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ACRONYMS LIST

AED	Academy for Educational Development
AOR	Agreement Officer's Representative
BFS	Bureau for Food Security
CARE	CARE International
CBO	Community-based Organization
CDC	Centers for Disease Control and Prevention
CGAP	Consultative Group to Assist the Poor
COP	Country Operational Plan
CRS	Catholic Relief Services
DAI	Development Alternatives, Inc.
DRC	The Democratic Republic of the Congo
ES	Economic Strengthening
ES/L/FS	Economic Strengthening, Livelihoods and Food Security
ES4UP	Economic Strengthening for the Ultra Poor
FANTA	Food and Nutrition Technical Assistance Project
FANTA-2	Food and Nutrition Technical Assistance II Project
FANTA-3	Food and Nutrition Technical Assistance III Project
FHI 360	Family Health International 360
FIELD-Support	Financial Integration, Economic Leveraging, Broad-Based Dissemination and Support
FtF	Feed the Future
FY	Fiscal Year
GODRC	Government of the Democratic Republic of the Congo
GOM	Government of Malawi
GON	Government of Nigeria
HAMED	Health and Market Development
HES	Household Economic Strengthening
HCI	Health Care Improvement Project
IAS	International AIDS Society
IP	Implementing Partners
IRB	Internal Review Board
LIFT	Livelihoods and Food Security Technical Assistance
LWA	Leader with Associates
MaFI	Market Facilitation Initiative
M&E	Monitoring and Evaluation
MEASURE	MEASURE Evaluation
MD	Microenterprise Development
MOH	Ministry of Health (DRC)
MOHSS	Ministry of Health and Social Services (Malawi)
NACS	Nutrition, Assessment, Counseling and Support
NAFIN	Namibian Alliance for Improved Nutrition
NCST	Nutrition Care, Support and Treatment (Malawi)
NGO	Non-governmental Organization
NHP	FHI 360's Nutrition and HIV Program (Kenya)
NIH	National Institutes of Health

OAA	USAID Office of Acquisition and Assistance
OHA	USAID Office of HIV/AIDS
ONA	Organization Network Analysis
OVC	Orphans and Vulnerable Children
PEPFAR	President's Emergency Plan for AIDS Relief
PLHIV	People Living with HIV
PMP	Performance Management Plan
PMTCT	Prevention of Mother-to-Child Transmission
PNLS	National HIV/AIDS and STI Control Program/ <i>Programme National de Lutte contre le VIH/SIDA et IST</i> (DRC)
PRONANUT	National Nutrition Program/ <i>Programme National de Nutrition</i> (DRC)
ProVIC	Integrated HIV/AIDS Program in the DRC/ <i>Programme du VIH/SIDA Intégré au Congo</i>
Save	Save the Children
SEEP	Small Enterprise Education and Promotion
SOTA	State of the Art
SOW	Scope of Work
SPRING	Strengthening Partnerships, Results, and Innovations in Nutrition Globally Project
STEP UP	Strengthening the Economic Potential of the Ultra Poor
TA	Technical Assistance
TDY	Temporary Duty
TOPS	Technical and Operational Performance Support
TWG	Technical Working Group
USAID	United States Agency for International Development
USDA	United States Department of Agriculture
USG	United States Government
VSL	Village Savings and Loan
VSLA	Village Savings and Lending Association
WFP	World Food Programme
WHO	World Health Organization

1. BACKGROUND

The Livelihoods and Food Security Technical Assistance (LIFT) project was initiated by the United States Agency for International Development (USAID) Office of HIV/AIDS (OHA) to provide technical assistance (TA) and strategic support to United States government (USG) agencies, their implementing partners (IP), and other public, private and civil society partners to improve the food and livelihood security of vulnerable households, with a particular focus on people living with HIV/AIDS (PLHIV), orphans and vulnerable children (OVC) and their caregivers. In addition, LIFT aims to provide global leadership and strategic learning to the field of economic strengthening (ES) through development of guidelines, trainings, and other tools to help vulnerable households—and those who serve them—engage in activities that enhance their economic and nutritional security.

Launched in Fiscal Year (FY) 2010 as a five-year Associate Award under the Financial Integration, Economic Leveraging, Broad-Based Dissemination and Support (FIELD-Support) Leaders with Associates (LWA) Cooperative Agreement, LIFT is managed and led by FHI 360 (formerly AED) and implemented with the support of CARE International (CARE) and Save the Children USA (Save). The goal of the LIFT project is to build the continuum of care for PLHIV and other vulnerable households by increasing their access to high quality, context appropriate, market-led economic strengthening, livelihood and food security (ES/L/FS) opportunities that improve their economic resilience and lead to better health. An essential component of LIFT's approach is establishing links to integrate economic strengthening and food security activities within HIV/AIDS Nutrition, Assessment, Care and Support (NACS) programs and health systems improvements.

LIFT meets the customized needs of USAID and other USG agencies by undertaking assessments that provide concrete recommendations for strengthening existing ES/L/FS programs as well as identifying strategic opportunities for new investments. LIFT works with implementing partners to strengthen their capacity to design and implement livelihood and food security interventions that sustainably improve the economic resiliency and health of their beneficiaries. Through these approaches LIFT aims to heighten the impact and sustainability of investments made by USAID, the President's Emergency Plan for AIDS Relief (PEPFAR), Feed the Future (FtF), the United States Department of Agriculture (USDA), the Centers for Disease Control and Prevention (CDC), and the Peace Corps, as well as local governments, civil society, and the private sector.

2. OVERVIEW AND KEY ACTIVITIES

During Fiscal Year 2012, LIFT made significant progress towards ongoing program implementation in several countries to improve the impact of PEPFAR-supported food security, livelihood and economic strengthening programs and build the continuum of care for people accessing NACS. The period under review is defined by an intensified focus on integrating ES/L/FS services as a component of the NACS program approach. Toward this end, LIFT participated in several key global activities, positioning itself as a knowledge and tools leader, developing a working model for the integration of ES/L/FS into NACS; documenting the current state of evidence linking HIV, nutrition, food security and economic status; contributing to the finalization of a globally harmonized indicator set for HIV and food security; and launched an inventory of technical assistance tools. LIFT

developed more meaningful partnerships with the Food and Nutrition Technical Assistance Project 3 (FANTA 3); the Health Care Improvement Project (HCI); and the Strengthening Partnerships, Results, and Innovations in Nutrition Globally Project (SPRING) in order to maximize the TA support to countries in which these programs are present. LIFT also contributed towards knowledge dissemination through presentations at several important meetings, events and conferences to build awareness for the important intersections between economic strengthening activities, food security and nutritional status and highlighting emerging practices with the ability to increase income and assets for poor households and reduce their vulnerability. LIFT significantly increased its outreach and support to USAID missions and provided field-based technical assistance to a range of countries including Nigeria, Namibia, South Africa, the Democratic Republic of the Congo (DRC), Malawi and Lesotho. Throughout the period of performance, LIFT underwent significant staffing changes, increasing the human resource capacity of the project team in order to be responsive to increasing demand from USAID missions. This report presents LIFT's progress, highlighting key activities, successes and challenges, during this 12-month period of performance.

3. GLOBAL ACTIVITIES

3.1. Research, Monitoring & Evaluation (M&E)

3.1.1. *Collaboration with MEASURE Evaluation*

In October 2011, LIFT reengaged with MEASURE Evaluation (MEASURE) to better understand its current work, review past collaboration between LIFT and MEASURE and map out future collaboration on global and country specific activities. LIFT prioritized improved collaboration with MEASURE during this period; the activities carried out by LIFT and MEASURE Evaluation contributed to building knowledge and an evidence base for impacts of ES activities. The year's collaboration with MEASURE resulted in a literature review to identify evidence of linkages between ES interventions, household economic resilience, food security, improved nutrition, and HIV-related outcomes, as well as the development of a logic model showing the causal pathways for the possible outcomes and impacts of LIFT's activities on the economic resilience and food and nutrition security of vulnerable households. The projects identified a unique area for collaboration in the organization network analysis (ONA) approach, which MEASURE has used to understand and support organizational networks. The projects have engaged in joint in-depth planning to pilot this approach as a component of LIFT's work in FY 2013. The ONA will identify and map organizations for inclusion in a NACS-ES referral network, facilitate understanding of the current linkages and relationships within the network, and provide a baseline to understand the direct results of LIFT's technical assistance to strengthen the referral network. These activities are discussed more in depth in the relevant sections below.

3.1.2. *LIFT's Research Agenda*

MEASURE developed a logic model showing how LIFT's TA activities could impact the economic resilience and food and nutrition security of vulnerable households. With significant input and collaboration with LIFT, MEASURE Evaluation undertook a literature review, which identified evidence of linkages between economic strengthening interventions, household economic resilience, food security, nutritional status and HIV-related outcomes. LIFT also reviewed well-respected household economic strengthening and food security frameworks and developed a causal pathways model that maps the ways that provision, protection and promotion activities could impact household food security as well as

health and nutrition outcomes. The literature review, logic model and causal pathways model were disseminated through the FIELD-Support E-bulletin and posted on Microlinks in July 2012.

Building on these foundational documents, in Quarter 4, LIFT prepared for a consultative meeting to present and solicit feedback on LIFT's proposed approach to generating an evidence base for linking NACS clients with ES/L/FS interventions. The LIFT Evidence Base Meeting will take place in November and will bring together LIFT's key stakeholders to define LIFT's vision, discuss upcoming activities related to the roll out of NACS and ES/L/FS integration, and if time allows to identify specific action research questions as well as indicators and measures of successful project implementation.

