

PDFCA 880

AGENCY FOR INTERNATIONAL DEVELOPMENT
WASHINGTON, D.C. 20523

SEP 22 1989

Mr. Charles Bennett
Food for the Hungry
Executive Vice President
7807 E. Greenway, Suite 3
Scottsdale, AZ 85260

SUBJECT: Cooperative Agreement No. OTR-0500-A-00-9185-00

Dear Mr. Bennett:

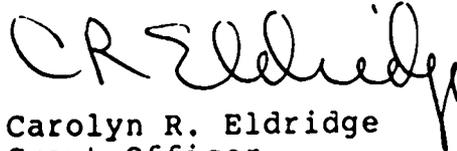
Pursuant to the authority contained in the Foreign Assistance Act of 1961, as amended, the Agency for International Development (hereinafter referred to as "A.I.D." or "Grantor") hereby provides to the Food for the Hungry (hereinafter referred to as FH or "Recipient") the sum of \$500,000 to provide support to the Recipient under A.I.D.'s Child Survival Program as more fully described in Enclosure 1 of this Cooperative Agreement entitled "Schedule" and Enclosure 2, entitled "Program Description."

This Cooperative Agreement is effective and obligation is made as of the date of this letter and shall apply to commitments made by the Recipient in furtherance of program objectives from September 1, 1989 through August 31, 1993.

This Cooperative Agreement is made to the Recipient on condition that the funds will be administered in accordance with the terms and conditions as set forth in Enclosure 1 entitled "Schedule," Enclosure 2 entitled "Program Description," and Enclosure 3 entitled "Standard Provisions," which have been agreed to by your organization.

Please acknowledge receipt of this Cooperative Agreement by signing all copies of this Cover Letter, retaining one copy for your files, and returning the remaining copies to the undersigned, including all copies stamped "Funds Available."

Sincerely,



Carolyn R. Eldridge
Grant Officer
Management Support Branch
Office of Procurement

Enclosures:

1. Schedule
2. Program Description
3. Standard Provisions

ACKNOWLEDGED:

FOOD FOR THE HUNGRY

BY: 
TYPED NAME: Charles T. Bennett
TITLE: Executive Vice President
DATE: October 4, 1989

FISCAL DATA

PIO/T No.:	9385016
Appropriation No.:	72-1191021.7
Budget Plan Code:	EDCA89 13810 KG11
Allotment No.:	947-38-099-00-76-91
This Obligation:	\$500,000
Total Obligated Amount:	\$500,000
Total Estimated Amount:	\$500,000
Technical Office:	FVA/PVC
DUNS No.:	09-365-4457
E.I. No.:	95-268-0390
DOC. NO.	36610

FUNDS AVAILABLE
Gloria Craig
SEP 26 1989
o/c 4190
Program Acctg Division
Office of Financial Management

SCHEDULE

A. Purpose of Agreement

The purpose of this agreement is to provide support for the Food for the Hungry Bolivia Altiplano Child Survival Project. This is more specifically described in Enclosure 2 to this Agreement entitled "Program Description," and the Recipient's proposal, dated December 20, 1988, as amended, which is hereby incorporated by reference. In the event of an inconsistency between the Recipient's proposal, the program Description, and this schedule; the schedule and then the program description shall take precedence.

B. Period of Agreement

1. The period of this Agreement is September 1, 1989 through August 31, 1993.

2. Funds obligated hereunder are available for the period September 1, 1989 to August 31, 1993.

C. Amount of Agreement and Payment

1. The total estimated amount of this agreement for the period shown in B.1. above is \$500,000.

2. A.I.D. hereby obligates the amount of \$500,000 for program expenditures during the period set forth in B.2. above and as shown in the budget below.

3. Payment shall be made to the Recipient in accordance with procedures set forth in Enclosure 3 - Optional Standard Provision, entitled "Payment - Letter of Credit".

D. Budget:

The Budget for this Agreement is shown as Enclosure 1a to this Cooperative Agreement. The Recipient may not exceed the total estimated amount or the obligated amount, whichever is less (see subparagraph C. above).

E. Substantial Involvement

1. Countries: The following country is approved for direct in-country program support under the Agreement: Bolivia.

Other countries may be approved during the period of the Agreement only with the express written approval of A.I.D.

2. The Recipient will carry out the following activities:

a. Submit a Detailed Implementation Plan (DIP) for each country program by April 1, 1990 in accordance with FVA/PVC guidelines. Illustrative guidelines are available from FVA/PVC and will be furnished to you in the Fall of 1989.

