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LIST OF ACRONYMS AND ABBREVIATIONS

ACDI/VOCA	Agricultural Cooperative Development International/Volunteers in Overseas Cooperative Assistance
ADRA	Adventist Development and Relief Agency
AED	Academy for Educational Development
AIN-C	Community-based Integrated Child Care, Honduras
AINM-C	Community-based Integrated Child and Maternal Care, Guatemala
ARC	American Red Cross
ARI	Acute Respiratory Illness
ART	Antiretroviral Therapy
ARV	Antiretroviral
ASARECA	Strengthening Agricultural Research in Eastern and Central Africa
AWP	Annual Workplan
BIA	Bioelectrical Impedance Analysis
BMI	Body Mass Index
CA	Cooperative Agency
CARE	Cooperative for Assistance and Relief Everywhere
CBGP	Community-based Growth Promotion
CBO	Community-based Organization
CCC	Comprehensive Care Centers
CDC	Centers for Disease Control
CHLS	Community and Household Livelihoods Surveillance
CHS-ECSA	Commonwealth Health Secretariat for East, Southern, and Central Africa
COP	Country Operation Plan
CORE	Child Survival Collaboration and Resources Group
CRG	Commodity Reference Guide
CRS	Catholic Relief Services
CS	Cooperating Sponsor (includes Private Voluntary Organizations)
C-SAFE	Consortium for the Southern African Food Emergency
CRG	Commodities Reference Guide
CSB	Corn-soy Blend
CSHGP	Child Survival and Health Grant Program
CSR4	CS Results Reports
CSTS	Child Survival Technical Support Project
CTC	Community-based Therapeutic Care
DA	Development Assistance
DAP	Development Assistance Program
DCHA	USAID Bureau for Democracy, Conflict and Humanitarian Assistance
DHS	Demographic and Health Surveys
DIP	Detailed Implementation Plans
DRI	Dietary Reference Intakes
EC	European Community
ECSA-CHS	East, Central, Southern Africa Commonwealth Health Secretariat
ENN	Emergency Nutrition Network
ERS	Economic Research Service

EU	European Union
FAMC	Food Aid Managers' Course
FANTA	Food and Nutrition Technical Assistance Project
FAO	Food and Agriculture Organization
FAO/NCPD	Food and Agriculture Organization's Nutrition and Consumer Protection Division
FBF	Fortified-blended Foods
FFH	Freedom from Hunger
FFLS	Farmer Field and Life Schools
FFP	USAID Office of Food for Peace
FFW	Food for Work
FH	Food for the Hungry
FHI	Family Health International
FSIAP-II	Food Security Information for Action Programme, Phase II, European Community/Food and Agriculture Organization
FY	Fiscal Year
GAM	Global Acute Malnutrition
GFDRE	Government of the Federal Democratic Republic of Ethiopia
GH	USAID Bureau for Global Health
GOI	Government of India
GOR	Government of Rwanda
HBC	Home-based Care
HDDS	Household Dietary Diversity Score
HFIAS	Household Food Insecurity Access Scale
HFSS	Household Food Security Scale
HIDN	USAID Global Health Bureau, Health, Infectious Disease and Nutrition
HIV	Human Immunodeficiency Virus
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
HPN	Health, Population and Nutrition
ICB	Institutional Capacity Building
ICDS	Integrated Child Development Services, India
ID	Iron Deficiency
IDA	Iron Deficiency Anemia
IDDS	Individual Dietary Diversity Score
IFA	Iron/Folic Acid
IFPRI	International Food Policy Research Institute
I-LIFE	Improving Livelihoods through Increasing Food Security, Malawi
INHP	Integrated Nutrition and Health Program, India
IR	Intermediate Result
IYCF	Infant and Young Child Feeding
JHU	Johns Hopkins University
JSI	John Snow International
KEMRI	Kenya Medical Research Institute
KPC	Knowledge, Practice and Coverage
LQAS	Lot Quality Assurance Sampling
M&E	Monitoring and Evaluation

MCHN	Maternal and Child Health and Nutrition
MDG	Millennium Development Goals
MIHFP	Months of Inadequate Household Food Provisioning
MINISANTE	Rwanda Ministry of Health
MOH	Ministry of Health
MTE	Mid-term Evaluation
MUAC	Mid-upper Arm Circumference
MYAP	Multi-Year Assistance Program
NARI	National Agriculture Research Institute
NASCOP	National AIDS and STD Control Program, Kenya
NCHS	U.S. National Center for Health Statistics
NFNC	National Food and Nutrition Commission, Zambia
NGO	Non-governmental Organization
NICS	Nutrition Information in Crisis Situations
NNS	National Nutrition Strategy
NWG	Nutrition Working Group
OFDA	USAID Office of U.S. Foreign Disaster Assistance
OGAC	Office of Global AIDS Coordinator
OICI	Opportunities Industrialization Centers International
OMB	Office of Management and Budget
OSU	Ohio State University
OVC	Orphans and Vulnerable Children
PAHO	Pan American Health Organization
PART	Program Assessment Rating Tool
PCI	Project Concern International
PDA	Personal Data Assistant
PDS	Public Distribution System
PEPFAR	President's Emergency Plan for HIV/AIDS Relief
PLHIV	People Living with HIV
PLWHA	People Living with HIV/AIDS
PMP	Performance Management Plan
PMTCT	Prevention of Mother-to-Child Transmission
PPC	USAID Bureau for Policy and Program Coordination
PPM	USAID Office of Program Policy and Management
PROCOSAN	Community-based Growth Promotion, Nicaragua
PROFILES	A Process for Nutrition Policy Analysis and Advocacy
PRRO	Protracted Relief and Recovery Operations, World Food Programme
PRSP	Poverty Reduction Strategy Paper
PSNP	Productive Safety Net Program
PVO	Private Voluntary Organization (also used for Cooperating Sponsor)
RCQHC	Regional Centre for Quality of Health Care, Uganda
RDA	Recommended Daily Allowance
ROADS	Regional Outreach Addressing AIDS through Development Strategies, Kenya and Uganda
RUSF	Ready-to-Use Supplementary Foods
RUTF	Ready-to-Use Therapeutic Foods

SAM	Severe Acute Malnutrition
SCF	Save the Children
SCN	United Nations Standing Committee on Nutrition
SD	Standard Deviation
SHG	Self-help Groups
SMART	Standardized Monitoring and Assessment of Relief and Transitions
SNNPR	Southern Nations, Nationalities, and People's Region
SO	Strategic Objective
SOH	Secretariat of Health
SOW	Scope of Work
SYAP	Single-Year Assistance Program
TAG	Technical Advisory Group
TANGO	Technical Assistance to NGOs International
TCI	Transport Corridor Initiative
TOT	Training of Trainers
TRAC	Treatment and Research AIDS Center, Rwanda
TRM	Technical Reference Materials
UK	United Kingdom
UN	United Nations
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
URC	University Research Corporation
US	United States
USAID	United States Agency for International Development
USAID/EA	USAID/East Africa
USDA	United States Department of Agriculture
USG	United States Government
WAGGGS	World Association of Girl Guides and Girl Scouts
WAZ	Weight-for-Age Z-scores
WFP	World Food Program
WHO	World Health Organization
WV	World Vision

INTRODUCTION

The Food and Nutrition Technical Assistance (FANTA) Project, a United States Agency for International Development (USAID) cooperative agreement managed by the Academy for Educational Development (AED), completed its eighth year of operation on September 30, 2006. FANTA provides technical leadership in food security policy and programming with a focus on food consumption and nutrition outcomes. Specifically, FANTA provides technical support in policy development, program design and implementation, and monitoring and evaluation (M&E) to private voluntary organizations (PVOs), host country governments, the USAID Bureau for Global Health (GH)/Office of Health, Infectious Disease and Nutrition (HIDN), GH/Office of HIV and AIDS (OHA), USAID's Bureau for Democracy, Conflict and Humanitarian Assistance (DCHA)/Office of Food for Peace (FFP), DCHA/ Office of Foreign Disaster Assistance (OFDA) and other USAID bureaus, offices, and missions. FANTA works in a number of focus countries and regions including: East Africa Region, Ethiopia, Kenya, Madagascar, Rwanda, Zambia, India, Guatemala, Haiti, Honduras and Nicaragua. In Project Year Eight, FANTA made preparations to begin work in Malawi, Mozambique and Namibia as well.

During Project Year Eight, FANTA continued its focus on the following priority technical areas:

- Strengthen Maternal and Child Health and Nutrition (MCHN) programs, with emphasis on improving infant and early childhood feeding indicators and measurement;
- Strengthen programming to improve women's nutrition and survival, including broadening the evidence-base on dietary diversity as an indicator of the adequacy of women's diets;
- Update guidelines for addressing nutritional care and support needs of families and people living with Human Immunodeficiency Virus (HIV). Develop guidelines and programming options for integrating food and nutrition interventions with antiretroviral therapy (ART) services, for mitigating the impact of HIV on food security, and for demonstrating the results achieved;
- Strengthen the guidelines for the management of acute malnutrition, including the Community Therapeutic Care (CTC) approach;
- Identify and validate indicators of food access, income, and vulnerability for problem assessment, targeting, and M&E of programs; and
- Strengthen program management through improved use of information generated by M&E systems.

FANTA uses a consultative process with its stakeholders to provide updates on technical advances and project activities and to solicit suggestions and feedback. Meetings are held with FANTA's Technical Advisory Group (TAG).¹ FANTA also works closely with the Child Survival Collaboration and Resources (CORE) Group and participates at technical venues, which serve as an important source of information on the priority technical assistance needs of some of FANTA's key PVO stakeholders.

¹The TAG membership consists of representatives from the PVO, academic, research, and USAID communities. The PVOs come from the food security and child survival and health implementing agencies and include representatives from Agricultural Cooperative Department International/Volunteers in Overseas Cooperative Assistance (ACDI/VOCA), Adventist Development and Relief Agency (ADRA), Africare, American Red Cross (ARC), Catholic Relief Services (CRS), Cooperative for Assistance and Relief Everywhere (CARE), Counterpart International, Food for the Hungry, Opportunities Industrialization Centers International (OICI), Save the Children (SCF), Technoserve, and World Vision International.

This report describes the activities undertaken by FANTA during Project Year Eight (October 1, 2005 – September 30, 2006). FANTA's ongoing activities are grouped by intermediate results (IRs) and are described in a detailed narrative.

STRATEGIC FRAMEWORK

FANTA's Strategic Objective (SO) is improved food and nutrition policy, strategy, and program development. The priority technical areas are considered critical to the attainment of this SO and represent themes that cut across FANTA's Intermediate Results (IRs):

- IR1: USAID's and Cooperating Sponsors' (CSs') nutrition and food security-related program development, analysis, monitoring, and evaluation improved;
- IR2: USAID, host country governments, and CSs establish improved, integrated nutrition and food security-related strategies and policies; and
- IR3: Best practices and acceptable standards in nutrition and food security-related policy and programming adopted by USAID, CSs, and other key stakeholders.

HIGHLIGHTS OF PROJECT YEAR EIGHT

Preventive versus recuperative approaches to reduce childhood malnutrition

FANTA completed a five-year study comparing the effectiveness of a preventive approach (targeting all children 6 through 23 months of age) and a recuperative approach (targeting malnourished children under 5 years of age) for reducing childhood malnutrition at the population level. The study compared the relative impact, cost and implementation implications of the preventive and recuperative approaches to food-assisted MCHN programming. The results clearly demonstrate that the preventive approach is more effective in reducing malnutrition - the prevalence of stunting, underweight and wasting was significantly lower in the preventive compared to the recuperative program communities after 3 years of program implementation (see **3.4.**)

Infant and Young Child feeding (IYCF)

FANTA collaborated with MEASURE/DHS to produce the *Infant and Young Child Feeding (IYCF) Update*, which provides data on key indicators, including a new summary IYCF indicator for children 6-23 months. The data are taken from the results of Demographic and Health Surveys (DHS) conducted between 1998 and 2004 in 43 countries in five regions of the world (see **3.2.2.a.**).

FANTA also completed a collaborative research study to develop and validate indicators of IYCF practices, specifically related to the frequency of feeding and nutrient density of complementary foods, for infants and young children 6 through 23 months of age in developing countries. The main findings are documented in *Developing and Validating Simple Indicators of*

Dietary Quality and Energy Intake of Infants and Young Children in Developing Countries: Summary of findings from analysis of 10 data sets. The results of the study provide a useful evidence base for the selection of indicators, field testing, and further dialogue towards consensus on global recommendations for IYCF indicators (see **3.2.2.b.**).

Scale-up and replication of community-based growth promotion programs

In efforts to strengthen the MCHN component and community-based growth promotion activities of Title II development assistance programs in the Central American region, FANTA carried out the following activities:

- FANTA and University Research Corporation (URC)/Calidad en Salud project held a *ProPAN: Process for Promotion of Child Feeding* workshop in Guatemala City, Guatemala. Workshop participants included 28 staff from the four Title II CSs in Guatemala, the Ministry of Health (MOH) of Guatemala, and various organizations working in nutrition and food security in Guatemala. The workshop trained participants in formative investigation methods and strategies in education and communication to improve results in behavior change among Community-based Growth Promotion (CBGP) beneficiaries (see **1.3.10.**)
- FANTA held a *Methods and Tools to Understand Participant Behaviors in Maternal and Child Health and Nutrition Programs* workshop in Tegucigalpa, Honduras. Workshop participants included 30 staff from the four Title II CSs in Honduras, the Secretary of Health of Honduras and the USAID Mission staff. The workshop introduced participants to behavior change theory and practice, and trained participants to use formative research techniques, with a special emphasis on IYCF, in order to better understand the motivators and barriers to behavior change among CBGP beneficiaries (see **1.3.12.**).
- FANTA held a *Quality Implementation of the Community Health and Nutrition Program* workshop in Pueblo Viejo, Nicaragua. Workshop participants included 32 staff from the four Title II CSs in Nicaragua, the Ministry of Health (MOH) and NicaSalud. The workshop helped identify specific areas for improvement in the PROCOSAN system for each local MOH/PVO team as well as local-level MOH/PVO plans to improve the quality of PROCOSAN implementation and counseling and negotiation (see **1.3.13.**).

Measuring household access to food

FANTA, in collaboration with Cornell and Tufts Universities, Africare and World Vision (WV), has developed the Household Food Insecurity Access Scale (HFIAS) - a scientifically validated, simple, and user-friendly approach for measuring the impacts of food security programs on the access component of household food insecurity. In Project Year Eight, FANTA published a standardized questionnaire and data collection and analysis instructions: *Household Food Insecurity Access Scale (HFIAS) for Measurement of Food Access: Indicator Guide* (see **3.2.1.a.**).

The Journal of Nutrition has been the principal forum for disseminating US-based research on food insecurity scales. It has also published most of the studies dealing with the application of

food insecurity scales in developing countries. A Journal of Nutrition Supplement, *Advances in Developing Country Food Insecurity Measurement*, summarizing the results of the FANTA-led HFIAS initiative was published in May 2006 and is available free-of-charge at www.fantaproject.org/publications/hfias2.shtml (see **3.2.1.a.**).

FANTA is collaborating with United Nations Food and Agriculture Organization's Nutrition and Consumer Protection Division (FAO/NCPD) in the use of the HFIAS, the Household Dietary Diversity Score (HDDS) and an individual dietary diversity score (IDDS), using the DHS instrument as a guide, in the European Community (EC)/FAO Food Security Information for Action Program, Phase II (FSIAP-II). FANTA's collaboration provides an important mechanism to broaden the use of the HFIAS and HDDS indicators beyond the Title II community (see **3.2.1.b.**).

Improving health and nutrition programming in emergencies

FANTA worked with the World Health Organization (WHO), the United Nations Children's Fund (UNICEF) and the U.N. Standing Committee on Nutrition (SCN) to bring together more than 50 international experts and representatives on November 2005 for a consultation on community-based management of severe malnutrition in children. A report of the consultation was published in September 2006 in the Food and Nutrition Bulletin (see **2.1.4.**).

FANTA, together with partners Valid International and Concern Worldwide released the manual: *Community-based Therapeutic Care (CTC): A Field Manual, First Edition 2006*. The manual provides program managers, practitioners, and technical specialists addressing severe acute malnutrition with the essential design, implementation and evaluation protocols for implementing the CTC approach. The manual was released in late September 2006 and will be disseminated in Project Year Nine (see **2.1.4.**).

FANTA is also collaborating with Valid and Concern in developing training modules based on the CTC Field Manual, which will form part of a strategy for scaling up the CTC approach internationally. The first regional training bringing together the community-based and facility-based approaches into an integrated approach to management of severe acute malnutrition was carried out by UNICEF/WHO/Valid in Tanzania, September 25-28, 2006, with support from FANTA (see **2.1.4.**).

FANTA is validating a modified Lot Quality Assurance Sampling (LQAS) approach for data collection in emergencies, which provides more timely and cost effective nutrition and health results comparable to those of a traditional 30x30 cluster survey. The approach was first field tested in Ethiopia in 2003. In September-October 2005, a second field validation was completed in Darfur Sudan using innovative handheld data entry with Dell personal data assistants (PDAs). A paper reporting the results from the initial 2003 field test of the approach was submitted to the International Journal of Epidemiology. (see **3.5.1.**).

Mainstreaming the use of food and nutrition in an HIV context

FANTA, in collaboration with the University of Malawi and Washington University at St. Louis,

began a randomized controlled trial investigating the differential impacts of supplementation with Plumpy'nut and corn-soy blend (CSB) on malnourished adult ART clients in Malawi. FANTA is also working with the Kenya Medical Research Institute (KEMRI) to conduct a randomized controlled trial comparing the impacts of nutrition counseling alone to the impacts of nutrition counseling and supplementation with a fortified-blended food (FBF) on malnourished adult ART and pre-ART clients in Kenya (see **3.3.1.**).