During Quarter 4, LIFT also participated in a FtF briefing on the initiative's monitoring and evaluation (M&E) framework, which provided an overview of technical and geographic focus areas of FtF, briefing on their indicators, description of the collection and reporting of the indicators, and discussion on how the data are being used at the national and USG levels to inform future programming. Through this meeting, OHA and LIFT also learned of a resilience team within the Bureau for Food Security which is developing a methodology for measuring resilience. LIFT will explore possibilities for collaborations with this group in the coming year.

3.1.3. *Organizational Network Analysis (ONA)*

In February, LIFT and MEASURE Evaluation began exploring the possibility of using MEASURE's ONA in LIFT's activities, and preparations for a pilot began in August. LIFT envisions that the ONA will be a key component of its initial engagement in selected pilot sites as a way to understand existing services and activities related to NACS and ES/L/FS integration within a catchment area. The ONA will also provide a baseline measure of client referrals between organizations and the overall strength of the network prior to LIFT's support. MEASURE explained the process that would be jointly undertaken to complete an ONA in a LIFT country, including fulfilling internal review board (IRB) requirements, customization of the tool for ES data collection and analysis, and sharing findings with communities. A budget was developed for the pilot outlining the key costs associated with conducting the analysis in one country (two sites). It is expected that during the initial ONA, MEASURE will train the LIFT team on this tool to enable LIFT to independently conduct subsequent ONAs.

LIFT identified Malawi or DRC as top choices for this initial joint endeavor and anticipates finalizing the country selection as well as an implementation plan in the second quarter of the next fiscal year.

3.1.4. *Harmonized Global Indicators for M&E*

From February 1-2, 2012, consultant Gary Woller represented LIFT at the World Health Organization (WHO) Consultation for Completion and Dissemination of Harmonized Global Indicators for Monitoring and Evaluation of Nutrition and HIV Activities in Geneva, Switzerland. Prior to this meeting, LIFT assisted in the development of the food security indicators to inform this global indicator list through various meetings and consultations starting in 2010 and helped to finalize these global indicators through this meeting and subsequent discussions. In coordination with USAID, LIFT anticipates field testing the final food security indicators in subsequent reporting periods.

3.2. Knowledge Management

3.2.1. *Coordination with Broader Research and Learning Partner Community*

Throughout the year, LIFT engaged several different potential research and learning partners to expand and accelerate dissemination of best practices in ES/L/FS. Access to ES/L/FS services is an essential component of poverty alleviation. To this end, LIFT's work over this year has centered on the advancement and dissemination of ES/L/FS knowledge and integration of these services in the context of nutrition and HIV care. LIFT worked in close partnership with HCI, SPRING and FANTA-3, and developed or strengthened collaborative relationships with the Technical and Operational Performance Support (TOPS) program, the Strengthening the Economic Potential of the Ultra Poor (STEP UP) initiative, the Market Facilitation Initiative (MaFI), the Health and Market Development (HAMED) working group, Tearfund and Catholic Relief Services (CRS). This approach has allowed LIFT to learn from other implementing partners to develop an inclusive approach to integrate ES/L/FS into NACS programming. The LIFT team is focused on understanding and working with proven tools and approaches, modifying them to fit the unique needs of the LIFT program.

LIFT's Technical Director joined the Advisory Group of Small Enterprise Education and Promotion (SEEP) Network's STEP UP initiative. STEP UP represents more than 130 national, regional and global organizations exploring cross-learning between financial, enterprise development and human service providers to complement each other's efforts to assist ultra-poor households in moving out of poverty. One of the key products under development is the creation of an Economic Strengthening for the Ultra Poor (ES4UP) "wiki" and one-stop-shop of resources (including documents, evaluations, training manuals and tools from all relevant fields) that will be shared with the larger development community through this knowledge management platform.

LIFT continued its engagement with the TOPS program by participating in the Knowledge Management Working Group. This resulted in an invitation from TOPS to LIFT to present at its semi-annual meeting that will be held in November 2012.

LIFT was approached by a newly formed HIV and Livelihoods Working Group made up of several organizations, including Tearfund and CRS, to share their experiences and evolve the state of practice related to integration of HIV and economic strengthening. The working group shared a concept note for a learning initiative and community of practice. LIFT provided preliminary feedback on the concept and identified potential linkages to TOPS, SEEP, HAMED and other similar technical working groups (TWGs). LIFT will continue to explore potential collaboration with this working group moving forward.

Members of the LIFT team met with Gina Chowa to learn more about the research study she was leading entitled "Impacts of Enhanced Economic Capability on HIV Positive People in Zambia." The team found potential areas for future collaboration and will explore this connection as LIFT's research and work in Zambia moves forward.

As a result of LIFT's collaboration with FANTA-3 in July 2012 during the International AIDS Society (IAS) satellite session on NACS, the team was contacted by Aranka Anema from the University of British Columbia regarding work they are doing to further indicators and measurements related to HIV, economic strengthening, food security and livelihoods programming. In the coming months, LIFT will determine if there is an appropriate scope for collaboration.

In July 2012, LIFT also met with Sera Lewis Young from Cornell University who is part of a National Institutes of Health (NIH) grant to study which ES interventions improve food security and parental behaviors and have an effect on Prevention of Mother-to-Child Transmission (PMTCT). In Uganda, Mozambique and Kenya, Cornell is partnering with CARE to identify the barriers preventing access to

PMTCT care for women; in Uganda, they are looking at the effect of food supplements for pregnant women. As LIFT begins ongoing work in some of these countries, we will coordinate to determine how we might collaborate and add value to this research.

3.2.2. *LIFT Livelihood and Food Security Conceptual Framework*

During Year 2, LIFT completed the LIFT Livelihood and Food Security Conceptual Framework and used Year 3 to present, revise and refine the framework to make it a more relevant tool for development practitioners. The LIFT Framework was published on the Microlinks website as a key resource for the event entitled, “Lessons Learned from Sequenced, Integrated Strategies of Economic Strengthening of the Poorest.” LIFT participated in the event, which focused on innovative, sequenced programming interventions to help the ultra poor transition from meeting their most basic needs and move towards economic self-reliance.

3.2.3. *Standards of Practice*

The LIFT Standards of Practice are a list of best practices that correspond to specific or ongoing stages of economic strengthening interventions—program planning, beneficiary selection, implementation, monitoring and evaluation, and knowledge sharing. LIFT has continued to revise and refine the Standards of Practice to improved their applicability and usefulness.

3.2.4. *Development of LIFT Website*

During this year, LIFT revisited the need for a web presence and platform for knowledge dissemination and initiated the process of developing a project website. As LIFT grows and matures, the project envisions a website which allows LIFT to publish project-developed materials; provide additional tools and resources to a community of program implementers; share updates on project work; disseminate emerging findings of the LIFT research and learning agenda; and provide information for USAID missions, practitioners and host governments who are interested in partnering with LIFT. The LIFT website will be complemented by our continued presence on several sector specific hubs including the STEP UP Wiki portal, MaFI, Microlinks, Agrilinks, CGAP Gateway and OVCnet.

LIFT prepared a web development strategy with the FHI 360 DesignLab based on the evaluation of several cost-effective, flexible and project-managed content management website platforms. In September, LIFT purchased the domain www.theliftproject.org; it is expected that LIFT will work with the FIELD-Support Knowledge Management team and other internal and external stakeholders to finalize plans and launch LIFT’s website presence in the first quarter of the next year.

3.2.5. *Development of Technical Briefs*

LIFT developed two technical briefs during this year which were disseminated at public events including the USAID OVC Forum, the CORE Group’s NACS state-of-the-art technical meeting, the IAS Conference. The first brief was developed to describe LIFT’s proposed approach to integrate economic strengthening as a component of NACS. The second brief discusses the relevance and importance of ES activities in the context of OVC programs and highlights LIFT’s technical assistance approaches for USAID missions and OVC program implementers.

3.2.6. *NACS Guidance Manual*

LIFT contributed to the FANTA-3 NACS Guidance Manual by writing a chapter on economic strengthening. LIFT's contribution to the guidance manual outlines the key considerations and elements associated with developing ES referral systems as a component of NACS, focusing on the key aspects of successful referral systems. The guidance also helps implementers to ensure that ES activities that are linked with NACS are appropriate to the needs and vulnerabilities of PLHIV, OVC and caregivers.

3.2.7. *Permaculture Literature Review*

LIFT conducted a literature review, for internal project use, to understand permaculture activities and the factors that influence permaculture's success or failure, in various contexts. In addition, the review aimed to understand what evidence currently exists positively linking the contributions of permaculture to household dietary and monetary needs, as well as considerations for replication and sustainability. The review found that limited research exists to definitively answer these questions, and LIFT will feed these findings into the broader LIFT research and learning agenda with the aim of increasing the evidence base for the effectiveness of permaculture.

3.2.8. *Standardized Assessment Methodology*

In preparation for new country-level situation and opportunity assessments to analyze existing ES activities and identify opportunities for scale-up and replication, LIFT worked closely with consultant Ben Fowler to document and standardize the project's approach to the different types of assessments LIFT undertakes in support of USG missions.

LIFT developed a range of assessment planning and guidance tools as well as templates for assessment scopes of work (SOWs) and specific assessment deliverables that together will form an assessment toolkit to efficiently prepare for and carry out assessments that respond to the needs of missions and other partners in a timely and efficient manner. These tools build on the lessons and experiences of previous LIFT assessments and aim to bring a standardized process and approach to LIFT's assessment methods, allowing for increased comparability of assessment results across different countries.

3.2.9. *Household Economic Strengthening (HES) One-Day Training Development*

During the year, LIFT began defining the goals, objectives and content for a one-day introductory household economic strengthening (HES) training curriculum, based on LIFT's previous trainings to date. The technical team worked with consultant Ben Fowler to define the intended audience and scope of the training based on the anticipated training needs for upcoming TA in DRC and Nigeria. LIFT plans to field test the training course and based on the results, will adapt and roll it out in other countries and with other appropriate audiences in the coming months. The draft curriculum will be completed in the first quarter of next year and will likely be initially field tested in the Nigeria.