This implementation plan should include a description of how the various child survival interventions will be evaluated and should clearly define: (a) the objectives and outputs that each program will be held accountable for; (b) the specific indicators that will be used to measure program success in reaching objectives and outputs; (c) mechanisms for collecting data, i.e. surveys, sentinel systems, etc.; and (d) manpower and other resources needed for carrying out monitoring and evaluation activities with a revised budget. The DIP should include scheduled reports, internal and external evaluations, and line item budgets.

b. Develop/adopt a program-specific Health Information System, responsive to the needs of field programs and headquarters and able to provide A.I.D. with information for tracking program performance. This system should be described in the first year progress report.

F. Reporting:

1. Financial Reporting:

a. Financial reporting requirements shall be in accordance with the method of payment Standard Provision cited under Section C. above.

b. The original and two copies of all financial reports shall be submitted to AID, Office of Financial Management, Program Accounting and Finance Division (FM/PAFD), Washington, D.C. 20523. In addition, one copy of all financial reports shall be submitted to the Technical Office specified in the Cover Letter of this Grant.

2. Program Performance Reporting and Evaluation:

a. (1) Annual Report: Five copies of the Annual Report will be submitted to the A.I.D./FVA/PVC Project Officer by October 15 of each year of the program; the first report is due October 15, 1990. The annual report should follow the annual report guidelines and should summarize inputs, outputs, progress to date, constraints, and highlights from the preceding year. The Report should also include reporting on the standard A.I.D. indicators for ORT, immunization and growth monitoring and nutrition interventions which are required of all programs receiving Child Survival funding.

(NOTE: For new Child Survival projects lasting three to five years, a mid-term evaluation report will replace the 2nd annual report.)

(2) The Annual Report will also include the "USAID Health and Child Survival Project Reporting Schedule". This must be completed each year of the Agreement (including the final year) and for each PVC-funded Child Survival (CS) project. Other A.I.D.-funded agreements, such as OPGs, should be identified if there is a relationship of that grant to this grant supported program.

(3) During the life-of-program, program monitoring and information on a country-specific basis will be included in the annual reporting system. Field reports prepared by the recipient's regional and technical specialists, as well as FVA/PVC consultants will also be included in the Annual Report.

b. Interim Reporting: Prior to the required final performance reporting date, events may occur that have significant impact upon the program outcome. In such instances the Recipient shall inform, in writing, the Grant Officer and the A.I.D./FVA/PVC Project Officer as soon as the following types of conditions are known:

(1) Problems, delays or adverse conditions that will materially affect the ability to attain program objectives, prevent the meeting of time schedules and goals, or preclude the attainment of program work activities by the established time period. This disclosure shall be accompanied by the statement of the action taken, or contemplated, and any assistance needed to resolve the situation.

(2) Favorable development or events that enable time schedules to be met or work activities to be performed sooner than originally projected, resulting in an earlier than planned project completion date.

c. Mid-Term Evaluation: A mid-term project evaluation will be scheduled. FVA/PVC may provide an external consultant to participate. The Recipient should work closely with the FVA/PVC Project Officer to plan for this evaluation and participants. The results of this evaluation will be submitted to FVA/PVC as a mid-term evaluation report in accordance with mid-term evaluation report guidelines provided by PVA/PVC. (NOTE: For extension agreements an annual report will take the place of a mid-term evaluation).

d. Final Evaluation: A final independent evaluation in collaboration with A.I.D. will be carried out in the final year of the program to evaluate program effectiveness and impact. This final evaluation must be completed prior to the expiration of the agreement. The final evaluation will be submitted to A.I.D. as part of the final report.

e. Final Report: No later than 90 days after the expiration of this Cooperative Agreement period, a Final Report following PVC final report guidelines and including items specified by the project officer is due. The Final Report includes but is not limited to, the findings of the Final Evaluation. The Final Report should follow the final evaluation guidelines, and items specified by the Project Officer. Five (5) copies will be submitted to the A.I.D./FVA/PVC and one (1) copy to the Grant Office whose address appears on the Cooperative Agreement cover letter. (NOTE: The A.I.D. Child Survival and Health Reporting Schedule must be submitted as part of the final report as well as a full financial report including a complete pipeline analysis.)

