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Awardee HQ Contact Name	Suzanne Berkey, Managing Director
Awardee HQ Contact Address	ACDI/VOCA, 50 F Street N.W., Suite 1000, Washington DC, 20001
Awardee HQ Contact Telephone Number	(202) 469 6088
Awardee HQ Contact Fax Number	(202) 626 8726
Awardee HQ Contact Email Address	SBerkey@acdivoca.org
Host Country Office Contact Name	Marie Cadrin
Host Country Office Address	House 30, Road 19/A, Banani, Dhaka-1213
Host Country Office Contact Telephone	88-02-8836801
Host Country Office Contact Email Address	mcadrin@acdivoca-proshar.org

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ACRONYMS

ACF	Action Contre La Faim
ACI	Advance Chemical Industries
ANC	Antenatal Care
BADC	Bangladesh Agricultural Development Corporation
BCC	Behavioral Change Communication
BDHS	Bangladesh Demographic and Health Survey
BDT	Bangladesh Local Currency
CBDMVG	Community Based Disaster Management Volunteer Groups
C-IMCI	Community Integrated Management of Childhood Illnesses
CMAM	Community-based Management of Acute Malnutrition
CPP	Cyclone Preparedness Program
CSS	Christian Service Society
DAE	Department of Agriculture Extension
DLS	Department of Livestock Services
DMC	Disaster Management Committee
DoF	Department of Fisheries
DRM	Disaster Risk Management
DRRAP	Disaster Risk Reduction Action Plan
FY	Fiscal Year
GIFT	Genetically Improved Farmed Tilapia
GMP	Growth Monitoring and Promotion
iDE	International Development Enterprise
IFDC	International Fertilizer Development Corporation
IMCI	Integrated Management of Childhood Illnesses
IPTT	Indicator Performance Tracking Table
IR	Intermediate Result
IY	Implementation Year
LHW	Livestock Health Worker
MoDMR	Ministry of Disaster Management and Relief
MoH	Ministry of Health
MYAP	Multi-year Assistance Program
NGO	Non Government Organization

PCI	Project Concern International
PM2A	Preventing Malnutrition in Children under Two Years of Age
PNGO	Partner Non Government Organization
PREP	Pipeline and Resource Estimate Proposal
PROSHAR	Program for Strengthening Household Access to Resources
RUTF	Ready-Use Therapeutic Food
SAM	Severe Acute Malnutrition
SO	Strategic Objective
SRDI	Soil Resources Development Institute
UNICEF	United Nations Children's Fund
US	United States
USA	United States of America
USG	United States Government
WHO	World Health Organization
FtF	Feed the Future

A. INTRODUCTION

The overall goal of the USAID funded Title II Program For Strengthening Household Access to Resources (PROSHAR) is to reduce food insecurity among vulnerable populations in selected upazilas of Batiaghata, Lohaghora and Sarankhola in Khulna Division. This five year Multi-Year Assistance Program (MYAP) has three key strategic objectives (SO), namely:

SO1: Income and access to food of poor and ultra poor households improved

SO2: Health of pregnant and lactating women and children under 5 (with particular attention to children under 2) improved

SO3: Institutions and households prepared to respond effectively to shocks

ACDI/VOCA is responsible for overall program results, and directly manages activities related to SO1 and commodities. Project Concern International (PCI) directly manages the implementation of activities related to SO2 and SO3. At the community level, implementation of activities is led by three key non-government partners: CODEC, Shushilan and Muslim Aid. iDE provides technical support on market linkages, and builds the capacity of the three PNGOs to better promote a demand driven model for producers to strengthen their links to market networks.

During FY2013 project implementation was challenged by the many hartals called across the country. These hartals placed limitations on vehicle movement across upazila boundaries, and regularly disrupted commodity distributions and visits by the PROSHAR technical teams from Khulna and Dhaka. Nonetheless, commodities continued to be distributed every month to beneficiaries. The PROSHAR activities carried out jointly with the Government of Bangladesh (GOB), most specifically training activities, were also affected by delays related to the government's complex approval requirements and changes to government staff schedules. Effective PROSHAR implementation was also impacted by a serious cold spell in quarter two, and delayed rainfall, which impacted the start of seasonal agricultural production, including fisheries production. Lastly, in the third quarter of FY2013, PROSHAR spent considerable time and effort preparing for Cyclone Mahasen which fortunately did not have widespread impact in the project's interventions areas. In spite of these substantial challenges, PROSHAR continued to make considerable progress towards achieving its joint goal with USAID of reduced food insecurity within the targeted areas.

In FY2013, the project reached approximately 73,000 direct beneficiaries and focused on integration across interventions¹. Trained SO1 beneficiaries are now demonstrating new technologies and management practices that are improving the capacity of SO2 households to grow nutritious foods. SO2 mothers have become aware of the various nutritious foods that they can grow, and are drawing on the knowledge gained by SO1 beneficiaries to improve their garden's productivity. Both SO1 and SO2 beneficiaries benefited from SO3 activities.

In FY2013, PROSHAR adapted its program activities based on revised livelihood and disaster risk reduction and response strategies, as well as findings from assessments and evaluations,

¹ PROSHAR completed the integration of its beneficiary database for SO1 and SO2 in FY2013. Although SO3 targets community management of Disaster Risk Reduction, it is now necessary to provide unique ID numbers for SO3 trainees and other participants. This will be completed in the first quarter of FY2014.

including the mid-term evaluation, which enabled PROSHAR to more than double its number of beneficiaries. The annual survey results, described below, indicate that the program, with its

amended strategies, is on track to reduce overall vulnerability to food security within its targeted upazilas.²

SO1: Income & Access to Food of Ultra-Poor Households Improved

SO1 supported activities that increased and diversified agricultural productivity, fostered the development of market linkages, and expanded activities within the non-farm sector. The revisions to the strategic approach of the program were undertaken following feedback obtained from beneficiaries, PNGOs, technical parties and both local and national government stakeholders on how to more effectively work with communities to reduce food insecurity.

A total of 26,250 rural households benefited directly from PROSHAR SO1 interventions, of which 18,509 were new households and 7,741 were continuing households. This represented 88% of the target for FY2103³. The number of households considered ‘adult female, no adult male,’ and ‘adult male, no adult female,’ fell far below targets. PROSHAR overestimated the number of households within these categories and will correct these targets in the IY5 PREP.

Women’s empowerment remained a key crosscutting theme in PROSHAR, with the program recognizing the important role women play in household food security. PROSHAR made three substantial shifts to the implementation strategy to ensure women were able to fully participate in the planned livelihood activities:

- Farmer field schools held close to producer groups’ households for two hours every two weeks enabled women to fit these trainings into their workload.
- Training of female Master Trainers for homestead based production field schools enabled women to become role models with credible information to disseminate.
- Creation of centralized and accessible collection points where women sold produce directly without being reliant on their husbands taking the produce to market.

Data collected in the FY2013 annual survey indicated that the percentage of continuing beneficiaries with a poorly diversified diet (less than 4 food groups) is 15% less than new beneficiaries. This indicates that livelihood beneficiaries are improving their dietary diversity over time. The percentage of continuing households with diversified diets (more than 6 food groups) was also 67% greater than new beneficiaries, and demonstrated a positive trend in achieving PROSHAR’s targets of improving dietary diversity.

Data collected on food consumption status in the week prior to the execution of the annual survey, indicated that overall, approximately six out of ten households had acceptable food consumption, including legumes, vegetables, and fish daily. Levels of poor food security (limited fish consumption, not consuming legumes and vegetables daily), remained highest in Batiaghata and Sarankhola, reinforcing the need to continue to focus on the ultra-poor and poor households in these two upazilas.

² ACDI/VOCA submitted PROSHAR’s mid-term report and all associated annexes to USAID by email on March 31, 2013.

³ The remaining 12% of target beneficiaries will only be counted once they complete their participation in the farmer field schools (expected Q1 FY2014)

Intermediate result 1.1: Agricultural productivity increased and diversified

In FY2013, the numbers of farmers applying new technologies or management practices far exceeded the targets in the IPTT. The annual survey found that 42.7% of SO1 beneficiaries cultivated a new crop as a result of PROSHAR interventions, compared to the target of 25%. The increase was likely attributable to the shifts the program made towards working with smaller producer groups. Targets for FY2014 and FY2015 will be revised in the upcoming PREP.

In FY2013, PROSHAR was requested by USAID to add an additional outcome indicator to inform both Food for Peace (FFP) and Feed the Future (FtF) results. PROSHAR estimated that 224 hectares would be planted in improved technologies and achieved 4,281 hectares. The likely reasons for the overachievement are (a) PROSHAR did not expect that the number of beneficiaries taking up technologies would be as high as it was; (b) PROSHAR did not expect the number of technologies/management practices to be adopted per beneficiary to be as high as it was, and; (c) hectares cultivated for two different crops (two different seasons) in a single year were counted twice. Targets for FY2014 and FY2015 will be revised upward in the IY5 PREP.

Similar to the achievements in the paragraph above, PROSHAR added an FtF indicator to monitor the number of beneficiaries applying new technologies. In FY2013 PROSHAR overachieved the target by more than 200% (target: 8,016; achieved 24,019).

Differences in the average number of technologies taken up by male and by female beneficiaries showed little variation in FY2013. This was a significant improvement over the FY2012 results, in which women appeared to be adopting significantly fewer technologies than men. The two likely reasons for this change were: (a) the shift to the “learning by doing” approach, utilized in farmer field schools; and (b) the provision of small in-kind grants in the first agricultural season to ultra-poor and poor households to encourage technology adoption.

In two subsectors, cash crops and fish production, continuing beneficiaries adopted, on average, greater numbers of technologies than new beneficiaries, which provided a preliminary indication of the likelihood of sustainability of the uptake of technology.

Homestead gardening was the only subsector in which the number of technologies adopted by continuing beneficiaries declined. Approximately 20% fewer continuing households adopted homestead gardening technologies compared to beneficiaries who joined PROSHAR during this fiscal year (new beneficiaries). Data collected during the annual survey indicated that technologies which required cash or intensive labor inputs were adopted at lower rates for continuing beneficiaries compared to new beneficiaries. As fewer households than anticipated had adopted labor saving technologies, greater effort will need to be placed during farmer field school sessions on the importance of enhancing men’s labor contribution to homestead gardening so that women’s workload remains balanced. In addition, PROSHAR will also need to work with female homestead garden producers to encourage them to move to bulk purchase of inputs as a means of reducing price per unit costs.

In order to assess gains made in homestead production, the annual survey collected information to determine production levels of key homestead products. FY2013 targets were met or exceeded for three of the four key products. Poultry production showed an overachievement of 20% (from .65 kg/bird to .8 kg/bird), possibly the result of PROSHAR’s decision to focus on bio-

security measures (housing, vaccinations, disease management) that protect the birds' health. PROSHAR's strategy in FY2013 to train local Livestock Health Workers (LHW) from within local communities to provide vaccinations on a fee for service basis contributed to this achievement, and will ensure the sustainability of these services into the future.⁴

Compared to last year's annual survey, tilapia production (kg/decimal) increased by almost 40% and was likely the result of PROSHAR's promotion of genetically improved farmed tilapia (GIFT)⁵. In addition, carp polyculture production exceeded targets by less than 10%, an improvement over FY2012.

Maize production was significantly underachieved in FY2013. The early harvesting of maize due to the anticipated landing of Cyclone Mahasen in May 2013, and the lack of access for most homestead producers to irrigation, impacted the size of the harvest. PROSHAR will hold discussions with beneficiaries and PNGO staff to determine whether this crop will continue to be promoted during the remainder of the project.

Producer groups with women in leadership positions increased from 15% (achieved target in FY2012) to 76.3% in FY2013 against a target of 30%. This was the result of the strategic shift by the program to smaller producer groups, thereby increasing opportunities for women to hold leadership positions within the project, due to the larger number of groups overall.

IR 1.2: Market linkages developed and strengthened

During FY2013, PROSHAR invested significant effort on promoting market linkages. With the support of iDE, PROSHAR worked to systematically link producer groups with the private sector⁶ and built the capacity of PNGOs to promote market linkages. PROSHAR discontinued its work with the market management committees after determining that their activities did not add significant value to improved access for the poor and ultra-poor.

The enhancement of market linkages resulted in 47.4% of agricultural smallholders stating they had increased access to markets (target: 35%). This compared very favorably with the information collected in FY2012, when approximately 13% agricultural smallholders reported increased access to markets. The change was likely the result of PROSHAR's increased focus on market linkages in FY2013. Given that the annual target has been overachieved, PROSHAR will review and propose changes to the targets for the last two years of the project.

The annual survey confirmed that 32.4% of new beneficiaries increased market access by selling a new product, whereas for continuing beneficiaries, this increased to 40.8%. Demand for products was a key factor in stimulating market access. A review of the gender aspect of market access showed that female agricultural producers were less likely to identify new buyers compared to male producers (33.3% vs. 42.7%). Greater emphasis will need to be made in the upcoming years to address this gender gap, so that gains can be sustained amongst female producers.

⁴ Attached is a success story, which illustrates the impact of PROSHAR's LHW intervention on a community and their newly trained livestock health worker.

⁵ This tilapia variety has significant benefits over the previously promoted mono-sex tilapia, including its ability to reproduce and provide a replenishing food source for the household. The GIFT tilapia fingerlings can also be sold to other households for pond stocking.

⁶ Firms the program linked with include Lal Teer Seed Ltd, EON Group, ACI Ltd, Syngenta, BADC and SRDI. Links have also been made with service providers including IFDC, DAE, BADC, DLS and Department of Fisheries (DoF).

In FY2013 a total of 4.1% of producer group members bulked (purchased or sold in a group) their product (target: 10%). The FY2013 annual survey indicated that, among the beneficiaries surveyed, approximately 25% of persons bulking were doing so for the sale of commercial vegetables, and 20% for the sale of fish. Significant differences between men and women in rates of bulking also existed. While 6.3% of male beneficiaries were buying or selling products together, this percentage was 3.3% for female beneficiaries. PROSHAR is making significant efforts in this area, and has established collection points for bulk selling of select products⁷. By December 31, 2013, PROSHAR will review the present bulking strategy to determine how it can be enhanced to further empower women and increase their participation.

IR 1.3: Non-agricultural opportunities expanded and diversified

The FY2013 annual survey confirmed that uptake of technologies for off-farm producers had increased significantly over the results in FY2012. The greatest uptake was in the area of improved product design, followed closely by the use of improved production specifications to meet buyer demands. There was virtually no differential between males and females in improved design, whereas the percentage of females adopting improved specifications was greater than for males. This difference may not, however, have been linked to a gender differential, but rather reflected the greater need for improved specifications in production of karchupi or katha, products primarily produced by women.

The annual survey found that 65.6% of alternative livelihood producers reported increased market access as a result of PROSHAR support, compared to a target of 45%. This overachievement was the result of an increased focus by the project on improving quality of off-farm production to meet buyers' needs. Considering the gains made in FY2013, PROSHAR will review the targets for FY2014 and FY2015 to determine if they should be adjusted.

Annual survey results for FY2013 also indicated that beneficiaries may be better positioned and more confident to identify new buyers after working with PROSHAR for one agricultural season. Approximately 23% of new beneficiaries cited the identification of new buyers as the reason for increased market access as compared to 59% for continuing beneficiaries.

SO2: Health of Pregnant and Lactating Women and Children Under Five (With Particular Attention to Children Under 2) Improved

In FY2013 PROSHAR's health and nutrition activities continued to be designed and implemented in accordance with the Ministry of Health's (MoH) national strategies. PROSHAR worked with government entities at all levels in order to meet program objectives, and coordinated with relevant partners⁸ working in the same communities to avoid duplication and capture synergies.

PROSHAR supported MoH service providers through the provision of technical training on integrated management of childhood illness (IMCI) and community management of acute malnutrition (CMAM). The program trained and monitored clinic community groups, established growth monitoring and promotion sessions at health service points that included vaccinations, and built awareness on key health issues through participation in the different

⁷ Vegetables in Lohagara, bamboo in Sarankhola, and sesame in Batiaghata

⁸ For example, the Government of Bangladesh, UNICEF, WHO and other national partners.

national health initiatives. To ensure greater service coverage, PROSHAR coordinated joint planning meetings between the MoH and local organizations providing health services, namely BRAC, CSS, and the USAID funded Smiling Sun franchise project. PROSHAR also worked closely with maternal and newborn health initiatives (a UN-GoB joint intervention) in Lohaghora, and worked on strengthening the implementation planning for the next phase of the project in Sarankhola.

Within the project catchment area, targeted mothers improved their understanding of infant and young child feeding practices, and 17,082⁹ children under the age of 2 (8,558 boys and 8,411 girls) participated in growth monitoring and promotion (GMP) activities¹⁰. A total of 67.3% of women participating in the program practiced exclusive breastfeeding for children less than 6 months of age, compared to the project target of 55%. The broad range of initiatives (folk songs, Prevention of Malnutrition Under 2 Approach (PM2A) participation, participation in National Breastfeeding week) undertaken in the program to raise awareness among women on the health implications of exclusive breastfeeding, was thought to have contributed to the high uptake of exclusive breastfeeding by lactating women. Given this level of achievement, PROSHAR will review its FY2014 and FY2015 targets.

Intermediate result 2.1: Malnutrition prevented and treated

PM2A is designed to reduce the prevalence of malnutrition in children. Under this approach, PROSHAR provides a comprehensive package of services which address health and nutrition concerns for all pregnant women, mothers of children 0-23 months, and children under two years of age living in target communities. The project targets for number of pregnant women being reached were set at the start of the project using the 2007 Bangladesh Demographic and Health Survey (BDHS). However, in the course of implementation, PROSHAR identified that there was a decline in the number of pregnant women within the catchment area. This observed trend was confirmed in the 2011 BDHS. Targets will, therefore, be revised downward to reflect the reduction in numbers of pregnant women within the target area.

In FY2013 service data indicated that the average percentage of PM2A children found to be underweight (weight-for-age<-2SD) was 21.2%, which was 1.6% higher than the yearly target. To date the key obstacle to achieving targets has been the quality of the counseling and support services provided to caregivers/mothers/family members of children under two, by PROSHAR's growth monitoring educators, growth monitoring facilitators and mother leaders. Specifically the program found that mother leaders and community educations focused on imparting key messages rather than promoting discussion on key health and nutrition issues. As such, to enhance the communication skills of the health promoters, training will be provided on active listening approaches. PROSHAR will also work with the leaders of care group sessions to amend the curriculum to add a component focused on engaging caregivers to prepare nutrient rich meals for their children. In the interim, monitoring visits to the households have been increased, with a focus on changing optimal feeding, care practices and hygiene so that further positive change is achieved.

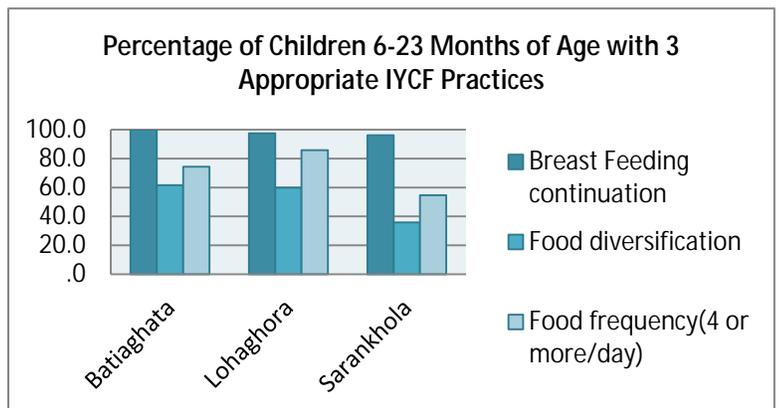
⁹ Number of direct beneficiaries as of September 30, 2013

¹⁰ This includes 113 non-PM2A beneficiary children between the ages of 24 and 59 months, of which 46 were male children and 67 were female children.

PROSHAR started CMAM implementation in October 2012 in partnership with community clinics and health and family welfare centers. PROSHAR’s baseline data from the targeted areas indicated a severe acute malnutrition (SAM) prevalence rate in the range of 1.1-1.6% of children under five years of age. PROSHAR estimated 1,388 SAM cases would be enrolled in the first 12 months of implementation, based on the lower range. PROSHAR followed the guidance in the Community-based Therapeutic Care - A Field Manual. First edition. Valid International 2006 p. 174 which is recognized as the official guidance for Outpatient Therapeutic Programs (including referenced in the 2008 and 2010 FANTA CMAM training manual as the standard). However, the actual caseload enrolled was even lower than expected, with a total of 301 children under five enrolled in the CMAM program. Accordingly, PROSHAR conducted an extensive house-to-house survey which confirmed that the baseline estimates were no longer accurate and the lower numbers seen at CMAM intervention sites were reflective of the actual SAM caseload within the targeted communities. While it cannot be stated with certainty, it is possible that PROSHAR’s PM2A program, which began implementation one year before the start-up of the CMAM services, was a contributing factor to this lower rate of SAM cases. As part of the ongoing awareness raising activities and surveillance mechanisms, PROSHAR will continue to identify children suffering from SAM so they can be treated on a timely basis.

In FY2013 the percentage of severely malnourished children that recovered after receiving treatment was 82%, two percent over target.

The FY2013 annual survey found that the percentage of caregivers adopting at least three recommended behaviors was 98.7%, compared to a target of 45%. This high level of adoption was similar to that achieved in FY2012 (99.7%). Given that these interventions will continue over the life of the project, PROSHAR will increase its targets in the IY5 PREP.



PROSHAR’s FY2013 annual survey revealed that key messaging around the provision of diversified food for children remained a concern, particularly in Sarankhola.¹¹ To address this issue, PROSHAR plans to support care trio groups to enhance their key messages by including cooking demonstrations, where women can learn to cook with more diversified foods. The groups will also organize celebrations that recognize families that have adopted appropriate food diversification strategies. Both of these activities were captured in PROSHAR’s IY4 PREP.

During FY2013, PROSHAR introduced hand washing stations with soap and water (Tippy Taps) to a select number of PM2A households. PROSHAR also introduced discussion topics and promotional materials (stickers, posters, and brochure) to care groups and stakeholders’ meetings. As a result, PROSHAR’s annual survey revealed that 37.8% of beneficiary households adopted a proper hand washing station in their homes, exceeding the target by 7.8%. In the next programmatic year, PROSHAR plans to extend these water and sanitation activities to all PM2A

¹¹ See table percentage of children aged 0-23 with appropriate infant and young child feeding (IYCF) practices.

households, high school students, care group trio leaders (especially groups led by fathers), and SO1 beneficiary households.

In expanding the reach of the hand washing initiative, the program hopes to increase the overall engagement of the community in promoting safe hand washing practices as a means of improving hygiene within the community. Given the increased focus on hand washing, proposed targets for the remainder of the program will be reviewed and revised.

Intermediate result 2.2: Improved effectiveness of health clinic services

In FY2013, the IMCI Unit of the MoH, in collaboration with PROSHAR, completed the training of all health assistants, community health care providers and their supervisors (assistant health inspectors and health inspectors) at the clinics working with PROSHAR. The trainings focused on the Community IMCI (C-IMCI) protocols as well as the protocols for facilities management. As of the end of FY2013, all health facilities in the targeted communities had at least one IMCI trained staff person. As part of enhancing the monitoring mechanisms of the MoH, PROSHAR also supported the Civil Surgeon's Office responsible for PROSHAR's implementation area to conduct quarterly review meetings to analyze progress in improving the quality of service delivery.

During FY2013, 93.6% (target 90%) of pregnant women received three or more antenatal care (ANC) visits. The high levels of service delivery were due to a combination of factors, including the provision of conditional rations, enhanced community mobilization and the project's extensive efforts to ensure ANC services were available to all pregnant women.

The annual survey also found that an increased numbers of caregivers of children under five were providing Oral Rehydration Therapy (ORT) during diarrheal episodes (46.2% compared with the achievement of 21.4% in FY2012, and well above the FY2013 target of 30%). PROSHAR believes that the high levels of adoption of ORT in treatment of diarrheal episodes was due to a cascade effect in which multiple point delivery strategies led to better informed beneficiaries. PROSHAR will review the targets for FY2014 and FY2015 to determine if they should be adjusted.