3.2.10. *NACS Technical Note*

LIFT contributed to the FANTA-3 NACS Technical Note, which is a brief document outlining the NACS approach to improve the nutritional status of individuals and communities. LIFT incorporated content related to the project's working model to integrate ES/L/FS activities into the continuum of care, and outlined considerations and key elements of a viable referral system to link NACS clients with community-based support services.

3.2.11. *Life in the Village Simulation Activity and Other Tools*

During Quarter 3, LIFT provided technical input on a learning simulation activity entitled, “Life in the Village,” developed by USAID’s Bureau for Food Security (BFS) and Microenterprise Development (MD) office. This activity was used in the USAID Agriculture Core Course in Bangkok in July 2012 to provide an opportunity for USAID mission staff to explore concepts around vulnerability and household decision making. Participants engaged around concepts of assets, shocks, financial services, food security and livelihood strategies for poor and vulnerable groups. This tool represents an exciting new area of potential LIFT collaboration with USAID’s BFS and MD office.

LIFT began to develop an inventory of ES/L/FS tools to identify knowledge assets that FHI 360, CARE, and Save have available and could be leveraged to support the implementation of LIFT roll out in different countries. In the next quarter, LIFT will identify a variety of tools and practices which will be instrumental as LIFT begins working at the community level to link NACS with ES/L/FS services. The inventory will allow LIFT to speed progress towards implementation and TA support. Initial tools identified include a situational analysis, diagnostic tools, an organizational score card and referral tools.

3.3. External Presentations and Outreach

3.3.1. Presentations and External Meetings

SEEP Conference (2011)

At SEEP’s Annual Conference in October, LIFT presented a draft of the Ethiopia *Promising Practices in Linking Livelihood Strengthening and Clinical Services* discussion paper to the HAMED working group. The presentation focused on key findings, including promising practices, challenges and considerations, which came out of Save the Children’s research on linking clinical HIV/AIDS care with economic strengthening services.

Global Microcredit Summit

In November, as part of LIFT’s engagement with the SEEP HAMED working group, LIFT presented at the 2011 Global Microcredit Summit in Valladolid, Spain. The workshop provided microfinance practitioners an opportunity to share and discuss how they could engage with HAMED and what they would like to learn from the SEEP community of practice. The objectives of LIFT’s session were to present an introduction to LIFT, provide an overview of the LIFT Ethiopia referral case study, and engage the microfinance community in a discussion about linkages from healthcare providers to ES activities. The presentation highlighted opportunities to cross-subsidize grants to the ultra poor through graduation models that include improved access to healthcare. The role of savings and micro-insurance were also highlighted as providing access to capital following a health shock, protecting productive assets and facilitating access to healthcare. LIFT also discussed the three approaches (unified, parallel and linked models) used by health programs for delivering access to ES programs and the need for further engagement from economic strengthening practitioners to make these approaches effective.

Economic Strengthening and Skills Building for OVC Practitioners (OVC Task Force)

On November 2011, LIFT, in collaboration with Jason Wolfe, delivered the third in a series of three workshop presentations on HES for OVC programs for the Interagency OVC Task Force. The workshop focused on examining what economic strengthening outcomes are feasible and realistic in the context of

OVC; how to develop causal models relevant to economic strengthening and OVC; reviewing outputs, outcomes, and impacts for various economic strengthening intervention types; and identifying key indicators relevant to economic strengthening for OVC used in different contexts.

CORE Group Fall Meeting Presentation

In October 2011, LIFT attended the CORE Group's two-day fall meeting and presented as part of a panel titled, "Unleashing the Power of Women and Girls: A Summary of Economic Empowerment Approaches." LIFT's presentation provided a brief overview of the project, introduced appropriate ES models and approaches, and discussed LIFT's role in linking economic strengthening and health programs taking into account gender considerations.

NACS State of the Art (SOTA) Meeting

LIFT highlighted the need for integration of economic strengthening as a part of the continuum of clinical care at the NACS State of the Art (SOTA) technical meeting convened by the CORE Group in February 2012. The two-day event provided an overview of current thinking and a forum for discussion on the predominant issues surrounding the design, implementation and evaluation of NACS programming. LIFT presented as part of a panel entitled, "Promising Practices: Lessons from the Field," and shared recent research in Ethiopia and Namibia on promising practices for linking ES with clinical services in the context of HIV programs, as well as LIFT's evidence-based approach for building these linkages through referrals. LIFT discussed its plans to incorporate ES and livelihoods activities as a component of NACS by establishing and supporting referral systems in several countries.

USAID OVC Resource Fair

LIFT was asked to participate in USAID's OVC Resource Fair in February 2012 in Washington, DC to discuss the project's objectives and explore areas of potential interest with OVC focal points from a range of countries as part of the OVC TWG's OVC Forum. LIFT met with mission staff from Nigeria, South Africa, Mozambique and DRC and discussed potential LIFT strategic support and TA.

Quarterly OHA Nutrition Collaborative Meetings

In the first half of this year, LIFT participated in the first two USAID nutrition coordination meetings to enhance collaboration among nutrition-focused TA and implementing partners (FANTA-3, SPRING, HCI and LIFT). The events provided a platform for sharing project objectives and priority activities, and allowed partners to identify synergies and areas of potential coordination in terms of technical and country activities. For the first meeting, LIFT provided input on the agenda and structure, and presented an overview of current and upcoming LIFT activities. The group agreed to participate in quarterly headquarters meetings and establish joint country level temporary duty trips (TDYs), where possible, to enhance coordination and identify specific activities for collaboration. At the second coordination meeting, LIFT presented on their positive experiences testing the coordinated approach between LIFT, FANTA and HCI in recent field visits in South Africa and Malawi.

International AIDS Society Conference (IAS) Satellite Session Support to FANTA-3

LIFT participated in several planning meetings with FANTA-3, OHA and other nutrition experts in preparation for an IAS Conference satellite session on NACS. The two-hour session, entitled "Integrating Nutrition Assessment Counseling and Support into HIV Services" took place in July 2012 and provided

policy makers, donors, program designers and implementers, clinicians, and PLHIV with access to the knowledge and experience of technical and programmatic experts implementing NACS.

International AIDS Society Conference Abstract

In a joint venture with Development Associates, Inc., LIFT submitted an abstract for a skills building session at the IAS Conference in Washington, DC in July 2012. The abstract was entitled *Economic Strengthening and Improving Livelihoods for People Living with HIV—Moving Past Jargon and Handouts to Programming Based on Evidence*, and the session aimed to increase health practitioners awareness and skills to effectively program or link to ES activities for HIV affected households by providing practical information to support implementers in designing and implementing livelihoods activities. While the abstract was not accepted by IAS, the development process helped the team flesh out new approaches to building the capacity of health implementing partners to provide or link to appropriate ES services.

STEP UP SEEP Group Engagement

LIFT participated in a planning meeting of SEEP's Strengthening the Economic Potential of the Ultra Poor initiative (STEP UP). The initiative will advance learning in this important area and will develop guidelines, tools and training methodologies to be shared with the larger development community. STEP UP will refine graduation and livelihood approaches—already showing promise with ultra poor households—for replication in new contexts. STEP UP will also explore other emerging ultra poor approaches, such as income support (conditional cash transfers), integrated health services, micro-insurance and savings programs to identify how these approaches can best be structured to help the ultra poor accrue, consolidate and protect tangible and intangible assets. The STEP UP initiative is relevant to LIFT's work to identify appropriate economic strengthening interventions for NACS clients. Throughout the year, LIFT has become a more active partner in the STEP UP Group.

Cracking the Nut Conference Participation

In June, LIFT team members participated in a two-day conference, Cracking the Nut: Attracting Private Sector Investment to Rural and Agricultural Markets. This participation facilitated connections with rural and agriculture practitioners, including Opportunity International, as well as other leading experts in the field. LIFT staff participated actively in sessions and contributed to discussions on the linkages of rural and agriculture finance and private-public partnerships to vulnerable populations. While the focus was on small holders, the definition of small holders discussed during the conference was very broad and identified gaps and opportunities for initiatives such as CGAP to improve common terminology and typology of these for practical programming applications. The issue of smallholder readiness—in terms of assets and risk profiles—to engage in private sector approaches is also relevant for LIFT's mandate.

SEEP Conference (2012)

LIFT partnered with Development Alternatives, Inc. (DAI) to lead the development of a joint abstract for a workshop to be delivered as part of the annual SEEP conference in November 2012. The abstract was entitled "Effective Economic Strengthening for the Ultra-Poor Affected by HIV" and aimed to present tools to assist practitioners to understand the unique vulnerabilities affecting the ultra-poor and implement targeted ES programming for HIV-affected households. The participatory session provides a framework and resources to assist ES practitioners to tailor their activities to the needs and constraints of vulnerable households. The submission was accepted as part of the "Strengthening the Economic Potential of the Ultra Poor" track and will be presented in November 2012.

3.3.2. Marketing and Outreach

LIFT Outreach Materials

LIFT developed and finalized a set of outreach materials which summarize LIFT services and expertise in a clear and compelling format so that USAID missions and other key stakeholders can easily understand LIFT project capacities and how they might be used to meet mission priorities. The final product is a series of two-page briefs describing LIFT technical assistance, including practical applications from project experience in four key areas: NACS ES/L/FS Integration, Opportunity Assessments, Program Quality and Implementation Support, and M&E Support. LIFT used these materials to engage in discussions with USAID missions in Malawi, DRC, Namibia and Lesotho to help them understand how LIFT's TA and support can integrate ES/L/FS activities as a part of the continuum of care. LIFT plans to refine these tools based on mission feedback and as LIFT gains further programmatic experience in these key areas. These tools have also been translated into French and will be shared with the USAID mission in Haiti early next year.