G. Indirect Cost Rates:

Pursuant to the Optional Standard Provision of this Cooperative Agreement entitled "Negotiated Indirect Cost Rates - Provisional", a rate or rates shall be established for each of the Recipient's accounting periods which apply to this agreement. Pending establishment of revised provisional or final indirect cost rates for each of the Recipient's accounting periods which apply to this agreement, provisional payments on account of allowable indirect costs shall be made on the basis of the following negotiated provisional rate(s) applied to the base(s) which are set forth below.

Type of Rate:	RATE	Period
Provisional	13.7%	01-01-87 Until Amended

Base: All program costs excluding administrative and commodity costs.

NOTE: Notwithstanding the above, Food for the Hungry will not collect from A.I.D. any funding under this Agreement for indirect costs. All indirect costs incurred will be absorbed by the Recipient.

Cooperative Agreement Budget

FR: 09/01/89 To: 08/31/93

<u>Cost Element</u>	<u>A.I.D.</u>	<u>Recipient</u>	<u>Total Amount</u>
Procurement	\$ 20,831	\$ 500	\$ 21,331
Evaluation	18,000	6,000	24,000
Other Program Costs	461,169	217,374	678,957
Indirect Costs	-0-	99,086	99,086
TOTAL	<u>\$500,000</u>	<u>\$323,374</u>	<u>\$823,374</u>

Notes To Budget:

1. The recipient is allowed 5% flexibility among cost elements in the budget. Within the cost elements however, the recipient has full flexibility of funds.

2. The recipient is expected to use its own private cost-share/matching funds for all procurement of non-U.S. vehicles and other non-U.S. non-expendable property estimated at over \$500 each. This alleviates the requirement for a source/origin waiver and also places the title to property completely in the recipient's name.

3. The recipient has agreed to expend from its non-federal funds by the end of the life-of-program (LOP) period at least 25% to A.I.D.'s 75%. The recipient is required to meet the requirements of the Standard Provision of this Agreement entitled "Cost Share/Matching."

4. If this award was made on the basis that the recipient has offered to cost share at a rate greater than that cited in Paragraph 3, the recipient is required to notify the Grant and Project Officer of any changes in the amount to be cost shared by the recipient in accordance with the Standard Provision entitled "Revisions to Grant Budget." Such a change may impact on future funding decisions under this Agreement.

5. The recipient is required to report in its Annual Reports to FVA/PVC, in their Incremental Funding Request Letter, and in the Financial Status Report Form (SF 269), the total amount of cost-sharing to date. Although the recipient is required to cost share on a life-of-program basis, they are also expected to expend those funds on a pro rated basis per year and not wait until the last year of the agreement to expend their cost share.

PROGRAM DESCRIPTION

I. Project Goal and Objectives

The project goal is to improve the quality of life of each family in 100 project communities with emphasis on children under 2 and mothers, by means of sustainable preventive health and nutrition programs integrated with rural development. The principal objectives are to reduce infant and child mortality and morbidity due to diarrheal disease, vaccine-preventable diseases, malnutrition and iodine deficiency through the efforts of local communities and strengthened linkages with the existing health system. over a 4-year period.

By the end of the Project in 1993, FH intends to reach the following objectives:

- Reduce mortality in infants/children 0-2 years by 20%;
- Reduce the incidence of diarrheal disease by 20%;
- Use of ORT in at least 65% of diarrhea cases;
- Reduce the proportion of children identified as malnourished by 50%
- Increase vaccination coverage to 80% of children under 1 year with EPI vaccines and 60% of women from 15-45 years old with TT;
- Have iodine supplementation in at least 80% of registered households;
- Fully train 200 HPs (health promoters) in 100 communities in the proposed package of child survival interventions including ORT, growth monitoring health and nutrition education;
- Fully train 8,500 mothers in the proposed package of child survival interventions using HPs and HP supervisors as instructors;
- Increase participation of mothers in Mothers' Center activities to 85% of those with children 0-2 years.

Intervention	Activities and Percent of Overall Project
Growth Monitoring	Train and supervise HPs in weighing, measuring and obtaining age of children, recording and teaching mothers to interpret growth trends. Outreach to children at nutritional risk. Provide scales to Mothers' Clubs (15%)
Immunization	Identify and register all under one's needing immunization. Comprehensive immunization education to parents. Organize immunization sessions and provide logistical support for EPI personnel. (20%)
Prevention of Goiter	Comprehensive health education about iodine and goiter to mothers and school children. Distribute iodized salt and iodine oil. (10%)
Nutrition/ Nutrition Education	Comprehensive education in general nutrition, especially for children under two years, lactating mothers and pregnant women. Promotion of breast feeding, appropriate feeding of malnourished children and children during illness; hygienic food preparation. Cooking demonstrations. (25%)
Acute Respiratory Infections	Teach HPs to identify serious cases of ARI and establish a system for treatment and referral. (5%)

