

FANTA·2

FOOD AND NUTRITION
TECHNICAL ASSISTANCE



USAID
FROM THE AMERICAN PEOPLE

FANTA-2 Workplan

Project Year One

June 2, 2008 – September 30, 2009

**Cooperative Agreement Number
GHN-A-00-08-00001-00**



FANTA-2

FOOD AND NUTRITION
TECHNICAL ASSISTANCE



FANTA-2 Workplan

Project Year One

June 2, 2008 – September 30, 2009

Cooperative Agreement Number
GHN-A-00-08-00001-00



Food and Nutrition Technical Assistance II Project (FANTA-2)

Academy for Educational Development 1825 Connecticut Ave., NW Washington, DC 20009-5721
Tel: 202-884-8000 Fax: 202-884-8432 E-mail: fanta2@aed.org Website: www.fanta-2.org

This report is made possible by the generous support of the American people through the support of the Office of Health, Infectious Diseases, and Nutrition, Bureau for Global Health, United States Agency for International Development (USAID), under terms of Cooperative Agreement No. GHN-A-00-08-00001-00, through the Food and Nutrition Technical Assistance II Project (FANTA-2), managed by AED.

The contents are the responsibility of AED and do not necessarily reflect the views of USAID or the United States Government.

Published November 2008

Recommended Citation:
FANTA-2. *FANTA-2 Workplan, Project Year One*. Washington, DC: Food and Nutrition Technical Assistance II Project (FANTA-2), AED, 2008.

Contact information:

Food and Nutrition Technical Assistance II Project (FANTA-2)
AED
1825 Connecticut Avenue, NW
Washington, D.C. 20009-5721
Tel: 202-884-8000
Fax: 202-884-8432
Email: fanta2@aed.org
Website: www.fanta-2.org

Table of Contents

Acronyms and Abbreviations	i
Food and Nutrition Technical Assistance II Project (FANTA-2).....	1
FANTA-2 Strategic Objective (SO) and Intermediate Results (IRs)	1
FANTA-2 Priority Technical Activities	3
FANTA-2 Key Operating Approaches	4
IR1: Strengthening Country-Specific Nutrition and Food Security Policies, Strategies and Programming ..	5
IR 1 Principal Activities	5
IR 1.1. Improving Title II food security program assessment, design, implementation and M&E.....	5
IR 1.2. Improving MCHN program design, implementation and M&E.....	6
IR 1.3. Improving HIV nutrition and food security-related program design, implementation and M&E	8
IR 1.4. Improving ER&S nutrition and food security program assessment, design, implementation and M&E	9
IR 1 Mission Supported Country Activities	10
Afghanistan.....	10
Côte d'Ivoire.....	10
Ethiopia.....	12
Ghana.....	13
Guatemala	15
Haiti	16
Kenya	17
Madagascar	18
Mozambique	18
Namibia	19
South Sudan.....	20
Sudan	21
Tanzania.....	22
Uganda	22
Vietnam	24
Zambia.....	25
IR 2. Increasing the Global Evidence Base, Effective Methods and Competencies for Effective Nutrition and Food Security Policy, Strategy and Program Design, Implementation, and Monitoring and Evaluation	27
IR 2.1 Evidence base for effective program approaches expanded.....	27
IR 2.2. Cost-effective and user-friendly assessment, M&E, costing and planning methods and tools developed	32
2.2.8. Validating Additional Thresholds for Alternative Sampling Designs	34
IR 2.3. Promoting Global Normative Standards in Nutrition and Food Security.....	36
Provide Technical Input on FBF's Role in Title II Commodities	39
IR 2.4. Competencies in problem assessment and program design, implementation and M&E strengthened	39
Annex 1. Document Management Workplan Supplemental	45
Annex 2. Event Management Workplan Supplemental	47