4. COUNTRY SPECIFIC ACTIVITIES

4.1. Country Specific

4.1.1. Malawi

Description of Activities during the Year

LIFT began to engage with the USAID mission in Malawi in Quarter 3 to solidify plans for an assessment visit in late July. USAID Malawi confirmed their interest in meeting with LIFT to engage mission staff in various sectors and relevant in-country program implementers and to begin discussing a more comprehensive scope for LIFT support with NACS acceleration funds. LIFT held two calls with the mission and had several email exchanges to outline the objectives and scope of the visit as well as finalize the dates for the visit (July 23 to August 3). LIFT communicated with FANTA and HCI to ensure coordination during the TDY.

During Quarter 4, LIFT conducted its first trip to Malawi as part of a joint TDY with FANTA-3 and HCI. Through this trip LIFT conducted over 20 meetings and site visits with key stakeholders including USAID, civil society implementers, and the Government of Malawi (GOM) (Ministry of Health, Ministry of Gender, and the Department of HIV/AIDS in the Office of the President and Cabinet). LIFT attained a clearer understanding of USAID, GOM and community-level priorities; common ES/L/FS approaches; and how these activities are linking with health and nutrition services, as well as gaps and challenges. The findings from these meetings informed preliminary recommendations to USAID/Malawi, which were shared at the out-briefing, and will form the basis of continued discussions with the mission to define LIFT's upcoming technical assistance activities.

LIFT began outlining its approach and plan for activities in Malawi including the efforts needed to finalize the district and site selection where the three projects will align their work to develop learning for the

collaborative approach as well as to understand possibilities for scale up in Malawi. LIFT intends to make significant progress in these areas in the next quarter as conversations with partners, country offices and the mission move forward.

Successes

Before the TDY, LIFT coordinated with HCI and FANTA, and throughout the joint TDY, the three partners were able to refine the objectives of the partnership, determine high-level tasks associated with strengthening the Malawian NACS equivalent, Nutrition Care, Support and Treatment (NCST), and extending the continuum of care in Malawi, identify which partner would lead each task, and present a coordinated technical assistance approach to USAID/Malawi and GOM. This joint approach has proven beneficial to all projects and the USAID/Malawi Mission.

During the TDY, LIFT met with health and ES/L/FS program implementers that are targeting vulnerable populations (including but not limited to HIV affected households) based on programs and activities identified by the mission and supplemented with LIFT research and contacts. This series of meetings resulted in identification of additional technical assistance needs as well as opportunities for future synergy to strengthen ES/L/FS support for HIV affected households. In addition, it helped LIFT to identify current linkages between ES/L/FS activities and NCST or other health services.

Challenges

Joint coordination between multiple partners has proven to be very beneficial for all implementing partners, USAID and the targeted beneficiaries. It does, however, take additional time to coordinate, as well as additional effort to balance all programs objectives and to identify areas of synergy. This additional coordination can lead to delays in certain reporting as all three implementing partners are working together to complete certain aspects of deliverables.

Learning

The joint TDY provided LIFT with a wealth of information about the local context, key ES/L/FS partners, the state of the NCST program and the priorities and areas of interest from the mission. The knowledge gained on this visit allowed LIFT to move forward in key areas, setting the stage for the piloting of LIFT's strategy at the community level in the next reporting period.

4.1.2. Nigeria

Description of Activities during the Year

LIFT held discussions with USAID/Nigeria on future long-term programming including a face-to-face meeting with Sola Onifade, OVC Program Manager while on temporary duty in Washington, DC in February 2012. The meeting with Sola led to LIFT drafting a work plan with key activities to program the remaining funds from the Nigeria mission and anticipated COP 12 funds. The three areas of focus for LIFT's future work in Nigeria include: (1) building the capacity of OVC implementing partners to deliver appropriate ES activities; (2) strengthening knowledge management of ES programs by OVC

implementing partners; (3) strengthening linkages between OVC implementing partners and ES service providers, including the Government of Nigeria (GON) and the private sector. The draft work plan was presented to USAID/Nigeria at the April village savings and loan (VSL) training for comment. Based on the mission's feedback, LIFT further refined the Nigeria work plan and submitted the revised LIFT/Nigeria work plan to the USAID activity lead in Nigeria in August 2012.

Following the LIFT training in HES conducted for PEPFAR implementing partners in July 2011, LIFT identified the need for in-depth training in village savings and loans activities. As such, LIFT organized a VSL training that was held in April 2012 in Lagos, Nigeria for 24 OVC program implementers. Preparations included adapting and finalizing the training curriculum, tools and materials, engaging external trainers from VSL Associates, identifying participants in collaboration with USAID/Nigeria, locating a venue, and other relevant logistical and administrative tasks. Prior to the training, LIFT conducted a needs assessment to understand the capacities, context and interests of participants, allowing for the training to be customized appropriately. The training was delivered by consultants, Hugh Allen and Mark Staehle, two leaders in the area of VSL.

Following the VSL training, 15 participants indicated that their organizations would develop savings groups based on the training they received from LIFT. Organizations already supporting savings groups stated that they would provide additional follow-up training to their community based organizations on the VSL methodology.

During this year, LIFT also worked with the mission to complete the USAID/Nigeria Annual Portfolio Review Activity Summary Sheet for October 1, 2011 to June 30, 2012.

Successes

Key successes for LIFT during this period included delivering an in depth training on VSL to 24 OVC program implementers and submitting a detailed work plan to USAID/Nigeria.

Following the training 15 OVC implementers began to step down the VSL training to community based organizations and improving their existing VSL activities based on the training they received.

Challenges

While LIFT prepared the detailed work plan for activities Nigeria, there was discussion between USAID/Nigeria and LIFT about the actual budget available. Per USAID/Nigeria they had provided a total of \$800,000 for LIFT activities; however, only \$400,000 had been obligated to LIFT. It was not until September that both USAID/Nigeria and the USAID Office of Acquisition and Assistance (OAA) discovered that the additional \$400,000 in funds was not formally sent to USAID/OAA and was still in USAID/Nigeria. This continual back-and-forth caused delays in terms of potential programming of LIFT activities in Nigeria as it affected the scope of the work plan.

Learning

The PEPFAR implementing partners found the simulations of how VSL groups work to be the most beneficial part of the training and identified that additional sessions on how to monitor and evaluate VSL groups and how to use information management systems is needed. Adjustments will be made to the previous training to ensure that additional time is set aside for these topics. LIFT will also look at how to incorporate the topic of “integrating VSL groups into multi-sector programs” as this was identified as a missing topic. LIFT will use this feedback to determine how to adjust future trainings on VSL and other similar trainings.

4.1.3. Namibia

Description of Activities during the Year

In November 2011, LIFT and the Namibian Alliance for Improved Nutrition (NAFIN) held the “Collaborating to Improve Health and Nutrition through Livelihoods and Economic Strengthening” conference, a high-level event that brought together a multi-sectoral group of stakeholders to review, discuss and provide feedback on the recommendations of LIFT’s previous assessment report. The event also provided an opportunity to explore strategies for linking NACS clients with livelihoods and other economic strengthening and food security programs to inform LIFT’s upcoming activities.

Conference participants represented public, private, donor and civil society sectors active in programs related to nutrition, HIV/AIDS care and support, food security and economic strengthening. Through the conference, LIFT and NAFIN created a forum for dialogue to discuss different types of programming options, including those recommended by the LIFT assessment, and to identify and create opportunities for collaboration, such as linking clients through referral systems. Additionally, through the conference, LIFT was introduced to a wide variety of potential partners that could be involved in the design and implementation of referral networks linking NACS patients with complementary services outside the clinic setting.

Following the conference, LIFT met with additional stakeholders in Namibia. The purpose of these meetings was to gather input on building linkages between NACS health facilities and economic strengthening and food security services and activities.

Following this TDY, LIFT finalized a detailed report of the proceedings, outcomes and key messages from its two-day stakeholder conference in Windhoek, Namibia, as well as a four-page executive summary of the meeting. LIFT also wrote and submitted a trip report summarizing meetings, site visits, contacts and key information gathered during the remainder of the trip and developed a strategy for LIFT’s approach engage communities and support systematic linkages between NACS sites and ES/L/FS services. These documents were used by USAID/Namibia to reach out to the Ministry of Health and Social Services (MOHSS) to discuss the next phase of LIFT’s engagement in Namibia.

LIFT engaged extensively with USAID/Namibia and FANTA-3 to plan for support in improving the access of NACS clients to ES/L/FS services in two initial sites. LIFT developed a draft engagement strategy which was sent to USAID/Namibia to inform their discussions with the MOHSS and

developed talking points for USAID to highlight LIFT's experience and capacity at a meeting with the MOHSS to determine which unit would provide coordination for LIFT activities.

Successes

LIFT planned and held a conference to encourage collaboration around nutrition and food security priorities, which was very well-received and attended by the Namibian Prime Minister as well as the U.S. Ambassador to Namibia and the USAID Mission Director.

Through continued dialogue with the USAID/Namibia and MOHSS, in late September it was agreed that LIFT activities would be coordinated by the Community-based Health Care Division of MOHSS, working in close coordination with the Department of Special Programmes/HIV and Nutrition Units. With news of this decision, LIFT began planning in-country support in November to continue discussions with USAID, FANTA, MOHSS as well as the Ministry of Gender Equality and Child Welfare and the Ministry of Agriculture, Water and Forestry to define concrete next steps for NACS ES/L/FS integration in Namibia, including selecting sites for the community-level work to integrate ES/L/FS into NACS and recruiting a local consultant.