The percentage of households providing continued feeding during diarrheal episodes was slightly below target (65.4% against a target of 67%). The annual survey also found that 52.2% of caregivers with children with symptoms of acute respiratory infection (ARI) sought advice and/or treatment, compared to the target of 41%. Discussion on optimal care during childhood illness, early identification in care group meetings of vulnerable children and counseling in the growth monitoring program are probable reasons for this overachievement. PROSHAR will review this trend and propose revisions to the targets for the last two years of the project.

Under the PROSHAR mother and childcare initiatives, 249 care group trios (a combination of mother, father, and grandmother leaders) have been formed over the life of the project. One of the objectives of these groups has been to involve men in maternal and childcare and empower mothers, fathers and grandmothers in the decision making processes at the household level regarding pregnancy, lactation, child health and nutrition. A total of 5,395 beneficiaries (1,669 male, and 3,726 female) were involved in these groups, which led to the increased participation

of mothers, grandmothers and fathers as critical household change agents, and strengthened linkages between mother leaders and government and/or NGO service providers¹².

SO 3: Institutions and Households Prepared to Respond Effectively to Shocks

In FY2013, activities focused on reinforcing the response skills of the disaster management committees (DMC), and enhancing the risk management practices within all communities. In FY2013, SO3 reached 35,467 people¹³ and helped 99 ward level communities develop emergency response plans. Positive behavior change in disaster risk management practices was promoted through a series of events including docudrama shows, folk songs, emergency simulations and the distribution of pocket books on disaster preparedness and response. PROSHAR has estimated that these events reached over 99,000 community members.

In May 2013 Bangladesh prepared to respond to cyclone Mahasen. Soon after the government announced warning signal 4¹⁴, all the Disaster Management Committees (DMCs) and community based disaster management volunteer groups (CBDMVGs) met to review readiness, track the evolving situation, and disseminate early warning messages to help vulnerable populations to be ready to move to cyclone shelters, if required. Although the cyclone did not make landfall in the project area, the activation of the disaster response mechanisms allowed the PROSHAR team to identify strengths and weaknesses in its response operations, refine its preparedness strategy and improve overall coordination with local and national stakeholders, including PNGOs.

PROSHAR involved youth in all CBDMVGs. A total of 414 youth between the ages of 13 and 24 who represented communities in 207 wards of PROSHAR's operational areas were trained on prevention, mitigation, preparedness and response to shocks. These youth took part in community risk assessments, the development of disaster risk reduction action plans, and helped set priorities for implementation. They also supported the implementation of community activities by mobilizing labor and monitoring implementation. Youth also took a very active part in the dissemination of Cyclone Mahasen warning messages under the guidance of the Cyclone Preparedness Program (CPP). Lastly, PROSHAR ensured youth were included in Water Management Committees formed to support maintenance of the pond sand filters (PSF) and deep tube-wells funded by PROSHAR.

Women made up 37% of members sitting on CBDMVGs. This level of participation ensured that women's concerns were included in any analysis or decision-making related to the renovation of infrastructure and the management of shelters. In the past year PROSHAR consulted with these women to ensure infrastructure projects such as latrines and potable water points were accessible to women.

¹² Mother leaders are members of community management groups set up for each clinic, where other members are clinic staff (government or NGO). In addition, mother leaders are now providing support to the Ministry of Health and Ministry of Disaster Management and Relief (MoDMR) to mobilize communities to participate national observation activities (eg. National Breastfeeding Day, Immunization campaigns, etc.)

¹³ This figure includes 11,037 direct beneficiaries and 24,430 people who received SO3 sensitization training during SO1 and SO2 activities, such as care group trio meetings.

¹⁴ When warning signal 4 is raised, households in the storm's path are urged to secure valuables and collect non-perishable food and safe drinking water. Disaster management councils at all levels review their early warning procedures, identify and ready relief items, and prepare cyclone shelters for use.

IR 3.1 Disaster Risk Reduction Action Plans (DRRAPs) functional

In FY2013, PROSHAR facilitated 143 (target 60) DMCs and CBDMVGs to become functional¹⁵ through the provision of training, materials and backstopping support. In addition, 13 DMCs were assisted in the development of Disaster Risk Reduction Action Plans (DRRAP), based upon the community risk assessments undertaken in each ward. In FY2014 the project will focus on providing support to these DMCs to review existing action plans, and identify key activities that can be implemented using existing budget allocations.

During FY2013 PROSHAR implemented 66 DRRAP infrastructure schemes¹⁶ using USG assistance. These schemes covered 24% of all targeted communities and provided 2,450 households with access to clean drinking water and 542 school students with access to hygienic latrines. Shelter capacity was also increased. Finally, PROSHAR implemented 46 additional DRRAP schemes undertaken by 3,142 laborers using GOB resources allocated to the project.

In order to sustain the disaster risk reduction initiatives PROSHAR included sustainability into the planning process and ensured participating community members were trained and familiar with all maintenance plans. Additionally, PROSHAR worked with DRRAP community members to identify income streams to cover costs associated with the ongoing management and maintenance of the disaster risk reduction initiatives.

IR 3.2 Early warning systems functional

In Sarankhola, CBDMVG members assisted CPP to identify vulnerable households, and warn populations residing in high risk area of the possible landing of Cyclone Mahasen. In Batiaghata, where CPP volunteers did not exist, CBDMVG members supported local governments to undertake identification and warning activities. CBDMVG members, with support from PROSHAR PNGO staff, also promoted key messages to households, including securing valuables and collecting non-perishable food and safe drinking water. These preparedness activities were made possible as a result of PROSHAR's provision of essential early warning response supplies and training to CBDMVGs in each ward susceptible to rapid on-set natural disasters. Finally, the preparedness activities undertaken by PROSHAR in advance of the landing of Cyclone Mahasen were an excellent opportunity to test its Emergency Response Plan which was subsequently modified based on lessons learned.

In spite of the technical and training support given to the ward level volunteer groups, the annual survey revealed an estimated 36.7% did not have functioning supplies at the time of the annual survey. Since Cyclone Mohasen, a number of wards had not replaced batteries in megaphones, nor had they recharged the solar powered radios. PROSHAR will reinforce the role of UDMCs and School Management Committees (repositories of the ward level equipment) in FY2014 to ensure more effective management of supplies.

IR 3.3 Increased knowledge and skills on DRM

¹⁵ Functional is defined as follows: (a) DMCs and CBDMVGs have regular meetings; (b) members have demonstrated their knowledge of disaster risk management responsibilities, as per the Government of Bangladesh (GoB) Standing Orders on Disaster, and (c) have updated CRAs and DRRAPs, in accordance with GoB standards.

¹⁶ Installation of 16 deep tube-wells, construction of eight new PSFs, repair of 25 existing PSF, construction of 10 rainwater harvesting systems, repair of three multipurpose cyclone shelters and construction of two cyclone shelter latrines with separate provision for male and female

PROSHAR mobilized 195 communities (Target: 99) to participate in training and awareness campaigns¹⁷ on disaster preparedness, prevention, mitigation and response across all three working upazilas. The behavior change communication (BCC) events used a range of approaches to disseminate key messages, which were refined following input and feedback from key community groups.

Commodity Update

ACDI/VOCA received all USG commodities with minimum loss while maintaining quality. A total of 11,740.588 MTs were received and sold to the GoB for monetization resources. A total of 1,604.59 MTs direct distribution commodities were received and 2,341.130 MTs were distributed at 84¹⁸ food distribution points. Direct distribution commodities' quality was ensured by regular monitoring and losses were primarily from small internal transport losses by from warehouse to warehouse. During FY2013, 3.146 MT RUTF were dispatched to the community clinics, family welfare centers & upazila health centers for use in PROSHAR programs. An additional 27 MT of RUTF was transferred to Action Contre La Faim, an NGO implementing a CMAM program in south-east Bangladesh, that had interest to use the RUTF. This transfer was made following approval by both USAID and by PROSHAR's line ministry and steering committee, so that this RUTF could be utilized to the benefit of Bangladeshi children.

B. SUCCESS STORIES

Across the three strategic objectives PROSHAR identified numerous success stories, which are included in Attachment B.

- The story of Jannati and her mother Lekjan highlights the health and nutrition work being done by PROSHAR and its government partners. The story also illustrates how Lekjan has been able to informally acquire knowledge from her neighbor (a PROSHAR beneficiary) on new technologies, which enhanced the production in her homestead garden.
- The story of Mr. Sayed Mofizur Rahman illustrates how training, along with the provision of small inputs, can create sufficient stimulus for an entrepreneur to develop and thrive. The success story also illustrates the role the private sector can take in extending the coverage of services beyond the over stretched government network.
- The story of Ms. Kobori Begum gives an example of a woman, trained as a Master Trainer and now successfully modeling optimal technologies related to tilapia production. Ms. Kobori's story illustrates how building a network of trusted and accessible resource persons in targeted communities can effectively spread knowledge.

¹⁷ The BCC materials and events included docudrama shows, folk dramas, songs

¹⁸ At 15 of the 69 food distribution points, rations were distributed over two days' to reduce the amount of time beneficiaries queued for rations.

C. LESSONS LEARNED

Strategic Objective 1: Income & access to food of poor and ultra poor households improved

- Uptake of technologies or management practices is higher when producer groups are sub-sectorally focused, and when training is delivered in “learning by doing” sessions. Re-alignment of producer groups into sub-sectors promotes increased interchange of experiences for better learning.
- Off-farm producer groups and commercial production groups require greater emphasis on marketing and networking techniques to reach buyers who are from outside of the PROSHAR target area. Homestead production groups, on the other hand, require more focus on growing nutritious foods for home consumption, bio-security of animals and the establishment of local collection points, where women are comfortable to go to sell extra produce.
- Producers raising goats or chickens are at high risk during monsoon season. Additional training modules addressing the specific management needs of livestock during the rainy season should be utilized.
- PNGOs require intensive capacity building to understand and adopt marketing approaches for livelihoods promotion.

Strategic Objective 2: Health of pregnant and lactating women and children under 5 (with particular attention to children under 2) improved

- Regular meetings of peers (mothers, fathers and grandmothers) need to rely less on delivering messages, and focus more on promoting interaction across leaders and peers that strengthens problem solving skills and reinforces positive behavior change.
- Existing literature on preventive programs related to nutrition indicate that prevention strategies successfully reduce the number of children under the age of five years reaching the level of severe and acute malnutrition. Programs that begin the preventive component the year before CMAM begins should factor this into their planned interventions.
- PROSHAR female beneficiaries who are in the last trimester of pregnancy, or who have children under the age of one year are less likely to enroll in SO1 producer groups than men or women without small children, for cultural and workload reasons. Nonetheless, they do access the knowledge transferred to extended family members or neighbors, to improve their own production.

Strategic Objective 3: Institutions and Households Prepared to Respond Effectively to Shocks

- Unions vulnerable to chronic disasters require different support compared to rapid on-set natural disaster which are supported by the government structures. They require skills to engage with other ministries (such as the Ministry of Environment, or the Water Development Board) beyond PROSHAR’s line ministry.
- Prepositioning of early warning materials at remote rural locations, coupled with appropriate training on the use of materials, helps volunteers to ensure quick dissemination of warning messages. However, provision of early warning materials, without a contribution from the

community at start-up (such as purchase of batteries for radios, etc.), may create the perception that PROSHAR will continue to maintain this equipment. School Management Committees, repositories of the early warning materials, need to monitor the functionality of equipment when it is returned and report to the CBDMVG and to PROSHAR when equipment requires community contribution to replace non-functional parts.

- PROSHAR's disaster preparedness and response requires clear roles and responsibilities to be delineated between the program offices in Khulna and Dhaka to run smoothly.
- Targeting youth to participate in disaster risk reduction activities promotes the spirit of volunteerism in the community and helps ensure the next generation is prepared to address natural and man made disasters quickly and appropriately.
- Increasing the participation of women in the community risk assessment process leads to the inclusion of activities in the disaster risk reduction action plans that specifically reduce the vulnerability of women, such as the need to improve physical access to clinics, hospitals and shelters, or the need to improve access to potable water for households.

ATTACHMENTS

B: Success stories (3)

D: Indicator Performance Tracking Table (IPTT)

E: Detailed Implementation Plan (DIP)

F: Expenditure Report

H: International Trip Summary

I: Monetization Tables*

J: Standardized Annual Performance Questionnaire (SAPQ)*

K: Beneficiary and Resource Tracking Table*

*Attachments I through K were entered into FFP MIS directly, and are included as separate attachments only in the email submission to the AOR.



SUCCESS STORY

MS. KOBORI BEGUM: RAISING HER FAMILY OUT OF POVERTY IN LOHAGARA UPAZILA, BANGLADESH, ONE FISH AT A TIME

Ms. Kobori Begum, a PROSHAR livelihoods enhancement volunteer, holds tilapia produced in her small 10 decimal pond. *Photo by Mr. Mostafa Zaman. Technical Officer, Muslim Aid, Aug 26, 2013*

most women have limited opportunities to access information and services and most farmers work as seasonal laborers or tend small, low yield farming plots.

“Previously we only stocked some fish fingerlings and harvested (them) all year round for only family consumption. But this year we will sell some left over tilapia after family consumption.” - Ms. Kobori, Lohogara Upazila, Narial District

Kobori Begum of Noapara village, Lohagara upazila, age 28, is one of the many impoverished women living in the area. She is a housewife and mother of three children. Her husband, Kamal Sheikh, is a poor farmer and the sole income earner for the family. The family has a 10 decimal pond used to stock small quantities of fish for limited and infrequent household consumption².

Lohagara is a large upazila with twelve unions in the district of Narail. Although it is large, much of the land remains unproductive in the rainy season due to water logging. Nearly a quarter of all children under the age of two within Lohagara upazila suffer from malnutrition¹,

PROSHAR

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PROSHAR aims to reduce food insecurity and chronic malnutrition, and increase resiliency to shocks, in three Khulna division Upazilas (Batiagiata, Sarankhola, Lohagara). To date the project has empowered over 42,700 poor and ultra poor households with the skills and resources to increase their income and access to food, and has worked with over 22,000 women and children to improve their health and nutrition status.

¹ % Children under 2 years underweight: 23.6% in inland areas (PROSHAR working area 22.7; Source:Page-66, Baseline, 01/2011)

² Ms. Kabori states that, prior to PROSHAR, the family consumed fish up to two times per week. Since the intervention the family has access to sufficient quantities of fish to consume it four times per week.

In February 2013 Ms. Kobori was selected by PROSHAR to participate in a three day master trainer program on tilapia cultivation for small household ponds. The course focused on pond preparation, fish food production, and tilapia cultivation processes. Her small household pond was stocked with 1,000 tilapia fingerlings ³. As a master trainer, Ms. Kobori was required to demonstrate every aquaculture technology on which she was trained and, as such, was provided with extra inputs of lime, fertiliser, fish fingerlings and fish food.

At the completion of the training course Ms. Kobori focused on following the fish production guidelines and technical information she had been given. Within one month of starting tilapia cultivation she produced sufficient quantities of fish to meet household demand, cover production costs and sell to other farming households.

Her husband estimates that under Ms. Kobori's care the pond could produce 12.6kg per decimal of fish for table consumption, and 8kg of fingerlings per decimal to restock the pond for the next production cycle.⁴ Previously the pond had only produced between 3-5 kg per decimal, a quantity insufficient for both household consumption and re-stocking.

In addition to the nutrient benefits Ms. Kobori's family is enjoying as a result of increased consumption, she has also been able to supplement the family income by earning 7,350 BDT (US\$94) over a 4 month period from selling the excess fish produced in her 10 decimal pond.

“Now I never think about the next meal for my children. I can make them educated and give them a better life.” -Ms. Kobori Begum, Lohogara Upazila, Narial District

Ms. Kobori says she will continue the tilapia cultivation in her pond and believes in the long term the money earned from tilapia farming will help fund the education of her children.

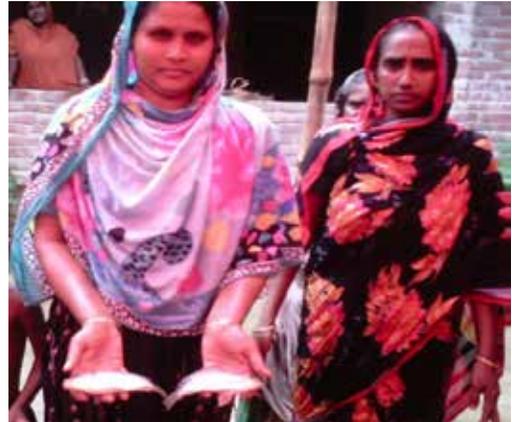
Seeing the success of Kobori Begum's fish cultivation, neighbors within the village are also choosing to take up small-scale household pond production of tilapia. Tilapia is a highly valued fish in the community and tends to command a higher price at market. Farmers like Kobori and her neighbors are able to net small quantities of under sized fish for household consumption while continuing to fatten larger fish for sale. In the long term PROSHAR expects this improved small pond cultivation demonstrated by Ms. Kobori will reduce the economic vulnerability of

³ PROSHAR, working in conjunction with Worldfish, promotes the use of genetically improved farm tilapia, which is both rapid growing and able to replicate, thereby eliminating the need for producers to buy new fingerling stock for each production cycle. Standard practice is to stock 100 fingerlings per decimal.

⁴ A production cycle is four months.

households while increasing their nutritional status from the increased consumption of protein rich fish.

Ms. Kobori is one of 427 master trainers participating in PROSHAR livelihood activities teaching over 3,800 women how to cultivate tilapia in their small homestead ponds. The approach used by PROSHAR to identify and train master trainers living within the targeted communities has ensured small-scale aquaculture producers have accessible and credible role models to draw on for support and advice as they farm their small household ponds.



Kobori Begum showing tilapia from her pond to the neighbors. *Photo by Mr. Mostafa Zaman. Technical Officer, Muslim Aid, Aug 26, 2013*

Tilapia production within the PROSHAR catchment areas has increased by almost 40% since FY2012.

This increase is likely the result of the promotion by PROSHAR of genetically improved farmed tilapia (GIFT) variety. Research undertaken by WorldFish,

with which PROSHAR coordinates under a memorandum of understanding, confirms the GIFT variety is more appropriate for low income households as it matures quickly and is able to replicate, thereby reducing costs associated with restocking ponds each production cycle.

The close collaboration PROSHAR has had with both Feed the Future and WorldFish has informed the shift in the program towards the promotion of this high yield tilapia.



Jannati(Left) with her mother, Lekjan Begum. *Photo by: Azhar, Documentation Coordinator, PCI, Sept 30, 2013*

SUCCESS STORY

LEKJAN BEGUM: A PROUD MOTHER and PROMISING HOMESTEAD GARDENER IN LOHAGARA UPAZILA, BANGLADESH

The village of Makhrail in Lohagara upazila, Narail District is deep in the heart of rural Bangladesh. Community members on average live on less than 1400BDT¹ (US\$17.5) per month as subsistence farmers or are self-employed.

The USAID funded Title II, PROSHAR, has been working in

the impoverished villages of Lohagara upazila providing much needed support to households to address key health and nutrition concerns for women and children. This is the story of one of the families that has participated in the PROSHAR nutrition program and is also benefiting from the technologies being introduced to the community to improve homestead gardens.

Jannati is a vibrant, energetic and happy seven-month old infant gifted with good health and today has a mother able to provide her the nutritional inputs she needs to thrive and grow. Seven months ago her story was very different and her prognosis less hopeful.

Five months into her second pregnancy Lekjan Begum (age 24) resident of Makhrail village, Lohagara, enrolled with PROSHAR as a prevention of malnutrition under two approach (PM2A) beneficiary. Within this program Lekjan received a suite of services including ante-natal and post-natal check ups at government service points, food rations and counseling on preventive care.

With the help of a traditional birth attendant Lekjan delivered her baby daughter, Jannati, at full term. Despite the antenatal care Lekjan received in advance of her delivery, her daughter was born moderately underweight and in need of additional care². A trained

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¹ 1400BDT is the per capita monthly income within PROSHAR's catchment area, as noted in the project baseline

² % Children under 2 years underweight- 23.6 nationally (PROSHAR working area 22.7; Page-66, baseline)

birth attendant delivered the baby, with the support of Lekjan's family's mother leader and grandmother leader. They all encouraged her to provide Jannati with the life saving colostrum milk her body produced shortly after her delivery.

Following the delivery, the mother leader and the grandmother leader of Lekjan's neighborhood along with a health promoter repeatedly visited Lekjan and her daughter Jannati at home to give guidance and support to continue exclusive breastfeeding. These visits by the group leaders also helped Lekjan's mother-in-law better understand her role in promoting exclusive breastfeeding of Jannati.

“My Daughter was very weak after birth but my learning in the care group, regular check up in growth monitoring promotion and support from my neighbor in gardening helped me a lot to take good care of my daughter.” -Ms. Lekjan Begum, PROSHAR beneficiary mother

As a result of the regular visits by the support groups Lekjan was able to exclusively breastfeed her daughter.

Jannati quickly gained weight and attained a normal nutritional status within four months of her delivery.

Enhancing Jannati's Dietary Intake beyond 6 months through Complementary Feeding

PROSHAR, in line with world health standards, advocates complementary feeding be introduced when an infant reaches six months of age. Information and counseling on complementary feeding is delivered to mothers like Lekjan through both the regular mother group meetings and by the government growth monitoring educators.



Lekjan Begum(Right) & Jannati(Left) in front of her homestead garden. *Photo by: Azhar, Documentation coordinator, PCI, September 30, 2013*

To prepare for the introduction of complementary feeding for Jannati, Lekjan sought guidance from her neighbor, Kabita, a member of the farmer's field school promoted by PROSHAR. Inspired by her neighbor's success in homestead gardening and looking for ways to enhance the nutritional and income status of her family, Lekjan started her own garden buying seeds from the local market. She produced a variety of vegetables including cucumber, eggplant, red amaranth, green papaya, sponge and ribbed gourd in her field. Her neighbor Kabita provided regular guidance to Lekjan on sourcing quality seed, land preparation, pest control approaches, strategies for efficient water use and techniques for artificial pollination of plants.

Today, Lekjan estimates that her family consumes about 20% of her seasonal produce, and she sells the remaining 80%. She is very satisfied with her level of vegetable production and has used the extra

income earned to cover other household expenses including the purchase of eggs and meat. In addition, she has been able to save approximately 8,500BDT (US\$ 106) from her earning and plans to use this money to extend her vegetable garden.

Today, Lekjan has a healthy baby of normal weight thanks to the regular growth monitoring and nutritional counseling support she continues to receive from PROSHAR. She now has the resources to provide nutritious meals with vegetables grown in her garden or bought from nearby markets.

The successful health and nutrition outcomes for Jannati, and the increased revenue stream for her parents resulted from a number of key implementation strategies employed by PROSHAR.

Firstly, the inclusion of the trio groups (grandmother/ mother) into the ante-natal and post-natal care program was essential in giving Lekjan and her mother in law important information on the value of exclusive breastfeeding. The regular visits by the grandmother and mother leaders helped to change traditional attitudes within the family on both breastfeeding and the introduction of complementary feeding when Jannati reached six months of age.

Secondly, the alignment of PROSHAR with the Ministry of Health's initiatives³ to promote good health ensures interventions for women done under PROSHAR will be more sustainable and accessible to women who are pregnant beyond the life of the current PROSHAR program.

Lastly, the PROSHAR livelihood initiatives are deliberately designed to ensure that there are resource persons in each village trained in homestead gardening. These women model optimal behaviors that maximize homestead production. Lekjan's neighbor is an example of one of these trained resources. Through her own homestead garden her neighbor was able to demonstrate increased production, and provide technical support to Lekjan when requested.

³ PROSHAR was specifically aligned to the Community Integrated Management of Childhood Illnesses initiatives run by the Government of Bangladesh.



Mr Rahman vaccinating cattle.

*Photo by: Mohsin Ali Sarder,
Production Specialist, PROSHAR.
ACDI/VOCA, Oct 8, 2013*

of animals in the district, is insufficiently staffed to meet all community needs for livestock care.

To address this shortfall in staffing and improve the overall health of livestock in Lohagara, PROSHAR has developed a network of 24 livestock health workers (LHW). These frontline workers provide vaccination and treatment services to livestock and poultry farmers within the upazila.