FANTA is collaborating with the World Food Program (WFP) to develop a handbook, *Food Assistance Programming in the Context of HIV*. A first draft has been completed, based on an extensive review of the literature, field visits to Ethiopia, Kenya, Uganda and Zambia, and a regional consultative meeting in South Africa with WFP country offices and their implementing agencies. Interagency Consultative Group meetings to share the 2nd draft are planned in Dublin and Washington, DC in December 2006. The handbook will be completed during Project Year Nine (see **3.3.2.**)

FANTA supported the Rwanda Treatment and Research AIDS Center (TRAC) to complete and disseminate the *Rwanda National Guidelines on Nutrition and HIV/AIDS* (see **1.3.7.**). FANTA also worked in collaboration with the Kenya MOH and UNICEF to complete, produce, and disseminate the *Kenya National Guidelines on Nutrition and HIV/AIDS* (see **1.3.2.**).

FANTA supported the integration of national guidelines in HIV service provision, and strengthened the capacity of service providers by working with national governments in Kenya, Rwanda, and Zambia to develop and disseminate national counseling and training materials on nutritional care and support of people living with HIV (PLHIV) (see **1.3.2.**, **1.3.7.** and **1.3.8.**).

Improving women's health and nutrition

The new brief, *Maternal Anemia: A Preventable Killer* (September 2006), details the causes and consequences of iron deficiency (ID), iron deficiency anemia (IDA) and anemia, and emphasizes the importance of implementing a package of interventions to address multiple causes of anemia. The brief is a product of collaboration between the GH Maternal Health team, A2Z Micronutrient and Child Blindness Project, ACCESS Program and FANTA. The brief is intended to advocate the implementation of integrated interventions to prevent anemia at the country level (see **2.1.1.**).

FANTA is working with the World Association of Girl Guides and Girl Scouts (WAGGGS) and the Regional Centre for Quality of Health Care (RCQHC) to expand coverage of anemia intervention packages in East and Southern Africa through a program to reach adolescent girls in three countries (Rwanda, Uganda, and Swaziland) with information, games, and activities about anemia prevention and control. Materials to support this activity, including a training manual, a badge and a workbook, were developed and pre-tested in Uganda during FY 2006 (see **2.2.2.**).

IR 1: USAID's and Cooperating Sponsors' nutrition and food security-related program development, analysis, monitoring, and evaluation improved.

1. ACTIVITIES IN SUPPORT OF IR 1

FANTA works with its partners and other stakeholders in nutrition and food security problem analysis, program design, and performance reporting. FANTA collaborates with GH, FFP, USAID Regional Offices and Field Missions, Title II PVO CSs and international organizations such as WFP and WHO. FANTA also works closely with the Child Survival and Health Grants Program (CSHGP) and its partners, the child survival and health PVOs, to support nutrition interventions in child survival and health programs. In addition, FANTA facilitates increased collaboration among child survival and health PVOs, represented by CORE, and Title II CSs.

1.1. Support to improve Title II food aid programming

FANTA assists DCHA, FFP and its partners strengthen implementation of and reporting on the Title II program, which is the Agency's largest program related to food security and nutrition in both emergency and development settings. The Title II program directly supports the Humanitarian Assistance, Investing in People, Economic Growth and Governing Justly and Democratically objectives of the new U.S. Foreign Assistance Framework.

1.1.1. Technical support to DCHA and PPC

1.1.1.a. Improve guidelines on nutrition and food security

The Title II Program represents the largest single source of resources within the United States Government (USG) available to focus on the problem of food insecurity internationally. Title II multi-year programs enhance household nutrition and increase incomes and agricultural production and productivity through a focus on decreasing risk and increasing resilience in vulnerable, food insecure populations. The FFP FY 2006-2010 Strategic Plan has expanded its objectives to emphasize vulnerability – the risk and consequences of, and resilience to, food security. This new FFP strategic objective- “reducing food insecurity in vulnerable populations”- encompasses both single-year emergency response and multi-year development relief programs.

Technical Content of Commodities Reference Guide (CRG)

FANTA supports FFP in periodically updating the technical content of the Commodities Reference Guide (CRG), an important source of information on the design and implementation of food aid programs for Title II CSs. FANTA provides technical assistance by updating the CRG to reflect current knowledge and international dietary recommendations.

In Project Year Eight, FANTA made revisions to the HIV references in the hard and online versions of the CRG, and provided an update on the wheat dockage percentage consistent with the U.S. Department of Agriculture (USDA) commodity requirements mandated of the manufacturers.

In response to an inquiry from USAID, FANTA researched the CRG for reference to the Institute of Medicine's 1989 Recommended Dietary Allowance (RDA) to evaluate whether and how an update to the 1997 Dietary Reference Intakes (DRI) standards could be implemented. The evaluation found that updated standards would affect the CRG only in the limited context of food ration energy calculation.

FANTA also participated on USAID's technical review panel of food aid commodity applications. In Project Year Eight, FANTA conducted reviews of three Title II commodity proposals: peanut butter, boxed rice and beans; and milk and whey products.

Corn Soy Blend quality and optimization

In July 2005, the Office of Program Policy and Management (PPM) requested assistance from FANTA to investigate the causes of and solutions to numerous reports of the Title II commodity CSB becoming discolored upon cooking. FANTA provided a technical review of USDA reports, data from USDA, USAID, WFP and PVOs, and information on manufacturer production and handling of CSB. FANTA advised USAID on action planning to rectify quality control problems associated with the over-fortification of CSB and served as a resource for FFP and PVOs requiring assistance on remixing their CSB. FANTA also completed and submitted a draft report of the review.

Due in part to the discoloration problem associated with CSB, as well as research showing that other food products such as Plumpy'nut may be more effective and rapid at treating acute malnutrition, there is growing international interest in improving the specifications of CSB. As a result of discussions with FFP on the optimization of CSB, FANTA drafted a concept note which aims to clarify blended food target groups, program objectives of CSB distribution and optimal CSB formulation in terms of micro/macronutrient content and levels. FANTA also participated in the Commodity Working Group Subgroup on Commodity Optimization meeting held in September, 2006 in Washington D.C. and made a presentation on key issues for consideration. The meeting was attended by USAID, USDA, food industry, and some PVO representatives.

The Standardized Monitoring and Assessment of Relief and Transitions (SMART) Initiative

The Standardized Monitoring and Assessment of Relief and Transitions (SMART) Initiative has worked to improve the monitoring, reporting, and evaluation of humanitarian assistance, through piloting an approach to routinely collect, analyze, and disseminate information on nutrition and death. With funding from FFP, GH, and the U.S. Department of State, FANTA worked with the USAID Bureau for Policy and Program Coordination (PPC), and key technical consultants to support a TAG and to organize a workshop on SMART in July 2002. Follow up meetings in 2004 and 2005 resulted in a draft methodology for assessing wasting, crude death rate, and some contextual information about food insecurity. FANTA provided extensive comments on the methodology in Project Year Seven. During Project Year Eight, limited engagement was undertaken while USAID and others sought funding for the overall effort.

1.1.1.b. Improve Title II food aid program design

Criteria for targeting emergency food aid established

To rapidly and aggressively implement FFP's new strategy, improve the effectiveness of resources to reduce food insecurity among vulnerable populations, and address the growing non-emergency funding crisis, FFP identified a list of priority countries for multi-year programming. This allows FFP to focus increasingly scarce multi-year non-emergency resources on a smaller number of countries (15 as opposed to the 32 countries that currently have multi-year programs) that are likely to require continued emergency food assistance in the absence of multi-year programs that address the underlying causes of food insecurity. By focusing on emergency-prone countries and vulnerable regions within them, FFP can react more quickly and effectively to emergencies.

FANTA provided critical technical assistance to FFP in the development and implementation of the criteria used to identify the priority countries. Countries with current programs were ranked (1 to 32) based on a weighted average of the country's ranking under three food insecurity indicators chosen because they addressed three aspects of food security: percent of children stunted (utilization), percent of population living under \$1/day (access) and percent of population undernourished (availability). The percent stunted ranking contributed 60 percent to the need-based country rank, the percent poor ranking contributed 30 percent, and the percent undernourished ranking contributed 10 percent.

As a result, FFP identified 15 countries for priority multi-year funding in FY 2007: Ethiopia, Zambia, DR Congo, Madagascar, Malawi, Liberia, Chad, Niger, Guatemala, Uganda, Bangladesh, Burkina Faso, Sierra Leone, Mozambique, and Haiti. FANTA also provided assistance in developing talking points and briefing documents on the priority countries, and participated in meetings with senior USAID management, including the Acting USAID Administrator and the Assistant Administrators of the Bureaus for DCHA; Africa; Latin American and the Caribbean; Asia and the Near East; and Program and Policy Coordination; a congressional staffer for Representative Barney Frank; and the PVOs.

MYAP scoring system established

FANTA developed review criteria and a scoring system for the review of Title II multi-year assistance programs (MYAP), and provided training to FFP, AMEX and technical reviewers in its use. The need for a more transparent and objective review and scoring system has been highlighted for a number of years given the increasingly limited amount of and competition for Title II non-emergency resources. The scoring system will help reviewers focus on the key elements of the proposals and should result in higher quality programs. FANTA also assisted in development of the FY 2007 Title II Assistance Program Guidelines.

FANTA comments on USG position papers

FANTA provided comments to FFP for incorporation in U.S. Government position papers on WFP Executive Board papers on 1) Transition from Relief to Development, focusing on natural

disasters, 2) HIV-AIDS: Follow-up to the Executive Board Recommendations, 3) Note on Humanitarian Access and its Implications for WFP and 4) Summary Report of the Thematic Review of WFP-Supported Mother-and-Child Nutrition Interventions.

Recommendations for reauthorization of P.L. 480

The FY 2007 Farm Bill will reauthorize P.L. 480, which is the authority for the FFP Title II program. In the past, Farm Bill changes have had a major impact on Title II, such as the mandate to streamline Title II program management, the authorization to expand the level of resources available to support CS management and administration of Title II programs, and the mandate that a minimum level of monetization be done under non-emergency programming. Over the last several years, it has been increasingly clear that several provisions within the current Farm Bill are difficult to implement, and make it challenging for the FFP program to function in a sufficiently effective, efficient and flexible manner.

The reauthorization of P.L. 480 next year provides an opportunity for FFP to work within the Administration to address some of the challenges that USAID faces in effectively implementing the Title II program so it can achieve food security results. In this regard, USAID will propose amendments to P.L. 480 in the Farm Bill that would assist USAID in implementing P.L. 480 programs more efficiently and in line with the President's overall foreign policy objectives. FANTA produced a report for FFP that identifies current Farm Bill authorities and mandates that have limited the efficiency of Title II program implementation, makes recommendations on specific amendments to the Farm Bill that would allow USAID to implement P.L. 480 programs more effectively and efficiently, and discusses recommended approaches to working with Capitol Hill to increase the probability of adoption of the proposed changes.

1.1.1.c. Review Title II single and multi-year assistance program proposals, results reports, and concept papers

FANTA provides written technical reviews for all new Title II MYAP proposals, and reviews selected CS Results Reports (CSR4) and Single-Year Assistance Program (SYAP) proposals, upon request. The reviews focus on food security problem analysis, program implementation strategy and relevance of the design, and M&E plan to address issues identified in the problem analysis and program design context. FANTA's written technical reviews during Project Year Eight are listed in Table 1.

Table 1: Title II Reviews by Type and Country

Program Reviewed	Country	PVOs
MYAP	Guatemala	ADRA, CRS, CARE, SHARE, SCF, WV
	India (phase-out plans)	CRS, CARE
	Liberia	CRS
	Mauritania	WV, ACDI-VOCA, Counterpart and Counterpart resubmissi

	Niger	Africare, CRS Consortium
	Sierra Leone	LEAD Consortium
	Uganda	ACDI/VOCA, CRS
	Zambia	C-FAARM, ADRA
DAP Amendment	Senegal-Gambia	CRS
DAP Close-out Strategy Amendment	Rwanda	CRS
CSR4	Mauritania	WV/Doulos Community

In Mauritania, in addition to reviewing the quality of the programming and M&E, FANTA researched other projects operating in Nouakchott, and prepared recommendations to the FFP Country Backstop Officer for future Title II programming in Mauritania. FANTA emphasized creating a strong community-based component to prevent malnutrition, as well as improving the rehabilitation activities by making them more community-based. In addition, FANTA also recommended ways of improving the M&E system so that results were comparable among the baseline, midterm, and evaluation surveys.

1.1.1.d. Assist in annual results reporting and development of DCHA/FFP FY 2006–2010 Strategic Plan and Results Framework

Support to FFP Annual and Close-out Reporting

FANTA assisted FFP to write the Performance Narrative section for the FY 2005 Annual Report. Feedback from FFP included “Brilliantly captures highlights and key results, well written, and eminently readable in typical [FANTA] style and standard. Bravo, [FANTA].” “Nice, impactful narrative. It has more punch than I remember from previous years.”

FANTA completed the close-out reports for the two SOs of FFP’s FY1997-2005 Strategic Plan. The close-out reports were well received. DCHA/PPM provided the following feedback: “I’ve reviewed the SO closeout reports and must say I am impressed by the quality of these materials. They are clearly written, cover the successes and challenges of your programs, and clearly document achievements against target indicators. I intend to use these as a reference given their wealth of information; especially, the program examples which will prove very useful in other types of reporting. Excellent job!” and from FFP “I received very, very positive feedback from PPM on the close-out reports! ...I’d like to share this document office-wide and archive in the AR database. This is really an excellent reference tool, especially considering the turnover in FFP staff. Thanks again for your excellent support!”

FANTA provided illustrative example text for inclusion in the Humanitarian Assistance narratives for the Joint State/USAID Performance Plan for 2007, to better reflect the successes of the Title II program.

Support to development of the FFP Performance Management Plan (PMP)

FANTA supported FFP in development of the first draft of the Performance Management Plan (PMP) for FFP’s new FY 2006-2010 Strategy. The draft PMP identified indicators at the SO and

IR2 level; indicators for IR1 are still being finalized. The PMP identifies SO -level indicators that capture the impact of the Strategy on the two aspects of food insecurity -- utilization and access -- that the Title II program best addresses.

- ❑ Given the critical importance of reducing malnutrition among the food insecure populations targeted by the program, the characteristics of the Title II food resource, and its demonstrated potential to address both access and utilization issues, FFP will report on two nutritional status indicators.
- ❑ Given the importance that the Title II programs, especially the multi-year programs, successfully increase resiliency to shocks by protecting and enhancing livelihoods of vulnerable households and improving their access to food, FFP will report on two household food consumption indicators.

The PMP explains the reasoning behind the selection of each indicator, and provides detailed information on indicator description, data collection methods, baselines and targets, and data quality assessment plans. FANTA developed a draft Standardized Annual Performance Questionnaire to help insure consistent and comparable reporting of data for the PMP indicators. FANTA also participated in multiple meetings on and revisions of the Annual Estimate of Requirements and Executive Summary Table forms to make them more efficient and comprehensive tools for collecting the information FFP needs for performance reporting.

Establishing a common performance measure for USG food aid programs

FANTA continued to provide technical assistance to FFP in discussions with USDA on a common performance measure for USG food aid programs to meet the requirements of the Office of Management and Budget and the Performance Assessment Rating Tool (PART). The common measure is based on the USDA Economic Research Service's (ERS) Food Security Assessment Model, a long standing, credible model (dating back to the late 1970s) that is used to produce ERS's annual Food Security Assessment Report. Specifically, FANTA provided input for and participated in discussions on the targeting assumptions incorporated in the model and the potential impact they have on the assessment and comparison of USAID and USDA programs. The discussions are on-going; no final consensus has been reached.

Integrating Title II program concerns to the Foreign Assistance Framework

FANTA provided technical input to help ensure that the new U.S. Foreign Assistance Framework reflects Title II program objectives, activities and target groups, and assisted in the definition and negotiation of Title II-program-related indicators and other Humanitarian Assistance Goal area indicators.

1.1.1.e. Provide technical assistance to Institutional Capacity Building Agreements

FANTA assists Institutional Capacity Building (ICB) Agreement recipients and USAID to demonstrate improvement in and report on the results of their investments in institutional capacity in food security. There are fifteen recipients, representing a wide range of CSs, with three- or five-year ICB agreements.

FANTA provided comments on and participated in FFP's review of FY 2007 Annual Workplans (AWPs) for 14 ICB grantees: ACDI/VOCA, Adventist Development and Relief Agency (ADRA), Africare, American Red Cross (ARC), CARE, Counterpart, Catholic Relief Services (CRS), Food for the Hungry (FH), Land O'Lakes, Mercy Corps, Opportunities Industrialization Centers International (OICI), Project Concern International (PCI), Save the Children (SCF) and WV. The review of the AWP identified a number of thematic areas where multiple CSs are investing ICB resources and more formalized opportunities to exchange information and share promising practices would be useful. These areas include HIV, development relief approaches, and early warning/vulnerability tracking systems and trigger indicators.

FANTA provided technical feedback to CRS's ICB midterm evaluator on several best practice documents produced under the ICB. Comments were provided on: 1) *Guidelines for the Development of Small-Scale Rural Water Supply and Sanitation Projects in East Africa*, 2) *Tsunami Recovery through Integral Human Development*, 3) *HIV/AIDS Best Practices*, and 4) *Propak: Project Design and Proposal Guidance for CRS Project and Program Managers*.

1.1.2. Technical support to CSs and USAID Field Missions

1.1.2.a. Participate in problem assessments for and baseline/mid-term/final evaluations of Title II food aid programs

Upon request, FANTA provides technical assistance to DCHA offices, Field Missions, and CSs in planning and conducting problem assessments for and evaluations of Title II food aid programs, including desk reviews of evaluation scopes of work (SOWs), identifying consultants, arranging field visits, and completing reports. It also includes support to FFP in assessing the need for redesign of on-going MYAPs in priority countries to ensure consonance with FFP's new strategy. In Project Year Eight, FANTA's support included facilitation of a two-day workshop with USAID/Tegucigalpa and Title II CSs in Honduras to develop technical inputs to the MTE SOW (see 1.3.12). FANTA also prepared the SOW for the Final Evaluation of CS DAPs in Haiti (see 1.3.11), and conducted negotiations with the consultant firm chosen to lead it.