Challenges

LIFT had planned to consult with MOHSS, obtain buy-in for its approach and identify the pilot sites early in Quarter 2 of the fiscal year; however, there were significant delays within the ministry that prevented activities from starting. LIFT was initially assigned an MOHSS counterpart in the Nutrition Unit. This unit was unable to take on this coordination role; therefore, meaningful engagement of the MOHSS was on hold until a replacement counterpart within another unit or division could be identified. The delays within the MOHSS in identifying the relevant unit and a point of contact to oversee LIFT activities persisted until the end of the fiscal year, and thus, the anticipated in-country MOHSS engagement and initiation of in-country activities was also significantly delayed. LIFT is hopeful that the recent decision about our point of contact within the ministry will pave the way for collaboration, buy-in and the start of LIFT activities early in the next year.

Learning

The November conference clarified which ES/L/FS activities are most relevant and promising in the Namibian context. The event and the subsequent meetings also highlighted significant enthusiasm for promoting NACS client referrals from clinical sites to economic strengthening and livelihoods programs. Participants recognized that doing so would address important structural needs; increase the sustainability and impact of current investments in clinical care; and be essential to providing a continuum of care for PLHIV, the food insecure, and other vulnerable populations. Stakeholders discussed several key opportunities for linking NACS to economic strengthening activities, which LIFT hopes to capitalize on in the next phase of its work in Namibia. Above all, it will be important to ensure community ownership in the initial stages of establishing the referral process, so that the program becomes self-sustaining. Identifying appropriate organizations to be involved in the referral network and ensuring they have the requisite financial, technical and administrative capacities to absorb new clients are key to implementing an effective NACS economic strengthening referral system. Since clinical sites do not have the capacity or time to coordinate referrals, the referral system must identify a coordinating

mechanism outside of the clinical setting. Within the communities in which NACS operates, potential referral coordinating agencies/organizations include government social workers, home-based care providers, NGOs and CBOs, or PLHIV support groups. Such entities are already providing informal referrals, and PEPFAR-funded organizations can play a critical role in strengthening their capacity.

Findings from a PEPFAR/MOHSS assessment of USAID-funded community and home-based care programs in Namibia conducted in April 2012, highlighted the need for support to strengthen the links between clinics and ES/L/FS activities, paving the way for LIFT's support in this area.

4.1.4. *The Democratic Republic of the Congo (DRC)*

Description of Activities during the Year:

Following the submission of a draft scope of work and budget to support the implementation of a NACS ES referral system in the DRC at the end of Year 2, LIFT continued discussions with USAID/DRC around establishing a new FIELD-Support associate award for LIFT activities. After an in-person meeting in Washington, DC in February, the DRC mission informed LIFT that instead of establishing a new associate award, additional funds would instead be put directly into LIFT's award.

After receiving a draft SOW for high-priority LIFT activities from USAID/DRC in May, LIFT engaged in several discussions with the mission and USAID Washington to finalize plans for in-country support to determine how NACS could best be piloted in Kinshasa, as well as how LIFT could support PEPFAR implementing partner PATH's Integrated HIV/AIDS Program in the DRC/*Programme du VIH/SIDA Intégré au Congo* (ProVIC).

In September, LIFT carried out a joint technical assistance visit with FANTA-3 to DRC, building on the previous work in the country and setting the stage for the roll-out of NACS. Both projects worked with USAID/DRC, CDC and Government of DRC (GODRC) counterparts to define site selection criteria which were used to identify 11 likely sites for initial implementation of NACS and conducted site visits to selected health facilities to understand their current nutrition services and referral processes. Through these site visits, LIFT also gained an understanding of community-level networks and ES/L/FS activities surrounding selected sites which will inform the integration of community services into NACS. LIFT consulted with national and provincial program implementers and stakeholders to gain a deeper understanding of broader ES/L/FS activities and services that could be linked with NACS. In the next reporting period, LIFT will also work with the mission to develop a full SOW and budget for activities to be implemented with NACS acceleration funds designated for LIFT.

From September 24 to October 5, LIFT provided TA and training to PEPFAR partner PATH/ProVIC and selected sub-grantees to improve their ES/L/FS interventions to include village savings and lending association (VSLA) programming. LIFT conducted a master training-of-trainers in VSLA programming to equip grantees with the basic knowledge and skills to effectively implement these activities, deliver training to program beneficiaries, and monitor and evaluate these initiatives. LIFT then delivered initial one-on-one TA to each organization to develop VSLA strategies and provided guidance to help implementers measure the effectiveness of VSLA activities. This TA resulted in sub-grantee-specific

action plans to implement VLSA activities, co-developed by LIFT and ProVIC sub-grantees. LIFT will provide ongoing strategic support to ProVIC, led by LIFT sub-grantee CARE through their DRC office.

Based on the outcomes of the technical assistance visit, LIFT plans to work with the mission and FANTA-3 to develop an implementation plan for the roll-out of NACS, including the integration of ES/L/FS programs in selected communities.

Successes:

LIFT and FANTA-3 made significant progress towards rolling out NACS in DRC, including selecting sites for the initial phase of the work and agreeing to key steps in the process with USAID/DRC and the Ministry of Health (MOH). The work carried out in this trip strengthened FANTA-3's and LIFT's relationships with USAID/DRC, GODRC, donors and civil society partners working on HIV, nutrition, food security and livelihoods. LIFT conducted a successful training of trainers for ProVIC and its grantees in VLSA programming to help them move away from their reliance on grants, training and subsidized credit and be able to implement more strategic, sustainable HES activities in accordance with LIFT's standards of practice and PEPFAR guidance.

Challenges

Prior to the training, LIFT emphasized to ProVIC the importance of allocating the necessary resources and staff to effectively oversee this new approach to ensure financial transparency in the savings mobilization and lending activities, as well as to improve the sustainability of these services and demonstrate results in the short amount of time remaining in their project. LIFT will continue to work with ProVIC to ensure clarity regarding the resources needed as well as to agree on the vision, technical approach and intended outcomes for these activities. LIFT will continue providing the additional TA and support required to ensure the successful implementation of VLSA activities by ProVIC grantees.

Learning

This is the first time FANTA and LIFT will concurrently start operations and implementation of NACS support. This offers a unique opportunity to build synergies, conduct joint work planning for the roll out of NACS in selected sites, and reduce duplication of efforts. This efficiency has already been demonstrated in this technical assistance trip through engagements with stakeholders, particularly the MOH. Both projects were able to meet with National Nutrition Program/*Programme National de Nutrition* (PRONANUT) and National HIV/AIDS and STI Control Program/*Programme National de Lutte contre le VIH/SIDA et IST* (PNLS) concurrently to present the overall concept of NACS, including the ES/L/FS continuum, and jointly select sites for the NACS pilot. The integrated planning with the MOH reduced the amount of time the MOH had to spend engaging with and understanding each project individually, understanding how they are related, and selecting operational sites for each project's work.

Through the September TA visit, LIFT also gained a deeper understanding of the prevalence and sophistication of various economic strengthening services. Currently, there are very few social protection programs and no individual government subsidies or cash transfers, which limits the

availability of provisioning services. The lack of social protection programs in DRC will pose a challenge for LIFT, as clinical workers indicated that approximately 70% of the HIV positive clients they see would fall into the "provisioning" category on the LIFT framework. On the other hand, the country has a robust network of microfinance providers offering both savings and credit services in urban and some peri-urban areas. Additionally, cooperatives exist that provide financial services across more rural areas of the country, but their financial intermediation appears to be weak.

Given the limitations of ES/L/FS services in many of the communities visited, LIFT will need to strike a balance to ensure its technical assistance supports those services that are more tailored and specific to HIV-affected, malnourished populations coming through the clinical setting, but also work with a lighter touch to support some approaches that are more inclusive of the community at large.

4.1.5. Ethiopia

Description of Activities during the Year

LIFT finalized the Ethiopia *Promising Practices in Linking Livelihood Strengthening and Clinical Services* research report early in the year. The report was shared with USAID/OHA and the PEPFAR Care and Support TWG for input, and feedback was received in November 2011. LIFT finalized this report based on this feedback. Specifically, LIFT included comprehensive information about each of the three project cases and the process each used for linking clinical patients to economic strengthening services as well as a more streamlined summary and presentation of challenges, promising practices and conclusions.

Successes

Presentation of the report at the NACS SOTA event in February 2012 and at the Global Microcredit Summit in Valladolid, Spain in November 2011 has helped position LIFT as a technical leader in this area.

Challenges

None.

Learning

The main learning for this period came from the publication. The research found that having case managers, community volunteers and a coordinating committee can improve the quality of referrals by facilitating follow-ups of lost referrals due to the depth of reach by the volunteers, and increased engagement of ES actors due to the role of the coordinating committee.

4.2. Other Countries

4.2.1. Kenya

Following the NACS SOTA in February 2012, LIFT met with the Brian Njoroge of FHI 360's Nutrition and HIV Program (NHP) to gain insight into possible integration of ES activities into the NACS framework in Kenya. Mr. Njoroge noted that ES is the missing component in HIV/nutritional care but implementers need support to ensure use of best practices, scale-up and linkages with the health sector.

Tim Quick, the LIFT Agreement Officer's Representative (AOR), traveled to Kenya in June and discussed potential LIFT TA with USAID/Kenya mission staff, including strengthening the community component of NACS, particularly in relation to ES/L/FS. Potential areas of support for LIFT from this discussion include LIFT conducting a preliminary assessment of ES/L/FS activities and making recommendations on how to strengthen that component of NACS programming. LIFT reached out to USAID/Kenya in May to propose a July scoping visit but the details were not finalized before LIFT traveled to Malawi.

LIFT continued to reach out to the mission to request a conference call to discuss possible LIFT support in Kenya, though a call was never agreed to by the mission. LIFT is tentatively planning to include a stop in Kenya during its next trip to the region.