Acronyms and Abbreviations

ABC	Activity-based costing
ACDI/VOCA	Agricultural Cooperative Development International/Volunteers in Overseas Cooperative Assistance
AED	Academy for Educational Development
AIDS	Acquired immune deficiency virus
AINM-C	Integrated Care for Children and Women at the Community Level
AMPATH	Academic Model for Prevention and Treatment of HIV/AIDS
APHIA II	AIDS, Population and Health Integrated Assistance II
ART	Antiretroviral therapy
BCC	Behavior change communication
CA	Cooperating Agency
CBGP	Community-based growth promotion
CCT	Conditional cash transfers
CDC	Centers for Disease Control and Prevention
CHW	Community health worker
CMAM	Community-based management of acute malnutrition
CNSA	Conseil National de Sécurité Alimentaire
CORE NWG	CORE Nutrition Working Group
CRG	Commodity Reference Guide
CRS	Catholic Relief Services
CS	Cooperating Sponsor
CSB	Corn-soy blend
CSHGP	Child Survival and Health Grants Program
DAP	Development Action Plan
DCHA	USAID Bureau for Democracy, Conflict and Humanitarian Assistance
DHMT	District health management team
DHS	Demographic Health Survey
DIP	Detailed Implementation Plan
DQA	Data quality assessment
DRC	Democratic Republic of Congo
DVD	Digital video disk
EFP	Emergency food product
EM	Exhaustive Measurement
ENA	Essential Nutrition Actions
ENN	Emergency Nutrition Network
EPI	Expanded Program of Immunization
ER&S	Emergency, reconstruction and stabilization
EWR	Early warning and response
F	United States Department of State, Office of the Director of United States Foreign Assistance
F&N TWG	PEPFAR's Food and Nutrition Technical Working Group
FACG	Food Aid Consultative Group
FANTA	Food and Nutrition Technical Assistance Project
FANTA-2	Food and Nutrition Technical Assistance Project II
FAO	United Nations Food and Agriculture Organization
FBF	Fortified blended food
FBP	Food-by-prescription
FEWS NET	USAID's Famine and Early Warning Systems Network Project

FFP	USAID Bureau of Democracy, Conflict and Humanitarian Assistance Office of Food for Peace
FFW	Food-for-work
FHAPCO	Federal HIV/AIDS Prevention and Control Program (Ethiopia)
FMOH	Federal Ministry of Health (Ethiopia)
FP	Focal point
FSPS	Food Security Programming Strategy
FY	Fiscal Year
GFATM	The Global Fund to fight AIDS, Tuberculosis and Malaria
GH	USAID Bureau for Global Health
GH/HIDN	USAID Bureau for Global Health Office of Health, Infectious Disease and Nutrition
GH/OHA	USAID Bureau for Global Health Office of HIV/AIDS
GHS	Ghana Health Service
GM	Growth monitoring
GMP	Growth monitoring and promotion
GRM	Government of the Republic of Mozambique
HBC	Home-based care
HCI	USAID's Health Care Improvement Project
HFIAS	Household Food Insecurity Access Scale
HIV	Human immunodeficiency virus
HPN	USAID's Health, Population and Nutrition Program
HMIS	Health management information system
I-TECH	International Training and Education Center on HIV
ICDAM	International Conference on Diet and Activity Methods
IASC	Inter-Agency Standing Committee
ICB	Institutional capacity building
IEC	Information, education and counseling
IFPRI	International Food Policy Research Institute
IMAM	Integrated management of acute malnutrition (CMAM in Uganda)
IMCI	Integrated Management of Childhood Illness
INP	Inter-agency Nutrition Partnership
IOM	Institute of Medicine
IP	Implementing partner
IR	Intermediate Result
IRD	Institute of Research for Development
IYCF	Infant and young child feeding
IYCN Project	USAID's Infant and Young Child Nutrition Project
LNS	Lipid-based nutrient supplement
LQAS	Lot quality assurance sampling
LSHTM	London School of Hygiene and Tropical Medicine
M&E	Monitoring and evaluation
MAM	Moderate acute malnutrition
MCHIP	Maternal and Child Health Integrated Program
MCHN	Maternal and child health and nutrition
MFK	Meds and Foods for Kids (Haiti)
MOH	Ministry of Health
MOHSS	Ministry of Health and Social Services (Namibia)
MPH	Master's degree in public health
MSPAS	Ministry of Public Health and Social Assistance (Guatemala)
MSP	Ministry of Public Health and Population (Haiti)