1.2. Support to Child Survival and Health Grants Program (CSHGP) Portfolio

1.2.1. Technical support to PVOs and GH

FANTA engages in activities to improve the design, implementation, and M&E of maternal and child survival and health programs that focus on nutrition. In collaboration with CSTS, other Cooperating Agencies and CORE, FANTA provides technical feedback on the Knowledge, Practice and Coverage (KPC) 2000+ Survey modules and guidance materials and coordinates revisions of the Nutrition Module of the Technical Reference Materials (TRM) for the CSHGP.

Review of Detailed Implementation Plans

FANTA provided written reviews of Detailed Implementation Plans (DIPs) for Helen Keller International's Mali program, FH's Mozambique program and Salvation Army World Service's Zambia program. FANTA also attended the DIP review session at the Child Survival Mini-

University on the Johns Hopkins University (JHU) Campus in Baltimore Maryland in June 2006, where FANTA offered technical support to the FH team.

WHO Growth Standards

In April 2006, the World Health Organization (WHO) released new growth standards for children 0-5 years, replacing the U.S. National Center for Health Statistics (NCHS) 1978 child growth references as the international standard. FANTA facilitated a session on the new growth standards at the CSHGP Mini University in June 2006. FANTA also made a presentation for the CORE Group at the Spring 2006 meeting as well as through the internet-based technology Elluminate in a live on-line session on July 27, 2006 (see **1.2.1.a.**) The presentations provided information on what the new WHO child growth standards are, why they were developed, and how the new growth standards may affect population-level data for program monitoring, evaluation, and decision making.

1.2.1.a. Technical support to the CORE Group

CORE spring meeting

FANTA participated in the planning of the CORE Spring Meeting held on April 24-28, 2006 in Easton, Maryland. FANTA presented the new WHO Child Growth Standards to the plenary session. FANTA also organized and facilitated a panel discussion on CTC featuring representatives from Valid, Concern, SCF and Judiann McNulty. The participants presented an overview of CTC, a comparison of CTC to the PD/Hearth approach, and shared programmatic challenges to CTC implementation.

FANTA co-facilitated the Nutrition Working Group (NWG), leading discussions on M&E, IYCF and the new WHO Child Growth Standards and facilitating creation of the 2006-2007 NWG workplan. FANTA also gave a presentation on the updating Module 2 of the KPC.

Promoting Title II involvement in the CORE Group

While CORE participating members have traditionally been child survival program staff, CORE's mission is to support any PVO that is implementing community-based health programs. Greater involvement in CORE activities by Title II PVOs facilitates greater exchange of knowledge and experiences leading to an improvement in all community-based health programming. To better support food security interventions in maternal and child survival and health programs and promote improved collaboration between child survival and health PVOs and Title II CSs, FANTA established an action plan to involve Title II representatives more fully in the activities of the CORE Group.

Session topics for the CORE spring meeting, such as CTC and PD/Hearth, were specifically selected to have relevance for both Title II and CSHGP program staff and an invitation to the meeting was extended to Title II representatives in USAID's name. The plan resulted in participation by food security/food assistance program staff in addition to health program staff from key PVOs such as ARC, Counterpart, FH, Project Concern International (PCI) and SCF.

Many of these representatives went on to become active members of the CORE Group.

Illuminate online presentations to the CORE Group

FANTA made a presentation to the CORE Group on July 27, 2006 using the on-line Illuminate software platform. The presentation on the new WHO Child Growth Standards introduced participants to the new standards, why they were developed, how they may affect population-level data for program monitoring, evaluating and decision-making, as well as how they compare to the 1978 NCHS growth references.

After updating KPC Module 2: *Breastfeeding and Infant and Young Child Feeding* (June 2006) (see 3.2.2.a.), FANTA made an additional on-line Illuminate presentation on September 28, 2006 to introduce the new KPC 2000+ Module 2. The session was jointly sponsored by the Nutrition and M&E Working Groups.

1.3. Country-specific activities

FANTA implements long-term technical support programs in ten priority countries: Ethiopia, Kenya, Madagascar, Rwanda, Zambia, India, Guatemala, Haiti, Honduras and Nicaragua. FANTA also made preparations in Project Year Eight to provide future support in Malawi, Mozambique and Namibia. FANTA staff and consultants help ensure continuity and complementarity between in-country activities and activities under FANTA's other IRs, as well as follow-up on technical recommendations.

1.3.1. Ethiopia

FANTA is providing technical support to USAID/Addis Ababa and its partners under the new Productive Safety Net Program (PSNP). This new approach was designed to protect and build household and community assets to withstand food security shocks and challenges. The multi-donor sponsored PNSP, adopted in FY 2005 and led by the Government of Federal Republic of Ethiopia (GFDRE), targets 5-7 million chronically food-insecure individuals in 242 *woredas* (districts) in 8 regions, promotes development assistance to areas that are marginally food secure, and promotes the construction of a robust economy in more favored zones.

The Title II program in Ethiopia is currently implemented by CARE, Christian Help Fund, CRS, FH, the Relief Society of Tigray, SCF and WV. The activities of the eight CSs cover a variety of food security program interventions including: agriculture, natural resource management, microenterprise development, water and sanitation, MCHN, and humanitarian assistance. In addition, the Mission has a Development Assistance-funded bilateral portfolio focused on maternal and child health, HIV, agriculture and natural resource management, education, and democracy and governance.

National Nutrition Strategy

Over the last two years, extensive discussions have been held in Ethiopia on the development of a National Nutrition Strategy (NNS). This broad exercise is spearheaded by the Prime Minister's Office with support from UNICEF, the World Bank, the European Union (EU), the USG and other bilateral donors. IFPRI was put in charge of eliciting stakeholder views and assembling the document. FANTA provided extensive comments to the drafts circulated. It is expected that the NNS will be adopted during CY2007.

Establishing new priorities for health and nutrition programming

PROFILES is a process for nutrition policy analysis and advocacy that uses spreadsheet models to estimate the functional consequences of malnutrition, quantified in terms of work productivity, health and survival. Implications for economic development, education and the health sector are emphasized and help to build consensus on priority investments in nutrition and health.

FANTA conducted two PROFILES exercises in Ethiopia in 2000 which resulted in a series of recommendations, *Time to Act*, for health and nutrition programming in Ethiopia. Many of these recommendations were picked up by both John Snow International (JSI) and LINKAGES for their activities in Ethiopia and, in the 2002 cycle, FANTA successfully worked with CSs to incorporate the recommendations into their Title II Development Assistance Programs (DAPs). However, with the advent of the PSNP, the focus for Title II programming shifted away from nutrition interventions to a strong focus on Food for Work and unconditional food and cash transfers to chronically food-insecure areas.

The recently completed DHS data collection, coupled with the ongoing work on a national nutrition strategy presented an opportunity for a reassessment of health and nutrition priorities in Ethiopia. FANTA worked with USAID/Addis Ababa on a PROFILES III workshop which, unlike the two predecessor workshops, would be broken down by region, in the three main national states served by the Mission (Oromiya, Amhara and the Southern Nations, Nationalities, and People's Region (SNNPR)).

The workshop was initially scheduled to take place in June of 2006, however, the GFDRE delayed release of the DHS data due to controversial results showing HIV prevalence rates that are lower than expected. The GFDRE agreed to an official dissemination of the DHS results on September 28, 2006, paving the way for FANTA to mobilize stakeholders and set up firm dates for the workshop and follow-on activities. The workshop is now scheduled for early FY 2007 in Nazareth, Oromia.

Title II strategy development

There is a growing sense within USAID/Addis Ababa that the Title II program could be better integrated with other activities supported by the Mission. FANTA has discussed a 'visioning' exercise with the Mission, bringing together SO team leaders to derive internal consensus on the role of the Title II program within the Mission strategy and on improving the integration of USG resources (see 2.2.1).

Title II Baseline Survey

FANTA helped develop the design for the Title II baseline survey in Ethiopia, a design that was later used as the model for the larger baseline survey for the PSNP. FANTA provided extensive technical assistance to the implementation of Ethiopia's Title II baseline survey, which was carried out in 2005 by a local firm, Indak Consulting, trained by FANTA previously. That such a large undertaking could be taken up in a rigorous manner by a local firm is a testimony to FANTA's capacity building efforts in the area of monitoring and evaluation in Ethiopia.

1.3.2. Kenya

Kenya is one of the 15 focus countries under the President's Emergency Plan for AIDS Relief (PEPFAR) and has scaled up its HIV prevention, treatment, and care and support interventions. Recognizing the important role nutrition plays in effective HIV treatment, care and support, USAID/Nairobi has provided funds to FANTA to strengthen the integration of nutrition into HIV strategies and programs.

Coordination with PEPFAR

FANTA provided support to USAID/Nairobi's FY2006 Country Operation Plan (COP) for implementation of PEPFAR by providing information about new and ongoing activities in the integration of food and nutrition into HIV treatment and care programs.

FANTA also gave a presentation on the food, nutrition, and HIV programs and policies in Kenya at the Annual PEPFAR Implementation Meeting in Durban, South Africa in June 2006. The presentation illustrated to PEPFAR implementers how Kenya is carrying out the recommendations from the 2005 WHO Consultation on Nutrition and HIV/AIDS in Africa.

Targeted Evaluation of the impacts of food supplementation on ART and pre-ART clients

FANTA, in collaboration with the KEMRI, began a randomized controlled trial to investigate the impacts of food supplementation on the nutritional and clinical status of malnourished, adult ART clients and malnourished pre-ART clients. (see **3.3.1.**)

National guidelines on nutrition and HIV/AIDS

The *Kenya National Guidelines on Nutrition and HIV/AIDS*, developed by FANTA in consultation with the National AIDS and STI Control Program (NASCO), UNICEF and a Technical Working Group, were printed, launched and disseminated to HIV care and treatment sites throughout the country. The objective of the guidelines are to mainstream nutrition interventions into the national HIV response, assist service providers to identify locally appropriate, sustainable ways of improving dietary intake by those who are infected with HIV, and provide simple and practical ways to assess the nutritional status of HIV-infected clients and assess the risk of malnutrition. The guidelines establish a consistent set of nutrition recommendations for PLHIV and describe actions that service providers need to take to provide

nutritional care.

Training course and curriculum on nutrition and HIV

To strengthen the human capacity of HIV service providers to provide effective nutritional care and support, FANTA worked in collaboration with NASCOP to prepare a Kenya national trainer manual, trainee toolkit, and powerpoint slides for a nutrition and HIV training course. Comprehensive Care Clinics (CCCs), the government facilities where HIV patients are treated, were the specific target for the trainings and FANTA conducted three four-day training workshops for over 60 service providers from 36 CCCs and NGOs. The manual, toolkit, and slides are being printed for national dissemination and roll-out of the training. Next steps will include training of trainers (ToT) and technical assistance to hospitals to improve coverage of PLHIV by nutrition services.

FANTA also worked with NASCOP, UNICEF and a working group of government and donor institutions to draft a national training curriculum on nutrition and HIV. The training curriculum provides detailed outlines of topics to cover for training of service providers in Kenya in nutrition and HIV. The curriculum is a key reference to strengthen the capacity of health services in Kenya to provide nutritional care and support to PLHIV.

HIV- nutrition counseling materials

To further strengthen nutritional care and support of PLHIV throughout Kenya, FANTA worked with NASCOP and UNICEF to develop counseling materials on nutrition and HIV that focus on the food and nutrition needs of PLHIV. The materials consist of a flip chart of counseling cards, a poster on nutritional management of symptoms, and a poster on the nutritional implications of anti-retrovirals (ARVs) and other drugs. The materials were launched by the MOH and disseminated to health care workers and counselors at health centers providing HIV treatment and care services in March 2006. In collaboration with NASCOP, FANTA oriented over 50 service providers at 12 CCCs in use of the national counseling materials.

1.3.3. Madagascar

The three Title II CSs in Madagascar, ADRA, CARE and CRS, implement activities in agriculture, water and sanitation, MCHN, and humanitarian assistance. The Title II program also includes disaster mitigation as well as urban development activity in the capital city and in some secondary cities such as Fort Dauphin and Tamatave. FANTA has been providing technical assistance to USAID/Antananarivo through the Title II CSs and the Mission FFP Office. In Project Year Eight, FANTA expanded its technical support to the Mission Health, Population and Nutrition (HPN) Office as well.

Layers for Health, Population and Nutrition (HPN)

Following the implementation of the Layers methodology (see 3.5.2.) with the Mission FFP Office, the HPN Office expressed interest in using a similar approach to monitor its extensive program. HPN has oversight responsibilities over a large number of partners operating health, population and nutrition interventions in several regions of the country, and were seeking a

monitoring system capable of providing actionable information to the Mission and its partners on the implementation of their activities in Madagascar. Specifically, the goal is to provide the information needed to document annually the key indicators required to track SO5 performance, including its four IRs.

In Project Year Eight, upon request of USAID/Antananarivo, FANTA determined the feasibility of using Layers surveys to collect HPN program data, designed a template for data collection and analysis, developed the full system and hired and trained PENSER, a local firm with excellent experience in health-oriented surveys, in the use of PDAs and of the LQAS instruments developed for this system.

The first HPN survey was implemented in May-June 2006. After analyzing the data collected, FANTA assembled draft tabulations and made a presentation to stakeholders in Antananarivo in September. The presentation and discussion of the results illustrated the reliability of the methodology developed by FANTA: figures provided for various indicators (such as Exclusive Breastfeeding, Vitamin A coverage, Immunization coverage, as well as many other important results) were well in line with expectations, demonstrating the ability of the approach to provide yearly monitoring of outcome-level results at a low cost. It is expected that, following the final submission of the report, more presentations will be made in Washington during FY 2007 to illustrate the general approach and its advantages.

Layers for Title II

FANTA support to the Mission FFP Office focused on the implementation of the Layers methodology to allow the Mission to better monitor its activities, identify potential problems and ensure that food aid is being delivered to the intended populations. In addition to the usual modules of agriculture, nutrition, health and education, the Madagascar version of Layers allows the Mission to assess the quality of infrastructure built with Food for Work (FFW), using technical standards developed by FANTA and agreed upon among the Mission, the Title II CSs and the Government of Madagascar.

In Project Year Eight, FANTA helped the Mission FFP Office finalize the first phase of Layers for Title II. Field data collection was initiated in January 2005 and completed in January 2006. In March 2006, FANTA and the Mission held individual meetings with the Title II CSs to discuss the results and recommendations.

In preparation for phase two of the Layers surveys, FANTA made adjustments to the model used in the first phase and provided additional training to Mission staff in the operation of the sampling modules including compilation of the sampling frame, use of FANTA's hyper-geometric calculator, and final selection of the sample. FANTA developed new modules for use in phase two to cover the tree plantation and agriculture components of the Title II partners.

1.3.4. Malawi

FANTA met with the USAID/Lilongwe FFP Officer to discuss potential FANTA technical assistance to strengthen the current Improving Livelihoods through Increasing Food Security (I-

LIFE) consortium Title II program and food security programming in Malawi. FANTA provided USAID/Lilongwe with a written description of possible scenarios for technical assistance. FANTA is awaiting Mission feedback on these scenarios and finalization of a scope of work.

1.3.5. Mozambique

As part of a larger effort to support food security strategy development (see 2.2.1) FANTA has initiated preparatory work with USAID/Maputo, including drafting a SOW and starting a desk review, in an effort to develop supplemental guidance for the development of food security programs in Mozambique, including the Title II program, in advance of the new MYAP cycle for the period FY 2008 – 2012.

1.3.6. Namibia

In response to requests from USAID/Windhoek, FANTA supported the planning of a series of technical assistance activities to strengthen nutrition programming in the context of HIV that FANTA will implement during Project Year Nine with Mission funding. Planned activities include an assessment of food and nutrition needs in the context of HIV, a short course on nutrition, and development of counseling materials on nutrition and HIV.

1.3.7. Rwanda

Rwanda is burdened with high rates of child malnutrition. The 2000 DHS showed prevalence rates of 42.4 percent for stunting and 24.5 percent for underweight for children under five years of age. Rwanda is also one of the 15 focus countries under PEPFAR. Under the President's Emergency Plan, there is an increased focus on care and support for PLHIV, ART clients and orphans and vulnerable children (OVC). Strengthening of food and nutrition programming in Rwanda is critical for addressing the chronic nutrition problems of the overall population as well as for effective care and support of PLHIV, ART clients and OVC, in particular.

National Nutrition Policy

The revision of Rwanda's National Nutrition Policy was undertaken to ensure that Rwanda is able to support the nutrition-related objectives outlined in the Millennium Development Goals (MDG) and the Rwanda Poverty Reduction Strategy Paper (PRSP). In Project Year Eight, FANTA provided support to the revisions of the Policy, however the Policy has not yet been approved and adopted by the Secretary General for the Ministry of Health (MINISANTE).

National guidelines for nutritional care for PLHIV launched

As a part of the Rwanda Nutrition Working Group, FANTA assisted in the development of *National Guidelines on Nutritional Care and Support for PLHIV*. These guidelines were developed to define the actions that service providers need to take to provide quality nutritional care and support to PLHIV, supplement national policies on prevention and treatment, and strengthen and standardize care and support for PLHIV across organizations, programs and services.

The National Guidelines were finalized and officially launched in March 2006 at a workshop organized by TRAC and FANTA, and supported by a number of other stakeholders, including UNICEF, Elizabeth Glaser Pediatric AIDS Foundation and CARE. Training on the use of the guidelines was conducted for more than 40 stakeholders in Kigali in September 2006.

At the request of the Minister, the Rwanda Nutrition Working Group also developed an abbreviated version of the National Guidelines, referred to as the National Protocol for the Nutritional Care and Support of PLHIV, which are targeted at front-line health service providers. The National Protocol were finalized and distributed in Project Year Eight.

Training on nutrition care and support for PLHIV

A first draft of the French translation of the *Rwanda HIV/AIDS and Nutrition Training Manual* was completed. Drafts of the Training Manual are already being used for training in Rwanda. The Training Manual will be finalized and distributed in Project Year Nine.