4.2.2. Tanzania

LIFT participated in multiple discussions with Deborah Ash of the FANTA-3 project to identify possible areas of collaboration with FANTA-3 and DAI's IMARISHA project efforts around NACS and improving ES/L/FS services. Areas where LIFT support would add value to the existing projects include supporting referral systems to link ES/L/FS services with NACS clients and conducting studies or operations research to better understand the impacts and cost-benefits of various HES activities. LIFT also engaged in discussions with DAI's home office team to discuss potential areas of collaboration on the IMARISHA project.

At the request of USAID/Tanzania, LIFT conducted a review and feasibility analysis of a series of concept notes which were submitted to USAID/Tanzania by Cheetah Development Inc. related to developing farmer cooperatives, improving relevance and access to markets for these cooperatives and establishing community health insurance during the last quarter of the year.

LIFT will continue its collaborative discussions with FANTA-3 and IMARISHA in the next year and will continue discussions with USAID/Tanzania on LIFT programming opportunities in Tanzania, possibly including a stop in Tanzania on an upcoming trip to the region to discuss potential areas for LIFT support with the mission and other key stakeholders.

4.2.3. South Africa

In July, LIFT participated in a joint TDY with FANTA-3 and HCI to co-facilitate a workshop with the National and Provincial Government Nutritionists to develop plans to strengthen their existing nutrition work to include more components of NACS.

Prior to the workshop, LIFT participated in meetings with USAID, CDC, and the Department of Health and visited a hospital to test FANTA-3's NACS facility rapid assessment checklist. The team found that nutrition is largely addressed at the hospital level, but South Africa is introducing a new cadre of nutritionists who will work at primary health care facilities. The workshop finished with the Provincial Nutrition Managers developing next steps for strengthening the NACS work in their areas.

LIFT participated in an initial in-country meeting with USAID/South Africa to discuss their interest in LIFT technical assistance to integrate ES/L/FS into the planned roll-out of NACS in all nine provinces. In FY

2013, LIFT will continue discussions with the USAID/South Africa on strengthening and integrating community and ES/L/FS linkages within the South African NACS model.

4.2.4. Lesotho

In September 2012, LIFT, FANTA-3 and HCI traveled to Lesotho to assess opportunities to integrate NACS into HIV care and treatment services, such as quality improvements of NACS services including referrals of NACS clients between health care facilities and ES/L/FS support. The team met with various stakeholders, including representatives from government, the United Nations, NGOs and service implementers, to identify key priorities for a joint work plan. Upon the conclusion of the rapid appraisal, the team carried out debriefs with USAID/Lesotho and the Ministry of Health and plans to debrief USAID/Washington in October to share lessons learned and discuss next steps. The team is drafting a joint work plan to improve the health and nutritional outcomes for mothers and children affected by HIV in Lesotho to be submitted in January 2013. Technical assistance efforts will provide a holistic and practical approach that identifies and prioritizes constraints to be addressed to improve PMTCT performance. This integrated assistance model will focus on a two pronged approach. The first part of the TA will strengthen the knowledge and awareness of government and implementing partners at the national level on the provision of maternal and child health services focusing on nutrition, food and livelihood security best practices and their dissemination. The second part of the TA will build the NACS capacity of selected demonstrational sites within a district through a series of complementary interventions that will be initially led by the quality improvement team. This complementary approach will use the quality improvement process to gather both quantitative and qualitative information to understand PMTCT opportunities as well as prioritize nutritional and livelihoods constraints to exploiting those challenges. The integrated assistance model has been designed to systematically improve the quality of PMTCT care provision with an eye towards achieving sustainability and developing robust indicators to effectively track performance and outcomes.

4.2.5. Haiti

Several members of LIFT's team began engagement at the end of FY 2012 with USAID/OHA, USAID/Haiti, SPRING, HCI and FANTA-3 in preparation for a Haiti NACS workshop scheduled in October 2012. The workshop will review initial findings from SPRING's evaluation of nutrition programming in Haiti, with LIFT scheduled to present in the workshop on how ES/L/FS services can be integrated within the NACS continuum of care. Preparations included the development of a scope of work for LIFT's representative at the workshop, joint calls with the various planning partners, feedback on the workshop agenda, translation of LIFT materials for local dissemination of project resources, and drafting of the presentation for LIFT's contribution to the workshop. LIFT also attended a meeting focused on reviewing initial findings from SPRING's Haiti NACS rapid assessment and draft workshop objectives.

4.2.6. Uganda

In February, LIFT met with Robert Mwadime of FHI 360's Community Connector Program in Uganda to discuss the objectives of LIFT and the Community Connector project and to identify potential areas of collaboration with this new, comprehensive program. Mr. Mwadime requested some tools to assess

poverty levels at the household and LIFT shared the Grameen Bank's progress out of poverty index and the USAID poverty assessment tool for Uganda. Based on input from USAID/Washington, LIFT has not yet pursued discussions on LIFT support with the Uganda mission, but plans to deepen collaboration with the Community Connector Program and the USAID mission in the next reporting period.

5. OPERATIONAL

5.1. Staffing

5.1.1. *LIFT Program Staffing*

During this fiscal year the LIFT project continued addressing staffing needs by filling previously open and new positions. The project team used these changes as an opportunity to better align staffing with the current direction of the LIFT program. During this year LIFT recruited for a Technical Director, Technical Specialist, M & E Specialist and a Program Associate.

In January, technical specialist Ben Rinehart left the LIFT project to become the Chief of Party for a FHI 360 ES program that resulted from a LIFT assessment in Swaziland; in March, Clint Curtis, program associate, left FHI 360. Based on the identification of individuals for the positions of Technical Director, M&E Specialist, Program Assistant and Program Manager (a new position), Barbara Monahan, Acting LIFT Project Director, completed the transition of her responsibilities to the Technical Director and Program Manager

Meaghan Murphy joined the LIFT project as a Food Security and Livelihoods Specialist in April. Since starting with the project, Ms. Murphy has provided critical support to LIFT's global activities including spearheading activities in Malawi, providing oversight in the development of project outreach materials, making linkages between Life in the Village and LIFT, providing technical input in the development of the literature review and causal pathways model, and leading the development of the LIFT website.

Jacky Bass joined the LIFT project as the Technical Director in July. This position was identified earlier in the year as a need to help the LIFT technical and learning agenda move forward. Since starting with the project, Ms. Bass has been critical in moving the LIFT team forward in the roll-out of the LIFT program and the cultivation of strategic relationships with USAID missions and implementing partners. Ms. Bass is leading the roll-out of LIFT into three countries through the end of the program.

Cheryl Tam joined the LIFT project as Program Assistant and started working with the project in August. Since starting with the project, Ms. Tam has been providing critical administrative and programmatic support to the entire LIFT team.

Clinton Sears joined the LIFT project at the end of September to lead the research and M&E aspects of the project and immediately began work with the LIFT team to plan for the upcoming LIFT consultative meeting on building an evidence base.

Laura Muzart, who previously provided discrete support to the LIFT project, was identified and hired for the position of Program Manager and will be overseeing the operational and contractual components of the project. Ms. Muzart will join the LIFT team in October of the new fiscal year.

5.1.2. *Finalize LIFT Work Plan and Budget*

LIFT developed a three-year work plan and corresponding budget to guide its work for the remaining three years of the project and initially presented these documents to the AOR at USAID on October 19, 2011. The revised work plan reflects the increased focus on developing linkages between NACS sites and ES activities as well as the LIFT research agenda. LIFT received feedback on the submission and continued to refine the project work plan and budget to reflect the needs/requests of USAID, including the possibility of a follow on LIFT II Associate Award which would affect the current project end date. A revised work plan and budget were shared with the AOR at USAID in March 2012 for discussion.

A revised work plan and corresponding budget were then submitted to USAID/OAA, with AOR concurrence, at the start of May 2012. The documents submitted provided a work plan through the end of the FY (a proposed revised end date), with the corresponding budget and requested a full obligation of the LIFT award to continue activities through the end of the fiscal year when it is anticipated that a second FIELD-Support associate award will be issued to continue LIFT activities. LIFT received verbal feedback from the OAA in June and again revised the budget and implementation plan to extend the period of performance through December 2012 as well as to include the expanded geographic coverage of LIFT. LIFT submitted an additional revised budget and implementation plan to USAID in July with a subsequent, final submission in September. These documents were submitted to USAID/OAA to request a full obligation of LIFT's award to continue activities through March 2013.

On September 25, 2012, LIFT received Modification #6 to the agreement. This modification increased the current LIFT obligation by \$1,656,862 to a full agreement obligation of \$4,136,862; modified the period of performance from 9/30/2009-9/30/2014 to 9/30/2009-3/31/2013; incorporated clauses from AAPD 11-01 Amendment #1 and AAPD 12-04; and approved a realigned budget for the remainder of the period of performance.

5.1.3. *Mickey Leland International Hunger Fellowship*

LIFT submitted an application through FHI 360 to host a Mickey Leland International Hunger Fellow to work with LIFT in Malawi as well in Washington, DC. The team identified a number of key technical and operational contributions that a fellow could make to LIFT's work both in Malawi as well as our larger evidence building and technical support agenda. In this next quarter, LIFT anticipates finding out if our application has been selected to move forward in this highly competitive process. If FHI 360/LIFT is selected as a host organization, the proposed fellow would serve as a Livelihoods and Food Security Coordinator for LIFT in the FHI 360 Malawi office during the first year of service and as a Livelihoods and Food Security Analyst as a member of the LIFT technical team in Washington, DC in the second year.

5.2. Deliverables

As per LIFT's cooperative agreement, LIFT prepared and submitted quarterly reports highlighting project progress and challenges throughout this period of performance. LIFT also submitted quarterly financial and accrual reports to USAID.