MTE	Mid-Term Evaluation
MUAC	Mid-upper arm circumference
MYAP	Multi-Year Assistance Program
NASCOP	National AIDS and STI Control Program
NGO	Nongovernmental organization
NEWS	Northwest Early Warning Systems (Haiti)
NHP	Kenya Nutrition and HIV Project
NiE	Nutrition in Emergencies
NIN	National Institute of Nutrition (Vietnam)
NFNC	National Food and Nutrition Commission (Zambia)
NSCN	National Sub-Committee on Nutrition (Uganda)
OFDA	USAID Bureau for Democracy, Conflict and Humanitarian Assistance Office of Foreign Disaster Assistance
OGAC	United States Department of State Office of the Global AIDS Coordinator
OM	Outcome Monitoring
OMB	United States Office of Management and Budget
OP	Operational plan
OVC	Orphans and vulnerable children
PART	Program assessment rating tool
PD/Hearth	Positive Deviance Hearth approach
PEPFAR	United States President's Emergency Plan for AIDS Relief
PHC	Primary health care
PHN	USAID Global Bureau Center for Population, Health and Nutrition
PLHIV	People living with HIV
PM2A	Title II Preventing Malnutrition among Under Twos Approach
PMP	Food for Peace Performance Management Plan
PMTCT	Prevention of mother-to-child transmission of HIV
PON	Polytechnic of Namibia
PVO	Private voluntary organization
QA/QI	Quality assurance and quality improvement
R&D	Research and development
RCQHC	Regional Center for Quality of Health Care (Uganda)
RUF	Ready-to-use food
RUSF	Ready-to-use supplementary food
RUTF	Ready-to-use therapeutic food
SAM	Severe acute malnutrition
SAM FP	Severe acute malnutrition focal point
SAM SU	Severe acute malnutrition support unit
SAM TA	Severe acute malnutrition technical advisor
SAM TC	Severe acute malnutrition technical committee
SAPQ	Standardized annual performance questionnaire
SC	Save the Children
SC/UK	Save the Children United Kingdom
SCMS	USAID's Supply Chain Management Systems Project
SFP	Supplementary feeding program
SO	Strategic Objective
SQUEAC	Semi-quantitative evaluation of access and coverage
SSC	United States Army Natick Soldier Systems Center
STI	Sexually transmitted infection
SYAP	Single-Year Assistance Program
TA	Technical assistance

TAG	Technical advisory group
TANGO	Technical Assistance to NGOs International
TDY	Temporary duty assignment
TFNC	Tanzania Food and Nutrition Commission
TI	Trigger indicators
TOT	Training of trainers
TRM	Technical reference material
TSS	Technical support services
TWG	Technical working group
UCD	University of California at Davis
UGAN	Ugandan Action for Nutrition Society
UKZ	University of KwaZulu-Natal
UN	United Nations
UNAM	University of Namibia
UNICEF	United Nations Children's Fund
URC	University Research Corporation
USAID	United States Agency for International Development
USDA	United States Department of Agriculture
USG	United States Government
VAAC	Vietnam Administration of HIV/AIDS Control
WDD	Women's dietary diversity
WDDI	Women's dietary diversity indicator
WDDP	FANTA's Women's Dietary Diversity Project
WHO	World Health Organization
WFP	World Food Programme
WSB	Wheat-soy blend
WU	Washington University in St. Louis

Food and Nutrition Technical Assistance II Project (FANTA-2)

FANTA-2 works to improve nutrition and food security policies, strategies and programs through technical support to the U.S. Agency for International Development (USAID) and its partners, including host country governments, international organizations and nongovernmental organization (NGO) implementing partners (IPs). Focus areas for technical assistance (TA) include maternal and child health and nutrition (MCHN), HIV and other infectious diseases, food security and livelihood strengthening, and emergency, reconstruction and stabilization (ER&S). FANTA-2 develops and adapts approaches to support the design and quality of field programs, while building on field experience and research activities to improve and expand the evidence base, methods and global standards for nutrition and food security programming. The project is a five-year cooperative agreement (6/2/2008 – 6/1/2013) with a worldwide geographic scope.