This is the story of Sayed Mofizur Rahman, age 30, one of the newly trained livestock health workers now servicing his upazila with essential services in vaccination and animal care.

In December 2012, PROSHAR selected Mr. Rahman, of Sayed Para village in Lahuria Union, as an LHW. He previously undertook petty trading (buying and selling of seasonal agricultural produce) but struggled to earn sufficient income to support himself. He participated in 15 days of intensive training on livestock health management provided by the Upazila Livestock Officer and was provided with start-up supplies by PROSHAR including bandages, needles and a thermos flask for optimal transportation of vaccines.

Mr. Rahman started vaccinating poultry and livestock in his union in early January 2013, and in September 2013, PROSHAR provided him with an additional seven days of refresher training. Today, Mr. Rahman is playing an important role within his community by providing timely vaccination and treatment of poultry and livestock for community members within Lahuria Union.

For Mr. Rahman the training has provided him with the skills needed to earn an increased income of 4000-5000BDT (US\$50-62) per month through the provision of vaccination and treatment services within his community. When interviewed

SUCCESS STORY

MR. SAYED MOFIZUR RAHMAN: A SUCCESSFUL COMMUNITY LIVESTOCK HEALTH WORKER IN LOHAGARA UPAZILA, BANGLADESH

Lohagara is a large upazila with 12 unions within the district of Narail. Most inhabitants of the upazila work in agricultural production and rear livestock and poultry, the condition of which is generally poor, with insufficient vaccination rates and minimal care. The district level Department of Livestock Services (DLS) within the Government of Bangladesh, which is responsible for the care

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by PROSHAR staff, Mr. Rahman discussed that some of the people of his union previously didn't know about the importance of vaccination of poultry and livestock. Now through his work they have become aware about the need to vaccinate their birds and animals and now request regular and timely care of their livestock.



Mrs. Kobita Begum from the village of Sayedpara, Lahuria Union, receiving poultry vaccination services from Mr. Rahman. *Photo by Mainul Islam, ACDI/VOCA, Oct 31, 2013*

“We had heard about vaccination of poultry some year ago, but didn't know how and where to get the vaccine, because neither the vaccine nor a person able to vaccinate was found in our community. Now we are getting vaccines in our house from Mr. Mofizur Rahman. We are satisfied with the work of Mofizur Rahman,” stated community members Nazma Begum, Salina Begum and Hasina Begum.

“I was jobless one year ago, now I am earning by vaccination and treatment of poultry and livestock as well as serving my community people.” - Mr. Rahman, Livestock Health Worker

The PROSHAR livestock health worker initiative is designed to improve the skills of locally available community members to provide an on demand service. This program provides opportunities for entrepreneurs to obtain a regular income stream and give the community improved services that enhance the health of productive assets, including poultry and livestock.

The design of the project is self-sustaining, with LHWs funding the restocking of supplies and the procurement of vaccines from the treatment fees charged to farmers. Mr. Rahman's services are supporting the local government to meet targets in vaccination delivery. Dr. Mostain Billah, the Upazila Livestock Officer of Lohagara sees tremendous value in having local animal health workers. As he shared with PROSHAR, “*the vaccination program of my upazila has been enhanced by livestock health workers of PROSHAR. They purchase on an average 10,000 doses of vaccine for poultry per month from my office.*”

ID	Indicator Required for	Indicator No.	Indicator	Disaggregation	FY11	FY12		FY13		FY14		FY15		LOA			Notes	
					(Oct 2010-Sep 2011)	Target	Achievement	% Target met										
Objective 1: Income and access to food of poor and ultra poor households improved																		
1	FFP, PROSHAR IMPACT	IM1	Average # of months of adequate household food provisioning	None								10.2		10.2			13% higher from baseline	
2	FFP, PROSHAR IMPACT	IM2	Average household dietary diversity score	None								6.9		6.9			5% higher from baseline	
3	PROSHAR IMPACT	IM3	Gross margin per unit of land, kilogram, or animal of selected product (crops/animals/fish production)	None								14,994		14,994			20% higher from baseline	
4	PROSHAR OUTCOME	OC1	Value of a set of assets (including savings, livestock, etc.)	None								60,566		60,566			25% higher from baseline	
IR. 1.1: Agricultural productivity increased and diversified																		
5	FIF, PROSHAR OUTPUT	OP1	Number of rural households benefiting directly from USG assistance * In 2013 the disaggregation is applied to the target numbers. However, in 2011 and 2012, this disaggregation was not part of the IPTT design.	Total		7843	7,741	29,596	26,250	43,102		43,102		43,102			New beneficiary: Yearly targets represent the number of new beneficiaries reached each year. Continued beneficiaries: The beneficiaries who continued from the previous year. The LOA target reflects the total number of beneficiaries entering the program.	
				Adult female no adult male (FNM)				6,712	393	9,776		9,776		9,776				
				Adult male no adult female (MNF)					3,116	53	4,539		4,539		4,539			
				Male and Female Adults (M&F)					19,768	25,804	28,787		28,787		28,787			
				Child no adult (CNA)														
				New				7843	7,741	21,855	18,509	13,506		0		0		
Continuing						7,741	7,741	29,596		43,102		43,102						
6	FIF, PROSHAR OUTCOME	OC2	Number of farmers and others who have applied new technologies or management practices as a result of USG assistance.	Total		724	1,457	8,016	24,019	14,580		16,943		16,943			Yearly targets represent the number of new and/or continuing beneficiaries applied new technologies or management practices plus the beneficiaries applied new technologies or management practices in the previous year. The LOA target reflects the cumulative number of beneficiaries.	
				Female			720	5,611	18,976	10,206		11,860		11,860				
				Male			737	2,405	5,043	4,374		5,083		5,083				
				New			1,457	6,559	17,473	6,564		2,363		-				
				Continuing			-	1,457	6,546	8,016		14,580		16,943				
7	FIF, PROSHAR OUTCOME	OC3	Number of hectares under improved technologies or management practices as a result of USG assistance	Total				224	4281	373		373		373			If a hectare is under more than one improved technology type (e.g. improved seed (crop genetics) and IPM (pest management)), count the hectare under each technology type (i.e. double-count). In addition, count the hectare under the total with one or more improved technology category. If a hectare is under more than one improved technology, some of which continue to be applied from the previous year and some of which were newly applied in the reporting year, count the hectare under the relevant technology type as new or continuing, depending on the technology, and under new for the total w/one or more improved technology category count the hectare managed by female who adopted one or more improved technology category. Similarly count the	
				Female				157	2940	261		261		261				
				Male				67	1133	112		112		112				
				New				224	2909	149		-		373				
				Continuing				0	1401	224		373		-				
				Crop Genetics				80	1390	134		134		134				
				Animal Genetics				25	215	42		42		42				
				Pest management				11	553	18		18		18				
				Disease management				11	553	18		18		18				
				Soil-related (fertility and				36	2224	60		60		60				
				Fishing gear/technique				23	174	39		39		39				
				Post-harvest handling and storage				22	144	37		37		37				
				Climate mitigation or adaptation					13	62	21		21		21			
Sub IR 1.1.1: Access to agricultural inputs and technology expanded																		
8	PROSHAR OUTCOME	OC4	% of beneficiaries who cultivate a new crop/product as a result of PROSHAR intervention	Total		10%	42.4%	25%	42.7%	35%		40%		40%			%age of SO1 beneficiary households who cultivate a new crop/ verify	
				Female			37.1%		40.2%									
				Male			56.5%		47.7%									
9	PROSHAR OUTCOME	OC5	% change in profit per unit of cost of Rice (HYV) as a result of PROSHAR intervention		15%	15%	20%	20.0%	20%		20%		20%					
10	PROSHAR OUTCOME	OC6	Production as a result of participation in PROSHAR technology transfer	- Indigenous poultry (KG/Bird)		0.5	1.1	0.65	0.8	0.8		0.9		0.9			Indicator subdivided by production (in 4 indicators) to better assess the targets.	
				- Tilapia (KG/Decimal)		15	7.2	10	10.0	10		11		11				
				- Maize (KG/Decimal)		13	12.3	15	8.9	16		17		17				
				- Carp poly (KG/Decimal)		25	9.7	12	12.9	12		14		14				
Sub IR 1.1.2: Producers have improved knowledge																		
11	PROSHAR OUTCOME	OC7	% of producer groups with women in leadership positions		15%	15%	30%	76.3%	45%		45%		45%					
Sub IR 1.1.3: Producers adopt improved/appropriate practices																		
12	FIF, PROSHAR OUTPUT	OP2	Number of individuals who have received USG supported short-term agricultural sector productivity or food security training * The disaggregation targets in gender and producer began in 2013	Total		7,243	7,187	21,230	17,909	28,138		10,698		41,205			No data for People in government, people in private sector and people in civil society as they are not our target beneficiaries. FY-14 and FY-15 followed multiple counting and add 15,350 and 10,698 individuals who received refresher training.	
				Female			5,036	14,861	14,818	19,697		7,489		28,844				
				Male			2,151	6,369	3,091	8,441		3,209		12,361				
				Producer			7,187	21,230	17,909	12,788		-		41,205				
				People in Government			-	-	-	-		-		-				
				People in Private Sector			-	-	-	-		-		-				
People in Civil Society			-	-	-	-		-		-								
IR 1.2: Market linkages developed and strengthened																		
13	PROSHAR OUTCOME	OC8	% of agricultural smallholders reporting increased market access and use as a result of PROSHAR intervention		20%	12.9%	35%	47.4%	40%		50%		50%					
Sub IR 1.2.1: Producers' cooperation improved																		
14	PROSHAR OUTCOME	OC9	% of producer group members bulking as a result of PROSHAR intervention		0%	5.3%	10%	4.1%	20%		30%		30%					
Sub IR 1.2.2: Access to market services improved																		

Indicator Required for	Indicator No.	Indicator	Disaggregation	FY11	FY12		FY13		FY14		FY15		LOA			Notes	
				(Oct 2010-Sep 2011)	Target	Achievement	% Target met										
15	PROSHAR OUTPUT	OP3	# of enterprises/producers receiving grants		-	-	13,141	11,631	13,856		-		26,997				
IR 1.3: Non-agricultural opportunities expanded and diversified																	
16	PROSHAR OUTCOME	OC10	% of alternative livelihood groups members reporting increased market access and use * Targets disaggregation by gender began in 2013	Total		20%	43.6%	45%	65.6%	50%		60%		60%			
				Female			38.1%	50%	63.5%	50%		50%		50%			
				Male			61.5%	50%	100.0%	50%		50%		50%			
Sub IR 1.3.1: Entrepreneurs have improved knowledge																	
17	PROSHAR OUTPUT	OP4	# of individuals who have received USG supported short term non-agricultural sector productivity training. * The target disaggregation by gender began in 2013	Total		600	554	1,125	889	1,318		600		1,897			
				Female			486	788	880	923		420		1,328			
				Male			68	337	9	395		180		569			
Sub IR 1.3.2: Entrepreneurs adopt improved/appropriate practices																	
18	PROSHAR OUTCOME	OC11	% of non-agriculture beneficiaries who adopted at least one technology introduced by the PROSHAR intervention * The target disaggregation by gender began in 2013	Total		10%	25.5%	30%	80%	40%		40%		40%			
				Female				60%	78.8%	60%		60%		60%			
				Male				40%	100.0%	40%		40%		40%			
19	PROSHAR OUTCOME	OC12	Quantity sold as a result of participation in PROSHAR technology transfer - Karchupi (Piece/year/beneficiary) - Bamboo products (Piece/year/beneficiary) - Others (Piece/year/beneficiary)	Total		60	1,045	72	108	84		96		96			
				Female		1,080	1,087	1,200	1,033	1,320		1,440		1,440			
				Male		1,080	543	550	519	600		600		600			
Objective 2: Health of pregnant and lactating women and children under 5 (with particular attention to children under 2) improved																	
20	FFP PROSHAR IMPACT	IM4	Prevalence of stunted children under five years of age	Total								34.4%		34.4%		8% points lower from baseline	
				Female								37.0%		37.0%			
				Male								32.0%		32.0%			
21	FFP PROSHAR IMPACT	IM5	Prevalence of underweight children under five years of age	Total								24.4%		24.4%		7% points lower from baseline	
				Female								25.4%		25.4%			
				Male								23.4%		23.4%			
22	PROSHAR IMPACT	IM6	% chronic malnutrition (energy deficient) of ever-married women 15-49 (BMI < 18.5mm)									21.5%		21.5%		2.4% point lower from baseline	
23	FFP PROSHAR OUTCOME	OC13	Prevalence of exclusive breast feeding of children under six months of age	Total								60%		60%		Baseline & endline data from annual survey of full population.	
				Female								60%		60%			
				Male								60%		60%			
24	PROSHAR OUTCOME	OC14	Prevalence of exclusive breast feeding of children in PROSHAR PM2A households children under six months of age	Total		50%	56%	55%	67.3%	60%		60%		60%		Annual survey of beneficiary sample. Intermediate data capturing only PM2A beneficiaries	
				Female				55%	69.6%	60%		60%		60%			
				Male				55%	65.5%	60%		60%		60%			
IR 2.1: Malnutrition prevented and treated																	
25	FIF PROSHAR OUTPUT	OP5	Number of children under five reached by USG-supported nutrition programs * The target disaggregation by gender began in 2013	Total		-	6,696	10,248	19,201	17,082	25,139		17,109		27,518		Yearly targets represent the number of children reached each year, regardless of whether they had also been reached last year. The LOA target reflects the total number children.
				Female				4,995	9,408	8,478	12,318		8,383		13,484		
				Male				5,253	9,793	8,604	12,821		8,726		14,034		
				New				10,248	8,953	7,235	8,317		-		-		
				Continuing				-	10,248	9,847	16,822		17,109				
Sub IR 2.1.1: PLW & Children under two years old access to nutrition and health services improved																	
26	PROSHAR OUTCOME	OC15	% of children under 2 years old who are underweight * The target disaggregation by gender began in 2013	Total								17.5%		17.5%		Baseline & endline data from annual survey of full population.	
				Female										18.0%		18.0%	
				Male										17.0%		17.0%	
27	PROSHAR OUTCOME	OC16	% of children under 2 years old from PM2A (Prevention of Malnutrition Under 2 Approach) households who are underweight * The target disaggregation by gender began in 2013	Total		21.6%	21.6%	19.6%	21.2%	18.5%		17.5%		17.5%		Annual survey of beneficiary sample only on PM2A beneficiaries	
				Female				22.5%	21.0%	22.2%	19.0%		18.0%		18.0%		
				Male				20.7%	18.0%	20.3%	18.0%		17.0%		17.0%		
28	PROSHAR OUTPUT	OP6	Number of beneficiaries receiving USG food assistance (dry rations) under nutrition program * New indicator since 2013	Other Family Members				53,298	60,925	50,820		23,235		127,353			
				PWLM				6,298	13,552	2,496		-		8,794			
				Children<24 Months				11,468	14,018	14,444		7,745		33,657			
Sub IR 2.1.2: Improved availability of and access to Community Management Acute Malnutrition (CMAM) services																	
29	PROSHAR OUTCOME	OC17	% of severely malnourished children who recovered after receiving SAM (Severe Acute Malnutrition) treatment	Total		80%	0%	80%	82.0%	80%		80%		80%			
				Female					80%	82.8%	80%		80%		80%		
				Male					80%	80.8%	80%		80%		80%		
30	PROSHAR OUTCOME	OC18	% of caregivers who adopted at least three of the recommended behaviors as a result of USG assistance			35%	99.7%	45%	98.7%	55%		60%		60%			
31	PROSHAR OUTPUT	OP7	# of pregnant/lactating women completing at least 12 months of PM2A programming.			455	445	8,473	9,887	8,928		2,232		20,088		Note: Target # reflects the shortfall in achievement of FY12 (10 persons)	
32	PROSHAR OUTPUT	OP8	# of children over 23 months who have completed the full PM2A program.	Total		-	-	2,232	2,068	8,928		2,976		14,136		Indicator measured after 24 months of project participation. Data collected Quarterly but aggregated annual number will be reported	
				Female					1,094	1,012	4,375		1,458		6,927		
				Male					1,138	1,056	4,553		1,518		7,209		
IR2.2: Improved effectiveness of health clinic services																	
Sub IR 2.2.1: Integrated services of community health clinics improved																	
33	PROSHAR OUTCOME	OC19	% of women who received at least 3 antenatal checkups by a qualified provider during pregnancy	None		39%	53%	90%	93.6%	90%		65%		65%		Baseline & endline data from full population survey. Intermediate year data capture PM2A beneficiaries. Targets have been revised based on historical data.	
				Total				31%	59.8%	34%	50.2%	35%		36.5%		36.5%	

Indicator Required for	Indicator No.	Indicator	Disaggregation	FY11 (Oct 2010-Sep 2011)		FY12 (Oct 2011-Sep 2012)		FY13 (Oct 2012-Sep 2013)		FY14 (Oct 2013-Sep 2014)		FY15 (Oct 2014-May 2015)		LOA			Notes
				Achievement	Target	Achievement	Target	Achievement									
34	PROSHAR OUTCOME	OC20	appropriate infant and young child feeding practices (IYCF)	Female		57.4%	33%	51.9%	34.5%			36.0%		36.0%			from PM2A beneficiaries
			* The target disagregation by gender began in 2013	Male		62.3%	35%	48.8%	35.5%			37.0%		37.0%			
35	FFP PROSHAR OUTCOME	OC21	Percent of children 6-59 months' with diarrhea treated with Oral Rehydration Therapy	Total								28.6%		28.6%			baseline and endline data from annual survey of full population
				Female										28.6%			
				Male										28.6%			
36	FFP PROSHAR OUTCOME	OC22	Percent of children under five years old with diarrhea treated with Oral Rehydration Therapy among PM2A households	Total		25%	21.4%	30%	46.2%	35%		35%					Intermediate year data capture PM2A beneficiaries
			* The target disagregation by gender began in 2013	Female				30%	46.2%	35%		35%					
				Male				30%	46.2%	35%		35%					
37	PROSHAR OUTCOME	OC23	% of children aged 6-23 months of age with diarrhea continuously fed during illness	None		64%	100%	67%	65.4%	70%		72.6%		72.6%			Baseline and endline data from full population survey. Intermediate year data capture PM2A beneficiaries
38	PROSHAR OUTCOME	OC24	% of children 0-23 months who had symptoms of Acute Respiratory Infection (ARI) that sought advice or treatment from trained health care	Total		39%	35.6%	41%	52.2%	44%		46.3%		46.3%			Baseline and endline data from annual survey of full population. Intermediate year data capture PM2A beneficiaries
			* The target disagregation by gender began in 2013	Female			43.2%	47%	53.3%	46%		50.0%		50.0%			
				Male			30.2%	34%	51.3%	38%		42.5%		42.5%			
Sub IR 2.2.2: Partnerships between health facilities and the communities (they serve) improved																	
39	FFP PROSHAR OUTCOME	OC25	% of households with soap and water at a hand washing station commonly used by family members	None								36.8%		36.8%			Baseline and endline data from annual survey of full population. Intermediate year data capture PM2A beneficiaries
40	FFP PROSHAR OUTCOME	OC26	% of households with soap and water at a hand washing station commonly used by family members among PM2A households	None		25%	11.8%	30%	37.8%	35%		36.8%		36.8%			Baseline and endline data from annual survey of full population. Intermediate year data capture PM2A beneficiaries
41	FFP PROSHAR OUTPUT	OP9	Number of people trained in child health and nutrition through USG-supported programs	Total		8,095	7,457	8,095	7,924	5,667		4,048		8,095			For this indicator, please simply count the training attendance numbers without distinguishing whether the same person received multiple trainings.
			* The target disagregation by gender began in 2013	Female			4,340	3,245	4,313	2,272		1,623		3,245			
				Male			3,117	4,850	3,611	3,395		2,425		4,850			
Objective 3: Institutions and Households prepared to respond effectively to shocks																	
IR. 3.1 Disaster Risk Reduction Plans (DRRPs) functional																	
42	PROSHAR OUTPUT	OP10	# unions with pre-positioned emergency supplies in accordance with their emergency plans as a result of PROSHAR intervention	None		4	11	11	23	17		23		23			LOA is not a cumulative #
43	PROSHAR OUTCOME	OC27	# of functional DMCs and CBDMVG at the ward, union, upazila levels as a result of PROSHAR intervention	None		15	26	60	143	133		133		133			117 CBDMVG (Ward) group, 13 UDMC and 3 UzDMC.
44	PROSHAR OUTPUT	OP11	# of DMCs members trained in prevention, mitigation, preparation and response to shocks as a result of PROSHAR intervention	Total		-	564	1,623	2,399	1,188		0		3375			
				Female		-	98	443	697	432				973			
				Male		-	466	1,180	1,702	756				2402			
45	PROSHAR OUTCOME	OC28	# of DMCs that have comprehensive Disaster Risk Reduction Plans as a result of PROSHAR intervention	None		-	1	15	13	15		15		15			13 UDMC and 2 UzDMC (Sarankhola and Batiaghata UzDMC)
46	PROSHAR OUTCOME	OC29	% of USG-assisted communities that have constructed/developed physical infrastructure to mitigate the effects of shock	Total		0%	5%	23%	24%	40%		50%		50%			104 Communities (Wards) out of 207 PROSHAR working communities (Wards)
			The target disagregation by gender began in 2013	New			5%	18%	19%	17%		10%					
				Continuing				5%	5%	23%		40%					
47	FFP / FIF PROSHAR OUTPUT	OP12	Kilometers of roads improved or constructed	Constructed				-	-	0		0		0			under FFW
			* FFW implemented in FY14	Improved				-	-	36		20		56			
48	PROSHAR OUTCOME	OC30	# of communities (wards) with emergency plans as a result of PROSHAR intervention	None		-	-	99	99	117		117		117			(13 vulnerable unions x 9 wards). This is not a cumulative number - same communities represented in years 4 & 5. Year 3 communities are a subset of communities targeted in years 4 and 5
IR 3.2: Early warning systems functional																	
49	PROSHAR OUTCOME	OC31	# of wards with disaster early warning and response (EWR) systems in place as a result of project assistance	Total		-	-	99	63	99		99		99			(11 vulnerable disaster prone unions x 9 wards). This is not a cumulative number - same communities represented in years 4 & 5.
				New				99	63	0		0					
				Continuing					-	99		99					
IR 3.3: Increased knowledge and skills on disaster risk management (DRM)																	
50	PROSHAR OUTCOME	OC32	# of communities (wards) participating in training and awareness campaigns on disaster preparedness, prevention, mitigation and response as a result of PROSHAR intervention	None		36	54	99	195	207		207		207			(23 unions x 9 wards) - this is not a cumulative number. Achievement in Year 12 and target for Year 13 is a subset of the total numbers in Years 4 and 5
51	FFP PROSHAR OUTPUT	OP13	Number of people trained in disaster preparedness as a result of USG assistance	Total		150	860	10,410	11,037	2,484		722		13,766			
				Female		50	173	4,216	5,180	794		73		5,133			
				Male		100	687	6,194	5,857	1,690		649		8,633			
				# disabled		0	0	99	186	108		0		207			
				# not disabled		150	860	10,311	10,851	2,376		722		13,559			
				#IDP		-	-	-	-	-		0		0			