5.2.1. Quarterly Reports

- Quarterly Report #9 (FY2012, Quarter 1)
- Quarterly Report #10 (FY2012, Quarter 2)
- Quarterly Report #11 (FY2012, Quarter 3)
- Quarterly Report #12 (FY2012, Quarter 4)

5.2.2. Summary of Financial Reporting

SF425s

- SF-425 for FY2012, Quarter 1
- SF-425 for FY2012, Quarter 2
- SF-425 for FY2012, Quarter 3
- SF-425 for FY2012, Quarter 4

Accruals Reports

- Accruals Report for FY2012, Quarter 1
- Accruals Report for FY2012, Quarter 2
- Accruals Report for FY2012, Quarter 3
- Accruals Report for FY2012, Quarter 4

5.2.3. Additional Reports Submitted

- SA Joint TDY Report
- LIFT Implementation Plan

5.3. Core Partners

5.3.1. Save the Children

Due to internal restructuring at Save the Children, Lisa Parrot was transitioned off of LIFT early in the year to assume a new role within the organization. Ms. Ntongi McFadyen, Director for Integrated Financial Services and Urban Livelihoods, increased her engagement in the LIFT project by providing regular part-time support to LIFT from their Washington, DC office, and Gareth Evans maintained his regular involvement. Based on the needs of the project Save identified and hired Waddington Chinogwenya as their Africa Livelihoods Advisor. Save provided Waddington with an in-depth orientation of LIFT and continues to engage him in ongoing planning activities. Since joining the LIFT team part-time, Mr. Chinogwenya has provided critical support in global and in-country activities providing substantial input to LIFT especially with regards to livelihoods analysis and monitoring and evaluation of ES/L/FS activities.

During this year, Save contributed to the revision and finalization of the Ethiopia *Promising Practices in Linking Livelihood Strengthening and Clinical Services* report for submission to the Care and Support

Technical Working Group. This was then presented through LIFT (with SAVE presenting) at the Global Microcredit Summit in Valladolid, Spain. The session was sponsored by the SEEP HAMED working group.

Save has taken lead on LIFT activities in Nigeria; they supported the drafting of the LIFT/Nigeria work plan and managed the technical preparations for the OVC VSL training in Nigeria that took place in April.

Save has worked with the LIFT team to present LIFT and its approach to developing linkages to NACS within the larger health community. Save has presented LIFT at the NACS SOTA event, a NACS presentation in South Africa, and will be presenting at an upcoming SPRING-sponsored event in Haiti.

In August, Save hosted a LIFT orientation at the Save DC office for the new LIFT Technical Director and Technical Specialists. This one-day meeting with the LIFT team included some of Save key personnel from its Hunger and Livelihoods Department, TOPS project, and HIV/AIDS and Child Protection Department. The meeting also allowed staff at Save not working directly on the LIFT project to gain a deeper understanding of LIFT's evolving mandate and opportunities to support the project.

During this period, Save has continued to be a critical LIFT partner and has actively participated in weekly project meetings as well as the development of LIFT tools, materials and project deliverables. Save has also played an active role in LIFT recruitment, including the Technical Director, Technical Specialist and M&E Specialist.

5.3.2. CARE

At the start of FY 2012, Barbara Monahan and Ben Rinehart met with Laté Lawson, Director of CARE's Economic Development Unit, to discuss reengaging CARE in LIFT's future program activities. This was and remains a top priority for the LIFT team. While discussions were fruitful, CARE has had ongoing challenges in dedicating staff members to participate in LIFT activities. CARE proposed a part-time staff member, but could only staff the person in their Atlanta office. LIFT feels that the position should be based in DC to ensure synergy between the three implementing partners. Mr. Lawson has also had problems joining the LIFT Weekly meetings due to his travel schedule. On a regular basis this FY the LIFT team reached out to CARE to keep them up to date with LIFT activities.

Since August, CARE and LIFT have been able to engage more actively on a number of levels. In August, LIFT was able to engage CARE in the VSLA training conducted by LIFT for PEPFAR implementer ProVIC in DRC and will continue to provide strategic technical support, capacity building and oversight to ProVIC and its grantees to ensure effective VSLA implementation. CARE has also started to participate more actively in LIFT meetings (due to a more relaxed travel schedule) and has most recently provided LIFT with an inventory of potential tools to support LIFT's TA activities. CARE will be present at the upcoming LIFT Evidence Base Meeting in November.

CARE also submitted a work plan to LIFT highlighting three proposed knowledge management activities that CARE could undertake in support of LIFT's program activities. Based on changes in programming, LIFT will explore reengaging CARE in the coming year to discuss two of these activities which include (1) a review of the State of Practice for programming aimed at improving the livelihoods of vulnerable populations, especially people living with or affected by HIV/AIDS; and (2) the development of M&E guidelines for integrated economic strengthening, food security and HIV/AIDS.

CARE submitted a concept note on potential ES/L/FS learning from existing CARE projects that LIFT could fund in order to capture emerging trends and lessons learned. Based on a shift in programming, LIFT hopes to reengage CARE in other key LIFT activities in the next year. LIFT has been in discussions with Save to identify similar opportunities for quick and cost-effective learning generation.

5.3.3. Nutrition Partner Coordination

As was noted earlier, enhanced collaboration among the OHA nutrition projects (LIFT, FANTA 2 and 3, HCI and SPRING) was significantly increased in this fiscal year. Evidence shows that ES/L/FS have greater impact on the poorer and more vulnerable populations when they are linked with or preceded by complementary services such as nutrition. For this reason, LIFT was eager to deepen the collaboration with these projects. With the exception of Nigeria, all of LIFT's in-country work this year was done in coordination with at least one of the other core nutrition partners. FANTA administrative and technical staff provided ongoing support and guidance to LIFT during the planning and implementation of LIFT's conference in Namibia. LIFT joined FANTA-3 and HCI in joint rapid appraisals to identify opportunities to integrate NACS into HIV care and treatment services including referrals of NACS clients between health care facilities and ES/L/FS support and quality improvement of NACS services in Malawi and Lesotho, and LIFT also began to jointly plan for NACS roll-out with FANTA-3 in DRC. LIFT, HCI and FANTA-3 jointly developed and delivered a NACS orientation workshop for the USAID mission and department of health in South Africa. At the end of the reporting period LIFT was coordinating with all three partners to deliver a similar event in Haiti in October.

This collaboration has been instrumental to LIFT's success over the course of the year, providing the project with access to key in-country stakeholders, identifying key areas of synergy and collaboration, determining how each partner can add value to the other projects' activities, and eliminating duplication of efforts among the projects. LIFT will continue to support improvement in this collaboration by facilitating dialogue, sharing tools and joint work planning and program implementation in several countries in the coming year.

6. Activities Planned for Next Reporting Period

6.1. Global

6.1.1. LIFT Evidence Base Meeting

As noted earlier, LIFT will finalize and disseminate LIFT's literature review and will convene a consultative meeting to define a research agenda that will build the existing evidence base for economic strengthening and food security impacts on health and nutrition.

6.1.2. SEEP Conference

LIFT will deliver a workshop at the upcoming SEEP Conference in November. The 90-minute session, aimed at microfinance and other economic strengthening implementers, will present tools to assist practitioners to understand the unique vulnerabilities affecting the ultra poor and implement targeted ES programming for HIV-affected households while linking to complementary support service.

6.1.3. STEP UP Working Group Meeting

LIFT will deliver a presentation on the tools inventory, process that is being envisioned for program roll-out, and tools that are currently in development or adaptation. The meeting will also provide LIFT with an opportunity to discuss the STEP UP agenda and why understanding poverty and extreme poverty is important to the members of this working group.

6.1.4. TOPS Semi-Annual Meeting

LIFT will be presenting at the upcoming TOPS meeting on its approach and critical next steps associated with its operationalization and introduce some of the tools that will be adapted, such as the diagnostic tool, ONA, and referral tools and processes, to upgrade provider capacity and help ES/L/FS service providers refer clients to health services (i.e., NACS facilities).

6.1.5. Household Economic Strengthening (HES) Training

The LIFT team will resume work with the consultant engaged for this activity, Ben Fowler, on the updating and finalizing a one-day overview training on household economic strengthening (HES) for LIFT to use in target countries to orient stakeholders to the LIFT framework and its application.

6.1.6. Outreach Strategy

LIFT will work closely with the FIELD-Support Leader team to update project knowledge management strategies in line with current practices and dissemination channels. Specifically, this will include the incorporation of the LIFT website into communication, outreach and external knowledge sharing and technical dissemination efforts.

6.1.7. Technical Global Leadership

LIFT will inventory materials developed to date and prioritize work on new technical tools guidance documents in addition to finalizing those that are underway. LIFT will identify opportunities to demonstrate leadership in the areas of food security, livelihoods, economic strengthening and linkages to NACS and the continuum of care, including hosting a consultative meeting to develop LIFT's research and learning agenda and participation in the NACS integration meeting in South Africa planned for March 2013. The team will also identify strategic conferences and workshops, such as the SEEP Conference which will be held in November 2012, where LIFT can contribute technical learning and experience through presenting, networking and participating. The project will also maintain its presence and engagement in key working groups such as HAMED, STEP UP and the CORE group.

6.1.8. Staffing

LIFT is now fully staffed with four new staff joining the team this year including a Technical Specialist, Technical Director, Program Assistant and M&E Specialist. The Program Manager will begin with the LIFT team in the next fiscal year. With its core team fully staffed and functional, the project expects to increase the pace of its activities and continue with its strategic goal to fully roll out its approach into at least three new countries.