FANTA-2 is implemented by the Academy for Educational Development (AED). Partners include the International Food Policy Research Institute (IFPRI), Nutriset, Regional Center for Quality of Health Care (RCQHC), Technical Assistance to NGOs (TANGO), Tufts University, University of California-Davis (UCD), University of KwaZulu-Natal (UKZ), Washington University in St. Louis (WU) and Valid International.

FANTA-2 Strategic Objective (SO) and Intermediate Results (IRs)

FANTA-2's SO is improved nutrition and food security policies, strategies and programming.

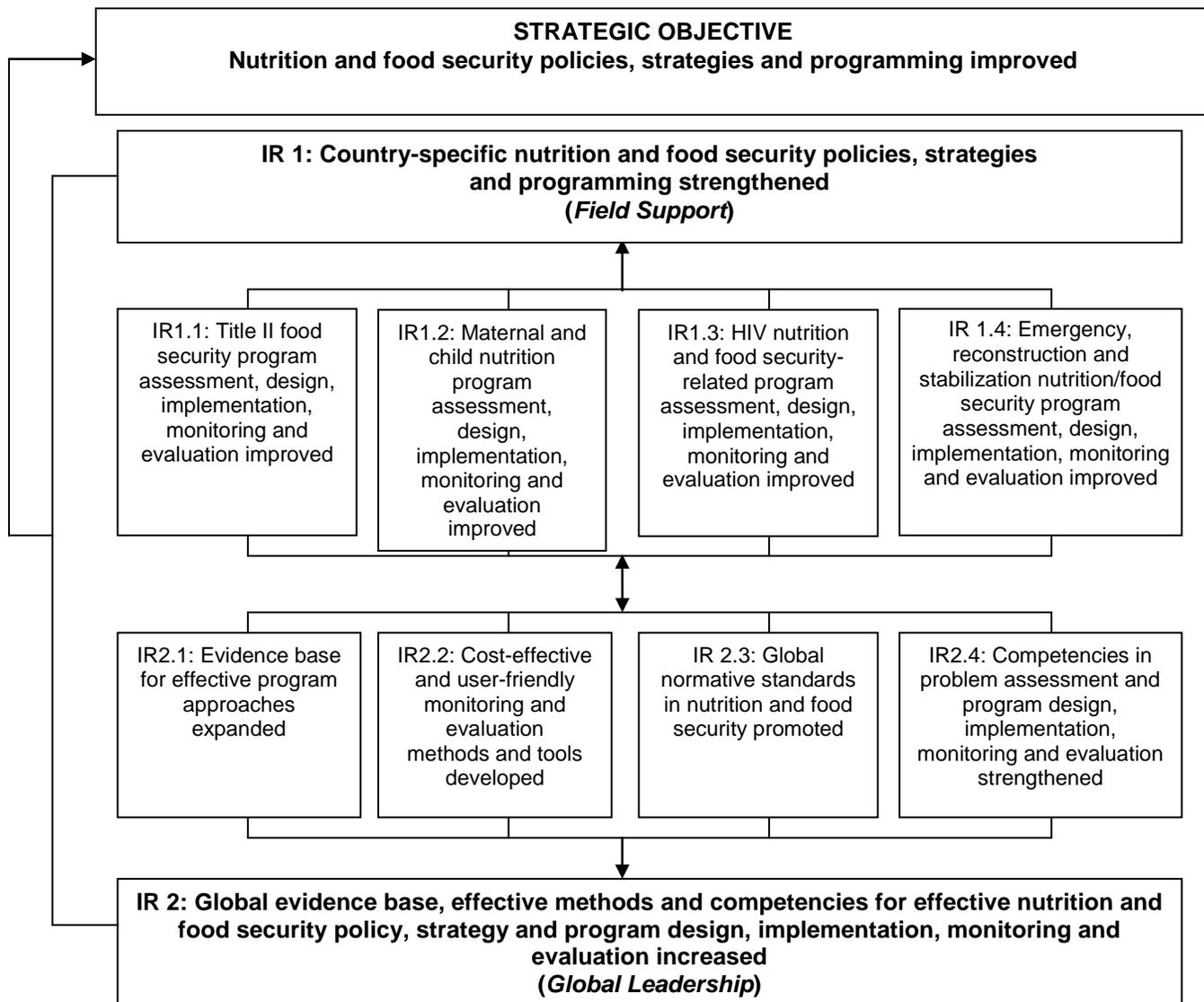
FANTA-2 will strengthen country-specific nutrition and food security policies, strategies and programming (IR 1) with field support activities to improve Title II food assistance, MCHN, HIV and other infectious diseases, and ER&S program assessment, design, implementation, and monitoring and evaluation (M&E).