FANTA provided a significant amount of training on nutritional care and support for adult PLHIV and children born to HIV-positive mothers to a number of different groups in Project Year Eight. This included training for: medical students at the National University of Rwanda Medical School, the University Hospital in Butare, the Ruhengri Hospital and the King Faycal Hospital; medical doctors, nurses and other service providers at private clinics, government-supported District Hospitals and PVO-supported health facilities; and over 60 TRAC trainers. In addition, training was provided on the use of anthropometric measurement for identification of moderately and severely malnourished PLHIV for 4 TRAC clinic service providers.

Nutrition counseling cards translated and printed

FANTA developed HIV and Nutrition counseling cards for use by government health facilities, PLHIV associations and PVOs in Rwanda. The counseling cards were adapted from regional counseling cards developed with support from USAID/East Africa (USAID/EA). Over 1000 copies of the counselling cards were distributed. Feedback on the quality of the counselling cards has been uniformly positive and FANTA is working with PVOs in Rwanda to print more copies of the counselling cards and adapt the contents for take-home brochures for PLHIV and their caregivers.

HIV and nutrition wall chart

FANTA, in collaboration with TRAC, distributed the HIV and Nutrition wall chart developed in Project Year Seven. The chart was produced mainly in Kinyarwanda and focuses on 10 messages related to healthy eating and lifestyles and proper care for PLHIV. The wall chart was distributed to 100 health facility and 755 PLHIV association sites, as well as to over a dozen CA and PVO partners in Rwanda.

Scholarship candidates for advanced nutrition degrees

The government of Rwanda (GOR) has set aside three WHO and Belgian Cooperation-funded scholarships for advanced nutrition degrees at the University of Nairobi. FANTA assisted with the recruitment and selection of candidates for these scholarships. The MOH Cabinet also finished the accreditation process for the Master's degree program in nutrition that has been developed for the National University of Rwanda/School of Public Health. Thirty candidates have been identified and accepted for this program. FANTA helped develop the course outline for this degree program.

PROFILES

In Project Year Eight, FANTA, in collaboration with UNICEF, provided support for two PROFILES workshops analyzing nutritional problems in Rwanda using spreadsheet models to estimate the consequences of malnutrition.

The Nutrition Working Group continues to fine tune the PROFILES presentation. The MINISANTE requested that once the National Nutrition Policy is finalized, PROFILES be presented in a forum presided over by the President with the objective of encouraging national debate on nutrition in Rwanda.

1.3.8. Zambia

Zambia is one of 15 PEPFAR focus countries and one of the hardest hit countries in the worldwide HIV epidemic, with an estimated one million individuals (10 percent of the population) currently HIV-infected. By strengthening HIV-related nutritional care and support services in Zambia, improving the quality of life of individuals receiving the services, and building community capacity to manage the negative impacts of HIV, FANTA activities contribute to PEPFAR goals and objectives in Zambia as well as USAID Lusaka's SO9: Reduced HIV/AIDS Impact through Multisectoral Response.

Nutrition counseling materials for PLHIV

To strengthen counseling of PLHIV and ART clients by home-based care and health facility providers on the importance of good nutrition, living positively, preventing and fighting illness through diet, and maternal and infant nutrition, FANTA developed a flipchart for use in HBC and two wall charts for use at the health-facility level. The materials, which were initiated in June/July 2005, were finalized and printed in Project Year Eight. FANTA provided support to the National Food and Nutrition Commission (NFNC) of Zambia in developing a dissemination strategy for the materials.

At the request of USAID/Lusaka, FANTA provided a concept note on a training of trainers in nutrition counseling and the use of the new flipcharts. This training of trainers from a number of organizations providing home and facility-based care will cover counseling techniques, nutrition and HIV, and use of the flipchart. These trainers will then be able to return to their respective organizations to train additional staff. This effort will fortify the roll-out of these counseling

materials in Zambia. This training is currently being planned for early 2007.

Community capacity assessment methods and monitoring tools

FANTA has been working with CRS/Zambia to refine community capacity assessment methods and monitoring tools, including analysis of existing Consortium for the Southern Africa Food Emergency (C-SAFE) and WFP community and household livelihoods surveillance (CHLS) datasets for Zambia in order to better characterize Zambian household vulnerabilities, coping capacities and response to HIV.

FANTA has been conducting an analysis of the data collected to further strengthen understanding of indicators of vulnerability to food insecurity in the HIV context and to allow food aid to be targeted more effectively. The final report will be produced in Project Year Nine.

Specialized Food Products

FANTA received positive feedback and final approval from the USAID/Lusaka mission on the report *Specialized Food Products to Address the Nutritional Needs of PLWHA and ART Clients in Zambia*. The report summarizes the findings from a FANTA assessment and provides recommendations to USAID/Lusaka on specialized foods to address national nutritional needs; improve the use of specialized food products in Zambia and identify food delivery options for ART, palliative care, therapeutic feeding and prevention of mother-to-child transmission (PMTCT); and assess the need for Ready-to-Use Therapeutic Food (RUTF) to address severe acute malnutrition related to HIV and potential delivery approaches for RUTF.

Conference on HIV, Nutrition and Food Security

At the request of PCI, FANTA helped organize a conference in Zambia on HIV, Nutrition and Food Security in May 2006, providing input on conference themes and organization. At the conference, attended by 221 participants from 20 countries, FANTA organized a session in which six organizations prepared foods currently being promoted for or targeted to PLHIV in different program settings. FANTA prepared information sheets for each food product and its programmatic use.

1.3.9. India

The India Title II program has faced a changing environment due to reduced commodity levels and efforts to accelerate the phase-out of Title II resources and phase-over of key activities to Government of India (GOI) programs. CARE and CRS completed a five-year Title II program in FY 2006, and will begin a three-year phase-out in FY 2007. CARE/India's Integrated Nutrition and Health Project (INHP) reaches over six million women and children in nine states with MCHN interventions, and uses Title II resources to strengthen the Government of India's Integrated Child Development Services (ICDS) program. In addition to maternal and child health and nutrition, CRS/India's Title II food security program includes agriculture and natural resource management, food for education and other humanitarian assistance activities. FANTA is providing technical support to facilitate the phase-over to GOI activities and resources and to

strengthen the ICDS program.

Phase-out plan for Title II program prepared

In response to a request from USAID/New Delhi, FANTA helped prepare a phase-out plan for the Title II program in India. Using documents provided by the Mission and its two Title II partners, CARE and CRS, FANTA prepared a plan detailing the programmatic process, resource details, and expected outcomes for phasing out all Title II resources from India between FY 2006 and 2011. Following further input from the Mission, the consultant refined the plan for final Mission review and submission to USAID/Washington.

Study of food aid transition in CARE Title II project areas

FANTA worked with IFPRI to conduct Phase I of a study of the progress and outcomes of the transition from Title II donated food to state government procured food in the CARE-assisted ICDS areas. The study responds to interest on the part of USAID/New Delhi, the GOI and CARE to draw lessons from the transition about opportunities to strengthen ICDS and other social safety nets. IFPRI submitted the final report, *Food Aid Transition in India's Integrated Child Developments Services (ICDS) Program in CARE-Supported Areas* from Phase I of the study of the transition. The final report incorporates input from USAID/New Delhi and CARE/India and is being disseminated to the Government of India and other stakeholders supporting the ICDS program.

The positive programmatic experiences reported in the study include strong commodity management, transparent reporting of program progress and impact, technical innovations such as the use of local food models for procurement, and convergence with health and nutrition services provided by Auxiliary Health Midwives working in the health system.

FANTA and IFPRI held a workshop in New Delhi, India on November 8-10, 2005 to report findings of their study of the program and food transition in the USAID funded Title II program managed by CARE and of positive programmatic experiences that might be replicated. Workshop participants included representatives from governments, donor agencies and academia. FANTA also provided input on the report to members of the team conducting the Final Evaluation for the INHP.

A revised proposal and workplan for Phase II of the study was submitted to the Mission. The proposed Phase II focuses on analysis of the various types of food procurement systems used in the ICDS, with in-depth focus on synergies between ICDS and the Public Distribution System (PDS) and on the use of self-help groups (SHG) for food procurement and supply.

Supporting replication of successful approaches from CARE's Integrated Nutrition and Health Project (INHP)

The India Planning Commission and the responsible ministries invited CARE, USAID and FANTA to provide input to the next generation of ICDS programs reflected in the 11th five year plan for India that will start in April 2007. By inviting its partners, GOI is signaling their

recognition of the importance of past USAID support of CARE's programs and the scope for improvements in the delivery of basic services at the village level. Both people and program impact of CARE's programs have been measured and FANTA's support and documentation has enabled the stakeholders to be confident of scaling up many of the key technical innovations.

In consultation with USAID/New Delhi, CARE, and GOI, FANTA produced a workplan and strategy for the replication of effective practices from the CARE Title II program into the larger GOI's ICDS program in two states. The workplan and strategy are the product of document review, field visits, and extensive consultations with stakeholders. The replication process has been endorsed by the GOI and implementation of replication is expected to begin during Project Year Nine. The replication process offers an opportunity to extend the successes of the Title II program to reach many additional beneficiaries through the large ICDS program, and offers an opportunity to build on a successful Title II food aid program to sustainably improve government programming.

1.3.10. Guatemala

Guatemala's Title II Program was implemented by four CSs in FY 2006: CARE, CRS, SHARE, and SCF, working in agricultural production, marketing and credit; natural resource management, water and sanitation, MCHN, and strengthening local government. FANTA works to strengthen the MCHN component, and community-based growth promotion activities, of Title II development assistance programs in Guatemala.

FANTA worked together with USAID/Guatemala, the Guatemalan MOH, URC/Calidad en Salud, and the Title II CSs to identify and agree on standards and norms for the implementation of a basic package for the Community-based Integrated Child and Maternal Care (Atención Integral a la Niñez y la Madre - AINM-C) activity. FANTA also trained the Title II CSs in the use of tools and methods to develop behavior change and communication (BCC) strategies focusing on improved IYCF, and key aspects to improve volunteer counseling for behavior change.

Improving behavior change interventions in MCHN programming

Use of appropriate behavior change methods can increase the impact of the MCHN components of Title II development projects. FANTA hosted a one-day workshop to strengthen behavior change in the design and implementation of MCHN programming. Eighteen participants from the four Title II CSs as well as URC/Calidad en Salud participated in the event, held November 29, 2005 at the offices of the USAID Mission in Guatemala City, Guatemala.

The workshop covered basic theories in behavior change, including the Health Belief Model, Stages of Change, and the Theory of Reasoned Action, among others. Presenters then shared the application of specific theories via existing frameworks and methods, including the BEHAVE framework, Positive Deviance Inquiry, Manoff's Behavior-centered Programming and the ProPan method for developing BCC strategies in IYCF. The event concluded with a panel discussion of the various frameworks and methods, their advantages and disadvantages, and recommendations for their application in programs. The workshop evaluation demonstrated that

the event met a felt need among the participants, that the vast majority were satisfied with the workshop, and that there is a strong desire to receive more technical assistance in this area, specifically, in applying the various methods that were discussed.

ProPAN: Process for the Promotion of Child Feeding Workshop

FANTA and URC/Calidad en Salud held a *ProPAN: Process for the Promotion of Child Feeding* workshop in Guatemala City, Guatemala in March 2006. Workshop participants included 28 staff from the four Title II CSs in Guatemala, the Guatemalan MOH, and various organizations working in nutrition and food security in Guatemala. The workshop, co-facilitated by FANTA, trained participants in formative investigation methods and strategies in education and communication to improve results in behavior change among CBGP beneficiaries.

ProPAN was developed by the Pan American Health Organization (PAHO), Emory Rollins School of Public Health, the National Institute of Public Health of Mexico, and the Nutrition Research Institute of Peru. It provides users with a step by step process for investigating nutritional and dietary problems and provides tools to design and evaluate interventions to address the problems that have been identified.

The workshop covered behavior change theories; guiding principles in complementary feeding and responsive feeding; description of ideal practices, actual practices, and gaps in knowledge regarding actual practices in complementary feeding; formative research techniques for discovering actual practices and the “why” behind them; behavior analysis to prioritize practices for promotion; recipe trials; trials of improved practices; development of communication strategies; counseling; and M&E. The workshop incorporated a combination of technical presentations, application of tools and concepts through small and large group sessions, presentation of working group results in plenary, participatory discussion, socio-dramas, and games to enhance participant comprehension and practical use of the various methods that were shared.

The final workshop evaluation demonstrated a high degree of satisfaction among workshop participants. Responses regarding participants’ opinions about the workshop processes and facilitators were consistently marked as “Very Good” or “Good” and all respondents indicated that they were “Very Satisfied” with the workshop.

Translation of the Linkages video on IYCF

FANTA translated the *Linkages Care and Feeding* video into Spanish and, working with a local firm, New Visions, produced new Spanish language versions. It is used as a tool to illustrate various ways of promoting growth and learning in young children through everyday interactions, including feeding, and was provided to participants of the *ProPAN* workshop as well as other interested organizations.

Measuring quality of implementation of AINM-C

Working with the Title II CSs, FANTA has developed a list of indicators to measure the quality

of implementation of AINM-C. After a FANTA presentation introducing the topic, the Title II CSs expressed interest in using LQAS to monitor the quality of AINM-C implementation, and asked to pilot its use. During meetings with USAID/Guatemala, Mission staff also expressed a great deal of interest in improving Title II CS capacity in using LQAS for this purpose in their programs. In response, FANTA will develop a scope of work for technical assistance in this specific area, to include training and field assistance in using LQAS for monitoring quality of program implementation, particularly AINM-C. This activity will be timed to coincide with the new MYAP cycle.

1.3.11. Haiti

FANTA provides technical support to USAID/Port au Prince in areas related to nutrition and food security, to the CSs to strengthen the implementation of their Title II development programs, and to the Haitian government in the development of a national early warning system. The difficult political environment and severe USG restrictions on travel to the country hindered FANTA's capacity to provide technical assistance, however, the following main activities were accomplished.

Preventive vs. recuperative approaches in food-assisted programs

FANTA completed a five-year operational research study comparing the preventive and recuperative approaches in nutrition interventions. The research clearly demonstrated that the preventive approach is more effective in reducing malnutrition (see 3.4.).

Mission FFP program priorities and resource integration

As part of a larger effort to support food security strategy development (see 2.2.1.) FANTA discussed a 'visioning' exercise with USAID/Port au Prince on the role of Title II programs within the Mission strategy and on improving the integration of USG resources.

Layers

FANTA initially developed its LAYERS methodology (see 3.5.2.) upon a request from USAID/Port au Prince in 2002. The unstable situation in the country has, however, impeded the full implementation of this activity, and Haiti now stands as the least advanced of the three countries where Layers is used.

In December 2005, the full Layers for Title II data sets had been collected by Field Monitors. FANTA moderated the subsequent presentation of results and discussions between the Mission and Title II CSs. FANTA also solicited input from stakeholders regarding recommended changes to the parameters and design of Layers; these were incorporated into Layers for Title II Round Two, which was rolled out mid Project Year Eight. The Layers for Title II application continues to be used in Haiti, with minimal input from FANTA. This demonstrates that capacity has been successfully built to implement the methodology, and that once implemented, local staff can operate the system without external support.

In the wake of the first reports generated by the Layers for Title II program, FANTA had discussions with the Mission HPN Office and partners on its flagship health program, HS2007, about the potential use of Layers to monitor the quality of service delivery in HS2007 sites. FANTA presented FANTA's experience using Layers to track health partner performance in other countries such as Madagascar to HPN staff along with representatives from HS2007 implementer Management Sciences for Health.

DAP Final Evaluation

In Project Year Eight, FANTA supported the Mission's Title II program as they undertook the Final Evaluation of the CS DAPs. Support included preparing the scope of work for this externally commissioned exercise, and representing Mission interests during negotiations with the consultant firm, Development Associates, to harmonize the technical needs of the work with the resources available to do it. The Final Evaluation and a draft report were produced by the consultant firm, but the report will need substantial reworking.

Harmonization of indicators between HS2007 and Title II CSs

Despite progress made in recent years to harmonize indicators across programs in Haiti, difficulties remained in merging the performance reporting systems of USAID contractors with those of the Title II CSs. USAID requested that FANTA examine how those differences could be bridged so that the Mission and Title II partners report jointly on at least a small set of indicators each year.

A preliminary identification of possible indicators was shared and four retained:

- Percent of children less than 12 months who are fully vaccinated
- Percent of children 6-59 months of age who received at least one dose of Vitamin A supplement in the last 6 months
- Percent of children 6-50 months of age who are underweight (-2 weight-for-age Z-scores (WAZ))
- Percent of pregnant women with three prenatal visits

FANTA discussed the methodology used in generating each of these indicators with the various partners, leading to agreements on a common set of standards with regard to the derivation of both the numerator and the denominator of each of those proportions.

1.3.12. Honduras

FANTA works to strengthen the MCHN component, and community-based growth promotion activities, of Title II development assistance programs in Honduras. In Project Year Eight, FANTA worked with USAID/Tegucigalpa, the Honduran Secretariat of Health (SOH), and the Community-based Integrated Child Care (Atención Integral a la Niñez - AIN-C) Interagency Committee, which includes the Title II CSs: ADRA, CARE, SCF and WV.

Training on standardized protocol for AIN-C implementation

FANTA, in coordination with the technical assistance unit of USAID/Tegucigalpa, built Title II CS capacity in Honduras to implement AIN-C according to SOH norms and standards, harmonizing messages, training and supervision through shared protocols and materials.

FANTA conducted 7 trainings for a total of 139 individuals consisting of community health volunteers, Title II CS staff and the Health Secretariat staff. The 5-day trainings were held in Comayagua, Copan, Langue Valle, San Lorenzo and Santa Barbara.

Training focused on a variety of topics including using the AIN-C baseline survey for community mapping, weighing children; determining minimum weight gain and whether children achieved minimum weight gain; preventive health activities (vaccination and supplementation with iron and vitamin A); counseling and negotiation; conducting monthly AIN-C meetings, meetings with the Secretary of Health and home visits; and basics of the information system.

The training revealed areas in which non-governmental organizations (NGOs) can improve implementation. Participant capacity was evaluated via participatory methods and demonstrated that follow-up training and supervision is needed on graphing of results of weighing session on child growth cards and counseling and negotiation.