Indicator Required for	Indicator No.	Indicator	Disaggregation	FY11 (Oct 2010-Sep 2011)	FY12 (Oct 2011-Sep 2012)		FY13 (Oct 2012-Sep 2013)		FY14 (Oct 2013-Sep 2014)		FY15 (Oct 2014-May 2015)		LOA			Notes
				Achievement	Target	Achievement	Target	Achievement	Target	Achievement	Target	Achievement	Target	Achievement	% Target met	
			#host	-	-	-	-	-	-	-	0		0			
			Total	-	10	66	66	150	78	304						
			Rural roads	-	-	-	-	36	20	56						
			Pond Sand Filter	-	8	33	33	50	25	116						
			Pond Re-excavation	-	-	-	-	20	5	25						
			Killa Construction	-	-	-	-	4	-	4						
			Sanitary latrine	-	2	2	2	3	-	7						
			Tube well	-	-	18	18	-	18	36						
			Multipurpose cyclone shelter repair	-	-	3	3	17	10	30						
			Rain water Harvesting system	-	-	10	10	-	-	10						
			Raising cyclone shelter premises	-	-	-	-	20	-	20						
52	PROSHAR OUTPUT	OP14	Number of infrastructure schemes constructed or repaired as a result of USG assistance													
53	PROSHAR OUTPUT	OP 15	Total # of beneficiaries (livelihood+PM2A+RUTF) registered to receive benefit directly from the PROSHAR - Livelihood - PM2A - RUTF (see Note 2) Total households benefited directly from PROSHAR													Yearly targets represent the cumulative number of benef registered under three categories (livelihood, PM2A & RUTF) while in the last row total households represent the cumulative number of unique households benefited directly from PROSHAR activities.
			Livelihood		10,950	11,323	30,235	42,713	43,102	43,102			43,102			
			PM2A		6,696	14,334	19,640	22,213	27,518	27,518			27,518			
			RUTF		200	289	1,166	301	2,132	2,776			2,776			
			Total HH		15,000	25,046	39,000	62,919	53,500	60,000			60,000			
Note 1: : OP= Output; OC= Outcome; IM= Impact; NA= Not available																

PROSHAR Performance Monitoring Plan											
ID	Indicator No.	Indicator for	Performance Indicator	Indicator Definition and Unit of Measurement	Unit	Disaggregation	Source of Information	Frequency	Methodology	Population Covered	Responsible
Objective 1: Income and access to food of poor and ultra poor households improved											
1	IM1	FFP PROSHAR IMPACT	Average # of months of adequate household food provisioning	The average numbers of month's beneficiaries in USG-supported social assistance programs are able to meet their basic food needs. This indicator captures the number of months in the last year during which a household was not able to maintain a minimum level of food security (ability to access food and availability of food). This is therefore the number of months respondents indicate food was sufficient for HH during last 12 months. Responses from the household are used to calculate the number of month of adequate household provision, the average of which is reported at the population level.	#	None	PROSHAR	Baseline, and end-line	Sample survey of randomly selected households	Total population	Director (EG) M&E unit, external consultant
2	IM2	FFP IMPACT	Average household dietary diversity score	Food groups consumed in last twenty-four hours. HDDS is composed of 13 questions about different food groups consumed by any household member using a 24-hour recall period. Responses across questions are used to produce a score of household dietary diversity to be reported at the population level. Number between 0 and 15. To better reflect a quality diet, the number of different food groups consumed is calculated, rather than the number of different foods consumed. Knowing that households consume, for example, an average of four different food groups implies that their diets offer some diversity in both macro- and micronutrients.	#	None	PROSHAR	Baseline, and end-line	Sample survey of randomly selected households	Total population	Director (EG) M&E unit, external consultant
3	IM3	PROSHAR IMPACT	Gross margin per unit of land, kilogram, or animal of selected product (crops/animals/fisheries)	Gross margin analysis involves the calculation of income deducting from that income the direct costs of production, total cost of purchased inputs. To conserve data collection resources, only those input costs estimated to be at least 5% of the total input cost will be included. Most likely items include, but are not limited to: purchased seed, feed, fertilizer, hired labor, hired machine/veterinary services, purchasing of tools, etc. Profit margin for agricultural and livestock production	#	None	PROSHAR	Baseline and end-line	Sample survey of randomly selected households	Total population	Director (EG) M&E unit, external consultant
4	OC1	PROSHAR OUTCOME	Value of a set of assets (including savings, livestock, etc.)	Value of assets belonging to the household. Asset is defined as any tangible or intangible item to which an economical value can be assigned. Assets can be physical, such as machinery and consumer durables, or financial, such as cash and accounts owned by an individual or household, especially that which could be converted to cash. Examples are cash, livestock. The value will be defined by the PROSHAR Team based on local market prices.	#	None	PROSHAR	Baseline and end-line	Sample survey of randomly selected households	Total population	Director (EG) M&E unit, external consultant
IR. 1.1. Agricultural productivity increased and diversified											
5	OP1	FtF PROSHAR OUTPUT	Number of rural households benefiting directly from USG interventions	Households are defined as group of persons, related or unrelated, living together and taking food from the same kitchen A household is a beneficiary if it contains at least one individual who is a beneficiary. An individual is a beneficiary if s/he is engaged with a project activity and either already has shown benefit from the activity or has a high likelihood of gaining one of those benefits due to his/her significant level of engagement with the project. For effective planning, resource management and quality programming to create greater impact, categorizes the beneficiary households in two basic Groups, such as On farm (Agriculture, Aquaculture, poultry & livestock) and Off farm. Households benefiting are defined as having received agricultural and non-agriculture training, services, session and interventions under PROSHAR Project period. Beneficiaries do not include those merely contacted or touched by an activity through brief attendance at a meeting or gathering. Beneficiaries include people who receive training. Yearly targets represent the number of beneficiaries reached each year (either new or continuing. The LOA target reflects the total number beneficiaries entering the program. The definition of "rural" is the areas which fall under union boundary, not in city corporation/ municipality or urban area, have identity as Village. The target group for this indicator include Poor, Ultra poor and Marginal household, living in rural area. New beneficiary: Yearly targets represent the number of new beneficiaries reached each year, Continued beneficiaries: The beneficiaries who continued from the previous year. The LOA target reflects the total number of beneficiaries entering the program.	#	Adult female, no adult male; adult male, no adult female; child no adult; new; continuing	PROSHAR , PNGO	Annual Census	Evaluating project records	PROSHAR Beneficiaries	Director (EG) M&E unit
6	OC2	FtF PROSHAR OUTCOME	Number of farmers and others who have applied new technologies or management practices as a result of USG assistance	Total number of farmers, ranchers and other primary sector producers (food and non-food crops, livestock products, fisheries, agro-forestry, and natural resource-based products are included), individual processors (not firms), rural entrepreneurs, that are applying best practices anywhere within the food and fiber system as a result of USG assistance. This includes innovations in productivity, value-added, post-harvest management, sustainable land management, managerial practices, input supply delivery. Technologies to be counted here are agriculture-related technologies and innovations including those that address climate change adaptation and mitigation. Relevant technologies could include: (a) mechanical and physical; (b) biological; (c) chemical; (d) management and cultural practices. In the case where, for example, a farmer applies more than one innovation as a result of USG assistance, they are still only counted once. Also, if more than one farmer in a household is applying new technologies, all the farmers in the household who apply these technologies/practices are counted. Yearly targets represent the number of new and/or continuing beneficiaries that applied new technologies or management practices plus the beneficiaries applied new technologies or management practices that applied the technology in the previous year, if they are not new beneficiaries. The LOA target reflects the cumulative number of beneficiaries.	#	Sex (Female and Male), New, Continuing	PROSHAR	Annual	Sample survey of randomly selected beneficiary households	PROSHAR Livelihoods Beneficiaries	Director (EG) M&E unit, external consultant

PROSHAR Performance Monitoring Plan											
ID	Indicator No.	Indicator for	Performance Indicator	Indicator Definition and Unit of Measurement	Unit	Disaggregation	Source of Information	Frequency	Methodology	Population Covered	Responsible
7	OC3	FtF PROSHAR OUTCOME	Number of hectares under improved technologies or management practices as a result of USG assistance	<p>At least one or more new technology which will be implemented by producers as a result of USG assistance and total number of hectares of land will be calculated. Technologies that will be reported are: (a) mechanical and physical; (b) chemical; (d) management and cultural practices; (e) crop genetics; (f) animal genetics; (g) pest management; (h) disease management; (h) soil fertility and conservation (including tillage, and use of compost, green manure promoted by PROSHAR; (i) promotion of technologies more appropriate to climate conditions or to mitigate impacts of climate change; (j) post-harvest handling and storage.</p> <p>If a hectare is under more than one improved technology type (e.g. improved seed (crop genetics) and IPM (pest management), count the hectare under each technology type (i.e. double-count). In addition, count the hectare under the total with one or more improved technology category.</p> <p>If a hectare is under more than one improved technology, some of which continue to be applied from the previous year and some of which were newly applied in the reporting year, count the hectare under the relevant technology type as new or continuing, depending on the technology, and under new for the total w/one or more improved technology category</p>	Hec	Crop Genetics, Animal Genetics, Pest management, Disease management, Soil-related (fertility and conservation, including tillage), Fishing gear/technique, Post-harvest handling and storage, Climate mitigation or adaptation, New Continuing, Sex (Female and Male)	PROSHAR	Annual	Sample survey of randomly selected beneficiary households	PROSHAR Livelihoods Beneficiaries	Director (EG) M&E unit, external consultant

PROSHAR Performance Monitoring Plan											
ID	Indicator No.	Indicator for	Performance Indicator	Indicator Definition and Unit of Measurement	Unit	Disaggregation	Source of Information	Frequency	Methodology	Population Covered	Responsible
Sub IR 1.1.1: Access to agricultural inputs and technology expanded											
8	OC4	PROSHAR OUTCOME	% of beneficiaries who cultivate a new crop as a result of PROSHAR intervention	Producers that cultivate new crops/ varieties (i.e., Agriculture, livestock, aquaculture) as a result of PROSHAR training and intervention. Here new crops/products refer to both new crops and new varieties of crop. Numerator: Number of beneficiaries who are planting new crop/varieties Denominator: Number of beneficiaries trained in crop diversification surveyed.	%	Sex (Female and Male)	PROSHAR	Annual	Sample survey of randomly selected beneficiary households	Livelihoods beneficiaries	Director (EG) M&E unit, external consultant
9	OC5	PROSHAR OUTCOME	% change in profit per unit of cost of Rice (HYV) as a result of PROSHAR intervention	The change in profit per unit (per decimale) cost over time. Profit on cost is calculated using the following formula: $\frac{((Total\ Revenue - Total\ Cost(excluding\ own\ labor)/Total\ Cost)*100)}{total\ kgs\ of\ rice}$. Here %change will be calculate considering base year.	%	None	PROSHAR	Annual	Sample survey of randomly selected beneficiary households	Livelihoods beneficiaries	Director (EG) M&E unit, external consultant
10	OC6	PROSHAR OUTCOME	Production as a result of participation in PROSHAR technology transfer - Indigenous poultry (KG/Bird) - Tilapia (KG/Decimal) - Maize (KG/Decimal) - Carp poly (KG/Decimal)	The change in production level for over time. Productions will be measured through survey using the appropriate unit of measure - average weight per bird (kg), Tilapia production per decimal of pond (kg), Maize production in per decimal land (kg), Carp poly production in per decimal of pond (kg).	#	None	PROSHAR	Annual	Sample survey of randomly selected beneficiary households	Livelihoods beneficiaries	Director (EG) M&E unit, external consultant
Sub IR 1.1.2: Producers have improved knowledge											
11	OC7	PROSHAR OUTCOME	% of producer groups with women in leadership positions	In order to track USG investments to increase capacity of women in agriculture, PROSHAR will track the number of women in leadership position within the producer groups. This information will be obtained through reading producer organization records triangulated with observation and spot checks. Numerator: Producers groups where at least one woman covers a leadership position (i.e., master trainer, Secretary, president) / Denominator: Total number of producer groups assisted.	%	None	PROSHAR , PNGO	Annual Census	Evaluating project records	Producer groups members	Director (EG) M&E unit
Sub IR 1.1.3: Producers adopt improved/appropriate practices											
12	OP2	PROSHAR OUTPUT	Number of individuals who have received USG supported short term agriculture sector productivity or food security training	The number of individuals to whom significant knowledge or skills have been imparted through formal means. This includes homestead and commercial producers who receive training in a variety of best practices in productivity, post-harvest management, linking to markets, etc. For calculating this indicator the following issues need to be considered: 1. Direct beneficiaries will be counted on an yearly basis (new and continued); 2. Participants who attend a minimum of 60% in FFS session and demonstration/study plots will be counted as having completed training, based on data extracted from attendance sheets; 3. Attendance sheets need to be maintained; 4. Pre test and post tests will be conducted at the beginning of the field school season and at the end to measure knowledge changes. . No data for People in government, people in private sector and people in civil society as they are not PROSHAR target beneficiaries. Yearly targets represent the number of beneficiaries and reached each year (who either received basic or refresher training or received marketing support) The LOA target reflects the total number on farm (agriculture, aquaculture and poultry & livestock) beneficiaries entering the program.	#	Sex (Female and Male), Producer, people in Government, people in Private Sector, People in Civil Society	PROSHAR , PNGO	Annual Census	Evaluating project records	Producer groups population	Director (EG) M&E unit
IR 1.2: Market linkages developed and strengthened											
13	OC8	PROSHAR OUTCOME	% of agricultural smallholders reporting increased market access and use as a result of PROSHAR intervention	Producer groups' members will be surveyed to capture changes in their use of markets. Market access will be measured both for input & output market. Improve. If producers have accessed market information from new market actors, this will also be considered an improvement in market access. Producer group members will be surveyed to capture changes in their use of market and market information. Numerator: Small holders reporting increase market use for buying & selling of products & services. Denominator: Total number of smallholders surveyed.	%	None	PROSHAR	Annual	Sample survey of randomly selected beneficiary households	On-farm Livelihoods beneficiaries	M&E unit, Director (EG), external consultant
Sub IR 1.2.1: Producers cooperation improved											
14	OC9	PROSHAR OUTCOME	% of producer group members bulking as a result of PROSHAR intervention	Percentage of producer group members benefiting from improvements in bulking. The term 'bulking' will indicate both bulk buying and bulk selling. Producers may buy inputs (such as seeds, fertilizers, vaccine, and others) collectively and sell their products collectively, including sharing vehicles to move goods to and from markets. Producer group members will be surveyed to capture changes in their buying- selling patterns which will be used to indicate uptake in bulking. Numerator: Number of producer group members practicing bulking in buying-selling process. Denominator: Total number of producer group members surveyed.	%	None	PROSHAR	Annual	Sample survey of randomly selected beneficiary households	On-farm Livelihoods beneficiaries	M&E unit, Director (EG), external consultant
Sub IR 1.2.2: Access to market services improved											
15	OP3	PROSHAR OUTPUT	# of enterprises/producers receiving grants	All Producers (on-farm and Off-farm) who are poor and ultra poor will receive in-kind micro-grants in the form of inputs in support of their selected sub-sectoral activities. The producers will come from both homestead production group and commercial production group, Marginal producers will not be eligible for micro grants. Numerator: Number of producer group members (on- farm & off- farm) receiving micro grants in kinds in different sub- sectors. Denominator: Total number of producer group members surveyed.	#	None	PROSHAR , PNGO	Quarterly but aggregated annual number will be reported	Evaluating project records	Enterprises/Producer groups population	M&E unit, Director (EG)
IR 1.3: Non-agricultural opportunities expanded and diversified											
16	OC10	PROSHAR OUTCOME	% of alternative livelihood groups members reporting increased market access and use	Market access will be measured both in input & output marke, and will include changes to market information as a result of the PROSHAR intervention. Non-farm livelihood group members will be surveyed to capture changes in their use of market and market information. Numerator: Alternative livelihood group members reporting increase market use for buying & selling of products & services. Denominator: Total number of alternative livelihood group members surveyed.	%	Sex (Female and Male)	PROSHAR	Annual	Sample survey of randomly selected beneficiary households	Off-farm Livelihoods beneficiaries	M&E unit, Director (EG), external consultant
Sub IR 1.3.1: Entrepreneurs have improved knowledge											

PROSHAR Performance Monitoring Plan											
ID	Indicator No.	Indicator for	Performance Indicator	Indicator Definition and Unit of Measurement	Unit	Disaggregation	Source of Information	Frequency	Methodology	Population Covered	Responsible
17	OP4	PROSHAR OUTPUT	# of individuals who have received USG supported short term non-agricultural sector productivity training.	The number of individuals to whom significant knowledge or skills have been improved through formal means. This includes crafts persons and tailors who receive training in a variety of best practices in purchase of quality inputs, production and sales techniques. Delivery mechanisms can include a variety of extension methods as well as technical assistance activities. For calculating this indicator the following issues need to be considered: 1. Direct beneficiaries will be counted in an yearly basis (new and continued); 2. Participants for cross visits and demonstration will be counted 3. Participants of courtyard session/FGD will not be counted; 4. Program staff receiving training related will not be counted 5. Attendance sheets will be maintained; 6. Pre test and post tests will be undertaken to assess improvements in knowledge. Numerator: Number of alternative livelihoods group members received training. Denominator: Total number of alternative livelihoods group members surveyed.	#	Sex (Female and Male)	PROSHAR , PNGO	Annual Census	Evaluating project records	Beneficiaries	Director (EG)
Sub IR 1.3.2: Entrepreneurs adopt improved/appropriate practices											
18	OC11	PROSHAR OUTCOME	% of non-agriculture beneficiaries who adopted at least one technology introduced by the PROSHAR intervention	Technologies including improved designs that meet market demand (including size), iand technologies to improve quality of production. Beneficiaries that adopt/ practice to demonstrate understanding the knowledge imparted from non-farm livelihoods training . Numerator: Number of non- agriculture beneficiaries that adopt at least one practice. Denominator: Total number of non- agriculture beneficiaries surveyed.	%	Sex (Female and Male)	PROSHAR	Annual	Sample survey of randomly selected beneficiary households	Off-farm Livelihoods beneficiaries	Director (EG) M&E unit, external consultant
19	OC12	PROSHAR OUTCOME	Quantity sold as a result of participation in PROSHAR technology transfer - Karchupi (Piece/year/beneficiary) - Bamboo products (Piece/year/beneficiary) - Others (Piece/year/beneficiary)	The term 'Quantity Sold' indicates the amount of products that beneficiaries sell in each year, to determine whether sales are increasing over time. These will be measured through the annual survey using the appropriate units of measure (karchupi: pieces per year per beneficiary; bamboo products (piece per year per beneficiary; tailoring: pieces per year per beneficiary; hand embroidery: piece per year per beneficiary. Numerator: The number of pieces of karchupi products/bamboo products/others products (tailoring, hand embroidery) sold by each beneficiary in a year. Denominator: Total number of non- agriculture beneficiaries surveyed..		None	PROSHAR	Annual	Sample survey of randomly selected beneficiary households	Off-farm Livelihoods beneficiaries	Director (EG) M&E unit, external consultant
Objective 2: Health of pregnant and lactating women and children under 5 (with particular attention to children under 2) improved											
20	IM4	FFP PROSHAR Impact	Prevalence of stunted children under five years of age	Stunting is a height-for-age measurement that reflects chronic undernutrition. This indicator measures the percent of children aged 0–59 months, i.e., under 5 years, who are stunted, as defined by a height-for-age zscore (HAZ) < -2. This indicator data is reported for all children under 5 to align with the Feed the Future initiative. The numerator for this indicator is the number of children aged 0–59 months with a HAZ < -2. The denominator is the number of children aged 0–59 months in the survey.	%	Sex (Female, Male)	PROSHAR	Baseline and end-line	Sample survey of randomly selected households with children under 5 yrs	Total population	Director (NH&D), M&E unit, external consultant
21	IM5	FFP PROSHAR Impact	Prevalence of underweight children under five years of age	Underweight is a reflection of acute and/or chronic undernutrition and is measured using weight-for-age. This indicator measures the percentage of children aged 0–59 months who are underweight, as defined by weigh tfor-age z-score (WAZ) < -2. The numerator for this indicator is the number of children 0–59 months with WAZ < -2. The denominator is the number of children 0–59 months in the survey.	%	Sex (Female, Male)	PROSHAR	Baseline and end-line	Sample survey of randomly selected households with children under 5 yrs	Total population	Director (N&D), M&E unit, external consultant
22	IM6	PROSHAR Impact	% chronic malnutrition (energy deficiency) of ever-married women 15-49 (BMI < 18.5mm)	Ever married woman within 15-49 age group whose Body Mass Index (BMI) measured through the weight in kilograms divided by height in meters squared (kg/m ²) is less than 18.5 is defined as chronic malnourished woman. It will be calculated as: Numerator: Body Mass Index of surveyed/ observed ever-married women (15-49) < 18.5; Denominator: Number of women ever-married women aged 15-49 surveyed/observed.	%	None	PROSHAR	Baseline and end-line	Sample survey of randomly selected households with ever-married women between 15-49 years of age.	Total population	Director (N&D), M&E unit, external consultant
23	OC13	FFP PROSHAR OUTCOME	Prevalence of exclusive breast feeding of children under six months of age	This indicator measures the percentage of children 0–5 months of age, i.e., under 6 months, who were exclusively breastfed during the day preceding the survey. Exclusive breastfeeding means that the infant received breast milk (including milk expressed or from a wet nurse) and might have received oral rehydration solution (ORS), vitamins, minerals, and/or medicines, but did not receive any other food or liquid. Numerator for this indicator is the total number of children 0–5 months of age who were exclusively breastfed in the day preceding the survey. Denominator is the total number of children 0–5 months in the survey.	%	Sex (Female, Male)	PROSHAR	Baseline and end-line	Sample survey of randomly selected households with children under 5 yrs	Total population	Director (NH&D), M&E unit
24	OC14	FFP PROSHAR OUTCOME	Prevalence of exclusive breast feeding of PROSHAR PM2A household children under six months of age	This indicator measures the percentage of children 0–5 months of age, i.e., under 6 months, who were exclusively breastfed during the day preceding the survey among the PROSHAR PM2A households. Exclusive breastfeeding means that the infant received breast milk (including milk expressed or from a wet nurse) and might have received oral rehydration solution (ORS), vitamins, minerals, and/or medicines, but did not receive any other food or liquid. Numerator for this indicator is the total number of children 0–5 months of age who were exclusively breastfed in the day preceding the survey. Denominator is the total number of children 0–5 months in the survey.	%	Sex (Female, Male)	PROSHAR	Annual	Annual survey	PROSHAR PM2A household targeted	Director (NH&D), M&E unit
IR 2.1: Malnutrition prevented and treated											