FANTA-2 will also increase the global evidence base, effective methods and competencies for effective nutrition and food security policy, strategy and program design, implementation, and M&E (IR 2). These activities will be carried out through expanding the evidence base for effective program approaches; developing cost-effective and user-friendly M&E methods and tools; promoting global normative standards in nutrition and food security; and strengthening competencies in problem assessment and program design, implementation, and M&E.

To achieve these results, FANTA-2 will:

- Operationalize knowledge and experience into practice through the effective country-level scale-up of proven approaches
- Strengthen the capacity of multiple partners
- Fill the evidence gaps quickly and efficiently to refine policy and guidelines in areas of current focus, particularly effective implementation of existing approaches
- Build the evidence base for policy and guidelines in new areas, such as nutrition and infectious diseases, and nutrition and food security in ER&S contexts

Figure 1. FANTA-2 Strategic Framework



FANTA-2 Priority Technical Activities

Priority field support (IR1) activities include:

- Providing targeted, specialized TA and training activities to support nutrition and food security programming strategies, early warning and response (EWR) systems, and M&E for Title II and other United States Government (USG) programs
- Integrating community-based management of acute malnutrition (CMAM) into national health systems and strengthening community-based growth promotion (CBGP) and behavior change programs
- Improving CMAM programming in ER&S contexts.
- Supporting national nutrition and HIV policies and guidelines, integrating food and nutrition into United States President's Emergency Plan for AIDS Relief (PEPFAR) HIV services, and strengthening nutrition assessment, counseling and food-by-prescription (FBP) programming
- Supporting quality assurance/quality improvement of CMAM, CBGP and nutrition and HIV programs
- Supporting the development of national nutrition policies and strategies
- Supporting improved nutrition and food security programs in other priority areas as needed

Priority global leadership (IR2) activities include:

- Increasing the evidence base on cost-effective programmatic approaches to improve nutrition and food security; focus research areas include:
 - Title II Preventing Malnutrition among Under Twos Approach (PM2A)
 - Use of lipid-based nutrient supplements (LNS) for prevention of 1) chronic malnutrition, 2) seasonal increases in acute malnutrition, and 3) acute malnutrition in vulnerable, disaster-affected populations
 - Formulations of specialized food products for different target groups for PEPFAR programs.
 - Exit strategies and community-based EWR systems for Title II multi-year development programs.
- Supporting advances in methods and tools that promote quality program implementation
- Increasing capacity to deliver effective services at scale
- Strengthening international, USG, country government and IP capacity to design, deliver, monitor, improve and demonstrate the effectiveness and impact of USAID-assisted nutrition and food security programs

- Developing and refining indicators used to measure household and individual food security and diet quality
- Building the evidence base on the impact of LNS on preventing 1) chronic malnutrition, 2) seasonal increases in acute malnutrition, and 3) acute malnutrition in vulnerable, disaster-affected populations, through effectiveness trials in multiple countries