FANTA conducted field visits to follow-up on AIN-C training conducted with ADRA, CARE and SCF and found that the CSs are implementing recommendations provided during the initial AIN-C trainings with FANTA. Areas to be improved include: prioritization of home visits, development and use of appropriate educational materials given literacy level of participants, follow-up on the use of counseling cards, and coordination with the national level AIN-C coordinator to negotiate involvement of local level SOH staff to ensure sustainability.

Training on AIN-C complementary activities

FANTA trained 18 CARE and 15 WV staff in complementary AIN-C activities, including establishment of support groups, communication for behavior change in AIN-C, use of the supervisory checklist to ensure quality of AIN-C implementation, strengthening of home visits and trimester AIN-C community meetings, and use of the forms for the information system.

Training on BCC

FANTA held a *Methods and Tools to Understand Participant Behaviors in Maternal and Child Health and Nutrition Programs* workshop in Tegucigalpa, Honduras. Workshop participants included 30 staff from the four Title II CSs in Honduras, the SOH and the USAID Mission. The workshop introduced participants to behavior change theory and practice, and trained participants to use formative research techniques, with a special emphasis on IYCF, in order to better understand the motivators and barriers to behavior change among CBGP beneficiaries.

AIN-C Interagency Committee

FANTA collaborated with the Honduran Secretariat of Health and USAID/Tegucigalpa to hold two meetings of the AIN-C Interagency Committee. During the first meeting, in October 2005, participants reviewed the work plan produced by the AIN-C Interagency Committee with support from FANTA. Discussion included progress in the six objectives identified in the work plan: strengthening regulation in implementation; maximizing financial and technical resources; financial, technical and social sustainability; AIN-C information system; BCC; and strengthening participation of local government and communities.

During the December meeting FANTA presented an update on BCC, objective number five of the workplan. FANTA proposed providing technical assistance to the Title II CSs in developing effective strategies in behavior change at the local level to complement Mission efforts at the national level. The December AIN-C Interagency Committee meeting also included presentations by the Honduran Secretary of Health and the World Bank on the certification process for service providers to become AIN-C implementers under the recently approved World Bank-funded nutrition and health program.

FANTA completed training to all Title II CSs in AIN-C implementation, as outlined in the work plan. Any further training needs are being coordinated separately by each Title II CS. FANTA has also completed the first part of the planned support for development of BCC strategies. FANTA technical assistance for the AIN-C Interagency Committee work plan will terminate following the second workshop on BCC strategy development planned for October 16-20, 2006.

AIN-C information system

In response to CS requests at the AIN-C Interagency Committee meeting, FANTA also co-facilitated a workshop with the Secretary of Health of Honduras and the World Bank for 20 Title II CS participants on the AIN-C information system. The workshop covered the AIN-C baseline survey, annual follow-up survey, community list of children, graphing of indicators, monthly summary data, monthly registry of diarrhea and acute respiratory illness (ARI) cases and their follow-up, and the application of the information system under the new World Bank extension of AIN-C coverage program. FANTA delivered a similar training for WV and SCF staff as well as Secretary of Health staff working in SCF project areas.

Revisions to AIN-C documents

FANTA assisted the Secretary of Health of Honduras, in coordination with the Mission technical assistance unit, to revise the following AIN-C documents: *Facilitator's Guide for Training Institutional Level Personnel*, *Facilitator's Guide for Training Community Health Volunteers*, the *Community Health Volunteer Manual*, and the *Supervisory Checklist*. Revisions were based on lessons learned in using the materials since their development in 1998, and revisions were tested with the Title II CSs during the above mentioned training sessions and field visits.

Mid-Term Evaluation of Title II Program

FANTA provided support to USAID/Tegucigalpa and the Title II CSs to prepare for the Mid-Term Evaluation (MTE) of the Title II program in Honduras, which will take place in FY 2007. FANTA facilitated a 2-day workshop with the Mission and the Title II CSs in order to develop the technical aspects of the MTE SOW, including MTE objectives, composition of the team and their duties, activities, deliverables and timeline.

1.3.13. Nicaragua

Since September 2003, FANTA has been providing assistance to Nicaragua through a sub-agreement with NicaSalud, a federation of 29 NGOs. Under the sub-agreement, NicaSalud works to strengthen national programs in infant and maternal health, reproductive health for youth and hygiene and environmental sanitation. FANTA technical assistance has helped NicaSalud better integrate nutrition into strategic planning in child survival and maternal health to improve food security in Nicaragua. As part of its work in maternal and child health, NicaSalud plays a key role in improving the quality of implementation and M&E of Nicaragua's community-based growth promotion program PROCOSAN.

An eight-month strike delayed FANTA technical assistance in Nicaragua in Project Year Eight, however, FANTA worked with USAID/Managua, the Nicaraguan MOH, NicaSalud and the Title II CSs to provide training on implementing PROCOSAN according to MOH norms and standards.

Support to NicaSalud

In Project Year Eight, NicaSalud entered into a direct bilateral agreement with USAID/Managua. In response, FANTA assisted NicaSalud in the qualitative evaluation of the final year of NicaSalud sub-grant implementation, further described below, and to complete all deliverables under the remaining period of the FANTA-NicaSalud sub-agreement. NicaSalud has experienced delays in providing the final deliverables due to staff reductions and the bilateral agreement process. It is expected that all deliverables will be submitted in Project Year Nine and the FANTA-NicaSalud sub-agreement will be closed.

Training on implementation of PROCOSAN

FANTA held a PROCOSAN workshop, *Quality Implementation of the Community Health and Nutrition Program*, in Pueblo Viejo, Nicaragua on August 16-18, 2006. Workshop participants included 32 staff from the four Title II CSs in Nicaragua, local and national MOH staff, and NicaSalud. Workshop participants identified specific areas for improvement in the PROCOSAN system for each local MOH/PVO team as well as local-level MOH/PVO plans to improve the quality of PROCOSAN implementation and counseling and negotiation.

The following recommendations for the implementation of PROCOSAN were developed by workshop participants:

- Provide technical assistance and follow-up (monitoring) of the implementation plans developed during the workshop, with a special emphasis on quality of implementation, introduction and adoption of PROCOSAN by the community, and counseling and negotiation.
- Promote linkages between Title II food security programs and PROCOSAN, especially food production and increased incomes with improved quality, quantity, frequency and consistency of food intake among children less than two years of age.
- Strengthen the role of health personnel to encourage and facilitate community-based actions.

Collaboration with NicaSalud on PROSIC evaluation

The PROSIC Project, originally designed to be a four year MCHN project, was implemented over a period of one year in three areas of Nicaragua: PROSIC Occidente, PROSIC Norte and PROSIC in the department of Madriz in central Nicaragua. The four year project was modified to terminate after one year of implementation due to changes in funding mechanisms planned by the USAID/Managua. The evaluation was conducted by regional teams consisting of PROSIC NGOs, the MOH, and NicaSalud.

The evaluation teams conducted in-depth interviews and focus groups, and used participatory methods with community leaders, volunteers and beneficiaries to determine strengths and areas for improvement in project implementation, capacity building and sustainability, analyzing these at the management, technical, operative and beneficiary levels. FANTA provided technical assistance to NicaSalud during the analysis of the qualitative data collected, helped define expectations for the analysis and developed the outline for the final report, stressing specific areas that required further analysis.

Preliminary results showed that the project, although it only had one-year of implementation, achieved a great deal of progress in building local NGO, MOH and community capacities. FANTA provided comments and revisions to NicaSalud final report on the evaluation and NicaSalud sent the text for translation into English.

IR 2: USAID and its counterparts establish improved, integrated nutrition and food security-related strategies and policies.

2. ACTIVITIES IN SUPPORT OF IR 2

Under IR2, FANTA seeks to strengthen the relationship between the Agency’s health and nutrition, agriculture, economic growth/poverty alleviation and food security-related programs in order to maximize the nutritional impact of these programs on target populations, especially young children, adolescents and women.

2.1. In Washington

2.1.1. Implement strategies for improving women’s nutrition

FANTA takes a lead role in coordinating efforts to improve women’s nutrition among USAID and its PVO partners by facilitating collaboration and by disseminating better practices and program options to the wider development community.

Maternal anemia brief

Iron deficiency (ID) is one of the most prevalent nutritional deficiencies and, as the cause of approximately 50% of all cases of anemia, has wide-ranging impacts on the health of women and their offspring.

In order to strengthen and expand its focus on iron deficiency, iron deficiency anemia (IDA) and anemia prevention and control efforts within its nutrition, maternal health and child survival and health portfolios, USAID/GH requested that FANTA and A2Z Micronutrient and Child Blindness Project produce a concise advocacy document that highlights the issues, new research and programmatic implications, as well as recommendations for intervention approaches to correct and prevent anemia.

FANTA worked collaboratively with GH Maternal Health and Nutrition staff as well as with A2Z and USAID’s ACCESS Program, to draft a technical brief on maternal anemia. *Maternal Anemia: A Preventable Killer* details the causes and consequences of ID, IDA and anemia, and emphasizes the importance of implementing a package of interventions to address multiple causes of anemia.

The brief highlighted recent meta-analysis which showed that IDA is associated with 22% of maternal deaths and 24% of neonatal deaths and that correcting anemia of any severity reduced the risk of death. This is a new finding and differs from the earlier view that only severe anemia is associated with increased mortality. The brief is intended to advocate the implementation of integrated interventions to prevent anemia at the country level.

The maternal anemia brief was launched along with a presentation by A2Z on prevention of maternal anemia at the *State of the Art Seminar on Maternal and Neonatal Nutrition*, hosted by

the ACCESS project on September 12, 2006. FANTA also made a presentation at the seminar on *Girl Guides: Prevention of Anemia in East and South Africa* (see **2.2.2.**)

Strengthening regional capacity to address maternal malnutrition

FANTA has been working with RCQHC and the African Regional Office of the World Association of Girl Guides and Girl Scouts (WAGGGS) to expand coverage of anemia intervention packages in East and Southern Africa through a program to reach adolescent girls in three countries (Rwanda, Uganda, and Swaziland) with information, games, and activities about anemia prevention and control (see **2.2.2.**)

Women's nutrition indicator guide

In response to the need for standardized, clear guidance on women's nutrition indicators, FANTA has developed the *Women's Nutrition Indicator Guide* to foster the consistent measurement of women's nutrition indicators and to standardize the data collection and analysis of these indicators. The guide, which focuses on problem assessment, monitoring, and evaluation was revised in Project Year Eight, incorporating new indicators such as the key Roll Back Malaria indicators relating to the prevalence of anemia in women of reproductive age. The guide, in review at the close of Project Year Eight, will be finalized in Project Year Nine.

Technical assistance to ACCESS Project

FANTA reviewed and sent comments on the proposed set of activities to improve the nutrition of women under the ACCESS project. These include providing technical leadership on the incorporation of nutrition in the care and services for pregnant women in the household-to-hospital continuum of maternal and newborn care; assisting with a review of the ACCESS project's incorporation of nutrition throughout its programs; and working with the ACCESS clinical and standards-based management team to review assessment tools for PMTCT and ARVs and integrate appropriate nutrition content.

2.1.2. Provide technical support to GH and USAID initiatives

FANTA provides technical support to GH and other USAID Bureaus in the area of nutrition and food security policy and programs to improve and strengthen the integration of nutrition into USAID programming. FANTA advocated for and facilitated the incorporation of promising practices and food security program approaches aimed at food insecure and more vulnerable populations into the USAID's new business model and strategic planning process, and initiatives for famine prevention, agriculture and rural development.

2.1.3. Improve the food security framework

FFP's FY 2006–2010 Strategic Plan places increased emphasis on problem assessment to identify sources of risk and vulnerability; the design of interventions to increase community, household and individual resilience to shock and chronic stress; and monitoring and evaluation systems that warn of increased food security stress and demonstrate the impact of Title II programs on reduced food insecurity through increased resilience. FANTA works with FFP,

field Missions and implementing partners to identify and validate best practices in development relief programming. FANTA also advocates and advises CSs on the development of Title II program designs that more directly address food insecure households' risk and vulnerabilities and utilize methods that will assist in M&E of vulnerabilities and resilience to food security shocks. FANTA seeks opportunities to directly assist USAID and CSs to tailor the basic development tools to development relief contexts.

2.1.4. Improve health and nutrition programming in emergencies

USAID is promoting better use of food assistance in conflict and emergency situations, operating appropriate interventions at scale and evaluating and documenting innovative approaches that link relief and development. To improve the response to emergencies by international agencies and implementing partners, FANTA has been working with technical, implementation and United Nations (UN) agencies in testing new approaches, developing and updating guidelines and promoting new technologies aimed at managing acute malnutrition. The work has focused on innovative implementation-level approaches that are also supported by improvements in the development of standard protocols and guidelines for the wider emergency community including host governments.

Severe acute malnutrition (SAM) represents an important risk for and cause of death and disability in poor countries. However, SAM without medical complications is readily treatable at home, with support from the community, and with the right foods in the right amounts. The recent development of convenient and palatable RUTF, such as Plumpy'Nut®, produced by French company Nutriset, has allowed for community-based treatment of SAM and facilitated significant expansion in program coverage. This can contribute substantially to reducing child deaths due to severe acute malnutrition, especially in emergency situations. Local production of RUTF by Nutriset franchises is underway in the Democratic Republic of Congo, Malawi and Niger, and is expanding to Ethiopia, Ghana, Mozambique, Tanzania and Uganda.

OFDA and GH have supported FANTA since 2002 to implement operational research on CTC of malnourished children. In addition, FANTA has been working with partner NGOs, including UK-based Valid International, and UN agencies in the implementation of CTC in emergency settings in Ethiopia, Malawi, and Sudan (Darfur and Southern Sudan). Experience to-date has been encouraging and FANTA has worked with and funded WHO and other UN agencies to facilitate the development of global protocols for community-based care for use by implementing agencies and host governments. Most significantly, WHO has begun to adapt community-based management of SAM and integrate the protocols with their well-established protocol for facility-based management.

During Project Years Six and Seven, FANTA worked with Valid to monitor effectiveness of the CTC approach in Ethiopia and Malawi and to look at the feasibility of local production of RUTF, nutrient-dense pastes, and alternative formulations that do not use costly milk powder or peanuts. These studies have already informed USAID and its partners about the advantages and limitations of the CTC approach. In addition, alternative local formulations of the RUTF have been tested in Ethiopia, Malawi and Zambia.

WHO/UNICEF/SCN consultation on the guidelines for community-based management of severe acute malnutrition

FANTA supported and participated in the WHO *Informal Global Consultation on Community Based Management of Severe Malnutrition in Children* on November 21-23, 2005 in Geneva. The consultation was hosted by WHO, UNICEF and SCN, and follows several years of field research and implementation and two prior meetings supported by FANTA. Participants included representatives from MOHs, international NGOs, WFP, UNHCR, and research institutions. The specific objectives of the consultation included to collect evidence on the feasibility, safety and effectiveness of community-based approaches for treating severely acutely malnourished children in resource-limited settings and identify knowledge gaps and areas of consensus that could be translated into global guidelines.

There was a general consensus on several points:

- Community-based management of severely acutely malnourished children using RUTF such as Nutriset's Plumpy'Nut® nutrient-dense peanut-based paste is effective.
- Mid-upper Arm Circumference (MUAC) less than 110 mm in children over 6 months of age can be used in active case finding as an independent criterion for admission to a community-based therapeutic feeding program.
- Community-based management is seen as a complement to supplementary feeding programs, hospital therapeutic feeding and appropriate referral for medical complications associated with wasting and edema.

FANTA's synthesis report of the consultation was published in September 2006 as SCN Nutrition Policy Paper No. 21 as a supplement to *Food and Nutrition Bulletin*. A joint UNICEF/WHO/UNHCR/WFP/SCN statement on community-based management of SAM has been agreed to and is currently going through the clearance process before being finalized for printing.

The recommendations from the meeting and the next steps affirm efforts undertaken by FANTA, USAID and its partners to develop evidence to support community-based care and provide lessons learned from Ethiopia, Malawi and elsewhere on application, replication and policy guidance. The CTC approach, together with development of imported and locally-produced RUTF, provides accessible and reproducible technologies and approaches for the treatment of SAM. WHO, UNICEF and SCN will disseminate the findings of the consultation widely among relevant stakeholders and develop guidelines for the management of SAM in children at the community level in coming years.

Joint Regional WHO/UNICEF training on management of acute malnutrition

In addition, WHO and UNICEF agreed to work together with FANTA in the mainstreaming of CTC protocols for the management of acute malnutrition. The first Joint Regional WHO/UNICEF training covering both facility- and community-based management of acute

malnutrition was held in Tanzania, September 20-30, 2006. Representatives from Botswana, Eritrea, Ethiopia, Kenya, Lesotho, Namibia and Tanzania participated.

Community-based Therapeutic Care (CTC): A Field Manual

FANTA, together with partners Valid and Concern released the manual *Community-based Therapeutic Care (CTC): A Field Manual, First Edition 2006*. The manual provides program managers, practitioners, and technical specialists addressing SAM with the essential design, implementation and evaluation protocols for implementing the CTC approach. The manual was released in electronic format in late-September 2006 and will be disseminated in Project Year Nine.

FANTA is collaborating with Valid and Concern in developing training modules based on the CTC field manual, which will form part of a strategy for rolling out the CTC approach internationally. The workplan was finalized for training modules on program planning, community mobilization, supplementary feeding, outpatient therapeutic programs, stabilization care and M&E.

ENN Operational Challenges Report

FANTA funded and provided extensive review of the Emergency Nutrition Network (ENN) report on the 2005 Inter-Agency Workshop on Community Therapeutic Care (CTC), *Operational Challenges of Implementing Community Therapeutic Care*. This latest ENN Field Exchange Special Supplement summarizes key elements of the presentations and discussions that emerged from the workshop held February 28 – March 2, 2005 in Washington, DC. In response to the growing numbers of agencies and MOHs implementing CTC, a consortium of NGOs, including FANTA, Concern, SCF and Valid, organized the workshop to identify issues and challenges in the implementation, integration and scaling up of CTC programming, and discuss mechanisms to ensure quality control over CTC programming. The supplement was mailed by ENN to practitioners throughout the developing world, while more than 19,000 copies were disseminated directly by FANTA in Project Year Eight.