PROSHAR Performance Monitoring Plan											
ID	Indicator No.	Indicator for	Performance Indicator	Indicator Definition and Unit of Measurement	Unit	Disaggregation	Source of Information	Frequency	Methodology	Population Covered	Responsible
25	OP5	FtF PROSHAR OUTPUT	Number of children under five reached by USG-supported nutrition programs	Precise Definition(s): Number of children under five years of age reached during the reporting year by program with nutrition objectives, which can include behavior change communication activities, micronutrient fortification or supplementation, growth monitoring and promotion and management of acute malnutrition. Beneficiaries, who appeared for the first time at any time within the reporting FY, will be counted as New, whereas those continued from previous FY will be counted as continuing beneficiaries. Beneficiary children who have reached the age of 24 months' will be considered graduated and will be subtracted from the number of under 5 children continuing within the program. LOA targets will include all children reached by PROSHAR through a cumulation of "new beneficiaries" numbers over the life of the project. The "continuing" numbers will not have an LOA target as all children will have "graduated" from the program by the end of project evaluation period.	#	Sex (Female,Male), New and Continuing	PROSHAR , PNGO	Quarterly but aggregated annual number will be reported	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
Sub IR 2.1.1: PLW & Children under two years old access to nutrition and health services improved											
26	OC15	PROSHAR OUTCOME	% of children under 2 years old who are underweight	Underweight is a reflection of acute and/or chronic undernutrition and is measured using weight-for-age. This indicator measures the percentage of children aged 0– 23 months who are underweight, as defined by weight-for-age z-score (WAZ) < -2. Numerator: Number of children age 0–23 months whose weight is greater than 2 SD under the median weight of the WHO reference population for their age; Denominator: Number of surveyed children age 0–23 months who were weighed	%	Sex (Female,Male)	PROSHAR , PNGO	Baseline and end-line	Sample survey of randomly selected households with children under 2 yrs	Total population	Director (NH&D), M&E unit
27	OC16	PROSHAR OUTCOME	% of children under 2 years old from PM2A (Prevention of Malnutrition Under 2 Approach) household who are underweight	Underweight is a reflection of acute and/or chronic undernutrition and is measured using weight-for-age. This indicator measures the percentage of children aged 0–23 months who are underweight, as defined by weight-for-age z-score (WAZ) < -2. Numerator: Number of children age 0–23 months whose weight is greater than 2 SD under the median weight of the WHO reference population for their age; Denominator: Number of children age 0–23 months who were weighed at Growth Monitoring Sessions. Note - unlike Strategic Objective indicator - this focuses only on children under 24 months (i.e. PM2A recipients)	%	Sex (Female,Male)	PROSHAR , PNGO	Quarterly but aggregated annual number will be reported	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
28	OP6	PROSHAR OUTPUT	Number of beneficiaries receiving USG food assistance (dry rations) under nutrition program	This indicator provides data on the number of direct beneficiaries – pregnant women, lactating mothers (PWLM) and their children 6-23 months of age, and members of households – receiving a dry ration package as a result of USG support. Progress results will be obtained from the commodity beneficiary tracking system. To calculate the number of family members, average family size is estimated at 3 persons (average family size of 5 less 2 persons captured in the other disaggregation sets. .	#	Other Family Members, PWLM, Children<24months	PROSHAR	Quarterly but aggregated annual number will be reported	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
Sub IR 2.1.2: Improved availability of and access to CMAM											
29	OC17	PROSHAR OUTCOME	% of severely malnourished children who recovered after receiving Severe Acute Malnutrition (SAM) treatment	Weight for Height Measurement (WHM) more than 3 Standard Deviations under median weight for height as measured by MUAC < 115 mm, or bipedal edema in children 0-59 months of age who have successfully achieved discharge growth (WHM >2 SD / MUAC ≥ 115 mm and no edema for 2 consecutive weekly follow up sessions. Numerator: Number of SAM cases (WHM - 3SD / MUAC < 115 mm or bipedal edema) in children 0-59 months of age who have successfully achieved discharge growth (WHM >2 SD / MUAC ≥ 115 mm and no edema for 2 consecutive weekly follow up sessions) Denominator: Total number of children 0-59 months admitted to the CMAM program.	%	Sex (Female,Male)	PROSHAR , PNGO	Quarterly but aggregated annual number will be reported	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
30	OC18	PROSHAR OUTCOME	% of caregivers who adopted at least three of the recommended behaviors as a result of USG assistance	Caregiver is defined as anyone who has primary responsibility for taking care of beneficiary child in a PM2A household (including mother, grandmother or any other member of the family) . Numerator: number of surveyed caregivers (PM2A recipients) adopting at least three recommended behaviors (i.e., water, sanitation, preventive health, infant and young child feeding)/ Denominator: Total number of caregivers (PM2A recipients) exposed to BCC messaging surveyed.	%	None	PROSHAR	Annual	Sample survey of randomly selected beneficiary households	PROSHAR PM2A households	Director (NH&D), M&E unit, external consultant
31	OP7	PROSHAR OUTPUT	# of pregnant/lactating women completing at least 12 months of PM2A programming.	Total number of women who have participated in 12 consecutive months of the PM2A program including: food rations, preventative health services and/ or health/nutrition education activities.	#	None	PROSHAR , PNGO	Quarterly but aggregated annual number will be reported	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
32	OP8	PROSHAR OUTPUT	# of children over 23 months who have completed the full PM2A program.	Total number of children over 23 months who participated in 18 consecutive months of the PM2A program (months 6-23 of their lives) including: food rations, preventative health services	#	Sex (Female, Male)	PROSHAR , PNGO	Quarterly but aggregated annual	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
IR2.2: Improved effectiveness of health clinic services											
Sub IR 2.2.1: Integrated services of community health clinics improved											
33	OC19	PROSHAR OUTCOME	% of women who received at least 3 antenatal checkups by a qualified provider during pregnancy	This indicator captures changes to the percentage of women receiving the minimal number of antenatal checkups (at least 3) during their pregnancy. Numerator: Total number of mothers who gave birth in catchment area, that saw a skilled provider three or more times during last pregnancy; Denominator: Total number of mothers surveyed.	%	None	PROSHAR	Annual	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
34	OC20	PROSHAR OUTCOME	% of children 6-23 months of age with 3 appropriate infant and young child feeding practices (IYCF)	This indicator captures changes to the number children that are provided with appropriate IYCF (Infant and Young Child Feeding) Practice. IYCF can be considered as (continued breastfeeding, age-appropriate dietary diversity, age-appropriate frequency of feeding) Numerator: Number of surveyed children aged 6-23 months that received the recommended number of food groups and frequency for age and breastfeeding status; Denominator: Number of children aged 6-23 months surveyed.	%	Sex (Female, Male)	PROSHAR	Annual	Sample survey of randomly selected beneficiary households	PROSHAR PM2A households	Director (NH&D), M&E unit, external consultant
35	OC21	FFP PROSHAR OUTCOME	Percent of children between 6-59 months' with diarrhea treated with Oral Rehydration Therapy	Numerator: Children between the ages of 6-59 months', who received oral rehydration therapy (ORT), defined as receiving Oral rehydration solution (ORS), Recommended Home Fluids (RHF) or increased fluids. Denominator: Children between the ages of 6-59 months' who were ill with diarrhea in the two weeks preceding the survey/100.	%	None	PROSHAR	Baseline and end-line	Sample survey of randomly selected households	Total population	Director (NH&D), M&E unit, external consultant

PROSHAR Performance Monitoring Plan											
ID	Indicator No.	Indicator for	Performance Indicator	Indicator Definition and Unit of Measurement	Unit	Disaggregation	Source of Information	Frequency	Methodology	Population Covered	Responsible
36	OC22	PROSHAR OUTCOME	Percent of children under five years old with diarrhea treated with Oral Rehydration Therapy among PM2A household	Numerator: Children under five years of age with diarrhea, who received oral rehydration therapy (ORT) from caregivers including oral rehydration solution (ORS), recommended home fluids (RHF) or increased fluids. Denominator: Children under five years of age who were ill with diarrhea in the two weeks preceding the survey among PM2A household.	%	None	PROSHAR	Annual	Sample survey of randomly selected households with children under 5 yrs	PROSHAR PM2A households	Director (NH&D), M&E unit, external consultant
37	OC23	FFP PROSHAR OUTCOME	% of children aged 6-23 months of age with diarrhea continuously fed during illness	Numerator: Number of surveyed children aged 0-23 months who had diarrhea in the last two weeks who received was fed the same amount, or more. This indicator does not measure the actual amount of food consumed and relies on self-reporting of the caretaker. Denominator: Number of children aged 6-23 months with diarrhea over the last 2 weeks surveyed.	%	None	PROSHAR	Annual	Sample survey of randomly selected households with children under 2 yrs	PROSHAR PM2A households	Baseline and endline data from full population survey. Intermediate year data capture PM2A beneficiaries
38	OC24	PROSHAR OUTCOME	% of children 0-23 months who had symptoms of Acute Respiratory Infection (ARI) that sought advice or treatment from trained health care provider	This indicator captures changes to behaviors of caregivers in response to ARI symptoms. Numerator: Number of mothers with children aged 0-23 months that had ARI symptoms in the last two weeks who sought advice or care from a trained health care provider; Denominator: Number of children aged 0-23 months with ARI over the last 2 weeks surveyed	%	Sex (Female, Male)	PROSHAR	Annual	Sample survey of randomly selected households with children under 2 yrs	PROSHAR PM2A households	Director (NH&D), M&E unit, external consultant
Sub IR 2.2.2: Partnerships between health facilities and the communities (they serve) improved											
39	OC25	PROSHAR OUTCOME	% of households with soap and water at a handwashing station commonly used by family members	A handwashing station is a location where family members go to wash their hands. In some instances, these are fixed locations where handwashing devices are built in and are permanently placed. But they may also be movable devices that may be placed in a convenient spot for family members to use. The measurement takes place via observation by an enumerator during the household visit. The enumerator must see the soap and water at this station. The soap may be in bar, powder, or liquid form. Shampoo is considered liquid soap. The cleansing product must be at the hand washing station or reachable by hand when standing in front of it. A "commonly used" handwashing station, including water and soap, is one that can be readily observed by the enumerator during the household visit and where study participants indicate that family members generally wash their hands. Numerator: Number of surveyed households where piped or stored water, soap and washing device for -hand washing can be observed; Denominator: Total number of households surveyed	%	None	PROSHAR	Baseline and end-line	End-line survey	Population targeted	Director (NH&D), M&E unit, external consultant
40	OC26	FFP PROSHAR OUTCOME	% of households with soap and water at a hand washing station commonly used by family members among PM2A households	A handwashing station is a location where family members go to wash their hands. In some instances, these are fixed locations where handwashing devices are built in and are permanently placed. But they may also be movable devices that may be placed in a convenient spot for family members to use. The measurement takes place via observation by an enumerator during the household visit. The enumerator must see the soap and water at this station. The soap may be in bar, powder, or liquid form. Shampoo is considered liquid soap. The cleansing product must be at the hand washing station or reachable by hand when standing in front of it. A "commonly used" handwashing station, including water and soap, is one that can be readily observed by the enumerator during the household visit and where study participants indicate that family members generally wash their hands. Numerator: Number of surveyed households where piped or stored water, soap and washing device for -hand washing can be observed; Denominator: Total number of households surveyed among PM2A household	%	None	PROSHAR	Annual	Sample survey of randomly selected households	PROSHAR PM2A households	Director (NH&D), M&E unit, external consultant
41	OP9	PROSHAR OUTPUT	Number of people trained in child health and nutrition through USG-supported programs	Number of people (health professionals, primary health care workers, community health workers, volunteers, non-health personnel) trained in child health care and child nutrition through USG-supported programs during the reporting year.	#	Sex (Female, Male)	PROSHAR, PNGO	Quarterly but aggregated annual number will be reported	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
Objective 3: Institutions and Households prepared to respond effectively to shocks											
IR. 3.1 Disaster Risk Reduction Plans (DRRPs) functional											
42	OP10	PROSHAR OUTPUT	# unions with pre-positioned emergency supplies in accordance with their emergency plans as a result of PROSHAR intervention	Number of unions with pre-positioned Emergency Supplies i.e. health, hygiene, water, sanitation, in accordance with their emergency plans	#	None	DRM committees	Annual	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
43	OC27	PROSHAR OUTCOME	# of functional Disaster Management Committee (DMCs) and Community Based Disaster Management Volunteer Groups (CBDMVG) at the ward, union, upazila levels as a result of PROSHAR intervention	Functional upazila and union level DMCs and ward level CBDMVG will be measured against an index with the following criteria: (i) All key members of the DMCs (as laid out by the GoB) and CBDMVG convene regularly meeting to address issues related to prevention, mitigation and response to shocks; (ii) The DMCs and CBDMVG demonstrate a knowledge of their responsibilities and the functioning of the national system for disaster risk management; (iii) The DMCs and CBDMVG are pursuing updated Community Risk Assessments and Disaster Risk Reduction Plans in accordance with GoB standards;	#	None	DRM committees	Annual	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
44	OP11	PROSHAR OUTPUT	# of DMC members trained in prevention, mitigation, preparation and response to shocks as a result of PROSHAR intervention	# of Upazila and Union DMC members trained in prevention, mitigation, preparation and response to shocks	#	Sex (Female, Male)	DRM committees	Quarterly but aggregated annual number will be reported	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit

PROSHAR Performance Monitoring Plan											
ID	Indicator No.	Indicator for	Performance Indicator	Indicator Definition and Unit of Measurement	Unit	Disaggregation	Source of Information	Frequency	Methodology	Population Covered	Responsible
45	OC28	PROSHAR OUTCOME	# of DMCs that have comprehensive Disaster Risk Reduction Plans as a result of PROSHAR intervention	DMCs that have completed full Community Risk Assessments (CRAs) and developed Disaster Risk Reduction Action Plan (DRRAP). CRA Reports and DRRAP will: (i) include key priorities for disaster risk reduction as identified by groups particularly vulnerable to food insecurity (women, the ultrapoor, the elderly, and other groups with special needs and unique vulnerabilities; and (ii) include a Vulnerability Map that meets the guidelines laid out by the GoB for Community Risk Assessments and Disaster Risk Reduction Action Plans.	#	None	DRM committees	Annual	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
46	OC29	PROSHAR OUTCOME	% of USG-assisted communities that have constructed/developed physical infrastructure to mitigate the effects of shock	Numerator: Number of communities (Wards) that have constructed or developed at least one physical infrastructure to mitigate the effects of shock through Food For Work (FFW) or professional service contacts, that are clearly mentioned in the DRRAP developed by community and agreed by the UDMC /Denominator: Total number of PROSHAR working communities (Wards).	%	New, Continuing	PROSHAR	Annual	Evaluating project records	Program Communities	Director (NH&D), M&E unit, external consultant
47	OP12	FFP PROSHAR OUTPUT	Kilometers of roads improved or constructed	A connecting road or approach road that will help the community people to go to the nearby cyclone shelter, market place, health center, and will improve access to these services, which have been identified in the CRA.	Km	Cosntructed / Improved	PROSHAR	Annual	Evaluating project records	Program Communities	Director (NH&D), M&E unit
48	OC30	PROSHAR OUTCOME	# of communities (wards) with emergency plans as a result of PROSHAR intervention	These plans are developed at Ward level and may be consolidated at the union level (with UDMCs). Emergency plans will include, but not be limited to, activities related to WASH, protection of vulnerable populations, evacuation, shelter, nutrition and health etc.	#	None	DRM committees	Annual	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
49	OC31	PROSHAR OUTCOME	# of wards with disaster early warning and response (EWR) systems in place as a result of project assistance	Number of wards with an early warning system in place is defined as: (i) the availability of equipment (radio, Mega-phone, etc.) in workable condition; (II) assigned trained volunteers from the same locality; (iii) a contingency plan with clear roles and responsibilities to enable functioning of the system; and (iv) community members are aware of the early warning system. The number of communities that meet this requirement as a result of project assistance will be counted for this indicator.	#	New, continuing	DRM committees	Annual	Annual survey	Program beneficiaries	Director (NH&D), M&E unit
IR 3.3: Increased knowledge and skills on disaster risk management (DRM)											
50	OC32	PROSHAR OUTCOME	# of communities (wards) participating in training and awareness campaigns on disaster preparedness, prevention, mitigation and response as a result of PROSHAR intervention	Number of communities participating in training and awareness campaigns, which will be conducted both directly by PROSHAR PNGO staff and by with Union and Ward level DMCs who have been trained as trainers.	#	None	DRM committees	Annual	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
51	OP13	FFP PROSHAR OUTPUT	Number of people trained in disaster preparedness as a result of USG assistance	This indicator will include individuals who have attended disaster preparedness training programs. This will include those trained in disaster preparedness through specific training programs (cyclone awareness and prevention programs, Emergency Managers and First Responders training, and community based disaster preparedness training. if an individual attends several times in a year she/he will be counted for one time only within the reporting period. Attendance sheets need to be maintained. Community awareness and standing committee meeting will be not be counted as training for this indicator.	#	Sex (Female, Male), disabled/not disabled, IDP, host family	PROSHAR, PNGO	Quarterly but aggregated annual number will be reported	Evaluating project records	Program beneficiaries	Director (NH&D), M&E unit
52	OP14	PROSHAR OUTPUT	Number of infrastructure schemes constructed or repaired as a result of USAID assistance	Any infrastructure intended to improve community or household preparedness that is supported through FFW or service contracts	#	Type of project	PROSHAR, PNGO	Quarterly but aggregated annual number will be reported	Evaluating project records	PROSHAR beneficiaries	M&E Unit
53	OP15	PROSHAR OUTPUT	Total # of beneficiaries (livelihood+PM2A+RUTF) registered to receive benefit directly from the PROSHAR - Livelihood - PM2A - RUTF Total HHs benefited directly from PROSHAR	A household is a beneficiary if it contains at least one individual who is a beneficiary. An individual is a beneficiary if she/he is engaged one or more project activities. Please note that disaster management (SO3) beneficiaries has not been considered here. Yearly targets represent the cumulative number of beneficiaries registered under three categories (livelihood, PM2A & RUTF) while total households represent the cumulative number of unique households benefited directly from PROSHAR activities.	#	None	PROSHAR, PNGO	Quarterly but aggregated annual number will be reported	Evaluating project records	PROSHAR beneficiaries	M&E Unit

Attachment E: PROSHAR Progress against IY4 Detailed Implementation Plan

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Cross-Cutting Activities						
Coordination/Collaboration						
Submit progress reports to GoB; participate in Coordination Steering Committee Meetings	Lead: COP Participants:					On-going
Participate in the monthly district NGOs coordination meetings	Director, Economic Growth; Director, Health/Nutrition and Disaster Risk Reduction, TLs					Ongoing
Participate in monthly upazila coordination meetings	TLs, DTLs, Technical Coordinators, PNGOs					Ongoing
Participate in FtF meetings and meet with FtF implementers to ensure synergies are realized	COP					Ongoing
Coordinate with FtF programs in piloting activities, possibly including seed certification process for cereal crop (PRICE), biofertilizers (PRICE), summer tomatoes (USAID horticulture program), saline/drought tolerant chili and tomatos (USAID horticulture program); coordinate as possible on distribution and production technologies (IRRI/CSISA and IFDC/AAPI).	COP, Director, Economic Growth					Ongoing
Monthly meetings between Field Facilitator, Health Promoter, Group Formation Officer and Care Group Supervisor for sharing the monthly work plan and identification of areas of integration.	Field Facilitators, Health Promoters, Group Formation Officer and Care Group Supervisor, Gender Specialist					Ongoing
Coordinate representation of all strategic objectives to support GoB "health days", "disaster preparedness/risk reduction days", "international women's day" and "environment days"	Team Leaders					Ongoing
PNGO Administration						

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Conduct refresher training on USAID rules and regulations, with a focus on compliance - 24 participants in each batch.	Director, Finance and Grants,					Ongoing
Revise PNGO program descriptions and budgets for June 2013-May 2014 period	Director, Finance and Grants, Grants Specialists,					
Review and monitor HR system	Director, Finance and Grants, Director, Human Resources					Ongoing
Financial oversight of PNGOs (review of monthly accounts, reconciliation of receivables, etc.)	Grants Specialists					Ongoing
Monthly intra-SO PNGO coordination meetings for supervisory Level	Director, Finance and Grants, Director, Economic Growth, Director, Health & Nutrition and Disaster Risk Reduction					July and August'13 monthly Cancelled . September'13 monthly PNGO Coordination meeting held on 22.
Bi-monthly inter-PNGO program coordination meeting - manager/supervisory Level	SO1, SO2, SO3 Team Leaders					Ongoing
Annual PROSHAR briefings with local GoB departments	Director, Economic Growth, Director, Health & Nutrition and Disaster Risk Reduction					Delayed. To be completed in October, 2013
Training on financial policies and procedures for finance, logistics and procurement (16 participants in each batch)	Director, Finance and Grants, Procurement Manager, Senior Finance Manager					Completed in September, 2013
Cross visits between upazilas by PNGOs	SO Sector Specialists and Team Leaders					
Establishment, and provision, of funding under innovation fund	Senior Director, Operations, Director, Finance and Grants					Ongoing
Commodities (Monetization and Direct Distribution)						
Arrival of monetization commodity	Director, Commodity & Logistics					Completed

		Implementation Year 4				ARR
Schedule	Responsible Party	June	July	Aug	Sep	Progress/Comments
Arrival of hard red winter wheat, red lentils, and oil for direct distribution	Director, Commodity & Logistics					Ongoing
Receive monetization proceeds from GoB	Senior Director Operations					Completed
Prepare and submit all commodity reports to USAID as required by Regulation 11	COP					Ongoing

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Monitoring and Evaluation (M&E)/Reporting						
Finalize integration of all databases (McAid/Access)	MIS & M&E Specialist					Ongoing
Finalize automated reporting of McAid	M&E Director and MIS					
Training sessions on data entry system for the PNGO M&E staff	M&E Director, M&E Specialists and MIS					Ongoing
Develop Standard Operating Procedures in support of monitoring FFW, and module for MIS management	MIS					Ongoing
Refresher orientation for appropriate staff on refined MIS and McAID	M&E team and IT Manager					
Implement quarterly qualitative monitoring to support data analysis for quarterly reports including nutrition status of pregnant women	M&E Director & M&E Specialists					Ongoing
Review and update existing M&E Plan, including a capacity development plan for PNGOs to manage M&E.	M&E Director and M&E Specialist					Delayed - to be completed next quarter.
Disseminate new M&E Plan to PROSHAR senior management and PNGO senior management	M&E Director and M&E Specialist					Delayed and planned to complete for next quarter
Review and refine MIS to update McAID system	M&E team and IT Manager					Ongoing
Refresher orientation for appropriate staff on refined MIS and McAID	M&E team and IT Manager					Ongoing
Complete quarterly program review meetings with PNGO and PROSHAR staff	M&E team, TLs, and DTLs					Ongoing
Complete quarterly refresher trainings on M&E for PNGO staff	M&E team, TLs, and DTLs					Ongoing
Digitize the beneficiary registration of all SOs and prepare reports on monthly basis	M&E team, CDC and PNGO					Ongoing
Prepare 272 muster rolls for FDPs in support of ration distribution on monthly basis; update receiving status and generate reports	M&E team					Ongoing
Receive aggregate reports of three SOs from PNGOs	M&E team, CDC and PNGO					Ongoing
Conduct end use monitoring at household level to identify the critical issues and share with the relevant team	M&E team, CDC and PNGO					Ongoing
Conduct market observations to identify the critical issues and share with the relevant teams	M&E team, CDC and PNGO					Ongoing

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Prepare monthly report on relevant Indicators (IPTT) to update the relevant teams on progress	M&E team, TLs, DTLs, CDC and PNGO					Ongoing
Prepare quarterly report on relevant indicators (IPTT) to report to SMT and USAID	Director, M&E					Ongoing
Establish a database of all reports & success stories, and provide access to same for senior staff and to PNGOs.	Lead: Consultant on Knowledge Management Coordinator Participants: Directors, TLs and DTLs, M&E, BCC					
Assess usage of database, and make improvements as required.	Executive Assistant to COP, with support from TLs, DTLs					
Prepare GoB quarterly performance report	Liason Specialist, M&E Team, TLs and DTLs					Ongoing
Prepare GOB annual workplan	Liason Specialist, M&E Team, TLs and DTLs					Completed
Conduct data quality assessment	M&E team, CDC and PNGO					Ongoing
Manage annual survey to assess outcomes	Director, M&E					
Submit quarterly financial reports to USAID	Finance Director, ACIDI/VOCA HQ					Ongoing
Submit Pipeline Resource Estimate Proposal (PREP) to USAID	COP, TLs, Commodity Team, M&E Director					
Prepare Annual Results Report for FY2013	COP, M&E Team, TLs and DTLs					
SO 1: Income and access to food of poor and ultra poor households improved						
Arrange training session for PNGOs staff on improving market linkage implementation in field (5-day long, 3 batch for three PNGOs, around 25 staff per batch)	IDE, PNGOs					Ongoing
Refresher training on improving marketing linkges (2 day long trainings) for selected PNGO Staff	IDE, PNGOs					
Refresher trainings on Farmers Field School (FFS) approach for 108 field facilitators (FF) and health promoters (HP)	Training and Curriculum Development Specialist,					Ongoing

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Refresher training on enterprise development through FaaB approach for FF	Marketing Specialist, PNGOs					Ongoing
Conduct study to identify the constraints and develop recommendations for greater gender balance in livelihood activities	Gender Specialist					Ongoing
Prepare gender tools to incorporate into the FFS session	Gender Specialist					Ongoing
Meetings on Upazila Women Leaders Network-building	Gender Specialist, PNGOs					Delayed and started from November'13
Staff refresher on socio-economic empowerment of women in PROSHAR working areas	PNGOS PM; Gender Specialist;					Delayed and started from November'13
Workshops on environmental review and compliance for PNGOs staff (101 staff members)	Environment Specialist, PNGOs					
50 off farm groups formed (10 persons in each group)	DTL, Off-farm, PNGOs					Ongoing
184 PRA exercises conducted in field by PNGO	DTL, Off-farm, PNGOs					Ongoing
99 trainings on group management & leadership development for producer groups	DTL, Off-farm, PNGOs					Ongoing
Distribution of flip charts to 23,290 households on agriculture, poultry and livestock and aquaculture	Training and Curriculum Development Specialist,					
Distribution of flip charts on agriculture, poultry, livestock, and aquaculture to 7,560 commercial producers.	Training and Curriculum Development Specialist,					
Conduct 2 days workshop on exit strategy/close-out plan with PNGOs	Training and Curriculum Development Specialist,					
Conduct 2 day workshop on progress made in implementing exit strategy to inform year 5 programming for PNGOs	Training and Curriculum Development Specialist,					
IR 1.1 Agricultural Productivity Increased and Diversified						

