

**United States Agency for International Development
Bureau for Democracy, Conflict and Humanitarian Assistance
Office of Food for Peace
Fiscal Year 2010: Title II Proposal Guidance and Program Policies**

**Food for Peace Response to Comments
Prevention of Malnutrition in under Twos Approach (PM2A)**

This document incorporates comments about PM2A from the draft *Fiscal Year 2010: Title II Proposal Guidance and Program Policies (Title II Guidance)*, the Food Aid Consultative Group Prevention of Malnutrition in under Twos Approach Working Group and draft country specific guidance.

1. Can Prevention of Malnutrition in under Twos Approach (PM2A) targeting be based on health districts?

PM2A should first and foremost be prioritized to the most food insecure areas (i.e., districts). The Food Security Country Frameworks (FSCFs) and the Bellmon Estimation Studies for Title II (BEST) analyses identify these most food insecure areas by district. Within the most food insecure areas, PM2A can be targeted by health districts, as long as the most food insecure areas are not excluded. Linking with existing health services is a priority whenever possible.

2. How will negative incentives of food aid rations to young and/or pregnant females (i.e., become pregnant to receive a food aid ration) be addressed? Will mothers who become pregnant while receiving rations for another child become ineligible for FFP funded PM2A activities?

There is no evidence to indicate that providing PM2A services, including food aid rations, to all pregnant females has a pro-natal effect. FFP would not recommend that any pregnant woman be denied participation in a PM2A activity because she will have/has another child while participating in the activity. In addition, most likely Ministries of Health will not allow the provision of services to some pregnant women and not others. Individual MYAPs should monitor their activities closely to note if there are any indications of a pro-natal effect as a result of the activities and address these challenges through their behavior change communication component and by facilitating access to family planning services available in the food aid program area.

3. Is FFP open to offering food aid rations to pregnant or lactating women or 6 months after birth while the food aid program promotes locally produced weaning and other nutritious food until the child reaches 2 years of age? Is FFP open to encouraging the use of home-based weaning foods?

Yes, FFP encourages the use of home-based, locally produced weaning foods after 6 months of age. Through the behavior change communication component of PM2A, MYAPs should be promoting locally available nutritious food for infants and young children and pregnant and lactating women that can be combined with the food aid ration, and children should be introduced to a range of diverse foods.

- 4. Will direct distribution as a result of PM2A food aid rations create a disincentive for production? With only the Haiti study to use as a “standard” there are concerns about overuse of food resources and potential unintended consequences to the local economy because of the food aid rations.**

The BEST analyses recommend levels of PM2A distribution that are calculated to avoid creating a disincentive for production or any unintended consequences.

- 5. The Haiti World Vision International and Cornell University study on PM2A is mentioned in the Title II Guidance. Are applicants expected to use ration sizes as was done in the study in other locations? Can more guidance be given on how to develop the PM2A ration?**

Applicants have flexibility to propose the PM2A ration composition and size that is appropriate for the target groups. The PM2A Technical Reference Materials (TRM) contains guidance on PM2A ration design and targeting as well as exit strategies and sustainability.

- 6. When will the TRM for design of PM2A be available?**

The PM2A TRM will be available on or about the date on which the final *Title II Guidance* has been posted.

- 7. Are applicants expected to create an incentive size ration (targeting the foods to precisely the same vulnerable groups in PM2A) but at a much smaller size?**

The purpose of the PM2A household ration is to supplement the household food supply, prevent sharing, and incentivize participation. Applicants should describe and justify the assumptions used to determine the ration, and monitor the ability of the ration to achieve these objectives and ensure that any modifications to ration size are not affecting critical outcomes, and to contribute to the body of experience and evidence on PM2A.

- 8. What is the balance between PM2A ration size and total beneficiaries served? Country specific guidance recommends coverage of large geographic areas, which are not coverable with finite resources; how should geographic coverage be chosen?**

Applicants may choose to cover all or just some of the geographic priority areas identified in the country guidance and FSCF. Targeting within priority geographic areas should be done based on assessment and indicators of relative food insecurity.

- 9. For pregnant woman, how should applicants price antenatal care services? Is there a minimum package?**

Applicants determine how to price the services proposed. The PM2A TRM provides guidance on a minimum package of health services, which include antenatal care, post-partum care, micronutrient supplementation, immunization and treatment of childhood illness, as described in the host country Ministry of Health’s policies and protocols. Many geographic areas will have limited, inconsistent or no access to these services. In these situations, applicants should describe the weaknesses in their geographic areas and work to make essential health and nutrition services available and accessible in order to protect the health and well-being of mothers and children.

10. How should applicants treat moderate malnutrition within the context of PM2A? Specifically for children 6-29 month of age, how are the moderately malnourished served and how does this differ from children 24-59 month of age?

Applicants may propose approaches to treating moderate malnutrition among the PM2A target population of under twos, and among older children, as well as define objectives and indicators to measure the impact of recuperative interventions. However, resources are finite, so applicants should carefully consider what will not be done in order to focus on recuperation. Note, underweight may be caused largely by stunting in older children in some countries, and provision of a short-term ration for recuperation may simply cause already stunted children to gain body weight but not height.