III. Approach

a. Types of Health Workers Providing Services

Volunteer HPs (Health Promoters) are the backbone of the health care delivery system. Ten HP supervisors will be employed full time by FH/B to provide training and supervision to volunteer HPs in child survival. Each of the Mothers' Centers with which FH/B works has two HPs who will conduct weekly health education sessions with assistance of HP supervisors. Other duties of the HP include helping the HP supervisor in weighing and measuring children while being trained to conduct growth monitoring sessions themselves, distributing ORS packets and home visits to children at risk.

b. Assistance to Government of Bolivia

- Strengthen MOH capability in EPI by assisting with needed equipment and supplies and organizing training and planning meetings;
- Organize immunization sessions and transport for EPI personnel and vaccines to vaccination sites;
- Promote immunization services through mass media;
- Coordinate with Sanitary Units to allow participation of beneficiary children in programs and campaigns of the MOH;
- Assist in the selection of HPs to be trained as birth attendants by government;
- Provide information from MIS to MOH in their own format;
- Sell ORS packets provided by regional Sanitary Units and return income generated to MOH (MPSSP).

c. Promotion of Child Survival Interventions

Oral Promotion

Building upon the strong oral tradition in Bolivia, FH/B will work through supervisors, HPs, Mothers' Centers and community leaders to increase the number of persons who know about the program and its services. Solar-powered projectors will be used to show filmstrips about the program during vaccination campaigns.

Expanding Mass Media Publicity

FH/B will expand mass media publicity for its child survival program within the project area by means of radio, the most important medium of mass communication in Bolivia. Many of the approximately 200 radio stations in Bolivia are oriented toward transmitting to rural areas in native languages (Morales, 1987). FH/B will develop 30 and 60 second radio spots in Spanish, Aymara and Quechua, for local radio stations.

IV. Target Population

In 100 communities in the project area, FH/B will deliver a comprehensive package of interventions with intensive health education, training of HPs and outreach. FH/B will also offer immunization and health education services to an expanded area which will include approximately two nearby smaller communities for each of the 100 core communities. These additional communities will be organized to receive immunization services three times each year. Intensified health education and mass media messages will create a demand for the services being offered.

Area	General Population	Children Under 1	Children Under 2	Children Under 6	Women 15-45 Yrs.
<u>La Paz</u>					
40 Communities in Pacajes	10,696	425	811	2,203	2,225
<u>Potosi</u>					
30 Communities in A. de Ibanez	7,104	282	538	1,463	1,478
30 Communities in Tomas Frias	<u>13,414</u>	<u>533</u>	<u>1,016</u>	<u>2,763</u>	<u>2,790</u>
Sub-Totals	31,214	1,240	2,365	6,429	6,493
Additional Communities of Expanded program	<u>47,091</u>	<u>1,860</u>	<u>3,547</u>	<u>9,643</u>	<u>9,740</u>
TOTALS	78,305	3,100	5,912	16,072	16,233

MPSSP policy is to provide services for children up to age 6, although they concentrate on those under 2. Therefore, the target group is 12,922 children under 6 and women 15-45 years for the majority of project interventions. The FH/B target population for immunization campaigns, nutrition and ORT will be 32,305.

V. Differences between Current and Proposed Activities

FH/B is currently administering a child survival project with interventions in nutritional education, including goiter; growth monitoring and oral rehydration to a much smaller target population (about 30%). FH/B would like to expand its program to at least 80% of target population and include surrounding communities. Raising immunization coverage and a referral system for ARI will be included.

VI. Coordination and Agreements on this Proposal

In developing this proposal, FH/B contacted UNICEF, CARE, Save the Children, Project Concern, the Program for Coordination of PVOs in Child Survival, the USAID Mission, the MPSSP, and the 3 departmental Unidades Sanitarias. FH/B coordinates their work with the MPSSP and has protocols of agreement with:

- Nutrition Division, MPSSP, to coordinate child health activities;
- MPSSP for additional supervision of FH HP supervisors;
- Departmental Unidades Sanitarias of La Paz, Potosi and Oruro.

Agreements have been signed with the following other government ministries at the national level:

- Ministry of International Affairs and Ministry of Planning and Coordination, for general development activities;
- Ministry of Education to coordinate School Feeding Program;
- Ministry of Rural and Agricultural Matters for technical assistance.