CTC panel discussion at CORE Group

FANTA organized and facilitated a panel discussion with Valid, Concern, SCF and Judiann McNulty on CTC at the annual CORE Group meeting in Easton, Maryland in April 2006. The participants presented an overview of CTC, a comparison/contrast of CTC to positive deviance/Hearth approach, and shared programmatic challenges to CTC implementation.

Technical note on scaling up CTC

FANTA and Valid have begun collaboration on a paper discussing Valid's experience scaling up its CTC programs in Ethiopia and Malawi. FANTA has drafted an initial outline of the paper and shared it with Valid.

Emergency Rapid Assessment Tool

FANTA provided technical review and comments to UNICEF on the food and nutrition components of an emergency rapid assessment tool that was developed for use in Lebanon following the conflict between Israel and Hezbollah.

Lot Quality Assurance Sampling in Emergency Settings

FANTA, with funding from OFDA and GH, and in collaboration with SCF, conducted a field validation of 3 LQAS designs for rapid assessment of children's nutrition and health status in 2 districts in West Darfur, Sudan (see **3.5.1**)

2.2. With Missions

2.2.1. Support food security strategy development

In March 2006, FFP identified 15 priority countries for focusing of MYAP resources, an important step in implementing the FFP's 2006-2010 Strategic Plan. Development of Title II food security program strategies is the next necessary step in these countries to ensure effective use of the Title II resource in reducing food insecurity. FANTA supports USAID Missions and FFP in the implementation of a collaborative and participatory process to develop food security strategies to: 1) better address country-specific risks and vulnerabilities related to poverty, food insecurity and malnutrition; and, 2) improve the strategic integration of USAID resources in support of food security objectives. The strategies identify the most food-insecure, where they are located, and the priority programmatic foci to reduce their vulnerability to chronic food insecurity, including the appropriate use of direct food distribution and monetization components within the MYAP. The strategies serve as a guide for PVOs developing new or expanded MYAP proposals. This activity is an urgent priority in the FFP priority countries where a significant proportion of existing Title II MYAPs will end in FY 2008 and/or where a significant number of new FY 2008 proposals are expected. These countries include Ethiopia, Haiti, Mozambique, and possibly Malawi and Niger.

FANTA has initiated preparatory work for USAID/Maputo, USAID/Addis Ababa and USAID/Port au Prince to clarify Title II program priorities and support the integration of Title II and other USG resources in support of those priorities. In Mozambique, FANTA has written a SOW and started a desk review, while in Ethiopia and Haiti, FANTA has discussed a 'visioning' exercise with the Missions on the role of Title II programs within the Mission strategy and on improving the integration of USG resources (see **1.3.1.**, **1.3.3.** and **1.3.11.**).

2.2.2. Support USAID/East Africa (USAID/EA)

With support from USAID/EA, FANTA works in partnership with regional institutions to improve nutrition and food security programming in eastern Africa. FANTA's work supports USAID/EA's SO 11: Regional Health and HIV/AIDS Programs. FANTA's technical assistance focuses largely on building capacity to strengthen food and nutrition responses to the HIV epidemic, in particular through improved nutritional care and support for PLHIV and the uses of

food aid to mitigate the impacts of HIV and AIDS.

Guide to Monitoring and Evaluating Nutrition Education and Counseling for PLHIV

As an increasing number of government and private programs offer nutrition education and counseling for PLHIV, there is growing demand for support to monitor and evaluate these interventions. FANTA developed *A Guide to Monitoring and Evaluating Nutrition Education and Counseling for PLHIV*, which is expected to be the first guide to provide this technical support.

The guide, which is based on a FANTA review of existing M&E materials and practices in nutrition and HIV, offers suggested indicators, tools for data collection, and provides guidance about how to design and implement M&E for nutrition education and counseling services targeting PLHIV. The draft guide was reviewed by technical specialists internally and externally, and, in order to improve the data collection process and to make the guide and tools more practical for program use, the draft was sent for field testing by programs in Kenya and Uganda in September 2006. The guide will be completed and printed during Project Year Nine.

Training for community and home-based care providers

FANTA and the RCQHC completed draft training materials on nutrition and HIV for community- and home-based care workers in the region. The materials consist of a set of training job aids and an accompanying manual for trainers related to nutrition and HIV treatment and how nutrition can improve the quality of life of PLHIV. During Project Year Nine, the materials will be completed, printed, and disseminated in a regional workshop for trainers of community- and home-based care providers.

Nutrition and HIV training manual for nurses and midwives

FANTA completed *Nutrition and HIV/AIDS: A Training Manual for Nurses and Midwives* in collaboration with partners LINKAGES and East, Central, Southern Africa Commonwealth Health Secretariat (ECSA-CHS). The training manual was developed for nursing schools in the east, central and southern Africa region and is based on consultation with administrators and instructors from nursing schools. The manual consists of 12 sessions that provide technical knowledge and guidance for implementing nutritional care and support throughout the life cycle based on contact points where nurses meet patients. Following editing and layout, the manual will be printed and disseminated. A workshop to train nursing school instructors in use of the manual is planned for Project Year Nine by ECSA-CHS with technical support from FANTA.

Review of field implementation of nutritional care and support interventions

Five pairs of resource persons in Kenya, Malawi, Tanzania, Uganda, and Zambia, supported by FANTA and RCQHC, completed reviews of HIV and nutrition programs in their country and completed five country reports on promising practices that were identified. FANTA and RCQHC held a four-day workshop to strengthen the capacity of these ten resource persons to provide consultancy services in nutrition and HIV. At the workshop, feedback was provided on

draft country reports, after which the teams continued their reviews, revised their reports, and submitted final reports for each country. During the first half of Project Year Nine, FANTA will compile the promising practices identified by the teams into a compendium to support nutrition and HIV programming.

Food assistance programming in the context of HIV

FANTA has produced a draft handbook, *Food Assistance Programming in the Context of HIV*, to improve capacity in the assessment, design and implementation of food security programs that respond to HIV-related challenges and HIV programs that respond to food security challenges. The principal audience is program staff at the field level (see 3.3.2.)

Strengthening regional capacity to address maternal malnutrition

In East and Southern Africa, maternal anemia is the most prevalent nutritional deficiency condition among women of reproductive age, and has wide-ranging impacts on both women and their offspring. Folate deficiency, one cause of nutritional anemia, greatly increases the risk of neural tube defects in the fetus at the time of conception. Among adolescent girls, anemia contributes to reduced work productivity and decreased school performance.

In response, FANTA has been working with RCQHC and the African Regional Office of WAGGGs to expand coverage of anemia intervention packages in East and Southern Africa through a Girl Guides Anemia Prevention Badge Project to reach adolescent girls in three countries (Rwanda, Swaziland and Uganda) with information, games, and activities about anemia prevention and control.

By working with adolescents, FANTA and RCQHC plan to reach both girls and women with information for improved intake of iron-rich and iron absorption-enhancing foods, as well as increased access to and use of iron/folic acid supplements during pregnancy. This approach has the double benefit of improving the nutritional status of non-pregnant adolescent girls in the present, and laying the foundation for better antenatal/maternal health and nutrition care in the future. There are two primary objectives of the program:

- To support the development of a regional approach and tools to be used by the Girl Guides Associations to improve maternal nutritional status through anemia prevention and control interventions.
- To support the implementation of the regional approach in Rwanda, Swaziland and Uganda, and potentially other countries in the USAID/EA region.

The project will develop a system by which Girl Guides can earn a badge in anemia prevention through educational programs and community involvement in anemia control. By working with adolescent girls, the program will increase their knowledge of optimal self-care to prevent anemia, and through the badge program the girls will share this knowledge with pregnant women, increasing their ability to consume iron/folic acid (IFA) supplements.

FANTA helped organize a regional planning workshop for the project in Kampala, Uganda from January 20-31, 2006, where stakeholders worked collaboratively in the design of the badge award program. FANTA worked with technical staff from RCQHC, members of the Girl Guide Associations of Uganda, Rwanda and Swaziland and the Regional Girl Guides office, and representatives from the MOHs of Swaziland and Uganda, to develop badge award guidelines, a badge, an outline of training and communication materials, and the M&E system for the project.

FANTA materials to support the Girl Guides Anemia Prevention Badge Project, including a Guide Leaders Training Manual, Anemia Prevention Badge, Badge Handbook and Badge Workbook, were developed during Project Year Eight.

The training manual, handbook and workbook were pre-tested in Uganda with Girl Guide Leaders and Girl Guides (Brownies, Junior Guides and Rangers). The pre-test provided valuable recommendations on making the materials more relevant and age-appropriate for Girl Guides and the materials were revised. Materials will be printed and the trainings held in Project Year Nine.

Association for Strengthening Agricultural Research in Eastern and Central Africa (ASARECA)

To support the application of agricultural research and technologies to help mitigate the impacts of HIV, FANTA is providing technical assistance to the Association for Strengthening Agricultural Research in Eastern and Southern Africa (ASARECA) and implementing partners in the region.

FANTA developed a concept note, *Strengthening Research-Extension-Farmer Partnerships to Improve Food Security and Nutrition of Households Affected by HIV/AIDS in the Eastern and Central Africa (ECA) Region*, to provide technical assistance to ASARECA. The concept note, a result of discussions between REDSO, ASARECA, FANTA and Family Health International (FHI), aims to promote appropriate skills, knowledge and tools to better secure the livelihoods of PLHIV and their households through building the capacity of ASARECA and its National Agriculture Research Institutes (NARIs) in Kenya and Uganda to:

- use an HIV lens as an analysis tool for planning agriculture research and applying its results
- facilitate the establishment of farmer field and life schools (FFLS) and research-extension-farmer partnerships to enhance adoption of appropriate technologies for HIV-affected farm families along transport corridors
- share lessons learned from FFLS and research-extension-farmer partnerships to help improve the relevance of agriculture research and technologies to vulnerable groups, especially those affected by HIV.

FANTA finalized the scope of work for a Rapid Technology Needs Assessment for PLHIV to be conducted in Kenya and Uganda in Project Year Nine. Results of the assessment will guide the selection of FFLS program strategies, the identification of demand-driven technologies and nutrition educational programs that can be developed on the basis of established needs; and will foster voluntary adoption of appropriate skills, tools and knowledge relevant to agricultural-based livelihoods of PLHIV.

Technical assistance to the Transport Corridor Initiative (TCI)

FANTA has provided technical assistance to USAID/EA and FHI to support integration of food and nutrition components into regional HIV programs, with particular focus on USAID/EA's Transport Corridor Initiative (TCI) activities.

FANTA finalized a workplan with FHI to integrate nutrition into the USAID/EA-funded Regional Outreach Addressing AIDS through Development Strategies (ROADS) project which supports prevention and care of PLHIV and OVC at sites along the northern transport corridor. In two two-day workshops for the implementing partners of the ROADS project, FANTA trained over 50 members of community-based organizations, PLHIV networks, and OVC support groups in nutritional care and support. The national counseling and training materials on nutritional care and support of PLHIV which FANTA helped to develop were distributed to all participants. During Project Year Nine, similar training will be conducted for groups along the transport corridor in Uganda and possibly a third country.

IR 3: Best practices and acceptable standards in nutrition and food security-related policy and programming adopted by USAID, Cooperating Sponsors, and other key stakeholders.

3. ACTIVITIES IN SUPPORT OF IR 3

IR3 supports GH in fulfilling one of its primary functions of global leadership. FANTA focuses on promoting promising practices to improve food security, focusing on women, adolescent, and children's health and nutrition. While IRs 1 and 2 concentrate on a defined set of stakeholders (i.e., USAID, PVOs, host country governments), under IR3, FANTA synthesizes promising practices and acceptable standards in nutrition and food security programming for the wider development community. The primary approach is through research, analysis, documentation, consultation, and appropriate dissemination (e.g., training, technical assistance) to a wide stakeholder audience.

Through IR3, FANTA supports priority research in programmatic and operational issues and expands the institutional capacity of key stakeholder groups (e.g., PVOs, USAID Missions, and UN Agencies such as WFP, FAO, SCN, UNICEF and WHO) to assess, design, implement, monitor, and evaluate food security policies and programs. Priority technical areas include the expansion of CTC approaches to the management of severe acute malnutrition with MOH, PVOs and the UN agencies, and support for the adaptation and use of the HFIAS and HDDS tools for measurement of household food access. Results from IR3 are incorporated in FANTA support to USAID in the development of guidelines for the review of proposals and the direction of its food security/nutrition efforts.

3.1. Develop Food Security Indicator and Promising Practice publications

3.1.1. Technical notes on monitoring and evaluation

In Project Year Eight, FANTA produced and disseminated two technical notes to assist CSs in establishing and carrying out results reporting and evaluations for Title II development programs. Technical Note #10, *Monitoring and Evaluation Framework for Title II Development Oriented Projects*, and Technical Note # 11, *Evaluating Title II Development Oriented Multi Year Assistance Projects*, were disseminated in February and March 2006, respectively.

3.2. Approaches to measuring household and individual access to and consumption of food

The access to and consumption of adequate and appropriate food by households and individuals are important components of food security. FANTA is carrying out a set of activities aimed at developing user-friendly, cost-effective approaches to measure changes in food access, dietary quantity and quality, and feeding behaviors at the household and individual levels. USAID and PVO stakeholders have identified this work as a high priority. The results from technical assistance, facilitation, and operations research will help USAID and its partners to better address program M&E in this area as well as influence the design of data collection instruments

for and analysis of data from key sources of information on nutrition and food security, such as the KPC and DHS.

3.2.1. Measuring improved household access to food

3.2.1.a. Adaptation of the U.S. Household Food Security Scale approach in developing country contexts

There is strong demand among food security program managers for a relatively simple, methodologically rigorous measure of household food insecurity, particularly the access component that can be used to guide, monitor, and evaluate programs. In response to this demand, FANTA has undertaken a set of activities to identify a scientifically-validated, simple, and more user-friendly approach for measuring the impacts of food security programs on the access component of household food insecurity. As a result of these activities, FANTA, in collaboration with Cornell and Tufts Universities, Africare and WV, has developed a *Household Food Insecurity Access Scale (HFIAS) for Measurement of Food Access: Indicator Guide (Version 2, July 2006)*, with a standardized questionnaire and data collection and analysis instructions.

The HFIAS is composed of a set of nine questions that have been used in several countries and appear to distinguish food insecure from food secure households across different cultural contexts. These nine questions represent universal domains of the experience of insecure access to food that can be used to assign households and populations along a continuum of severity. The information generated by the HFIAS can be used to assess the prevalence of household food insecurity (e.g., for geographic targeting) and to detect changes in the food insecurity situation of a population over time (e.g., for M&E).

Development and release of the *Household Food Insecurity Access Scale (HFIAS) for Measurement of Food Access: Indicator Guide*

The process of developing the HFIAS has brought together academics, practitioners, governments and donors in an effort to better understand the impact of programs on household food insecurity. In FY 2003, FANTA and its partners at Cornell and Tufts Universities completed studies in Bangladesh and Burkina Faso to validate the US Household Food Security Scale (HFSS) approach for use in developing countries. The field validation resulted in a draft guide with standardized questionnaire and data collection and analysis instructions in Project Year Seven. In Project Year Eight, FANTA brought together thirty-two representatives from PVOs, the Centers for Disease Control (CDC), USAID, USDA, international organizations such as IFPRI, and Cornell and Tufts universities, at the Measuring Household Food Insecurity Workshop II on October 19, 2005 in Washington, DC. The workshop was aimed at reaching consensus on the questions that make up the HFIAS and on a transparent method to create continuous and categorical indicators based on the HFIAS. With input from the workshop, the core HFIAS team (FANTA, Cornell and Tufts universities) finalized the set of questions and instructions on how to analyze and report data from the HFIAS to produce the *Household Food Insecurity Access Scale (HFIAS) for Measurement of Food Access: Indicator Guide*. Version 1 of the document was published in March 2006 with Version 2, offering an updated questionnaire

section, released in July 2006. Uptake of the guides has been impressive - more than 6000 copies have been disseminated electronically and in hard copy

In May 2006, a supplement, *Advances in Developing Country Food Insecurity Measurement*, was published in the Journal of Nutrition, the principal forum for disseminating US-based research on food insecurity scales and most studies dealing with the application of food insecurity scales in developing countries. The supplement summarized the results of the FANTA-led HFIAS initiative and included articles on:

- findings of the first studies to develop and validate food insecurity scales from the "ground-up" in a developing country context;
- findings of the first cross-country study to compare the performance of the same set of food insecurity items in four dramatically different cultures;
- results of a cross-country review of food insecurity scale applications and its implications for the development of a universal measurement tool; and,
- status of the process to develop a universal measurement tool.

The Journal of Nutrition Supplement is available free-of-charge at www.fantaproject.org/publications/hfias2.shtml.

3.2.1.b. Promoting use of food access indicator measurement instruments

In addition to the HFIAS guide produced in Project Year Eight, FANTA also developed guides for two access indicators in previous project years: Months of Inadequate Household Food Provisioning (MIHFP) and HDDS. FANTA designed a Household Food Insecurity module which includes both the MIHFP and HDDS indicators and is included in the standard KPC survey instrument used extensively by the Child Survival and Title II PVOs. In addition, the food access indicators were adopted in FFP's PMP developed with FANTA assistance in Project Year Eight (See 1.1.1.d.). FANTA has continued to promote the use of these indicators for all Title II projects with access activities as well as further support the use of the indicators in FFP's PMP.

Collaboration with FAO's Nutrition and Consumer Protection Division (FAO/NCPD) and the European Community/FAO Food Security Information for Action Programme, Phase II (FSIAP-II)

FANTA is also collaborating with FAO/NCPD in the use of the HFIAS and HDDS, and an IDDS, using the DHS instrument as a guide, in the EC/FAO FSIAP-II. FANTA's collaboration provides an important mechanism to broaden the use of the HFIAS and HDDS indicators beyond the Title II community. During FY 2006, FANTA collaborated with FAO/NCPD to test and adapt the HFIAS, HDDS and IDDS tools in Kenya, Malawi and Mozambique.