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Establish 657 farmer field schools, each serving 10 farmers, for homestead vegetable gardening, quality seed production/preservation, saline/boro rice cultivation, lentil, mustard, potato, maize, grass pea, watermelon, sesame and mung bean); linkage with WorkdFish/CSISA on orange sweet potato promotion to homestead garden producer groups.	Agricultural Specialist & Coordinators, PNGOs					Ongoing
Conduct day long training on Sonali breed rearing for Master trainers who received training on indigenous poultry rearing in the previous year	Poultry and Livestock Specialist, PNGOs					Ongoing
Establish 409 livestock & poultry farmer field schools each serving 10 farmers, for indigenous/Sonali poultry rearing, duck rearing, layer bird rearing, broiler rearing, fodder cultivation, beef fattening, dairy cow rearing, urea molasses block, and small ruminant rearing.	Coordinator, Livestock & Poultry Specialist, PNGOs					Ongoing
Establish 247 aquaculture school ponds/ghers, each serving 10 aquaculture producers, for carp nursery management, prawn nursery mangement, prawn carp polyculture, shrimp culture, carp polyculture.	Ag Coordinator, Production Specialist - Aquaculture					Ongoing
Establish 60 FFS on dike cropping, each serving 10 farmers. Establish 7 FFS on nutrient-dense fish cultivation, each serving 10 farmers. Anticipated linkage with WorldFish/CSISA (FtF program) to provide technical advice to Master Trainers on promotion of dike cropping and nutrient-dense fish cultivation.	DTL On Farm, PNGOs					Ongoing
Anticipated linkage with WorldFish GIFT program to provide technical advice to Master Trainers	DTL On Farm, PNGOs					Ongoing
Identify linkages between WorldFish supported hatcheries and nurseries and PROSHAR producer groups as well as WorldFish sales depots; maintain communications and sharing of information	DTL On Farm, PNGOs					Ongoing
Conduct 7,878 semi-monthly field school sessions by master trainers	PNGO Technical Coordinator,					Ongoing
Conduct refresher livestock health worker training for 46 participants	Livestock Specialist					
Celebrate 93 Farmer Field Days (FFD) on agricultural technology in collaboration with SO2 CGs, with average 200 attendees per FFD	Agricultural Specialist & Coordinators, PNGOs					

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Celebrate 14 FFD on livestock & poultry technology in collaboration with SO2 CGs, with average 200 attendees per FFD	Production Specialist (Poultry & Livestock), PNGOs					
Celebrate 34 FFD on aquaculture technology in collaboration with SO2 CGs, with average 200 attendees per FFD	Production Specialist (Aquaculture), PNGOs					
Conduct 27 trainings/follow-on trainings on MSE development through FaaB	Marketing Specialist, PNGOs					Ongoing
Conduct 11 batches of cross-visits between producers in different unions/upazilas	Marketing Specialist, PNGOs					
Conduct 12 regular meetings with economic growth program implementers to (a) identify opportunities for farmer cross-visits and (b) coordinate use of technical expertise	SO1 DTL/On-farm & SO1 DTL/Off-farm					Cancelled
Conduct 15 cross-visits of select farmers groups to learn from other economic growth programs supported by USAID (eg. Feed the Future)	Horticulture Specialist, Aquaculture Specialist					
Conduct 2 semi-annual livelihoods conferences with key stakeholders (GoB, NGOs, private sector) to share lessons learned	Director, Economic Growth, SO1 DTL/On-farm & SO1 DTL/Off-farm					
Pre-season planning meeting	DTL On-farm, Marketing Specialist					
IR 1.2 Market Linkages Developed and Strengthened						
Carry out subsector analyses	Marketing Specialist, PNGOS, IDE					Ongoing
Arrange 4-daylong training program for partners/ output markets (including relevant public dept.) on improving market linkages and implementation process in association with PNGOs	IDE, PNGOs					Delayed, will be done after study is completed
Assist PNGO to arrange 2 day-long refresher trainings to partners/ output market (including relevant public sector) on improving market linkages	IDE, PNGOs					Delayed, will be done after study is completed
Arrange meeting with the private sector to promote involvement in the Upazilla and District level forum/network						Ongoing
Assist PNGOs to conduct private sector engagement forum (PSEFs) meetings in association with PNGOs at Upazila level						Ongoing

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Conduct 10 batches of union-level workshops among agriculture beneficiaries, input suppliers and buyers (25 per group)	DTL On-Farm, Agriculture Specialist, Seed Specialists, PNGOs					
Conduct 9 union-level workshops among aquaculture beneficiaries, input suppliers and buyers (25 per group)	DTL On-Farm, Aquaculture Specialist, PNGO					Ongoing
Conduct 7 union-level workshops among poultry-livestock beneficiaries, input suppliers and buyers (25 per group)	DTL On-Farm, Livestock/Poultry Specialist					Ongoing
Conduct 12 workshops between beneficiaries and local level GoB agencies to improve collaboration (25 per group)	Economic Growth Program Coordinators, PNGOs					Ongoing
Conduct 23 meetings with a total of 575 beneficiaries on post harvest value-added activities	DTL On-Farm, Market Linkage Specialist, PNGOs					
Distribute livelihoods grants	Director, Economic Growth, PNGO Field Facilitators					Ongoing
Use ICT for Business Advisor/Master Trainer	DTL Off-Farm					Delayed and will be started from November'13
Promote access to finance/savings	IDE, PNGOs					Delayed, will be started from November'13
Conduct workshops for beneficiaries with SRDI (Soil Resources Development Institute) on soil testing	Agriculture Specialist					Completed
Provide refresher training for input suppliers (agriculture, poultry, livestock and aquaculture) on quality inputs and critical production technologies	DTL On-farm, Marketing Specialist					Delayed and will be started from January'14
Provide training for 25 mobile input sellers on quality inputs and critical production technology	DTL On-farm, Marketing Specialist					Ongoing
Conduct workshops for mobile input suppliers	DTL On-farm, Marketing Specialist					
Arrange 3 cross visits for master trainers	DTL Off-farm, PNGOs					
Support day observance (tree plantation week, World Food Day, International Women's Day, National Fish week and Environmental Day)	DTL On-farm, DTL Off-farm, PNGOs					Ongoing
Form farm business groups	Marketing Specialist, PNGOs, IDE					Ongoing

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Establish private sector engagement forum; anticipated linkage with CNFA/Agriculture input supply program	Marketing Specialist, PNGOs, iDE					Ongoing
Collection point establishment	Marketing Specialist, PNGOs, iDE					Ongoing
IR 1.3 Non-Agricultural Opportunities Expanded and Diversified						
Conduct 3 upazilla-level workshops between off-farm producers and private enterprises to benefit 75 off-farm producers group in building linkages	Market Linkage Specialist, Economic Growth Program Coordinators, PNGOs					
Conduct 50 trainings on off-farm livelihood options for 500 beneficiaries	DTL Off-farm, PNGOs					Ongoing
Provide refresher training to 31 producer groups in off-farm livelihood options (25 members per group)	DTL Off-farm, PNGOs					Ongoing
Conduct 9 learning-sharing visits with groups of 10 to promote off-farm livelihood options	DTL Off-farm, PNGOs					
SO 2: Health of pregnant and lactating women and children under 5 (with particular attention to children under 2) improved						
IR 2.1 Malnutrition Prevented and Treated						
<i>Sub IR 2.1.1 PLW and Children under 2's access to nutrition and health services improved</i>						
Continue on-going registration & service to pregnant women in the 23 unions	CDCs, GMF					Ongoing
Identify and verify newly pregnant women in the community	CDCs,HP					Ongoing
Mobilize registered women for receiving antenatal care and to participate in care groups	HPs, GM Facilitator					Ongoing
Monitor, evaluate and provide feedback and improve the food distribution process	M&E Director, CDCs,					Ongoing
Provide refresher training on commodity distribution and monitoring	Commodity Specialist and M&E Specialist					
Conduct education sessions at each food distribution point for PM2A beneficiaries to support proper use of ration	HP, CGS					Ongoing
Recognize families with optimal exclusive breastfeeding practices	HPs and GMF					Ongoing

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Lead the delivery of key nutrition and health messaging activities at Farmer Field Days	HP, CGS					Ongoing
Care Groups (CG)						
Continue training/meeting with 249 care group trios by health promoters. Train Mother Leaders (MLs) twice a month, Grandmother Leaders (GmLs) once a month, and Father Leaders (FLs) once every 2 months on CG modules	HP and CG Supervisor					Ongoing
Developing job aid for ML for supporting behavior change at the household level through regular household	Lead: TL Participants: BCC					Ongoing
MLs, FLs and GmLs provide messages to the households they support through regular meetings with their groups	LMS, LFs, LGs, HPs					Delayed, rescheduled to begin in November
Assign new registrants to current care groups	HP and CG Supervisor					Ongoing
Visit/supervise Trio leaders on a monthly basis	HPs and CG Supervisors					Ongoing
Document the experience of CG Trios Model	Lead: TL Participants: M&E, BCC specialist					Delayed, rescheduled December
Refresher training for CG Supervisors and HP on CG Trios concept and modules	TL, DTL, H&N Specialist					
Recognize Care Group Trios' excellence and change makers	HP, CGS					
Celebrate timely initiation of complementary feeding (180+ days) at PM2A beneficiary group level on monthly basis	HP, ML, Grandmother Leaders					Ongoing
Recognize 516 families twice a year practicing optimal health and nutrition behavior as a part of engaging family members, especially fathers and grandmothers in child growth and development	Growth Monitoring Facilitator, GMEs					Delayed, rescheduled in December after completing the breast feeding week observation
Mother leaders provide growth monitoring Promotion (GMP) services at EPI sites						
Continue implementation of growth monitoring and promotion activities in 516 EPI sites by 516 mother leaders and 68 GM Educators on a monthly basis	GM Facilitators, GME, Selected Mother Leader					Ongoing
Conduct refresher trainings for 516 mother leaders on GMP and 68 GM Educators	Growth Monitoring Facilitator, TCs and Health & Nutrition					

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Provide follow on support for severely malnourished children/on going monitoring of the GM activities through home visit by mother leaders, GM educators and HPs	CGS, GMF					Ongoing
Organize and facilitate training for HAs and CHCPs on GMP to support the MoH nutrition strategy	Lead: DTL Participants: GMF					
Organize and facilitate monthly meetings at the union level in each of the 23 unions (teachers, religious leaders, etc.) for awareness building and ensuring qualified participation in PROSHAR activities	CCLO, GMF					Ongoing
Provide training on IYCF counseling and facilitation for 516 mother leader, 65 HPs, 12 GMFs and 68 Growth Monitoring Educators	Director, TL, Training organization					Delayed, planned from November
Pilot competition among the families of 11-23 month old children on childcare and nutrition in 8 GMP sites in each upazila	GME, ML, GMF					Delayed, rescheduled to begin in December
Semi annual meeting with Graduated Trios Leaders	Lead: HP Participants: Care Group Supervisors					
<i>Activity 2.1.2: Improved availability of and access to CMAM</i>						
Implement CMAM from 59 Community Clinics and 19 H&FWC						
Provide refresher training for HAs (83) ,CHCPs (63), SACMO/FWV (23), AHI (21) and HI (7) on CMAM as well as application of local RUTF	DTL, Nutrition Specialist					
Provide refresher training for Health and Nutrition Coordinator(4), TCs(3) M&E(1) and MoH staff(6)	DTL, Nutrition Specialist					
Provide refresher training for 1,974 mother leaders to identify SAM in the community including signs and symptoms	CG Supervisor, GMF and HPs					
Establish and maintain RUTF supply chain between 59 community clinics and the PROSHAR warehouse	FLC,CCLO					Ongoing
IR 2.2 Improved Effectiveness of Health Clinic Services						
<i>Improve Sub IR 2.2.1, Integrated services of community health clinics</i>						
Improved management of 59 community clinics						

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Provide refresher training for the Community Clinic Liaison Officers (4), TCs (3) and Health & Nutrition Coordinators (4) on community groups	DTL, Health Specialist					
Conduct follow up meetings with 59 community groups three times a year	CC Liaison Officer					Ongoing
Conduct follow up meetings with community support (CSG)	CC Liaison Officer					Ongoing
Provide refresher training for Community Clinic Support Groups (CG); 3 Support Groups at each community clinic trained once per year following GoB guidelines and manual	CC Liaison Officer					
Observe Community Clinic Day in 59 CCs	CC Liaison Officer, TC					
Provide yearly refresher training for trained 60 Community midwives (PCSBA) on EOC	MoH, TL					
Review gap analysis action plan; hold workshop with upazila participants in 3 upazilas (45 participants/upazila)	DTL, N Specialist					
Provide refresher training for 66 CSBA on HBLSS	DTL, H Specialist					
Conduct training of PM2A beneficiary family members on HBLSS, 8 Training session/CSBA/month	MoH, DTL, TC					Delayed, to begin in November
Distribute delivery kits to PM2A beneficiaries (PW) at last trimester to 9,948 women	HP and CG Supervisor					Ongoing
Provision of Integrated Management of Childhood Illness (IMCI)						
IMCI unit of the MoH to train 25 doctors and 30 paramedics on IMCI based on MoU signed with PROSHAR	Director, TL, IMCI unit					
Hold bi-annual IMCI review meeting at the district level with the MoH, UNICEF, WHO and other development partners	Program Manager IMCI (MoH), TL, DTL					Ongoing
Advocacy with IMCI section and NNS during national planning workshop as part of sustainability plan for program phase out and hand over of feasible	Director Program and TL					
Ensure monthly supportive supervision of basic health workers providing IMCI in PROSHAR areas of operation through Upazila Health and Family Planning Officer	Health Specialist, TC					Ongoing

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Equip 59 Community Clinics for quality service delivery through Americare support or procure locally	Director Program, TL,					
<i>Sub IR 2.2.2 Partnerships between health facilities and the communities they serve improved</i>						
Coordinate and collaborate with local level service providers (i.e. Department of Public Health Engineering, UN bodies, NGOs and private sectors working on WASH)	U H&N Coordinator					Ongoing
Piloting and scaling up of hand washing stations at PM2A household level	HP and CG Supervisor					Ongoing
Provision of Community Integrated Management of Childhood Illness (C-IMCI)						
Provide refresher training of 83 HAs, 63 CHCPs and 27 Supervisors on C-IMCI by IMCI unit of DHGS of MoH	IMCI Unit MoH, Director, TL					
Provide refresher training of 200 village doctors, on C-IMCI by IMCI unit of DHGS of MoH	IMCI Unit MoH, Director, TL					
Provide supportive supervision for 400 village doctors by HI, AHI CCLO, GMF	CCLO, AHI, HI, GMF					Ongoing
Provide monthly supervision for 59 Community Clinic (HA and CHCP) by their supervisors and program staff (HI, AHI, CCLO)	CCLO, AHI, HI					Ongoing
Conduct refresher 2 day trainings for 275 selected ML on community case management of Acute Respiratory Infections (ARI) and diarrhea	GM Facilitator, CGS					
Recognize Village Doctor Excellence	CCLO, Upazila Coordinator, TC					
Observe National Days, i.e. World Breast Feeding Day, National Immunization Day, Vitamin A Campaign, Deworming Campaign, Global Hand Washing Day, International Population Day, World AIDS Day, etc	DTL,TC					Ongoing
SO 3: Institutions and Households Prepared to Respond Effectively to Shocks						
<i>Sub IR 3.0.1. Establish Technical Advisory Group (TAG)</i>						

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Engage industry experts from public, private and/or academic sectors for technical feedback and support on project implementation priorities	TL, DTL					Ongoing
<i>Sub IR 3.0.2. Established disaster response team ready to respond</i>						
Review/update PROSHAR Emergency Response Plan	TL					Ongoing
Review/update member contact information in PROSHAR disaster response team in ERP	TL					Ongoing
Participate in coordination meetings with national and regional disaster forums, UN agencies, Disaster Management Bureau, CDMP, WASH & other clusters	TL					Ongoing
Contract services of local university specialists and students to conduct the following impact studies: * Impact study on PSF/pond re-excavation projects (e.g. cost analysis, impact on HH savings and incidence of water-borne disease, etc.) * Impact study on infrastructure projects * FFW program impact study * BCC strategy impact study * Feasibility study of alternative technologies for surface water treatment	TL Director Program and DTL					
IR 3.1 Disaster Risk Reduction Action Plans (DRRAPs) Functional						
<i>Sub IR 3.1.1. Strengthening Disaster Management Committees (DMCs)</i>						
Review and update membership of 3 UzDMCs	DRM TC, DTL					
Facilitate bi-monthly meeting with UzDMC members, including reaffirming the scope of PROSHAR and reinforcing UzDMC linkages with GoB for sustainability and continued support for unmet needs	DRM TC, DTL					Ongoing
Review and update the membership of union DMCs	UDRMC, DRM LO					

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Facilitate bi-monthly meetings with union DMCs, including reaffirming the scope of PROSHAR and reinforcing UDMC linkages with GoB for sustainability and continued support for unmet needs	UDRMC, DRM LO					Ongoing
Conduct quarterly meetings with 207 Community Disaster Management Volunteer Groups (CDMVGs), including reaffirming the scope of PROSHAR and reinforcing CBDMVG linkages with GoB for sustainability and continued support for unmet needs	UDRMC, DRM LO					Ongoing
Support the UDMC review of DRRAP and selection of projects	UDRMC, DRM TC					
<i>Sub IR 3.1.2. Capacity building of Disaster Management Committees</i>						
Facilitate mobilization of available non-PROSHAR resources for implementation of DRRAP projects by UDMC and UzDMC	TL, DTL, Director DRR					Ongoing
Organize national stakeholder workshop to advocate support of key national and regional stakeholders for DRRAP implementation	TL, DTL, Director DRR					
Organize 3 workshops for District DMCs to share PROSHAR achievements and receive feedback	DTL, DRM TC					
Implement environmental reviews for all DRRAP projects	Environmental Specialist, DRM Engineer					Ongoing
Reinforce additional PSF Management Committees to replicate and scale the model for PSF management in prioritized communities	DRM Engineer and Implementation Team					Ongoing
Conduct implementation of 150 DRRAP projects including construction/repair of approach roads to cyclone shelters, raising cyclone shelter perimeters, re-excavation of ponds, etc.	DRM Engineer, Monitoring Officer (Contractual Staff), Commodity Team					Ongoing
Professional service contracts to complete multi purpose cyclone shelter repair (i.e. floor and roof repair, plaster, painting, door and windows repair etc), cyclone shelter latrine construction, and PSF repairs	TL, DRM Engineer, Director DRR					Ongoing

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Construct livestock evacuation shelters (earthen Killa)	DRM Engineer, Monitoring Officer (Contractual Staff), Commodity Team					
Rehabilitate rural earthen roads and raise to highest flood level	DRM Engineer, Monitoring Officer					
<i>Sub IR 3.1.4. Community and Household level preparedness</i>						
Evaluation of impact of House Hold DRR plans	TL, DTL					
IR 3.2 Early Warning Systems Functional						
Review/update modules on early warning system for Community Disaster Management Volunteer Group (CDMVG), DMCs, school teachers, school management committees, religious leaders and students	DRM TC, DTL, BCC Specialist					Ongoing
Review/update union ERPs	UDRMC, DRM LO					
Review stock of UDMC emergency supplies and re-stock as needed	UDRMC, DRM LO					
Based on MTR recommendations, incorporate study results into SO3 BCC messaging and training activities	DTL, BCC Specialist					Ongoing
<i>IR 3.3. Increase Knowledge and Skills on disaster management</i>						
Review/update modules on prevention, mitigation, preparedness and response for community disaster management volunteer groups (CDMVG), DMCs, school teachers, school management committees, religious leaders and students	DTL, BCC Specialist					Ongoing
Conduct quality assessment of PNGO trainings for UDMCs and CBDMBGs	M&E Specialist, DTL, DRM TC.					
<i>Sub IR 3.3.1. DRM training and awareness campaigns</i>						
Provide training to 128 Cyclone Preparedness Programme (CPP) volunteers on first aid	CPP, TL					Delayed, will start in November 2013
PNGOs and CPP volunteers to co-facilitate training on First Aid to 351 CBDMVG members	TO, UDRMC					
Provide training to PNGO SO3 staff on search and rescue	TL, DTL					Ongoing

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Provide training to 128 Cyclone Preparedness Programme (CPP) volunteers on search and rescue	CPP, TL					
Provide refresher training to PROSHAR disaster response team on humanitarian standards	TL, DTL					
Provide training to NGOs staffs and CBOs (150 persons) on humanitarian standards	TO and UDRM					
Provide refresher training to 3 Upazila DMCs on prevention, mitigation, preparedness, response and early warning	DRM TC, DTL					
Provide refresher training to 23 union DMCs on prevention, mitigation, preparedness, response and early warning	TO, UDRMC					Ongoing
Provide training to 1,044 shelter/school committee members on preparedness, mitigation, response and early warning system	TO, UDRMC, DRM Engineer					
Provide training to 280 Boy Scouts and Girls Guides on preparedness, mitigation and response	TO, UDRMC					
Provide training to 432 religious leaders on preparedness, mitigation, response and early warning systems	TO, UDRMC					
Develop module on Emergency Leadership and Emergency Security Management for UDMC leader members and village police	TL, Consultant, BCC Specialist					Ongoing
Develop Module on water point management, harmful effects of Arsenic and Arsenic Test for CBDMG and Community people	TL, DTL, Consultant, BCC Specialist					Ongoing
Provide ToT to 31 PROSHAR and PNGO staff on water point management, harmful effects of Arsenic and Arsenic Test	DTL, BCC specialist and Consultant					
Provide training to 540 CBDMVG members (6 from each ward, total 90 wards in 10 less vulnerable union) on Water point management, harmful effects of Arsenic and Arsenic Test at Lohagara	TO, UDRMC					
Trained CBDMVG members facilitate 1,080 community session (12 court yard session per ward, total 90 wards in 10 unions) on harmful effects of Arsenic	CBDMVG, TO, LO					
Procurement of 540 Arsenic testing kits for trained CBDMVG members and handing over to them	TL, DTL, DRM TC					

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Trained CBDMVG members to carry out Arsenic testing of Tube-well (Avg. 50 tube-wells/CBDMVG member)	DRM TC, UDRMC					
Convene one coordination meeting between CBDMVG leaders and Lohagara Upazila DPHE	DRM TC, UDRMC					
Provide training to 112 village police on emergency security in 14 Unions in cyclone prone areas	TO, UDRMC					
Provide training to 169 Union elected members in 13 cyclone prone unions on emergency leadership	TO, UDRMC					
Provide PSF, deep tube well, rain water management & caretaker training to 111 management committees	DRM Engineer, TO					
Provide training on infrastructure planning & implementation guidelines with PNGOs	TL, DRM Engineer					Ongoing
Provide training on FFW scheme implementation guidelines with SO3 staff and PNGO management team	TL, DRM Engineer					
Conduct DRM awareness campaigns- observation of International Day for Disaster Reduction (IDDR), National Disaster Preparedness Day (NDPD), World Environment Day (WED), including preparation of 10,000 posters for NDPD and 10,000 posters for IDDR	DTL, DRM TC, UDRMC					Ongoing
Disseminate DRM messages through media such as billboards as part of on-going awareness raising activities on preparedness, mitigation, response and early warning	DTL, BCC Specialist					Ongoing
Organize local activities (e.g. folksongs) to raise/reinforce community awareness of their rights and entitled services, such as reporting exploitative practice (e.g. illegal water-logging) to appropriate government authorities	DTL, BCC Specialist					
In coordination with CPP, DMCs and community members, organize 3 community emergency simulations in Sarankhola and Batiaghata	CPP, DTL, BCC Specialist					
<i>Sub IR 3.3.2. Establish linkages with different disaster and emergency networks</i>						
Facilitate two coordination workshops with all SOs to ensure that DRR issues are incorporated across the SOs	TL, DTL					Delayed, will be held November

Schedule	Responsible Party	Implementation Year 4				ARR
		June	July	Aug	Sep	Progress/Comments
Organize 474 awareness raising shows (docudrama viewings) focussing on early warning	DTL, BCC Specialist, DRM TC, UDRMC					Ongoing
Facilitate sessions on DRM to SO1 and SO2 direct beneficiaries	DTL, BCC Specialist, DRM TC, UDRMC					Ongoing
Support CBDMVG member representatives to guide discussions on disaster risk reduction at Trios Group Meetings in Lohagara low risk areas	DRM TC, CGS, HP					Delayed will start from November
Organize quarterly joint meeting with CPP (union and unit TL, DTL), CBDMVG leaders and UDMC members for better coordination and exchange of knowledge	DRM TC, UDMC, DRM LO					Ongoing
Organize annual convention for both CPP and CBDMVG leaders to review the activities being carried out jointly and way forward (in Sarankhola)	COP, Director DRR, TL, DTL and BCC Specialist					
Organize one workshop with CBDMVG and shelter management committee to strengthen coordination in emergency evacuation and response.	DTL, DRM TC and UDRMC					

FY 2012 FFP Standardized Annual Performance Questionnaire (SAPQ)

Purpose

The Standardized Annual Performance Questionnaire (SAPQ) allows Food for Peace (FFP) to collect standardized data across all Title II food aid programs and host countries on an annual basis. These data are aggregated at an Agency level so that FFP can report to the U.S. Congress and other stakeholders on progress made against the [Food for Peace Strategic Plan, 2006-2010](#) objective of reducing food insecurity among vulnerable populations. The questions asked in the SAPQ correspond to the indicators in the FFP Performance Management Plan (PMP).

