social and Economic Development Plan 2016–2020 (PNDSE),¹⁴ framing nutrition within the wider political and economic context.

Some respondents suggested that the consulting time allocated was insufficient, as it did not allow for field visits, which would have been beneficial. However, most respondents, namely the TA provider and the SUN Focal Point, felt that the number of consultant days was sufficient, and the problem was more that the TA process itself was severely delayed. This delay was due to several reasons, one being the slow responsiveness of the government SUN technical Focal Point. All decisions and communications had to be conducted by the government SUN technical Focal Point, so if this person was absent or busy, the process was stalled. Due to the overall length of the process (nearly two years), the international consultants were not continually available, also adding to the delay. Confusion over who should cover logistical costs also delayed the process, as the government had to ask in-country partners to cover the costs of stakeholder meetings. Due to this delay, many of the products had to be developed simultaneously instead of sequentially. For example, the mapping of stakeholders should ideally have been completed before the development of the advocacy document.

Several respondents mentioned that more in-country consultant time was needed for the development of the advocacy and communication strategy, particularly as in-country capacity for communication and advocacy was very low.

4.2.2. Involvement of stakeholders

All GTNA members were involved in developing the various TA products according to their technical expertise. The TA consultants provided comments and recommendations by email. The SUN Focal Point then met with relevant GTNA members to discuss the comments and recommendations, and provided feedback after to the consultants. In-country workshops were conducted to develop and review the products at various stages, again combining different GTNA members as well as sub-national actors including selected regional health directors and local non-governmental organisations (NGOs).

¹⁴ Plan National de développement Social et Economique

A couple of respondents explained that because nutrition was not seen as a priority by the government, nutrition awareness was poor. Therefore, prior to starting the workshops, an orientation session on multisectoral nutrition was conducted to ensure that all stakeholders were aware of the process and were better able to provide relevant inputs. Many respondents felt that this was an important step in the development of the TA products.

The SUN Focal Point invited the relevant people to attend the various workshops and meetings which fed into the development of the outputs. There are no available attendance sheets for these workshops and meetings. The TA providers all stated they had little say on the matter of who should be invited to these meetings, and they were therefore doubtful as to whether all the right people were included, particularly those with sufficient knowledge or decision-making power and those representing civil society. Mapping stakeholders before initiating the development of strategic documents would have been helpful in identifying those responsible and ensuring their inclusion in the relevant workshops.

A team from the GTNA also conducted field visits to collect information and priorities at the regional level from local level stakeholders (local NGOs, government departments, etc). The TA providers conducted a review of the different sectoral plans to define the relevant priorities for each sector. Finally, as part of the stakeholder mapping exercise, a team of surveyors visited the implementing partners at grassroots level to administer a questionnaire on activities. One respondent suggested that a local consultant per region would have been helpful, to bring the realities of the field to the forefront and to ensure that the outputs included the sub-national perspective.

All respondents mentioned that, although providing TA remotely was feasible, a reliable internet connection is needed, and face-to-face meetings between in-country stakeholders are still necessary to liaise with the international consultant. Stakeholders also noted that dedicated in-country working sessions led by external consultants can facilitate better participation and focus. One respondent mentioned that remote support from the consultants would be useful in updating the national policy and plan following the mid-cycle evaluation (discussed further below).

4.2.3. Empowering country-led action

The SUN Focal Point led the process of developing the TA outputs, and the TA consultants provided suggestions and comments that the country team reviewed under the SUN Focal Point's leadership. The SUN Focal Point facilitated the workshops and meetings in-country, while the TA consultants provided their support in preparing presentations and during the question-and-answer sessions.

The SUN Focal Point particularly appreciated the external perspective of the consultants in ensuring that high-impact interventions were included in the strategic document. During the review and revision of the Multisectoral National Nutrition Policy and the National Multisectoral Nutrition Strategic Plan, TA consultants provided clear explanations for the suggested additions. This was appreciated by several respondents as it facilitated on-the-job capacity building of the GTNA members. Due to limited country capacity, TA consultants conducted two sets of formal training: one on communications and advocacy, and the other on budgeting. This enabled participants to fully engage in the workshops. Several respondents mentioned that including more people in these training sessions would increase overall in-country capacity.

Pairing international consultants with national consultants was viewed as good practice in building in-country capacity. However, one of the respondents highlighted that the national consultant who had previously worked on the 2019 budget planning exercise was not part of the current team providing TA to Guinea for conducting a financial gap analysis. This was not considered to be an effective use of local capacity, and it was suggested that previously-trained local consultants should be considered for future TA processes. However, some respondents suggested that the national consultant hired by MQSUN+ was not strong enough to support the development of the TA outputs.

4.2.4. Gender, equity and social inclusion

GESI was included in the development of the strategic documents, specifically in the development of the policy. A situational analysis was conducted in which the voices of women's groups at regional level were included, but not of other vulnerable groups; however, there were insufficient funds for similar consultations at community level. One respondent mentioned that nutrition Focal Points in the sectoral ministries are usually women, and they have "a better understanding of women's needs". However, in the final validation meeting, only 23 (30%) of the 75 guests invited were women.

Most respondents mentioned only the sex disaggregation of indicators as a way of including GESI in the strategic documents, and many deferred responsibility for GESI considerations to the National Agency for Economic and Social Inclusion (ANIES)¹⁵, under the Ministry of Social Welfare, which they believed to be responsible for GESI in Guinea. Although the final strategic documents do take GESI into account, the low GESI awareness among the stakeholders interviewed seems to indicate that this inclusion is primarily due to the TA consultant inputs.