3.2.2. Measuring IYCF practices

3.2.2.a. IYCF indicators

Optimal IYCF is a critical aspect of care to improved nutrition, health, and development of the child. Improving the definition and measurement of IYCF practices in the 6- to 23- month

period will help advocate for increased focus on this important determinant of infant and young child nutrition, in addition to improving the ability of program implementers to define the magnitude of the problem in their program context and monitor and report on improvements in IYCF practices.

IYCF Update

With support from GH, FANTA has been collaborating with ORC Macro (i.e., DHS, CSTS), CORE, and PVOs working on child survival and health activities to improve the use and interpretation of infant and child feeding data available from DHS and KPC surveys. During Project Year Eight, FANTA collaborated with Measure/DHS to produce *Infant and Young Child Feeding (IYCF) Update* (September 2006) which provides data on key indicators, including a new summary IYCF indicator for children 6-23 months.

The document was finalized in September 2006, and uses DHS data from 1998-2004 to report on IYCF indicators for 43 countries. Data on a number of new IYCF indicators, including indicators for frequency of feeding, food group diversity, and a summary IYCF indicator, are provided in the update. These indicators were developed using the scientific rationale provided by *Guiding Principles for Complementary Feeding of the Breastfed Child* (PAHO/WHO 2003) and *Guiding Principles for the Non-Breastfed Child 6-24 Months of Age* (WHO 2005).

Updates to KPC Module 2

FANTA also revised KPC Module 2: *Breastfeeding and Infant and Young Child Feeding* (June 2006) to be consistent with the DHS tabulation plan for IYCF indicators. FANTA updated the indicator list in Module 2 to reflect the current WHO Guiding Principles and included the summary IYCF indicator developed by FANTA and IFPRI and tabulation instructions for all indicators included in the Module. The revised module is posted on the [CSTS+ website](http://www.childsurvival.com/kpc2000/mod2_06_28_06.pdf) at http://www.childsurvival.com/kpc2000/mod2_06_28_06.pdf.

FANTA made a presentation on the updated Module to the CORE Group, using the On-line Elluminate technology. The session was jointly sponsored by the Nutrition and M&E Working Groups.

3.2.2.b. Developing and Validating Indicators of Feeding Frequency and Nutrient Density of Complementary Foods for the Breastfed and Non-Breastfed Child In Developing Countries

Clear guidance for the international community on optimal IYCF practices has been achieved with the publication of the *Guiding Principles for Complementary Feeding of the Breastfed Child* (PAHO/WHO 2003) and *Guiding Principles for the Non-Breastfed Child 6-24 Months of Age* (WHO 2005). Over the past several years, FANTA has implemented a multi-stage initiative to develop a set of indicators to assess IYCF practices and to monitor and evaluate progress on improving IYCF practices worldwide. During Project Year Eight, FANTA worked with IFPRI, University of California at Davis, WHO, and collaborating researchers from several developing countries to develop and validate indicators of feeding practices, specifically related to the

frequency of feeding and nutrient density of complementary foods, for infants and young children 6 through 23 months of age in developing countries.

An important milestone in the process was achieved during Project Year Eight with the publication of the results of research carried out using ten data sets with information on dietary intake of children 6 through 23 months of age: 3 from Africa (Ghana, Madagascar and Malawi), 3 from Asia (Bangladesh, India and the Philippines), and 4 from Latin America (1 from Brazil, 1 from Honduras and 2 from Peru). Two main research questions were addressed:

1. How well can dietary diversity (sum of foods or food groups consumed over a reference period) or sentinel food group (selected nutrient-dense food groups) indicators predict dietary quality for infants and young children in different populations with varying dietary patterns?
2. How well does the frequency of feeding of foods and nutritive liquids other than breast milk (hereafter referred to simply as “foods”) predict energy intake – either energy from foods alone or total energy intake – in different populations with varying dietary patterns?

The main findings of this collaborative research activity are documented in the final report *Developing and Validating Simple Indicators of Dietary Quality and Energy Intake of Infants and Young Children in Developing Countries: Summary of findings from analysis of 10 data sets*. The results of the study provide a useful evidence base for the selection of indicators, field testing, and further dialogue towards consensus on global recommendations for IYCF indicators. The findings support the use of dietary diversity indicators to assess dietary quality in populations of infants and young children who do not regularly consume fortified foods. In contexts where fortified foods are widely consumed, additional indicators that reflect consumption of fortified foods are also needed. The study did not identify a universal cutoff for feeding frequency that could be used across populations to predict low energy intake with an acceptable level of accuracy. However, because feeding frequency is still a useful indicator of feeding practices, adoption of feeding frequency indicators that reflect the Guiding Principles are recommended.

3.2.3. Validating dietary diversity as a measure of the adequacy of women’s diets

The DHS 2005 revised questionnaire includes, for the first time, a 24-hour recall question on food group consumption of the mothers of children less than three years of age. Inclusion of this question represents a significant opportunity to advocate for an increased emphasis on women’s diet quality.

To support the use and interpretation of data collected using the new DHS 2005 questionnaire, FANTA is collaborating with IFPRI to conduct a secondary analysis of food group consumption (dietary diversity) data to assess the adequacy of consumption of specific macro- and micronutrients for women. An expression of interest was solicited from research organizations that have extant, ready-to-analyze women’s food consumption datasets from developing countries, and 11 data sets representing Africa, Latin America, and Asia were identified. IFPRI

will develop a protocol for data analysis and use it to analyze at least one data set during Project Year Nine.

3.3. Strengthening food and nutrition responses to HIV

FANTA provides technical support to GH, DCHA, other USAID Bureaus and USAID/EA to integrate food security/nutrition objectives into USG HIV strategies and programming.

3.3.1. HIV nutritional care and support

For the past six years, FANTA has provided technical assistance at multiple levels to strengthen nutritional care and support for PLHIV. FANTA assists regional institutions, country teams and programs in adapting global guidance to develop locally appropriate nutritional care and support programming and guidelines. Working with regional partners, FANTA has developed national guidelines for nutritional care and support for PLHIV and training and counseling materials to strengthen the capacity of service providers.

National guidelines for nutritional care and support for PLHIV

In Project Year Eight, FANTA supported TRAC to complete and disseminate *the Rwanda National Guidelines on Nutrition and HIV/AIDS* (see **1.3.7.**) and worked with the Kenya MOH and UNICEF to complete, produce and disseminate the *Kenya National Guidelines on Nutrition and HIV/AIDS* (see **1.3.2.**). FANTA has directly supported the development and production of national guidelines in four countries (Kenya, Rwanda, Uganda and Zambia) and has provided technical assistance supporting national guidelines in an additional eight countries (Botswana, Ethiopia, Lesotho, Malawi, Namibia, Swaziland, Tanzania, Zimbabwe).

National counseling and training materials

FANTA supported the application of national guidelines in HIV service provision, and strengthened the capacity of service providers by working with national governments in Kenya, Rwanda, and Zambia to develop and disseminate national counseling and training materials on nutritional care and support of PLHIV (see **1.3.2., 1.3.7.** and **1.3.8.**).

Expanding evidence of the role of food supplements in HIV treatment and care

In order to strengthen the evidence base on the impacts of food supplementation on the nutritional and clinical status of HIV-infected individuals, FANTA is partnering with local partners to conduct two Targeted Evaluations with PEPFAR funding from OHA and USAID/Nairobi. FANTA also partially supported a recent observational study of the effectiveness of CTC for malnourished HIV-infected children. The study was funded by the USAID Bureau for Africa.

In Malawi, FANTA, in collaboration with Washington University at St. Louis and the University of Malawi, began a randomized controlled trial to investigate the differential impacts of two food products on the nutritional and clinical status of malnourished, adult ART clients. During the

initial three months of ARV treatment at Queen Elizabeth Central Hospital in Blantyre, Malawi, HIV-infected adults with BMI<18.0 receive either CSB or an RUTF consisting of micronutrient-fortified nutrient-dense paste (Plumpynut®). Nutritional counseling is provided to all clients. The CSB and RUTF both provide 1360 kcal per day – approximately 45% of subjects’ daily energy requirement – but the two products differ in form, composition, nutrient density, and protein and micronutrient content. Data on subjects’ nutritional status (body mass index (BMI), bioelectrical impedance analysis (BIA), and serum albumin), clinical status (viral load, CD4 count, clinical events), quality of life, and adherence to ARV drugs will be collected for the three months of supplementation and for nine months of follow-up. Recruitment proceeded on schedule, and final results are expected in early 2008.

In Kenya, FANTA, in collaboration with KEMRI, began a randomized controlled trial to investigate the impacts of food supplementation on the nutritional and clinical status of malnourished, adult ART clients and malnourished pre-ART clients. HIV-infected adults with BMI<18.5 at five sites in Kenya receive either a micronutrient-fortified blended food product and nutritional counseling, or nutritional counseling alone during their initial six months of ARV treatment (for ART clients) or during six months of cotrimoxazole treatment (for pre-ART clients). The product, locally manufactured by Insta, is composed of corn, soy, oil, sugar, whey protein, and micronutrient premix and provides 1320 kcal per day. Data on subjects’ nutritional status (BMI, MUAC, BIA, serum albumin), clinical status (CD4 count, clinical events), quality of life, and drug adherence will be collected for the six months of supplementation and six months of follow-up. Within each arm of the study (ART and pre-ART) outcomes of subjects who receive food will be compared with outcomes of those who do not.

In Project Year Eight, FANTA finalized the study protocol, prepared data collection tools, obtained approval by review committees in Kenya and the US, prepared training content for site staff, recruited and trained staff, and began recruitment of study subjects and collection of data. Recruitment proceeded more slowly than expected in Project Year Eight as a result of decentralization of ART services. Final results are expected in early 2008.

WFP Nutrition and HIV seminar series

As part of WFP’s Nutrition and HIV seminar series, FANTA made a presentation in March 2006 on nutritional interventions for PLHIV and the use of therapeutic foods. The seminar was well attended by UN, NGO, World Bank, and USAID representatives and covered nutritional requirements of PLHIV, nutrition program objectives, definitions of food interventions, and current research on the use of RUTFs.

Support to the Office of the Global AIDS Coordinator (OGAC) and PEPFAR

In the continuing effort to strengthen food and nutrition programming in HIV contexts, FANTA provided background documents and input to the Office of the Global AIDS Coordinator (OGAC) in their development of the PEPFAR *Report on Food and Nutrition for People Living with HIV/AIDS*. The report was submitted to Congress in May 2006. FANTA also provided input to a PEPFAR policy document on food and nutrition interventions, guidance on technical interventions, steps for operationalizing food and nutrition interventions and other documents. In

response to requests from the USAID Office of HIV/AIDS, FANTA provided information on the evidence base and experience in nutrition and HIV programming.

FANTA also participated in the PMTCT and Infant Feeding Community of Practice, led by LINKAGES that developed indicators for PMTCT and infant feeding interventions in PEPFAR programs.

3.3.2. Food security and food aid interventions to mitigate the impact of HIV

For the past two years, FANTA has expanded its activities focused on mitigating the impact of HIV on food security. Using interviews, consultation, and experience-sharing with food aid stakeholders, FANTA began developing programming guidance on uses of food aid to mitigate the impacts of HIV. FANTA also provided technical assistance to WFP in the design of WFP Protracted Relief and Recovery Operations (PRRO) proposals, country action plans, and implementation guidelines.

Draft handbook on food assistance programming in the context of HIV

There has been increased acknowledgement in the development community of the links between food insecurity and HIV and the corresponding need to integrate food and nutritional support into a comprehensive response to the HIV epidemic. Recognizing this, FFP, OHA, USAID/EA and the Bureau for Africa, as well as WFP, provided funding to FANTA for the development of program-level technical guidance to meet this challenge.

The draft handbook, *Food Assistance Programming in the Context of HIV*, seeks to improve capacity in the assessment, design and implementation of food security programs that respond to HIV-related challenges and HIV programs that respond to food security challenges. The principal audience is program staff at the field level.

The handbook is the result of a consultative process begun in 2003 which has included food security programming needs assessments, roundtable discussions, consultations, country visits, and review workshops with WFP, USAID, other international and bilateral organizations, Title II PVOs, and local and international implementing partners. TANGO (Technical Assistance to N.G.O.s) International is the lead writer with FANTA being responsible for review of each chapter and production of the draft handbook.

The first draft of the handbook was completed in Project Year Eight, based on an extensive review of the literature, field visits to Ethiopia, Kenya, Uganda and Zambia, and a regional consultative meeting in South Africa with WFP country offices and their implementing agencies. Interagency Consultative Group meetings to share the second draft are planned in Dublin and Washington, DC in December 2006. The handbook will be completed in Project Year Nine.

ASARECA

To support the application of agricultural research and technologies to the mitigation of HIV impacts, FANTA is providing technical assistance to ASARECA and implementing partners in the region (see 2.2.2.).

3.4. Preventive vs. recuperative approaches in nutrition interventions

The design of the food component of food-assisted MCHN interventions is a critical determinant of the eventual impact the intervention will have on the nutritional status of the population of interest. Currently, two main approaches exist: recuperative and preventive.

In the traditional recuperative approach, children under a certain age (typically five years old) are targeted to receive food supplements, based on their nutritional status as measured during growth monitoring activities. Children identified as having a weight-for-age below the –2 standard deviation (SD) from the median cutoff point are eligible to receive food rations for periods of varying length.

In the preventive approach, by contrast, food supplements are targeted to all children between 6-to-23 months of age irrespective of their nutritional status and are expected to prevent growth faltering and malnutrition.

There is strong scientific evidence to suggest that a preventive approach can have a greater public health impact over the long term. However, no effectiveness trial had confirmed the theory in a real life context. To clarify this issue, and to understand how to best design and implement a preventive intervention, FANTA, with technical support from IFPRI and Cornell University and in collaboration with WV/Haiti, supported a field study in Haiti comparing, in an operational context, the relative impact, cost and implementation implications of the preventive and recuperative approaches to MCHN programming with a food supplementation component.

FANTA completed the five-year study in Project Year Eight. The results clearly demonstrate that the preventive approach is more effective in reducing malnutrition, with the prevalence of stunting, underweight and wasting significantly lower in the preventive compared to the recuperative program communities after three years of program implementation.

	Preventive approach	Recuperative approach
Stunting	23.2%	28.7%
Underweight	22.9%	30.1%
Wasting	5.2%	9.2%

These results provide the much-needed evidence-base for better practices in MCHN programming approaches. WV plans to use preventive approaches in their future program design.

FANTA presented the final results of the five-year study to an audience of over 50 policy-makers, NGOs and other stakeholders on September 13, 2006 in Washington DC. IFPRI, WV and Cornell University made presentations on the project overview and rationale for the preventive approach, design of the BCC strategy, program implementation, design of the impact evaluation, relative impact of the preventive vs. recuperative approaches, relative cost of the two approaches and programmatic implications and research recommendations. Condensed presentations will be made by IFPRI staff in Washington DC and Port au Prince in Project Year Nine.

**Table 2. List of reports, publications and presentations Project Year Eight
Haiti operational research comparing recuperative and preventive approaches**

Reports

Menon, P., M. Arimond, M.T. Ruel, G. Pelto, J.-P. Habicht and C. Loechl. *Using operations research to monitor program implementation and inform impact evaluation*. Results of a second round of operations research of the World Vision Maternal and Child Health Program in Haiti. Submitted to the Food and Technical Assistance (FANTA) Project, March 2005.

Maluccio, J., & Loechl, C. Preventive versus recuperative targeting of food aid: Accounting for the costs. Report submitted to the Food and Technical Assistance (FANTA) Project, March 2006.

Discussion Papers & Conference Proceedings

Menon, P., Arimond, M., Ruel, MT, Habicht, J.-P., Pelto, G, Loechl, C.U. 2005. Using operations research to strengthen an impact evaluation comparing two integrated nutrition programs in Haiti. *Proceedings of the International Congress of Nutrition, 2005*.

Loechl, C, Ruel, MT, Pelto, G, Menon, P. 2005. The Use of Operations Research as a Tool for Monitoring and Managing Food-Assisted Maternal/Child Health and Nutrition (MCHN) Programs: An Example from Haiti. Food Consumption and Nutrition Division Discussion Paper No. 187. IFPRI: Washington, D.C.

Briefs

Ruel, M.T., C. Loechl, G. Pelto and P. Menon. *Translating Research into Action: Using Operations Research to Strengthen Food-Aid Programs*. IFPRI/WFP Brief – Linking Research and Action. Strengthening Food Assistance and Food Policy Research, International Food Policy Research Institute, Washington, 2005.

Presentations (Conferences, workshops and other presentations)

Michaud L, Menon, P., Ruel, MT, Loechl, CU, Arimond, M, Pelto, G. Improving complementary feeding through behavior change in Haiti. Global Health Council, June 1, 2006.

Menon, P., Ruel, MT, Loechl, CU, Arimond, M, Habicht, J.-P., Pelto, G. Micronutrient Sprinkles are effective at reducing anemia among children 6-24 months in rural Haiti. Experimental Biology 2006, April 1-4, 2006, San Francisco.

Loechl, CU, Arimond, M., Menon, P, Ruel, MT, Habicht, J.-P., Pelto, G. Feasibility of distributing micronutrient Sprinkles along with take-home food aid rations in rural Haiti. Experimental Biology 2006, April 1-4, 2006 San Francisco.

Menon P. Evaluating the effectiveness and feasibility of using micronutrient Sprinkles to reduce anemia among children 6-24 months in rural Haiti. Invited seminar: Rutgers University Department of Nutrition seminar series, March 1, 2006.

Menon P. Evaluating the effectiveness and feasibility of using micronutrient Sprinkles to reduce anemia among children 6-24 months in rural Haiti. Invited seminar: Cornell University Program in International Nutrition seminar series, February 9, 2006.

Ruel, M. The effectiveness and feasibility of using micronutrient Sprinkles to reduce anemia among children 6-24 months in rural Haiti. World Food Program, Rome, 2006.