The SAPQ is strictly a reporting tool for collecting and aggregating data from all food aid programs. The SAPQ is NOT used to evaluate or manage individual food aid programs. It will be reviewed by the Policy and Technical Division (PTD) rather than the Agreement Officer's Representative (AOR). Please provide only the information requested in the manner requested, and do not modify or insert additional indicators or information. The Indicator Performance Tracking Table (IPTT) for development programs and Annual Results Report (ARR) narrative for both development programs and emergency programs are the appropriate place to tell the full story of your food aid program, not the SAPQ.

Submission

Awardees should submit their SAPQ(s) as part of their program's ARR, no later than the first Monday in November. SAPQs should be sent with food aid program ARRs via email to: ffpdocs@amexdc2.com.

Applicable Programs

All currently active Title II programs must submit an ARR, which includes an SAPQ. Submission of an ARR is required each fiscal year, even if the food aid program began late or expired early in the fiscal year being reported on and therefore, has implemented few award activities or achieved few results. The only exception is awardees implementing food aid programs through the International Food Relief Partnership (IFRP). An ARR covers award activities implemented during one fiscal year only, regardless of when the funding or food aid commodities were provided. The results reported should be for all activities *implemented* in the most recent fiscal year for which data are available.

If no activities were implemented in the most recent fiscal year, due to late food aid commodity arrivals, etc., there is a question to that effect in the SAPQ. Please still fill out the SAPQ.

Formatting Issues and Input

Please do not reformat the questionnaire or its contents, i.e., insert or delete rows or columns, change font sizes or print parameters, etc. At the same time, awardees are encouraged to provide recommendations as to how to improve the functional use of this questionnaire, such as formatting, data entry, etc.

Please do not save the SAPQ in a different format such as .pdf. FFP needs to receive the SAPQ in the Excel format provided.

Please round figures to the nearest whole number. Do not report decimals. i.e. report 14% not 13.5%.

Questions

Questions directly related to the SAPQ may be directed to AMEX International Inc., at 202-962-0048 or ffpdocs@amexdc2.com. Questions related to individual host country programs and performance should be directed to the respective FFP AOR or AMEX International support staff member.

SAPQ Instructions

Awardee Program and Contact Information

Awardee Name(s): Formal organization name or acronym is acceptable. If the food aid program is implemented by a consortium, list the lead awardee name and include the names of the subawardees and/or partner organizations in parentheses.

Host Country(ies): Fill in the name of the host country(ies) where activities are implemented. In cases where one food aid program operates in multiple countries or in a geographical region, please specify the region and list the applicable host countries.

Program location(s) in host country: List regions (and specify country, if unclear) where activities take place.

Program Start Date: List the program start date as provided on the original award agreement. Dates should be provided in the following format: MM/DD/YY.

Program Expiration Date: List the expiration date for the food aid program as provided in the award agreement or subsequent award modifications, as appropriate. Dates should be provided in the following format: MM/DD/YY.

Program Name: List the formal name of the food aid program as promoted by the awardee, if available.

Award Number: An award agreement is a document signed by the awardee and FFP that describes the food aid commodities being requested and the food aid program in which they will be used. Award numbers are usually found on the first page or pages of FFP agreements.

Awardee Contact Information: Include the name, email address, address, and phone number of the main person(s) responsible for completing the food aid program's SAPQ. Should additional information be required, this person will be contacted by FFP.

Definitions

- The terms used in the SAPQ questionnaire are defined in the "Definitions" tab.
- Age groups such as "0-59 months" mean children from 0-59.9 months of age; in other words, children under 60 months of age.
- **The indicators of number of months of adequate food provisioning (MAHFP) and household dietary diversity score (HDDS) are measured in particular ways that are explained in the "Definitions" tab. If you do not use the same method that is described, please do not provide data. If you have particular indicators you want to share with FFP (which do not match the indicators in this SAPQ) please report them in the IPTT, not the SAPQ.**

SAPQ General Instructions

To ensure the questionnaire performs correctly, you must enable macros. To do this, you open the "Questionnaire" worksheet. Then, click "Enable Macros" by the Security Warning at your upper-right. If you are using Excel 2007, you click "Options" and then "Enable Macros". Macros will now function in your document.

Development programs awarded in *FY07, FY08, FY09, and FY10* are required to report each year on all the Annual indicators that are applicable to their food aid programs.

Development programs awarded in *FY11 and FY12* are NOT required to report on the current set of Annual monitoring indicators.

Development programs awarded *before FY11* are required to report on the applicable Impact indicators (i.e., MAHFP, HDDS, Underweight and Stunting) in the years for which they are available (e.g., baseline and final evaluation.)

Development programs awarded *in FY11 and onward* are required to report on the new set of applicable Impact indicators (i.e., All except MAHFP) in the years for which they are available (e.g., baseline and final evaluation.)

Development programs awarded *prior to FY07 and all emergency programs (including International Food Relief Partnership (IFRP) programs)* are asked only to provide the data if they have them.

For many *emergency programs (including IFRP programs)*, the majority of the SAPQ questions will not be applicable; however, emergency programs should still fill in the relevant sections of the SAPQ.

See FFP Information Bulletin 11-03 for more information on which indicators apply to which food aid programs, available online at, http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpib.stdindicators.pdf

- Submit one SAPQ per food aid program. If you are working in several different regions in a host country under a single development program or emergency program, submit a single SAPQ covering the entire program. If you are implementing more than one development program or emergency program in the same host country, submit one SAPQ for each Title II program. Similarly, submit separate SAPQs for each development program and each emergency program, i.e., do not combine data for a development program and emergency program on the same form.
- For regional programs that cover more than one country, if your data are country-specific, please insert additional worksheets to report on each country in addition to reporting the aggregated, program-wide data.

• Yes/No questions determine whether an indicator is applicable to your program or not. Notice the "skip" instructions to the right of the Yes/No questions. If you answer "No" to a question, you are asked to skip ahead, instead of providing indicator data for an area that does not apply to your program.

• Annual beneficiary-based indicators are those for which you collect data every year based on beneficiary monitoring. Impact indicators are those collected periodically, at a minimum at baseline and final evaluation, through a population-based representative sample.

• Type in the white cells only. Some cells contain drop-down menus and others allow you to enter a freeform response. Where there are drop-down menus, you must pick from the available choices --- do not modify the choices or substitute different indicators. When you are asked to type something in, notice what kind of information is being asked for. It could be a number (#), a percentage (%), a year (FY), or text.

• If your data do not exactly correspond to the particular indicator for which we are asking, please do not provide any data in those cells. For example, if you measure the prevalence of underweight among children aged 6-36 months, but we have asked for the prevalence of underweight for children aged 0-59 months, please do NOT provide your data as they are not exactly what we are asking for.

• All questions in the SAPQ ask you to provide data from the most recent fiscal year for which data are available. In addition, some questions ask for data collected (a) the previous fiscal year, in the case of annual indicators that show a change from year to year; or, (b) the last time you collected the indicator, in the case of impact level indicators, where you are also asked to write in the year that the data were collected. Please provide only the data for the years requested.

• When you are asked to provide future year targets, provide your most current thinking on those targets, even if you made a change to your targets and the change hasn't yet been approved by FFP.

• On some of the SAPQ questions, you are asked to provide the overall number of people, households, or communities affected by your program (for annual indicators) or in the target population (for impact level indicators). Please provide this information, which is necessary to create weighted averages for all Title II programs. FFP cannot use your data unless you provide this information. Note: If data are unavailable for the overall number of people, households or communities, refer to the "SAPQ Help" document available on the FFP website, which provides detailed instructions on how to derive an estimated value.

SAPQ DEFINITIONS

Access to Cleansing Agents at Hand Washing Place	A standard indicator that measures access to hygiene practices. It measures the percentage of households with children aged 0–23 months that have soap and water at a hand washing station. (This indicator was adapted from the USAID Hygiene Improvement Project (HIP) document Access and Behavioral Outcome Indicators for Water, Sanitation, and Hygiene (2010).) The data for this indicator is collected through the household questionnaire in a population-based survey. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .
Access to Financial Services	A standard indicator that measures farmers' access to financial services. It measures the percentage of farmers who used financial services (savings, agricultural credit, and/or agricultural insurance) in the past 12 months. Farmers (including herders and fishers) are defined as 1) men and women who have access to a plot of land (even if very small) over which they make decisions about what will be grown, how it will be grown, and how to dispose of the harvest; AND/OR 2) men and women who have animals and/or aquaculture products over which they have decision-making power. Financial services refer to services provided by formal or non-formal groups for the management of money. This includes credit (loans), savings, and insurance schemes run by for-profit, non-profit, and governmental organizations. The data for this indicator is collected through the household questionnaire in a population-based survey. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .
Access to Improved Drinking Water	A standard indicator that measures access to potable drinking water. This indicator measures the percentage of households using an improved drinking water source. An improved water source is an infrastructure improvement to a water source, a distribution system, or a delivery point. By nature of its design and construction, the improvement is likely to protect the water source from external contamination, in particular fecal matter. (For a list of improved drinking water sources, refer to this specific indicator on the link below.) The data for this indicator is collected through the household questionnaire in a population-based survey. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .
Access to Improved Sanitation Facility	A standard indicator that measures access to sanitation facilities. This indicator requires the use of questions that determine whether there is a sanitary facility in the household and whether that sanitary facility meets the improved sanitation standards defined in the Millennium Development Goals (MDGs). (Improved sanitation is further defined under this specific indicator on the link below.) The household head or a responsible adult is asked to identify the kind of toilet facility that household members usually use. The data for this indicator is collected through the household questionnaire in a population-based survey. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .
Agriculture Technologies	Agriculture technologies refer to the practice of combining land, labor, capital, and knowledge to produce, market, distribute, utilize, and trade food, feed, and fiber. Illustrative sustainable agriculture technologies may include, but are not limited to, low-input approaches, crop rotation (i.e., for soil fertility enhancement and/or pest management), intercropping, integrated farm systems (for example, tree-crop-fish pond-livestock systems), reforestation, water conservation and harvesting, cover cropping, green manure, effective composting, erosion control, improved seed varieties, non-invasive species, and integrated pest management. PVOs are free to define "technology". One approach, however, is to say that agricultural technologies are transferred as a <i>package</i> of technologies that, when used in combination, have a proven <i>desired outcome</i> , such as increased yield or reduced soil erosion or a decrease in post-harvest losses. For instance, an Integrated Rice System is a package designed to increase rice yields. It consists of five technologies: seed selection, transplanting, water control, weeding, and fertilizing. Research shows a 50% increase in yield if all 5 technologies are used. Yield will still increase, but not by 50%, if 3 or 4 of the technologies are used.
Anthropometric Indicators	The quantitative measurement of the human body. Anthropometric techniques are used to measure the absolute and relative variability in size, shape, and weight of the human body. Anthropometry follows a rigorous set of guidelines that include standardization of the measurement techniques and uniform reference standards and cutoffs.
Beneficiaries	<p><i>Direct beneficiaries</i> are those who come into direct contact with the set of interventions (goods or services) provided by the program in each technical area. Individuals who receive training or benefit from program-supported technical assistance or service provision are considered direct beneficiaries, as are those who receive a ration or another type of good. Note: all recipients are beneficiaries, but not all beneficiaries are necessarily food ration recipients. Services include training and technical assistance provided directly by program staff, and training and technical assistance provided by people who have been trained by program staff (e.g., agricultural extension agents, village health workers). If cooperatives or organizations receive training or technical assistance from the program, all members of the cooperative/organization are considered direct beneficiaries. In a Food for Training (FFT) program, the direct beneficiaries are those trained under the program. In a Food for Work (FFW) or Food for Assets (FFA) program that is implemented as a stand-alone activity (e.g., not as part of a wider set of interventions in the technical sector), direct beneficiaries are those who directly participate in the activity (i.e., receive a ration), not all of those who use or benefit from the infrastructure/asset created (e.g., a road). If a FFW or FFA activity forms part of a set of activities in a technical sector (e.g., FFW to build irrigation infrastructure, accompanied by technical assistance in new cultivation techniques and water management to a targeted group of farmers), the direct beneficiaries include FFW participants and the farmers receiving the technical assistance (the two groups may overlap). In the case of food rations, direct beneficiaries include the individual recipient in the case of individual rations, and the recipient plus his/her family members in the case of family rations.</p> <p>Direct beneficiaries do not include those who benefit indirectly from the goods and services provided to the direct beneficiaries, e.g., members of the household of a beneficiary farmer who received technical assistance, seeds and tools, other inputs, credit, livestock, etc.; farmers from a neighboring community who might observe the effects of the training and demonstration plots in the target community and decide to adopt or model the new practices themselves; the population of all of the communities in a valley that uses a road improved by FFW; or all individuals who may have heard a radio message about prices, but who did not receive the other elements of an agricultural intervention necessary to increase incomes. Such individuals are considered <i>indirect beneficiaries</i>.</p>
Communities	This is intentionally left undefined so that programs may use their own definition of what constitutes a "community". A "community" could be a village, but it doesn't necessarily have to be. A community is meant to be a geographic grouping (neighborhood, village, commune...); it does not refer to a group of people who all have a similar characteristic, like women or farmers.
Community Capacity	In this context, community capacity refers to a community's ability to govern itself; to organize, analyze, plan, manage, problem-solve, implement actions, and represent its interests and participate in broader fora. This goes beyond targeted efforts to strengthen communities in nutrition, agriculture, infrastructure, early warning, or other topics covered elsewhere in the SAPQ.
Disaster Early Warning and Response System	A community-based system that identifies increasing stress or oncoming shocks, indicates when actions need to be taken, and what the appropriate responses should be.
Exclusive Breastfeeding	A standard indicator that measures nutritional status of children. This indicator measures the percentage of children 0–5 months of age, i.e., under 6 months, who were exclusively breastfed during the day preceding the survey. Exclusive breastfeeding means that the infant received breast milk (including milk expressed or from a wet nurse) and might have received oral rehydration solution (ORS), vitamins, minerals, and/or medicines, but did not receive any other food or liquid. The data for this indicator is collected through the household questionnaire in a population-based survey. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .
Household Dietary Diversity Score (HDDS)	A standard food access indicator measuring the number of different food groups consumed by a household over a 24 hour recall period. This indicator is a proxy for household socioeconomic status and not a measure of dietary quality. It is collected through a household questionnaire consisting of one single question, using 12 standard food groups, asked of the person responsible for food preparation in the household. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the Indicator Guide at http://www.fantaproject.org/publications/hdds_mahfp.shtml .
Household Hunger Scale (HHS)	A standard food access indicator measuring the percentage of households with moderate or severe hunger over the last 4 weeks. It is collected through a household questionnaire consisting of three questions asked of the household member in charge of food preparation, about the frequency with which the three events were experienced by <u>any</u> household member in the last 4 weeks. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .
Improved Storage Techniques	A standard indicator that measures farmers' use of improved storage techniques. It measures the percentage of farmers who used at least [a project-defined minimum number of] improved storage techniques in the last post-harvest period. "Improved" storage techniques are methods for storing crops, animal feed, and aquaculture products that are cost-effective and allow for long-term storage. These techniques allow a farmer to safely store excess harvest from the plot where the farmer has decision-making power for subsequent sale and/or consumption. Improved storage techniques should minimize post-harvest losses and maximize profits by allowing farmers to sell their products later in the season when excess product supply has diminished. The data for this indicator is collected through the household questionnaire in a population-based survey. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .

Minimum Acceptable Diet (MAD)	A standard indicator that measures nutritional status of children. This indicator measures the percentage of children 6–23 months of age who receive a minimum acceptable diet, apart from breast milk. The MAD indicator measures both the minimum feeding frequency and minimum dietary diversity, as appropriate for various age groups. If a child meets the minimum feeding frequency and minimum dietary diversity for his or her age group and breastfeeding status, then the child is considered to be receiving a minimum acceptable diet. The data for this indicator is collected through the household questionnaire in a population-based survey. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .
Minimum Number of Agricultural Technologies	This is left to each program to define. Of the technologies being transferred, what minimum number of them are farmers expected to be able to realistically adopt while still having a significant desired outcome (i.e. increased yield)? Also see <i>Agriculture Technologies</i> above.
Number of Months of Adequate Household Food Security	A standard food access indicator measuring the number of months a household had enough food to meet the family's needs over the last year. It is collected through a household questionnaire consisting of two questions asked of the person responsible for food preparation in the household. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the Indicator Guide at http://www.fantaproject.org/publications/hdds_mahfp.shtml .
Physical Infrastructure to Mitigate the Impact of Shocks	Includes structures such as cyclone shelters, natural and artificial barriers such as flood embankments and tree plantations, and soil and water conservation and retention structures such as gully plugs.
Practice of Value Chain Activities	A standard indicator that measures farmers' marketing of agriculture products. It measures the percentage of farmers who practiced the value chain activities promoted by the project in the past 12 months. Value chain activities include, but are not limited to, pre- and post-harvest activities such as joint purchase of inputs, bulking, transporting, sorting, grading, processing, trading/marketing (wholesale, retail, export). Projects for which this indicator is applicable need to pre-identify a list of value chain activities that the project will be promoting during the life of the project so that the baseline survey is able to measure the percentage of farmers that are already practicing these specific value chain activities. This will later be compared to the percentage of farmers practicing these value chain activities during the final evaluation survey at the end of the project. More on value chain activities can be found at the USAID's value chain wiki link: http://apps.develebridge.net/amap/index.php/Value_Chain_Development . The data for this indicator is collected through the household questionnaire in a population-based survey. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .
Safety Net	A community-based safety net supported under a development program can be a broadly defined system for addressing the food security needs of a community's most vulnerable members during a shock. A community-based safety net is: managed and maintained by the community; internally resourced, at least in part; and can be year round or seasonal. Examples include community food banks or insurance schemes.
Shock	A rapid or slow onset event (or set of events) having a detrimental effect on a population's food security status by impeding one or more of the three elements of food security (availability, access, utilization). Shocks can occur occasionally or recurrently. The source of the shock(s) can be: natural (drought, floods, earthquake, hurricane, etc.); political (conflict, civil war); economic (employment insecurity, hyper-inflation, collapsed terms of trade); and/or, health-related (epidemics, endemic disease, and widespread malnutrition).
Stunting	A standard indicator that measures nutritional status of children. Stunting is a height-for-age measurement that reflects chronic undernutrition. This indicator measures the percent of children aged 0–59 months, i.e., under 5 years, who are stunted, as defined by a height-for-age z-score (HAZ) < -2. The data for this indicator is collected through the household questionnaire in a population-based survey. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .
Sustainable Agriculture	A sustainable agriculture system provides needed nutrition and economic growth while promoting natural resource management to protect or enhance the environment (i.e., natural resources and/or human health). This system is economically viable and market driven while ensuring local replicability, gender equity, and social acceptability (e.g., sensitive to potential for conflict over scarce resources). Such a sustainable agriculture system uses agriculture technologies to offset losses of and/or regenerate soil fertility, prevent erosion of topsoil, safely and affordably manage pests, protect water quality and quantity, reduce post-harvest storage losses, and enhance resiliency to climatic fluctuations. An appropriate agriculture system relies on agricultural technologies that rely on market-driven demand to maximize return and predictability of income generation and consider the capacity and seasonality of labor input that a household can allocate to agriculture, particularly those households affected by chronic disease (e.g., HIV/AIDS and TB). A sustainable agriculture system balances community needs assessed via a participatory rural appraisal with the community's capacity to maintain access to the intervention once the USAID program has successfully ended.
Sustainable Agriculture Practices and/or Technologies	A standard indicator that measures farmers' access to agriculture (crop/livestock and NRM) practices and/or technologies. It measures the percentage of farmers who used at least [a project-defined minimum number of] sustainable agriculture (crop/livestock and/or NRM) practices and/or technologies in the past 12 months. (An illustrative list of sustainable agriculture practices and techniques are listed under this specific indicator on the link below.) The data for this indicator is collected through the household questionnaire in a population-based survey. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .
Underweight	A standard indicator that measures nutritional status of children. Underweight is a reflection of acute and/or chronic undernutrition and is measured using weight-for-age. This indicator measures the percentage of children aged 0–59 months who are underweight, as defined by weight-for-age z-score (WAZ) < -2, in the target population. The data for this indicator is collected through the household questionnaire in a population-based survey. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .
Underweight among Women of Reproductive Age	A standard indicator that measures nutritional status of women of reproductive age. This indicator measures the percentage of non-pregnant women of reproductive age (15–49 years) who are underweight, as defined by a body mass index (BMI) < 18.5 kg/m ² . To calculate an individual's BMI, weight and height data are needed. BMI is equal to weight (in kg) divided by height squared (in meters). The data for this indicator is collected through the household questionnaire in a population-based survey. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .
Women's Dietary Diversity Score	A standard indicator that measures the women's dietary diversity. This indicator aims to measure the micronutrient adequacy of the diet and reports the mean number of food groups consumed in the previous day by women of reproductive age (15–49 years). The indicator is tabulated by averaging the number of food groups consumed (out of the specified nine food groups) across all women of reproductive age in the sample with data on dietary diversity. The data for this indicator is collected through the household questionnaire in a population-based survey. The population-based survey is usually conducted during the hungry season, on all the households selected in a representative sample. The questionnaire and instructions for data collection, tabulation, and analysis can be found in the FFP Standard Indicators Handbook at http://transition.usaid.gov/our_work/humanitarian_assistance/ffp/ffpstindicatorhb.pdf .

FFP Standardized Annual Performance Questionnaire (SAPQ) - FY 2013

YOUR COMMENTS

AWARDEE FOOD AID PROGRAM INFORMATION	
Awardee Name(s)	ACDI/VOCA
Host Country <i>(or Countries, for Regional Programs)</i>	Bangladesh
Program location(s) in the host country	Khulna Division
Program Start Date <i>(mm/dd/yy)</i>	5/24/10
Program Expiration Date <i>(mm/dd/yy)</i>	5/31/15
Program Name	PROSHAR (Program for Strengthening Household Access to Resources)
Award Number (unique for each program)	AID-FFP-A-10-00012
AWARDEE CONTACT INFORMATION	
Contact Name (person filling out the SAPQ)	Marie Cadrin
Contact Email	mcadrin@acdivoca-proshar.org
Contact Address	House 30, Road 19/A, Banani, Dhaka-1213
Contact Phone	88-02-8836801

****Please Refer to Skip Instructions to the Right of each Question****

I	Was your food aid program awarded in Fiscal Year (FY) 2011 or after?	Yes/No No	If "Yes"; skip to QIII
II	If answered "No," in what FY was your food aid program awarded?	FY FY10	Enter FY
III	Has your food aid program conducted a quantitative, population-based, statistically representative baseline survey?	Yes/No Yes FY	If "No"; skip to QVII
IV	In what FY was this data collected?	FY11	Enter FY
V	Is final data available?	Yes/No Yes	If "No"; skip to QVII
VI	Has this data been recorded in a previous SAPQ?	Yes/No Yes	If "No"; skip to Section 1
VII	Has your program conducted a quantitative, population-based, statistically representative final evaluation?	Yes/No No FY	If "No"; skip to QXI
VIII	In what FY was this data collected?		Enter FY
IX	Is final data available?	Yes/No	If "No" skip to QXI
X	Has this data been recorded in a previous SAPQ?	Yes/No	If "Yes"; You are FINISHED. SUBMIT SAPQ. If "No"; skip to Section 1
XI	Has your food aid program collected annual monitoring data? (This is data about direct beneficiaries coming from your routine monitoring system)	Yes/No Yes	If "No", You are FINISHED. SUBMIT SAPQ
XII	In what FY was the most recent annual monitoring data collected?	FY13	Enter FY
XIII	Has this data been recorded in a previous SPAQ?	Yes/No No	If "Yes", You are FINISHED. SUBMIT SAPQ

You may make comments, if desired in this column. i.e., if you are uncertain whether a particular indicator is what FFP is looking for, mention it here.