Some respondents stated that more involvement of sub-national actors, particularly those responsible for implementation, could improve context-specific GESI actions in the development of these documents, particularly regarding the needs of the most vulnerable and difficult-to-reach populations. No respondents highlighted the need for GESI training. Finally, young people were not included in developing the various documents, yet several respondents felt their inclusion would be important in developing future strategic documents.

4.3. Quality of TA outputs

All stakeholders interviewed found the documents to be of very good quality, and were satisfied with them.

4.4. Uptake and utilisation of outputs

In August 2021, partially in response to the various documents developed, a multisectoral strategic coordination platform¹⁶ was formally created by the Prime Minister (Order 768/PM/SGG). A Focal Point was nominated within the Prime Minister's Office to guide a technical group in the multisectoral implementation of the National Multisectoral Nutrition Strategic Plan. This platform was originally created in 2019, but not formalised until July 2021 due to the COVID-19 pandemic.

However, the review found the TA products are currently only being used by a small number of stakeholders at the national level. This is because they have not been widely disseminated, although a national validation workshop was held and a dissemination plan was developed.

The National Nutrition Policy and the National Multisectoral Nutrition Plan were presented in the national-level validation workshop in September 2018, in the presence of MQSUN+ consultants. The workshop included 75 participants from government (including representation at sub-national level), UN agencies, multilateral agencies, donors, and local and international NGOs.

In November 2018, a high-level meeting on nutrition, hosted by the First Lady and attended by the Prime Minister and SUN Coordinator, was held to disseminate the Multisectoral National Nutrition Policy and the National Multisectoral Nutrition Plan. This meeting also enabled all high-level stakeholders to renew their commitment to nutrition (SUN Report EN 2019 Country Guinea). However, sub-national dissemination was not conducted due to lack of funding, and restraints caused by the COVID-19 pandemic.

The costing of the National Multisectoral Nutrition Strategic Plan and the advocacy documents were not finalised until April 2020. By May 2020, Guinea was in the grip of the COVID-19 pandemic, and the planned round table discussion with all donors had to be postponed. It was rescheduled for October 2021, followed by sub-national dissemination meetings in all Guinea's regions, but is likely to be delayed further due to the September 2021 coup d'état.

¹⁵ L'Agence Nationale d'Inclusion Economique et Sociale

¹⁶ Comité Stratégique Multisectorielle de Nutrition

The SUN Focal Point intends to make the documents available on the SUN website, the West African Health Organisation (WAHO) website and the government website. However, the documents are not currently available online.

It was suggested that the same international consultants could continue to provide remote support updating strategic documents, and that the local consultants previously involved in TA should, depending on performance, be employed in future TA support to ensure continuity and to reinforce capacity building.

5. Key Messages and Lessons Learned from Guinea

5.1. TA design

5.1.1. Involvement of national and sub-national stakeholders

- Include a detailed budget when drafting ToRs, stating who will be responsible for what, and use this to secure financial and technical commitment. Joint cost-sharing of TA development is a helpful way to encourage country ownership, stakeholder participation and accountability.
- Ensure sub-national stakeholders are involved in TA design and process, to make sure their TA needs are considered, improve ownership of the process, and increase the relevance and uptake of TA outputs. Consider recruiting local sub-national consultants to better support sub-national engagement.

5.1.2. Assembling the TA team

- Consider the need for specific expertise related to gender, equity and social inclusion and nutrition within the TA team, bringing practical examples, tools and resources.
- Consider pairing an international consultant with a national consultant to help increase in-country capacity. This qualified person should also be involved in future similar TA support.

5.2. TA provision process

5.2.1. Consensus on objectives and methods

- Create a core team, including women and representatives of other marginalised groups, to liaise with the TA consultant. This will ensure the process continues even if someone from the core team is absent, and will help ensure better future uptake and utilisation of the products.

5.2.2. Capacity development

- Consider including an initial dedicated phase of orientation and capacity strengthening in nutrition and GESI for country stakeholders before the development of outputs.

5.2.3. Involvement of stakeholders

- Map stakeholders before starting the process of developing strategic documents, to better identify who is responsible for key areas and decision making, and ensure they are included in the relevant workshops.

5.3. Uptake and utilisation of outputs

5.3.1. Validation, launch and dissemination

- Include the development of a costed and funded validation and dissemination plan for all relevant TA outputs, including identifying opportunities and resources to facilitate promotion and dissemination of outputs.

5.3.2. Capacity development

- Consider continued provision of TA for a set time following the production of outputs, to support the country in using the TA outputs effectively. For example, in Guinea's case this could include coordinating the use of the advocacy plan, and setting up budget tracking systems.

Annex 1 – Abbreviations

ANIES	National Agency for Economic and Social Inclusion
ECOWAS	Economic Community of West African States
FAO	Food and Agriculture Organization
FCDO	Foreign, Commonwealth & Development Office
GESI	Gender, equity and social inclusion
GTNA	Groupe Technique de Nutrition et Alimentation (Technical Group for Nutrition and Food)
MQSUN(+)	Maximising the Quality of Scaling Up Nutrition (Plus)
NGOs	Non-governmental organisations
PNDSE	Plan National de développement Social et Economique (National Social and Economic Development Plan) 2016–2020
SMS	SUN Movement Secretariat
SUN	Scaling Up Nutrition
TA	Technical assistance
TAN	Technical Assistance for Nutrition programme
TASC	Technical Assistance to Strengthen Capabilities project
TOR	Terms of reference
UNICEF	United Nations Children's Fund
WAHO	West African Health Organisation
WHO	World Health Organization

DEVELOPED BY TECHNICAL ASSISTANCE TO STRENGTHEN CAPABILITIES (TASC)



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