VII. Use of Community Resources

FH/B will work with 100 Mothers' Centers with about 60 members each. Mothers' Center members are pregnant women or mothers with children under 6 who are of low income. Each center has three working committees:

1. Monitoring Committee - promotes greenhouses and vegetable gardens.
2. Education Committee - promotes health and hygiene education.
3. Health Committee - assists with growth monitoring and collecting vital statistics, especially for children.

When FH/B's child survival program began in 1984, the majority of communities with which FH/B began working had no Mothers' Center. FH/B staff were instrumental in organizing new centers in each community. A total of 117 Mothers' Clubs were organized in 1985 with FH/B assistance, increasing to 148 in 1986, 183 in 1987 and 212 in 1988.

CIMS-PAG

OTR-0500-A-00-9185-00

AID 1350 T 187	AGENCY FOR INTERNATIONAL DEVELOPMENT PROJECT IMPLEMENTATION ORDER/TECHNICAL SERVICES	1 Cooperating Country Centrally Funded	Page 1 of 1 Pages
*PIO T		2 PIO T No 9385016	3 <input checked="" type="checkbox"/> Original or Amendment No _____
		4 Project Activity No and Title 938-0500 Food For the Hungry International (FHI) Child Survival Cooperative Agreement	

5 Appropriation Symbol 72-1191021.7	6 Budget Plan Code 947-38-099-00-76-91 EDCA89 13810 KG11
7. Obligation Status <input checked="" type="checkbox"/> Administrative Reservation <input type="checkbox"/> Implementing Document	
8. Project Assistance Completion Date (Mo., Day, Yr.)	
9 Authorized Agent AID/W	10 This PIO T is in full conformance with PRO-AG No _____ Date _____
11a Type of Action and Governing AID Handbook <input type="checkbox"/> AID Contract (HB 14) <input checked="" type="checkbox"/> AID Grant or Cooperative Agreement (HB 13) <input type="checkbox"/> PASA/RSSA (HB 12) <input type="checkbox"/> Other	
11b Contract/Grant/Cooperative Agreement/PASA/RSSA Reference Number (if this is an Amendment)	

M/FM/PAFD
 POSTED 5/24/89
 FUNDS RESERVED BY
Alan Craig

12 Estimated Financing (A detailed budget in support of column (2) is attached as Attachment No _____)					
Maximum AID Financing Available	A Dollars	(1) Previous Total	(2) Increase	(3) Decrease	(4) Total to Date
		- 0 -	500,000	- 0 -	500,000
	B U.S. Owned Local Currency				

13 Mission References

14A Instructions to Authorized Agent
 SER/OP/W/MS is requested to execute a 4 year assistance agreement with Food for the Hungry International (FHI) effective from Sept 1, 1989 through August 31, 1993. Funding of \$500,000 dollars is provided for expenditures for a 4 year period. PIO/T Enclosures: 1A) Grant Program Budget (format C), 1B) Program Budget/Proposal Budget (format D and G), 1C) Country Budget, 2) Program Description, 3) PVC/IPS's "PVO financial Profile" on PVO, dated 2/88, 4) PVO's Proposal 5) Award Letter and 6) Special Instructions 7) Indirect Cost Rate

14B. Address of Voucher Paying Office
 AID/M/FM/PAFD, Washington, D.C. 20523

15. Clearances - Include typed name, office symbol, telephone number and date for all clearances			
A. The Project Officer certifies that the specifications in the statement of work or program description are technically adequate. AID/FVA/PVC:ATHompson <i>AT</i>	Phone No 5-4753	B. The statement of work or program description lies within the purview of the initiating office and approved agency programs. AID/FVA/PVC:LTanner <i>LT</i>	Date 5/19/89
AID/FVA/PVC:JVan der Vlugt <i>JV</i> AID/FVA/PVC:LWatlington <i>LW</i>	Date 5/24/89	D. Funds for the services requested are available	Date
E. AID/FVA/PPM:EJefferson <i>EJ</i>	Date 5-24-89		

16 For the Cooperating Country: The terms and conditions set forth herein are hereby agreed to Signature _____ Date _____ Title _____	17 For the Agency for International Development Signature <i>Robert N. Shank</i> Date 5/24/89 Title <i>Barry Riley, Director, FVA/PPM</i>
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*See HB 3, Sup. A, App. C, Att. B, for preparation instructions. Note: The completed form contains sensitive information whose unauthorized disclosure may subject an employee to disciplinary action.