SECTION 1: Data from a Representative Population-based Survey

This section asks for impact data coming from a quantitative survey such as a baseline or final evaluation

1	From the dropdown list, please select <u>all</u> FFP indicators applicable to your program included in IPTT?	Dropdown List	Select from dropdown menu: If Q1 is "No"; ONLY select from indicators: 1A, 1B, 1D AND 1E. If Q1 is "Yes"; select from all applicable indicators but 1A
		1A Months of Adequate Food Provisioning 1B Household Dietary Diversity score 1D Underweight 1E Stunting	
2	What is the estimated number of households in your target geographic area? (Applicable to Questions: 3, 4, 5, 14, 15, 25 & 26)	94,673	Applicable only when indicators: 1A, 1B, 1C, 1J, 1K, 1R OR 1S are checked in Q1
1A: Months of Adequate Household Food Provisioning (Impact Indicator)			Applicable only when 1A is checked in Q1
	What was the <i>average number of months of adequate household food provisioning</i> ? <small>Award Number: AID-FFP-A-10-00012 (November 5, 2013) Fill out the table below with the data from your survey. Only provide data if you used the standard methodology in FFP handbook. If this is a baseline survey, please also provide your final evaluation target for this indicator.</small>		

3		FY 11	Final Evaluation Target		FY XX should be entered based on survey year (QIV OR QVIII)
	Indicator	# months	What FY is the final evaluation?	# months	
	Average number of months of adequate food provisioning	9.0	FY15	10	

1B: Household Dietary Diversity (Impact Indicator) Applicable only when 1B is checked in Q1

4 **What was the average household dietary diversity score?**
 Fill out the table below with the data from your survey. Only provide data if you used the standard methodology in FFP handbook. If this is a baseline survey, please also provide your final evaluation target for this indicator.

	FY 11	Final Evaluation Target		FY XX should be entered based on survey year (QIV OR QVIII)
Indicator	# of food groups	What FY is the final evaluation?	# of food groups	
Average household dietary diversity score	6.6	FY15	6.9	

1C: Household Hunger Scale (Impact Indicator) Applicable only when 1C is checked in Q1

5 **What was the percentage of households reported to have moderate or severe hunger?**
 Fill out the table below with the data from your survey. Only provide data if you used the standard methodology in FFP handbook. If this is a baseline survey, please also provide your final evaluation target for this indicator.

	FY XX	Final Evaluation Target		FY XX should be entered based on survey year (QIV OR QVIII)
Indicator	% HH	What FY is the final evaluation?	% HH	
Household Hunger Scale				

6	What is the estimated total number of children living in your target geographic area:	# 0-5 mo	# 6-23 mo	# 0-59 mo	Applicable only when indicators 1D, 1E, 1F OR 1G are checked in Q1
	0-5 months of age (Refer to SAPQ Help: "Children 0-5 months of age" for Calculation Instructions)				
	6-23 months of age (Refer to SAPQ Help: "Children 6-23 months of age" for Calculation Instructions)	5,136	15,279	58,983	

1D: Underweight (Impact Indicator) Applicable only when 1D is checked in Q1

7

What was the percentage of children 0-59 months reported to be underweight (WAZ < -2)?

Only provide data if you used the standard methodology in FFP handbook.
If this is a baseline survey, please also provide your final evaluation target for this indicator.

Indicator	FY 11	Final Evaluation Target	
	% underweight	What FY is the final evaluation?	% underweight
% of children 0-59 months of age who are underweight (WAZ<-2)	31%	FY15	24%

FY XX should be entered based on survey year (QIV OR QVIII)

1E: Stunting (Impact Indicator)

Applicable only when 1E is checked in Q1

8

What was the percentage of children 0-59 months reported to be stunted (HAZ <-2)?

Only provide data if you used the standard methodology in FFP handbook.
If this is a baseline survey, please also provide your final evaluation target for this indicator.

Indicator	FY 11	Final Evaluation Target	
	% stunted	What FY is the final evaluation?	% stunted
% of children 0-59 months of age who are stunted (HAZ<-2)	42%	FY15	34%

FY XX should be entered based on survey year (QIV OR QVIII)

1F: Exclusive Breastfeeding (Impact Indicator)

Applicable only when 1F is checked in Q1

9

What was the percentage of children 0-5 months of age who are exclusively breastfed?

Only provide data if you used the standard methodology in FFP handbook.
If this survey is a baseline survey, please also provide your final evaluation target for this indicator.

Indicator	FY 11	Final Evaluation Target	
	% exclusively breastfed	What FY is the final evaluation?	% exclusively breastfed
% of children 0-5 months of age who are exclusively breastfed			

FY XX should be entered based on survey year (QIV OR QVIII)

1G: Minimum Acceptable Diet (Impact Indicator)

Applicable only when 1G is checked in Q1

10

What was the percentage of children 6-23 months of age who are receiving a minimum acceptable diet?

Only provide data if you used the standard methodology in FFP handbook.
If this survey is a baseline survey, please also provide your final evaluation target for this indicator.

Indicator	FY XX	Final Evaluation Target	
	% min diet	What FY is the final evaluation?	% min diet
% of children 6-23 months of age receiving a minimum acceptable diet			

FY XX should be entered based on survey year (QIV OR QVIII)

11

What is the total number of women of reproductive age (15-49 years) living in your target geographic area (for Q12 & 13 only)? (Refer to SAPQ Help: "Women 15 to 49 years of age" for Instructions on Calculation)

Applicable only when indicators 1H OR 1I are checked in Q1

1H: Underweight among Women of Reproductive Age (Impact Indicator)

Applicable only when 1H is checked in Q1

12

What was the percentage of women of reproductive age (15-49 years) reported to be underweight (BMI < 18.5 kg/m²)?

Only provide data if you used the standard methodology in FFP handbook.
If this survey is a baseline survey, please also provide your final evaluation target for this indicator.

Indicator	FY XX	Final Evaluation Target	
	% underweight	What FY is the final evaluation?	% underweight
% of women of reproductive age reported to be underweight (BMI < 18.5 kg/m ²)			

FY XX should be entered based on survey year (QIV OR QVIII)

1I: Women's Dietary Diversity Score (Impact Indicator)

Applicable only when 1I is checked in Q1

13

What was the mean number of food groups consumed by women of reproductive age (15–49 years)?

Only provide data if you used the standard methodology in FFP handbook.
If this survey is a baseline survey, please also provide your final evaluation target for this indicator.

Indicator	FY XX	Final Evaluation Target	
	Mean # of food groups	What FY is the final evaluation?	Mean # of food groups
Women's Dietary Diversity Score			

FY XX should be entered based on survey year (QIV OR QVIII)

1J: Access to Improved Drinking Water (Impact Indicator)

Applicable only when 1J is checked in Q1

14

What was the percentage of households using an improved drinking water source?

Only provide data if you used the standard methodology in FFP handbook.
If this survey is a baseline survey, please also provide your final evaluation target for this indicator.

Indicator	FY XX	Final Evaluation Target	
	% HH	What FY is the final evaluation?	% HH
% of households using an improved drinking water source			

FY XX should be entered based on survey year (QIV OR QVIII)

1K: Access to Improved Sanitation Facility (Impact Indicator)

Applicable only when 1K is checked in Q1

15

What was the percentage of households with access to an improved sanitation facility?

Only provide data if you used the standard methodology in FFP handbook.
If this survey is a baseline survey, please also provide your final evaluation target for this indicator.

Indicator	FY XX	Final Evaluation Target	
	% HH	What FY is the final evaluation?	% HH
% of households with access to an improved sanitation facility			

FY XX should be entered based on survey year (QIV OR QVIII)

16

What is the total number of households with children 0-23 months of age in your target geographic area (for Q17 only)?

Applicable only when indicator 1L is checked in Q1

1L: Access to Cleansing Agents at Hand Washing Place (Impact Indicator)

Applicable only when 1L is checked in Q1

17

What was the percentage of households with children aged 0–23 months that have water and soap or locally available cleansing agent at a hand washing place?

Only provide data if you used the standard methodology in FFP handbook.
If this survey is a baseline survey, please also provide your final evaluation target for this indicator.

Indicator	FY XX	Final Evaluation Target	
	% HH	What FY is the final evaluation?	% HH
% of households with children aged 0–23 mo having access to water and soap or locally available cleansing agent at a hand washing place			

FY XX should be entered based on survey year (QIV OR QVIII)

18

What is the total number of beneficiary farmers in your target geographic area (for Q19, 20, 21 & 22 only)? (Refer to SAPQ Help: "Farmers" for Instructions on Calculation)

Applicable only when indicators 1M, 1N, 1O OR 1P are checked in Q1

1M: Access to Financial Services (Impact Indicator)

Applicable only when 1M is checked in Q1

What was the percentage of farmers who used financial services (savings, agricultural credit and/or agricultural insurance) in the past 12 months?

Award Number: AID-FFP-A-10-00012 (November 5, 2013)

Only provide data if you used the standard methodology in FFP handbook.
If this survey is a baseline survey, please also provide your final evaluation target for this indicator.

19	Indicator	FY XX	Final Evaluation Target	
		% farmers	What FY is the final evaluation?	% farmers
% of farmers who used financial services in the past 12 months				

FY XX should be entered based on survey year (QIV OR QVIII)

1N: Practice of Value Chain Activities (Impact Indicator)

Applicable only when 1N is checked in Q1

20 What was the percentage of farmers who practiced the value chain activities promoted by the project in the past 12 months?

Only provide data if you used the standard methodology in FFP handbook.
If this survey is a baseline survey, please also provide your final evaluation target for this indicator.

Indicator	FY XX	Final Evaluation Target	
	% farmers	What FY is the final evaluation?	% farmers
% of farmers who practiced the value chain activities in the past 12 months	%	FY	%

FY XX should be entered based on survey year (QIV OR QVIII)

1O: Sustainable Agriculture Practices and/or Technologies (Impact Indicator)

Applicable only when 1O is checked in Q1

21 What was the percentage of farmers who used at least [a project-defined minimum number of] sustainable agriculture (crop/livestock and/or NRM) practices and/or technologies in the past 12 months?

Only provide data if you used the standard methodology in FFP handbook.
If this survey is a baseline survey, please also provide your final evaluation target for this indicator.

Indicator	FY XX	Final Evaluation Target	
	% farmers	What FY is the final evaluation?	% farmers
% of farmers who used at least [a project-defined minimum number of] sustainable agriculture (crop/livestock and/or NRM) practices and/or technologies in the past 12 months			

FY XX should be entered based on survey year (QIV OR QVIII)

1P: Improved Storage Techniques (Impact Indicator)

Applicable only when 1P is checked in Q1

22 What was the percentage of farmers who used at least [a project-defined minimum number of] improved storage techniques in the past 12 months?

Only provide data if you used the standard methodology in FFP handbook.
If this survey is a baseline survey, please also provide your final evaluation target for this indicator.

Indicator	FY XX	Final Evaluation Target	
	% farmers	What FY is the final evaluation?	% farmers
% of farmers who used at least [a project-defined minimum number of] improved storage techniques in the past 12 months			

FY XX should be entered based on survey year (QIV OR QVIII)

SECTION 2: Annual Monitoring Data
This section asks for annually monitored data about direct beneficiaries, coming from your routine monitoring system

23	Did your food aid program implement activities (deliver goods and services (assistance) to beneficiaries) in FY13?	Yes/No
		Yes

FY XX should be entered based on survey year (in QXII)

2A: Anthropometry (Monitoring Indicators)

24	Did your food aid program implement activities to maintain or improve the nutritional status of beneficiaries in FY13?	Yes/No
		Yes

FY XX should be entered based on survey year (in QXII)
If "No", skip to Q26

25 What anthropometric indicators does your program use for regular monitoring of the nutritional status of beneficiaries?

Please provide only ANTHROPOMETRIC indicators which are a measure of the physical body. Acceptable anthropometric measures include prevalence of stunting (height for age Z - HfA), underweight (weight for age - WfA), wasting (weight for height WfH), weight gain, growth faltering (trend of weight gain), body mass index (BMI), middle-upper arm circumference (MUAC); average HfA Z score (HAZ), WfA Z score (WAZ), WfH Z score (WHZ); proportion of children/adults recovering to defined cut-offs (e.g. WAZ 30% median). Measures such as breastfeeding, vaccination rates, or numbers of ration recipients are NOT anthropometric.

25 Only include data for indicators that you monitor annually among direct beneficiaries. These data will be based on regular monitoring of your program beneficiaries and not on a representative sample survey of a broader population. DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION

Desired direction (+ / -)	FY 12	FY 13
	actual %	actual %
- decrease	22%	21%

FY XX should be entered based on survey year (in QXII)

FY XX-1 should be entered based on survey year (in QXII)

Indicators

25.1 % of children under 2 from PM2A household who are underweight (weight-for-age - 2 S.D.)

25.2

25.3

25.4

2B: Behavior Change: Health, Nutrition, Hygiene (Monitoring Indicators)

26	Did your program implement activities to improve the health, nutrition or hygiene behaviors of beneficiaries in FY13?	Yes/No
		Yes

FY XX should be entered based on survey year (in QXII)
If "No" skip to Q29

27 What behavior change indicators does your program use for regular monitoring of beneficiaries?

For each indicator, fill in data on the FYXX indicator value (i.e. the result achieved) and the number of beneficiaries reached in FYXX. Please provide future year targets for the indicator, as applicable.

Use the drop down menu to select the indicator on which you are reporting. Give the percentage (%) of **beneficiaries** adopting the improved health, nutrition or hygiene behaviors. You may take a census or a sample of your beneficiaries. **DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION.** Only the indicators on the drop down menu can be included.

See FFP Information Bulletin 07-02 (http://www.usaid.gov/our_work/humanitarian_assistance/ffp/fy08_ffpib_new_reporting.pdf) for further information on these indicators. For indicators with an *, the specific behaviors that comprise these indicators are to be defined by the awardee. See the "Definitions" tab for a definition of "beneficiaries".

Indicators	FY 13		Future Targets			
	actual %	# beneficiaries	FY 14	FY 15	FY XX	FY XX+4
			target %	target %	target %	target %
27.1 % children 0-6 months of age exclusively breastfed	67%		60%	60%		
27.2 % children 6-23 months of age w/3 appropriate infant & young child feeding practices (continued BF'ing, age-appropriate dietary diversity, age-appropriate frequency of feeding)	50%		35%	37%		
27.3						
27.4						

FY XX should be entered based on survey year (in QXII)
Future Target Years (i.e., FY XX+1; FY XX+2; etc) should be entered based on survey year (in QXII)

Please note that targets are set for the total population while FY12 achievements has been reported from the beneficiary based sample survey result.

2C: Agricultural Extension (Monitoring Indicator)

28	Did your food aid program provide farmers with extension/outreach services in FY13?	Yes/No
		Yes

FY XX should be entered based on survey year (in QXII)
If "No" skip ahead to Q34

29 How many farmers (individuals, not households) received extension/outreach services in FY13?

Please provide future year targets for number of farmer beneficiaries, as applicable.

	FY 13		Future Targets			
	# farmers	# farmers	FY 14	FY 15	FY XX	FY XX+4
			# farmers	# farmers	# farmers	# farmers
	17,909	28,138	10,698			

FY XX should be entered based on survey year (in QXII)
Future Target Years (i.e., FY XX+1; FY XX+2; etc) should be entered based on survey year (in QXII)

30	How many sustainable agricultural technologies did your program transfer in FY13? See the "Definitions" tab for more information about "agricultural technologies"	# technologies
		10

31 What are the sustainable agricultural technologies your program made available for transfer in FY13?

If you transferred more than 10 technologies, you can list the others in the comments column to the right.

31.1	Use of improved variety seed
31.2	Use of 2-3 seedling per hill for rice
31.3	Maintenance of proper spacing
31.4	Intercrop cropping
31.5	Use of balanced fertilizers and integrated pest management.
31.6	Use of PROSHAR recommended seed storage methods
31.7	Use of organic fertilizers
31.8	Use of Weed control (weeding)
31.9	Conservation agriculture (minimal tillage, composting)
31.10	Use of improved post-harvest management

31.11 Use of improved breed, Use of liming, 31.12 Use of proper vaccination, 31.13 Use of improved variety, 31.14 Use of supplementary feeding/ Use supplementary feed, 31.15 Use of proper stocking density, 31.16 Use of creep feeding for indigenous poultry, 31.17 Use of improved shade, 31.18 Use of disease management, 31.19 Use of proper de-worming, 31.2 Use of quality fry/fingerlings/ juvenile, 31.21 Use of urea molasses straw, 31.22 Use of organic fertilizer, 31.23 Use of disease management, 31.24 Use of

32	What is the minimum number of sustainable agricultural technologies your program would like an individual farmer to use/adopt as a result of your program's assistance? See the "Definitions" tab for a definition of "minimum number." This number should be less than the response to question 30.	# technologies
		1

33 What percentage (%) of program beneficiaries (farmers) adopted the minimum number of technologies in FY13?

Please provide the future year targets, as applicable.

Award Number: HR-FFP-10-00612 (from HR-FFP-10-00612)

DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION.

	FY 13		Future Targets			
	actual %	# beneficiaries	FY 14	FY 15	FY XX	FY XX+4
			target %	target %	target %	target %

FY XX should be entered based on survey year (in QXII)
Future Target Years (i.e., FY XX+1; FY XX+2; etc) should be entered based on survey year (in QXII)

Targets are based on previous indicator: % of beneficiaries (farmers) using a project-defined minimum number of sustainable agriculture technologies. ACIDI/VOCA removed this indicator from its last submitted IPTT/PMP in August 2012.

| % beneficiary farmers |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 96% | 50% | 60% | | |

2D: Disaster Early Warning Systems (Monitoring Indicator)

34	Did your food aid program assist communities to develop disaster early warning and response systems in FY13? See the "Definitions" tab for a definition of "disaster early warning and response system".	Yes/No
		Yes

FY XX should be entered based on survey year (in QXII)
If "No", skip to Q37

35	How many communities does your program plan to assist to develop disaster early warning and response systems over the life of the award?	# communities
		117

How many of your program's targeted communities had disaster early warning and response systems in place in FY13 as a result of your program's assistance? Please provide the future year targets for # of communities, as applicable. Future targets should be cumulative. For instance, if 25 communities have early warning systems in Year 1 and another 25 are added in Year 2, the Year 2 target would be 50, not 25. DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION.

36		FY 13	Future Targets				
			FY 14	FY 15	FY XX	FY XX+4	
			# communities	# communities	# communities	# communities	# communities
			99	117	117		

FY XX should be entered based on survey year (in QXII)

Future Target Years (i.e., FY XX+1; FY XX+2; etc) should be entered based on survey year (in QXII)

2E: Infrastructure To Mitigate Shocks (Monitoring Indicator)

37	Did your food aid program assist communities to improve or develop physical infrastructure to mitigate the impact of shocks in FY13? See the "Definitions" tab for a definition of "infrastructure"	Yes/No
		Yes

FY XX should be entered based on survey year (in QXII)

If "No", skip to Q41

38	How many communities does your program plan to assist to improve or develop infrastructure to mitigate the impact of shocks over the life of the award?	# communities
		104

39	What kinds of physical infrastructure did your program improve or develop in FY13? If there are more than 5 kinds of infrastructure, you can list the others in the comments column to the right.
39.1	Construction of thirty three new pond sand filters (PSF)
39.2	Construction of two Sanitary Latrines
39.3	Installation of two Tube well
39.4	Repairing Three Multipurpose Cyclone Shelter
39.5	Construction of Ten Rain Water Harvesting System

40	How many of your program's targeted communities had improved physical infrastructure to mitigate the impact of shocks in FYXX as a result of your program's assistance? Please provide the future year targets for number of communities, as applicable. Future targets should be cumulative. For instance, if 25 communities have infrastructure in place in Year 1 and another 25 are added in Year 2, then the Year 2 target would be 50, not 25. DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION.	FY 13	Future Targets				
			FY 14	FY 15	FY XX+3	FY XX+4	
			# communities	# communities	# communities	# communities	# communities
			49	67	84		

FY XX should be entered based on survey year (in QXII)

Future Target Years (i.e., FY XX+1; FY XX+2; etc) should be entered based on survey year (in QXII)

2F: Safety Nets (Monitoring Indicator)

41	Did your food aid program assist communities to strengthen safety nets to address the needs of their most vulnerable members in FYXX? A community-based safety net supported under a Title II development program can be a broadly defined system for addressing the food security needs of a community's most vulnerable members during a shock. A community-based safety net is: managed and maintained by the community; internally resourced, at least in part; and can be year round or seasonal. Examples include community food banks or insurance schemes.	Yes/No
		No

FY XX should be entered based on survey year (in QXII)

If "No", skip to Q44

42	How many communities does your program plan to assist to strengthen safety nets over the life of the activity?	# communities

43	How many of your programs targeted communities that had safety nets in place in FYXX as a result of your program's assistance? Please provide the future year targets for number of communities, as applicable. Future targets should be cumulative. For instance, if 25 communities have safety nets in place in Year 1 and another 25 are added in Year 2, then the Year 2 target would be 50, not 25. DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION.	FY XX	Future Targets				
			FY XX+1	FY XX+2	FY XX+3	FY XX+4	
			# communities	# communities	# communities	# communities	# communities

FY XX should be entered based on survey year (in QXII)

Future Target Years (i.e., FY XX+1; FY XX+2; etc) should be entered based on survey year (in QXII)

2G: Community Capacity (Monitoring Indicator)

44	Did your food aid program assist communities to strengthen community capacity in FYXX? Award Number: AID-FFP-A-10-00012 (November 5, 2013) Community capacity refers to a community's ability to govern itself; to organize, analyze, plan, manage, problem-solve, implement actions, and represent its interests and participate in broader fora. This goes beyond targeted efforts to strengthen communities in nutrition, agriculture, infrastructure, education, and other topics covered elsewhere in the	Yes/No

FY XX should be entered based on survey year (in QXII)

Part of the unions are considered as communities.

strengthen communities in nutrition, agriculture, infrastructure, early warning, or other topics covered elsewhere in the SAPQ.

No

If "No": You are FINISHED. SUBMIT SAPQ

45 How many communities does your program plan to assist to strengthen community capacity over the life of the award?

communities

46 What are the components of community capacity that your program strengthened in FYXX?

Select from the drop down menu. If there are more than 10 components, you can list the others in the comments column to the right.

46.1	
46.2	
46.3	
46.4	
46.5	
46.6	
46.7	
46.8	
46.9	
46.10	

47 **How many of your program's targeted communities had strengthened community capacity in FYXX as a result of your program's assistance?**

Please provide the future year targets for number of communities, as applicable. Future targets should be cumulative. For instance, if 25 communities have strengthened capacity in Year 1 and another 25 are added in Year 2, then the Year 2 target would be 50, not 25

DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION.

FY XX	Future Targets			
	FY XX+1	FY XX+2	FY XX+3	FY XX+4
# communities	# communities	# communities	# communities	# communities

FY XX should be entered based on survey year (in QXII)

Future Target Years (i.e., FY XX+1; FY XX+2; etc) should be entered based on survey year (in QXII)

Congratulations! You have finished the SAPQ