FANTA-2 Key Operating Approaches

Determining Priority Needs

To determine needs and priorities, FANTA-2 works with USAID's Bureau for Global Health Office of Health, Infectious Diseases and Nutrition and Office of HIV/AIDS (GH/HIDN and GH/OHA), Bureau for Democracy, Conflict and Humanitarian Assistance Office of Food for Peace and Office of Foreign Disaster Assistance (DCHA/FFP and DCHA/OFDA) and USAID Missions allocating funds for specialized technical assistance. FANTA-2 then coordinates and collaborates with key stakeholders at the international, regional, national, and sub-national levels, with country-level activities implemented under the lead of the host country's government. The breadth and depth of the collaborative relationships facilitate arriving at consensus on major needs and priorities, and leveraging resources to address those needs.

Coordinating and Maximizing the Effectiveness of Activities across IRs

FANTA-2's targeted, specialized TA and training builds from and informs the integration of FANTA-2's research and development (R&D) activities. FANTA-2 integrates research results and operational experience into the strategies, policies and guidelines issued by international organizations and the USG. FANTA-2 closely coordinates with and provides support to the USG central offices supporting programs targeted under FANTA-2 and to regional and country Missions. This multi-layered support to multiple USAID offices ensures the flow-down of global and USG standards and flow-up of country experience.

Coordinating and Maximizing the Effectiveness of Activities across Program Areas

The evidence base and effective program approaches generated in one program area often can apply to activities in other areas. FANTA-2 shares the same approach to share knowledge across program areas, and allow field experience in one area to inform development of policy and guidelines in new areas where a more limited evidence base might exist. This takes maximum advantage of existing evidence and enables USAID to begin program implementation.

IR1: Strengthening Country-Specific Nutrition and Food Security Policies, Strategies and Programming

FANTA-2's field support activities are designed to strengthen nutrition and food security programs and integrate food and nutrition components into a range of MCHN, HIV and emergency response programs. Activities will be carried out in collaboration with Missions, national governments and Cooperating Sponsors (CSs) and IPs in fifteen countries: Afghanistan, Ethiopia, Ghana, Guatemala, Haiti, Kenya, Madagascar, Mozambique, Namibia, South Sudan, Sudan, Tanzania, Uganda, Vietnam and Zambia. In addition, pending further discussion with the USAID Bureau of Democracy, Conflict and Humanitarian Affairs (DCHA) Office of Food for Peace, Washington, D.C. (FFP/W), FANTA-2 will provide country-focused technical assistance to FFP programs in Bangladesh, Burkina Faso, Burundi, Chad, Democratic Republic of Congo (DRC), Ethiopia, Indonesia, Liberia, Mali, Mozambique, Niger, Sierra Leone and Uganda.

FANTA-2's approach is to strengthen the capacities of government and local institutions, ensuring that ultimately these institutions sustain and expand the improved nutrition and food security activities FANTA-2 supports. Country activities will apply the evidence, methods, tools and normative standards developed through FANTA-2's global leadership activities and, in turn, country activities will inform global leadership efforts.

IR 1 PRINCIPAL ACTIVITIES

IR 1.1. Improving Title II food security program assessment, design, implementation and M&E

As the single largest USG investment in improving nutrition and food security, USAID's Title II program represents an important opportunity to achieve significant and sustainable impacts in reducing household food insecurity and malnutrition. FFP's identification of 18 priority countries for Title II Multi-Year Assistance Programs (MYAPs) provides a clear focus for FFP development activities and a priority target for TA. The likely increase in non-emergency resources and resources for assessments and studies in the 2007 Farm Bill offers a strong platform for improved nutrition and food security programming, and the possible reduction or elimination of monetized resources calls for innovative approaches to direct distribution of food. FANTA-2 staff, consultants and partners provide in-country TA to FFP, Missions and Cooperating Sponsors (CSs) in FFP priority countries to strengthen approaches throughout the program cycle of assessment, strategy, design, implementation, and M&E.