11. To what extent should applicants be involved to ensure treatment and/or nutritional support of children targeted for Severe Acute Malnutrition (SAM), as well as Moderate Acute Malnutrition (MAM) at health center (outpatient) and Center for Nutritional Rehabilitation (CREN) (in-patient) levels?

Title II-supported programs aim to reduce the prevalence of chronic malnutrition and underweight in children. PM2A is recommended because it aims to prevent and reduce malnutrition in young children who are often at the highest risk of stunting and acute malnutrition. When pregnant and lactating women and young children 6-23 months of age are provided supplemental food under PM2A, reductions in acute malnutrition prevalence are expected. The PM2A approach also includes screening and referral for children with SAM and home visits to follow young children with SAM. Applicants are encouraged to coordinate and collaborate with the health system, other nongovernmental organizations and community based organizations to ensure screening, referral and treatment for children with acute malnutrition.

12. Will the Multi-Year Assistance Programs (MYAPs) directly fund the care of acute malnutrition?

In terms of the care of acute malnutrition, note that FFP does allow the purchase of ready to use therapeutic foods (RUTFs) with Title II funds (specifically, with cash proceeds from monetization). Ties to health systems are critically important to provide inpatient services that link with and complement the community outreach component provided by awardees. If the prevalence of acute malnutrition is high enough that it is a significant problem in the food aid program area, then the applicant should develop a separate intermediate result that focuses on those activities.

RUTFs may be purchased from section 202(e) funds for “new” MYAPs and for single-years assistance programs (SYAPs) under these conditions:

- A SYAP that targets a distinct area or population not served by the same organization under a pre-existing Title II program may be considered as “new” for the life of the award (LOA). The term “new” does not apply to subsequent food aid programs or modifications that simply broaden the existing food aid program area or target population;
- An on-going SYAP that is undergoing a re-design in order to introduce multi-year development interventions may be considered as “new” for the LOA;
- A MYAP that targets a distinct area or population not served by the same awardee under a pre-existing food aid program may be considered as “new” for the LOA; and

- A MYAP that follows SYAP(s) in the same area or that targets some or all of the same population may be considered as “new” for the LOA.

If not fulfilling these conditions, RUTFs may be purchased with monetization funds.

13. As Guatemala and Burundi research programs produce evidence, there will be assumptions that current MYAPS need to incorporate them. Will awardees be expected to change the approved PM2A activities based on research results from PM2A activities implemented in food aid programs in other countries?

FFP will not require existing food aid programs to change implementation design based on research results. Awardees may choose to adjust designs, within LOA levels, if the research suggests cost-effective improvements.

14. What resources will be available (beyond the Burundi and Guatemala studies) for applicant research? How are awardees expected to pay for research?

Applicants should include the resources required for program quality assurance, quality improvement and monitoring and evaluation. There will be no external research component for additional countries at this time.

15. Are there plans to update the Commodity Reference Guide to reflect guidance for PM2A ration design?

The *Commodity Reference Guide* is currently being revised and updated, however it will not be finalized before fiscal year 2010 MYAP proposals are due. Where there are contradictions between the PM2A TRM and the *Commodity Reference Guide*, applicants should follow the guidance in the TRM, as it is more up-to-date.

16. What indicators will be used to measure success of PM2A activities?

M&E requirements, including required FFP indicators, are described in the *Title II Guidance* and in the most recent Food for Peace Information Bulletin on indicators and reporting. In addition to the relevant required FFP and USAID/Mission indicators, applicants should identify in the indicator performance tracking table (IPTT) what each proposed indicator will be and what methods will be used to collect them.

17. How will PM2A success be measured globally?

The standardized annual performance questionnaire (SAPQ) (submitted with the annual results reports) has been designed to facilitate aggregation across MYAPs. However, awardees continue to face challenges in submitting the SAPQ fully and correctly, which limits FFP’s ability to measure global success of the Title II programs.

18. How do applicants prevent double counting and confounding factors in monitoring?

Applicants must propose and implement a monitoring and evaluation system that provides the information needed to adequately monitor food aid program implementation and report on progress and achievements.

19. How do MYAPS ascertain that other administrative programs are accountable for regional results?

Performance indicators selected for inclusion in the IPTT should measure changes that are clearly and reasonably attributable, at least in part, to the MYAP. In the context of performance indicators and reporting, attribution exists when the outputs of the MYAP have a logical and causal effect on the result(s) being measured by a given performance indicator. If more than one agency or government is involved in achieving a result, awardees should describe what role each played in achieving the result.

**20. How does the proposal technical evaluation committee evaluate the PM2A ration size?
What are evaluators looking for in the cost estimate?**

In addition to the PM2A guidance provided in the *Title II Guidance* and on the FANTA website, the technical evaluation committee will refer to the PM2A TRM.

21. For the review process, what is the balance between the quality of programming and target group coverage?

Quality of programming is paramount to achievement of results. Applicants should propose coverage that allows good quality programming to be implemented, and explain reasoning and assumptions in the proposal narrative.