6.1.9. *Inventory of Tools*

LIFT plans to finalize and launch an inventory of the ES/L/FS tools which will document the knowledge and assets of FHI 360, CARE, and Save that could be leveraged to support the implementation of LIFT roll out in different countries. The inventory will be a first step towards widely canvassing the available TA tools from partners. This information will be used to develop a process flow for the roll-out of LIFT programs in its initial three countries as well as clearly outline any tools that will need to be developed or adapted by the program to ensure a rapid scale-up of TA activities.

6.1.10. *Process Flow*

A process flow for TA activities will be assembled by LIFT during the next FY. This will ensure that the program has clear visibility into the support implementation that will be required by its project in different countries. The process flow will also introduce a more systematic and coordinated effort related to LIFT roll-out in its first three countries.

6.1.11. *Development/Adaptation of Tools*

Over the coming year, LIFT will also initiate the process of developing new tools, such as a client diagnostic tool to segment individuals and households by poverty level, and adapt existing tools such as MEASURE's ONA, CARE's Scorecard and Save's situation analysis to meet LIFT needs.

6.2. *Country-specific Activities*

6.2.1. *DRC*

LIFT will collaborate with USAID/DRC and FANTA-3 to develop a work plan for NACS roll-out, including ES/L/FS integration in three selected sites. LIFT plans to travel to DRC in January to finalize site selection and undertake a situation analysis in the selected communities to inform program planning. LIFT will continue to provide support to ProVIC in implementing VSLA through their grantees and champion communities.

6.2.2. *Nigeria*

The LIFT Nigeria work plan is expected to be approved by USAID/Nigeria and preliminary work will be led by Save, the lead LIFT partner on this activity. The proposed work plan includes the development of the performance management plan (PMP), the development of the ES for OVC toolkit, support to the ES for OVC forum and the development of a knowledge sharing portal, as well as in-country visits.

6.2.3. *Malawi*

LIFT will coordinate with stakeholders to finalize the selection of a district(s) for TA support and then better understand what economic strengthening, livelihoods, and food security services exist in selected districts, and how they map onto NCST services catchment areas. LIFT plans to address this issue through a Situational Analysis, which will explore seven key themes: (1) national and local policy and legal environment related to ES/L/FS; (2) national and local HIV/AIDS policies and institutional infrastructure; (3) availability of ES/L/FS and health services; (4) access to ES/L/FS services for HIV/AIDS

affected and infected households; (5) household demand for ES/L/FS services; (6) community networks and cultural beliefs; and (7) important observations made from speaking with the community.

It is expected that LIFT will potentially conduct an ONA in Malawi and will also test the diagnostic tool in two of the sites, once finalized.

LIFT anticipates mobilizing local FHI 360 staff to work on LIFT as well as recruiting a local consultant on specific follow-up activities while work and activity planning is underway.

6.2.4. Namibia

LIFT plans to travel to Namibia in November to support USAID in the selection of pilot sites for the integration of ES/L/FS into NACS, consult with the MOHSS to refine the strategy for this work, and determine next steps and possible collaboration with the bi-directional referral pilot and the recently developed food security screening pilot. LIFT expects to hire a staff member in country to help continue LIFT activities and will work with USAID to complete a LIFT work plan.

6.2.5. Haiti

LIFT plans to travel to Haiti to present and actively engage in a NACS workshop in Haiti in October 2012. The workshop will be led by SPRING, and LIFT will present on clinic-community linkages with a focus on economic strengthening. Following the workshop, the LIFT team anticipates gaining a better understanding of interests, next steps and potential opportunities for future engagement with the USAID/Haiti.

6.2.6. Lesotho

LIFT plans to finalize the proposed work plan with the Lesotho mission at the start of FY 2013. Based on the approved work plan, LIFT will then move forward with suggested activities in country.

7. SUCCESSES

7.1. LIFT refined its programmatic approach for the next three years of implementation which focuses on three interdependent objectives or pillars:

- a.** To provide technical assistance and strategic support to USG agencies and their implementing partners to improve the quality of ES programs and activities that support PEPFAR investments.
- b.** To build the evidence base for ES impacts on health and nutrition.
- c.** In select countries and in collaboration with partners, to improve access of NACS clients to ES services through referrals and other health systems strengthening activities.

7.2. As a program management strategy, LIFT began holding bi-weekly meetings with USAID to ensure close collaboration on project activities, direction and decisions. This approach has been effective in addressing challenges and clarifying expectations.

- 7.3.** LIFT reengaged Save the Children as an essential partner on the project, which has resulted in valuable technical input and resources to the LIFT program.
- 7.4.** The engagement of CARE in the LIFT partnership has gained additional momentum during this FY. CARE led a successful VSLA Master Training-of-Trainers Workshop in the DRC for a total of 11 participating organizations and provided one-on-one TA to support these organizations to prepare and plan for VSLA implementation.
- 7.5.** LIFT made significant progress in developing the project's research agenda through strategic collaboration with MEASURE Evaluation.
- 7.6.** Based on a literature review and research in Ethiopia and Namibia, LIFT developed a proposed model for integrating ES/L/FS into NACS services. LIFT delivered a successful presentation on this topic at the NACS SOTA event, which addressed a clear interest and need among NACS implementers to integrate ES services as a component of care.
- 7.7.** LIFT developed or finalized a host of key documents, including the LIFT Livelihood and Food Security Conceptual Framework, *Promising Practices in Linking Livelihood Strengthening and Clinical Services* in Ethiopia Report, the LIFT Namibia Assessment Report, the LIFT Ethiopia Assessment Report, and the Collaborating to Improve Health and Nutrition through Livelihood and Economic Strengthening in Namibia Conference Report, for dissemination at various events and publication on Microlinks.
- 7.8.** In collaboration with MEASURE Evaluation, LIFT finalized a literature review to understand the existing evidence of associations between economic strengthening, food security, nutrition and HIV outcomes. LIFT also developed a logic model and causal pathways model which will help to define LIFT's research agenda.
- 7.9.** LIFT successfully completed several joint TDYs with core nutrition partners FANTA and HCI, in South Africa, Malawi, DRC and Lesotho. In countries where it is feasible, this new approach will streamline program implementation and maximize the use of resources. LIFT has also begun developing joint work plans that will facilitate increased collaboration in program implementation.

8. CHALLENGES

- 8.1.** Uncertainty about the mechanism and timeframe for adding \$5 million in NACS plus-up funding for LIFT activities has contributed to delays in program planning and implementation. LIFT looks forward to working closely with USAID to clarify their expectations and requirements to release the NACS plus-up funding and developing a corresponding work plan and budget approved by USAID to guide program activities.
- 8.2.** It was difficult to determine the total funding obligated by USAID Nigeria to LIFT. Eventually, LIFT confirmed that \$400,000 was the total amount allocated to LIFT, which allowed the project to begin planning subsequent activities.
- 8.3.** The continual transitions in project staff throughout the year required an investment in transferring historical project information to the new team. This investment has strengthened

LIFT's knowledge management system and processes, and helped to streamline orientation of new LIFT project staff throughout the period. However, the project was understaffed for much of the period of performance, which impacted LIFT's ability to implement activities at the desired pace.

- 8.4. LIFT planned to begin testing its proposed model for integration of ES/L/FS into NACS in Namibia during this period; however, challenges in identifying an appropriate point of contact in the MOHSS in Namibia led to delays in activities. Because LIFT did not have another country primed and ready to collaborate on this work, this delay impacted LIFT's ability to get on the ground experience developing and supporting NACS-ES referral systems. The project addressed this challenge by making significant progress in Malawi, DRC and Lesotho, all of which are eager to work with LIFT to establish ES/L/FS referral systems within NACS early in the next year.
- 8.5. The joint preparation work undertaken as part of the workshop planning process for Haiti demonstrated the challenges that can come with collaboration. Short turnaround time for planning, communication issues, and differing perspectives on the priorities for the activity were challenging at times and resulted in less than optimal planning timeframes for LIFT. However, LIFT worked closely with USAID and the lead planning partner to resolve these quickly and as efficiently as possible to ensure LIFT could meet the needs of the mission in Haiti as well as the workshop organizers.

9. KEY LEARNING

- 9.1. LIFT identified new examples of programs linking ES and health services at the Global Microcredit Summit. Freedom from Hunger has written an excellent paper on this topic titled *Health and Microfinance: Leveraging the Strengths of Two Sectors to Alleviate Poverty*, by Marcia Metcalfe and Sheila Leatherman (2010). The paper can be found at:
<http://www.ffhtechnical.org/resources/microfinance-amp-health/health-and-microfinance-leveraging-strengths-two-sectors-alleviate>.
- 9.2. LIFT has researched several approaches and tools for community mapping, community engagement and network analysis, which will inform these components of LIFT's work on NACS and ES/L/FS referral systems in specific countries.
- 9.3. LIFT continued to learn on several fronts through joint project coordination efforts through the quarterly meetings in Washington, DC as well as joint TDYs in the field. LIFT's joint TDYs with FANTA-3 and HCI in South Africa, Malawi and Lesotho further clarified and mapped important technical roles for each of the projects in relation to one another and how they can work in pilot sites as well as nationally in-country in a collaborative way. LIFT's joint TDY with FANTA-3 in DRC laid the groundwork for the joint roll-out of NACS activities. LIFT engaged with SPRING for the first time (and FANTA-3 and HCI) around preparations for the NACS Haiti workshop planned for October 2012. Learning from these joint efforts resulted in the development of joint deliverables which LIFT contributed heavily to including the site selection criteria and a joint TDY preparation check list that had input from all projects and that will continue to evolve over the coming quarters.

9.4. Overall, LIFT learning and progress related to the roll-out of our approach was exponential due to the successful mobilization of staff and consultants to several countries during the year. Participation in TDYs, workshops, and TA presented rich opportunities for LIFT to refine and shape its accelerated approach to roll out activities in the field.