Ruel, M. The effectiveness and feasibility of using micronutrient Sprinkles to reduce anemia among children 6-24 months in rural Haiti. UNICEF workshop, Panama, November 2005.

Menon, P., Arimond, M., Ruel, MT, Habicht, J.-P., Pelto, G, Loechl, C.U. Using operations research to strengthen an impact evaluation comparing two integrated nutrition programs in Haiti. *To be presented at the International Congress of Nutrition, Durban, South Africa, September 19-23, 2005.*

Menon, P., Arimond, M., Ruel, MT, Loechl, C.U., Habicht, J.-P., Pelto, G. Operations research using a consultative process helps improve the implementation of growth monitoring in rural Haiti. *Presented at Experimental Biology 2005, San Diego.*

3.5. Innovations to improve monitoring and evaluation of food security programming

To meet expressed needs of USAID and PVO partners, FANTA continues to support the development of innovative tools for problem assessment and program and commodity monitoring. Based on its previous work, FANTA continued to focus its efforts on two promising applications in Project Year Eight: the use of LQAS applications for assessing the prevalence of severe acute malnutrition in emergency situations and of Layers for program and commodity monitoring.

3.5.1. Lot Quality Assurance Sampling (LQAS)

LQAS is a sampling methodology that permits statistically valid conclusions about particular outcomes (e.g., program coverage, service quality) using the smallest sample possible.

Applying LQAS designs to emergency settings

FANTA, in collaboration with CRS, SCF and Ohio State University (OSU), applied LQAS methods to develop and test three new survey designs to respond to the data collection priorities of emergency settings: 1) a 33x6 design (33 clusters, 6 observations in each), 2) a 67x3 design (67 clusters, 3 observations in each) and, 3) a "Sequential" design (a multi-stage sampling plan based on the 67x3 design).

The designs were field tested in Ethiopia in 2003 and in Sudan in 2005, where they were shown to provide rapid and statistically reliable methods for assessing Global Acute Malnutrition (GAM), an indicator commonly used by relief organizations worldwide to assess the gravity of nutritional issues and the need for response in emergency settings.

FANTA conducted the Sudan LQAS field validation in collaboration with SCF in two administrative units (Fur Baranga and Habila) in West Darfur in September-October 2005. Within each administrative unit, the LQAS designs were implemented alongside a conventional 30x30 cluster survey. The purpose of the field validation was to further test and consolidate the findings from the initial LQAS field test in Ethiopia in 2003 by using independent samples for each design, to test the capability of the LQAS designs to provide reliable point estimates for household-level indicators, and to obtain time-savings estimations using comprehensive time data for two new geographic areas. The results from the field validation were positive, providing further evidence that the 33x6 and 67x3 LQAS designs perform comparably to the 30x30 cluster survey in terms of point estimates and 95% Confidence Intervals for all child- and household-level indicators, with the exception of those relating to mortality. In addition, the LQAS designs allow for hypothesis testing of GAM about the 10%, 15%, and 20% threshold levels.

Dissemination and outreach on LQAS designs in emergency settings

A journal article, *A Field Test of Three LQAS Designs to Assess the Prevalence of Acute Malnutrition*, summarizing the results from the initial 2003 field test of the approach, was submitted to the International Journal of Epidemiology where it is undergoing a peer review process.

FANTA presented the results from the LQAS Sudan field validation for OFDA in January 2006 and for the Emergency Working Group at the SCN in Geneva in March 2006. FANTA also presented a session on *LQAS to Measure the Nutrition and Health Status of Children in Emergency Settings* and facilitated a session on Translating Assessment Findings to Program Design at the Food Security Assessment Workshop in September 2006. The workshop, organized and hosted by a group of PVOs and funded through their ICB grants, was attended by more than 60 food security practitioners from, multilateral agencies, academia, and government. The workshop purpose was to share tools, methodologies, and best practices for conducting food security assessments.

FANTA has prepared a draft report, *LQAS for Rapid Nutrition Assessments in Emergency Settings: Results from a Field Test in West Darfur, Sudan*. FANTA also developed a draft paper, *Using Modified LQAS Designs to Assess Acute Malnutrition: A Validation Study by Computer Simulation*, documenting the statistical methods underlying the LQAS approach for rapid assessment of children's nutrition and health status. It is expected that both the report and the paper will be published in peer reviewed journals in Project Year Nine.

3.5.2. Layers

Missions have oversight responsibilities for Title II CS management of commodities and grant

funds. In most countries, however, the sites visited by Mission staff (i.e., food monitors) are not randomly selected, hence their visits do not allow Missions to make program-wide judgments of the overall quality of their PVO programs. Food monitors also generally observe only the operations associated with the management of the food commodities; only rarely can they make rigorous assessments of the activities, such as immunizations, that surround the distribution of food. To address these issues, FANTA developed the Layers software. Layers is a computerized monitoring system that combines the data collection by LQAS and an automated analysis and report production module (based on the MSAccess engine). Layers offers USAID Missions the capacity to characterize, with statistical accuracy, the operation of their programs, from the management of Title II commodities to the quality of other services being delivered (health, education, family planning, etc).

The use of PDAs with Layers software permits the entry and verification of the data collected at each site, while reducing the costs of data entry and maximizing the potential use of program data. Moreover, the automated report production modules enable frequent and objective feedback by the Mission to its various partners. FFP has introduced Layers as a regular topic covered at the Food Aid Managers' Course (FAMC) held twice annually in Washington and/or in the field, for Mission staff and Title II program managers.

Expansion of Layers modules was requested by the USAID Missions in Madagascar and Ethiopia. In Madagascar, Layers modules were developed to assess the availability and quality of service delivery in health posts and remote health stations. The method was successfully pilot tested in the field during Project Year Eight, following which the HPN Office at USAID/Antananarivo expects to use it on a yearly basis to assess performance and progress of Mission HPN program implementation (see **1.3.3.**).

In Haiti, in the wake of the first reports generated by the Layers for Title II program, FANTA had discussions with the Mission Office of HPN and partners on its flagship health program, HS2007, about the potential use of Layers to monitor the quality of service delivery in HS2007 sites (see **1.3.11.**).

3.6. Promotion of information sharing and coordination

With support from DCHA and PPC, FANTA has provided funding for greater outreach for technical innovations and global leadership with SCN based at WHO. The SCN provides an active forum for information exchange through its publications (SCN News, NICS, SCN Policy Paper), its website and its annual technical sessions. In Project Year Eight, FANTA supported the SCN to produce their Policy Paper No. 21, a synthesis report of the November 21-23, 2005 *WHO, UNICEF, and SCN Informal Consultation on Community-Based Management of Severe Malnutrition in Children* as a supplement to the Food and Nutrition Bulletin. (see **2.1.4**) as well as three Nutrition Information in Crisis Situations (NICS) reports and the Nutrition and Mortality report that is used for the USAID Annual Performance Report.

3.7. Training workshops and technical presentations

During Project Year Eight, FANTA conducted training workshops that reached more than 950

participants in eight countries, as detailed in Table 3, below.

Table 3: Training Workshops in Project Year Eight

Title	Location	Date	Duration	Participant:
Trainings on standardized protocol for AIN-C implementation	Honduras, multiple locations (7x)	September 2005 – May 2006	5 days	139
Workshop to strengthen behavior change in the design and implementation of MCHN programming	Guatemala City, Guatemala	November 2005	1 day	18
Training on nutritional care and support for adult PLHIV and children born to HIV-positive mothers	Rwanda, multiple locations (12x)	December 2005, February - September 2006	3 days	411
Workshop for Title II PVO participants on AIN-C information system	Tegucigalpa, Honduras	February 2006	1 day	20
Workshop on ProPAN: Process for the Promotion of Child Feeding	Guatemala City, Guatemala	March 2006	5 days	28
Trainings on AIN-C complementary activities	Honduras, multiple locations (2x)	March 2006	4 days	33
Orientation for CCC service providers on HIV-nutrition counseling materials	Kenya, multiple locations	March 2006	8 days	50
Workshop on HIV nutritional care and support for implementing partners of the ROADS project	Kenya, multiple locations (2x)	March 2006	2 days	50
Workshop to strengthen capacity of HIV and nutrition program resource persons from Kenya, Malawi, Tanzania, Uganda, and Zambia	Kampala, Uganda	April 2006	4 days	10
Training of PENSER in the use of PDAs and LQAS instruments developed for conducting health-oriented surveys	Antananarivo, Madagascar	May 2006	5 days	13
HIV-nutrition training workshops for comprehensive care clinics (CCCs)	Kenya, multiple locations (3x)	June, July 2006	4 days	60
Workshop on methods and tools to understand participant behaviors in maternal and child health and nutrition programs	Tegucigalpa, Honduras	July 2006	5 days	30
Training on use of anthropometric measurement for identification of moderately and severely malnourished PLHIV	Kigali, Rwanda	July 2006	3 days	4
Workshop on PROCOSAN: Community-based Growth Promotion, Nicaragua	Pueblo Viejo, Nicaragua	August 2006	3 days	32

Title	Location	Date	Duration	Participant:
Workshop on developing inputs for technical aspects of the mid-term evaluation of Title II program	Tegucigalpa, Honduras	September 2006	2 days	24
Training on the use of the National Guidelines on Nutritional Care and Support for PLHIV	Kigali, Rwanda	September 2006	3 days	42

In addition, FANTA organized workshops and consultations, and made technical presentations for staff of PVOs, MOHs, USAID and other stakeholders on a broad range of topics, including:

- Community-based management of severe malnutrition in children (see **2.1.4.**)
- Preventive vs. recuperative approaches in nutrition interventions (see **3.4.**)
- Breastfeeding and IYCF (see **1.2.1.a.** and **3.2.2.a.**)
- WHO growth standards (see **1.2.1.a.**)
- Anemia prevention (**2.2.1.** and **2.2.2.**)
- Program and food transition in India's Title II program (see **1.3.9.**)
- Scale-up and replication of CBGP programs (see **1.3.10.**, **1.3.12.**, **1.3.13.**)
- HIV and nutrition (see **1.3.2.**, **1.3.7.**, **1.3.8.** and **3.3.1.**)
- Household food insecurity access scale (see **3.2.1.**)
- Applying LQAS designs to emergency setting (see **3.5.1.**)

Food Aid Manager's Course

FANTA also continued to support DCHA/FFP's FAMC by contributing several sessions on M&E Frameworks, Evaluation Models, Conceptual Frameworks, Layers and Suggested DCHA/FFP Indicators. This training was provided in the first "FAMC on the Road", held in Dakar in January 2006. In the one-week FAMC workshop held in Dar es Salaam in July 2006, FANTA delivered a one-day session on M&E issues.

FANTA also made presentations on the Office of Food for Peace 2006-2010 Strategic Plan: Framework, key approaches, performance measures as well as the Development-Relief Approach at several FFP training venues, including approximately 30 participants at the Washington, DC FAMC in April 2006, and 12 participants at the FFP Orientation Training in July 2006.

Evaluation of biofortification interventions

FANTA was invited to participate in a two-day workshop organized by IFPRI's Harvest Plus unit, titled *Evaluating the Impact of the Biofortification Interventions*. The purpose of the workshop, convened in Washington, D.C. in October 2005, was to reach consensus on plausible and cost-effective methods to evaluate the impact of biofortification interventions, using both biological and non-biological indicators, and to discuss tools to assess the potential for the scaling up each intervention. FANTA made a presentation titled *Evaluation Designs: Adequacy, Plausibility and Probability Models*.

Presentations in university settings

FANTA presented an annual lecture on the *Design And Implementation Of Sustainable Food Security Programs Using Food Aid Resources – Focus On Maternal And Child Health And Nutrition* to approximately 50 graduate students in the International Nutrition class at JHU's Bloomberg School of Public Health. FANTA also presented an annual lecture of 24-hour Dietary Recall Data Collections Methods to approximately 20 graduate students in the Surveys and Surveillance class at Tufts University Friedman School of Nutrition Science and Policy.

3.8. Information sharing and communications

Developing, capturing, articulating, and disseminating best practices and acceptable standards in nutrition and food security are activities fundamental to their ultimate adoption. FANTA communications activities support the publication, presentation and dissemination of project activities at events, workshops, and trainings and in print and electronic media to help further the following goals:

- Expanding the knowledge base on nutrition and food security through published reports, electronic media, training and meetings.
- Fostering dialogue and discussion on key issues related to nutrition and food security.
- Informing policy on nutrition and food security.
- Creating linkages between FANTA and the nutrition and food security community.

Table 4: FANTA publications and dissemination in Project Year Eight

Title	Author/Publisher	Release Date	FANTA dissemination
Publications			
Assessing Nutrition in Emergency Situations Bookmark (English, French, Spanish)	FANTA	June 2006	213
Community-based Therapeutic Care (CTC): A Field Manual	Valid International	September 2006	-n/a-
Food and Nutrition Library Version 3.1 CD-ROM	UN System Standing Committee on Nutrition	February 2006	-n/a-
Household Dietary Diversity Score (HDDS) for Measurement of Household Food Access: Indicator Guide, Version 2	FANTA	September 2006	2521
Household Food Insecurity Access Scale (HFIAS) for Measurement of Food Access: Indicator Guide, Version 2	FANTA	July 2006	6249
Kenyan National Guidelines on Nutrition and HIV/AIDS	Kenyan Ministry of Health	April 2006	633
Advances in Developing Country Food Insecurity Measurement	Journal of Nutrition, Volume 136 Issue 5 Supplement	May 2006	105

Maternal Anemia: A Preventable Killer	FANTA	August 2006	522
Measuring Household Food Insecurity Workshop II Report	FANTA	January 2006	3591
Operational Challenges of Implementing Community Therapeutic Care: ENN Report on an Inter-agency Workshop	Emergency Nutrition Network	November 2005	19266
Project Year Eight Annual Report	FANTA	December 2005	-n/a-
Project Year Nine Workplan	FANTA	October 2005	-n/a-
Technical Note No. 11, Evaluating Title II Development-oriented Multi-Year Assistance Projects	FANTA	March 2006	1236
Technical Note No. 10, Monitoring and Evaluation Framework for Title II Development-oriented Projects	FANTA	February 2006	1518
Training Materials			
Kenya Counseling Materials (Flipchart and Posters) for PLHIV	National AIDS and STD Control Programme (NAS COP) and FANTA	February 2006	
Rwanda Counseling Materials (Flipchart and Poster) for PLHIV	Treatment and Research AIDS Center (TRAC) and FANTA	March 2006	
Zambia Counseling Materials (Flipchart and Poster) for PLHIV	Zambian National Food and Nutrition Commission (NFNC) and FANTA	November 2005	
Periodicals			
Nutrition Information in Crisis Situations, Volume 8	UN System Standing Committee on Nutrition	January 2006	
Nutrition Information in Crisis Situations, Volume 9	UN System Standing Committee on Nutrition	May 2006	
Nutrition Information in Crisis Situations, Volume 10	UN System Standing Committee on Nutrition	August 2006	
SCN News No. 31, "Adolescence: A Pivotal Stage in the Life Cycle"	UN System Standing Committee on Nutrition	Late 2005 / Early 2006	
SCN News No. 32, "Tackling the Double Burden of Malnutrition: A Global Agenda"	UN System Standing Committee on Nutrition	Mid 2006	
United Nations University Food and Nutrition Bulletin Volume 27, No. 3 (SCN Nutrition Policy Paper No. 21), "Proceedings of an Informal Consultation on Community-based Management of Severe Malnutrition in Children"	UN System Standing Committee on Nutrition	September 2006	

Dissemination of FANTA publications

FANTA disseminates publications through its website as well as through response to global requests for material. In Project Year Eight, through web downloads and hard copy mailings, FANTA distributed nearly 400,000 copies of more than 200 different publications and information products developed over the life of the project.

The FANTA website is the cornerstone of dissemination activities. As a resource center, the site connects visitors not only to FANTA's work and publications but also to other websites, reports and publications that can help to expand the knowledge base, foster dialogue, inform policy and create linkages within the nutrition and food security community.

Table 5. Web Site Activity for Project Year Eight

General Information for PY8	
Visits to web site	99,222
Number of web pages viewed by visitors	850,254
Number of hits	3,543,505
Average number of visitors per day	272
Average number of pages viewed per day	2,329
Most active day of PY8	March 27, 2006
Top Ten Web Pages for PY8 (excludes home page)	
1. Anthropometric Indicators Measurement Guide	www.fantaproject.org/publications/anthropom.shtml
2. Focus Area: Monitoring & Evaluation	www.fantaproject.org/focus/monitoring.shtml
3. Focus Area: HIV/AIDS	www.fantaproject.org/focus/hiv_aids.shtml
4. Focus Area: Food Security	www.fantaproject.org/focus/foodsecurity.shtml
5. Focus Area: Infants' and Children's Nutrition	www.fantaproject.org/focus/children.shtml
6. Focus Area: Emergency Nutrition	www.fantaproject.org/focus/emergencies.shtml
7. Sampling Guide	www.fantaproject.org/publications/sampling.shtml
8. HIV/AIDS: Preservice Training Guide	www.fantaproject.org/focus/preservice.shtml
9. FANTA Publications Page	www.fantaproject.org/publications/index.shtml
10. Focus Area: Household Food Consumption	www.fantaproject.org/focus/household.shtml
Top Ten PDF Downloads for PY8	
1. Anthropometric Indicators Measurement Guide (English, French)	
2. Sampling Guide (English, French, Spanish)	
3. HIV/AIDS: A Guide for Nutrition, Care and Support 2004	
4. Ugandan Counseling Materials for Nutritional Care and Support of People Living with HIV/AIDS	
5. Nutritional Care and Support for People Living with HIV/AIDS in Uganda: Guidelines for Service Providers	
6. The Nutritional Needs and Status of Adolescents (English and French versions)	
7. Women's Nutrition During Pregnancy and Lactation (English and French versions)	
8. Operational Challenges of Implementing Community Therapeutic Care: ENN Report on an Inter-agency Workshop	
9. Measuring Household Food Consumption: A Technical Guide, 2005	
10. Measuring Food Insecurity: Going Beyond Indicators of Income and Anthropometry	