1.1.1. Food Security Assessments and Programming Strategies

A solid understanding of national food security conditions is a crucial prerequisite to sound programming. In response to demand, FANTA-2 supports Missions and governments to plan and implement in-depth food security assessments. FANTA-2 uses existing information and, if necessary, collects primary data to identify the location, nature and level of food insecurity in targeted countries. Working with Missions, governments and other stakeholders, FANTA-2 applies assessment results to prepare Food Security Programming Strategies (FSPSs) that define objectives, approaches and institutional partnerships for effective use of USG resources to reduce food insecurity. In Project Year One, FANTA-2 will develop FSPSs in Bangladesh, Burkina Faso, Liberia and Sierra Leone.

1.1.2. EWR Systems

Development relief, an approach that simultaneously addresses both chronic and transitory food insecurity, is central to FFP's Fiscal Year (FY) 2006-2010 Strategy. A critical component of this is EWR systems integrated into MYAPs targeting food insecure populations subject to recurrent shocks. FANTA-2 will work with FFP to identify a small number of priority countries in order to strengthen the EWR systems within MYAPs, including trigger indicators (TIs). FANTA-2 will work closely with CSs to assist in EWR system design (e.g., TI selection), implementation (e.g., data collection and management, decision making for changing use of food resources in MYAPs), and institutional coordination (e.g., communicating and sharing of information with Missions, the USAID Famine and Early Warning Systems Network [FEWS NET] and national food security and early warning stakeholders). Countries for this activity may include Afghanistan, DRC, Mali, Mozambique and Niger.

1.1.3. M&E

FANTA-2 focuses significant attention on the establishment of high-quality M&E systems in FFP priority countries to strengthen USAID and CSs' ability to document progress, demonstrate results and improve program implementation. FANTA-2 applies and refines state-of-the-art methods and tools, such as the infant and young child feeding (IYCF) summary indicator, Household Food Insecurity Access Scale (HFIAS), and lot quality assurance sampling (LQAS) and alternative sampling designs, and innovates to meet specific M&E needs. In-country TA on M&E includes:

- Supporting the development of a harmonized and integrated M&E plan for new FY 2008 MYAPs through regional workshops and TA to Missions and Title II CSs, working to coordinate and harmonize CS outcome and impact indicators, and incorporating Mission, F, and FFP indicators. In Project Year One, regional workshops will be held in Mali and Mozambique for new FY 2008 MYAPs, and in-country TA may be provided in Burundi, Ethiopia, Mali, Mozambique and Niger.
- Supporting new MYAPs through TA for the design and implementation of high quality baseline surveys. Priority countries for Project Year One include Afghanistan, Chad, DRC, Mali, Mozambique, Niger and Uganda.
- Improving Mission oversight and assessment of the quality of Title II programs in the field through training in the Layers approach—a computerized food aid program monitoring system.
- Supporting Missions and CSs to improve the quality of MYAP final evaluations—a critical means of assessing the impact of Title II investments and improving the design of future programs. FANTA-2 will contribute to evaluation design and implementation, and conduct evaluations where USAID demand exists. In Project Year One, FANTA-2 will conduct a meta-evaluation of five Title II Development Assistance Programs (DAPs) conducted in Indonesia.

IR 1.2. Improving MCHN program design, implementation and M&E

The 2008 Lancet series on maternal and child undernutrition highlights and deepens the evidence base for what program implementers and public health authorities have long known:

Malnutrition is the single largest contributor to child mortality. USAID has made significant strides over the past decade in addressing malnutrition, not only through Title II programs, but also through integrating nutrition into broader health programs. FANTA-2 works with partners to integrate proven approaches into national health systems, while continuing to innovate and adapt approaches to maximize impacts in various contexts. FANTA-2 responds in new areas, such as nutrition and malaria, as evidence-based normative standards emerge.

1.2.1. Integration of CMAM into National Health Systems

Severe acute malnutrition (SAM) affects about 20 million children less than five years of age, contributing to over one million child deaths each year. CMAM has proven to be a highly effective approach to manage SAM, with both research and program experience attesting to its success. CMAM is frequently implemented as a parallel program, but to be effective and reach national scale, it must be integrated into national health systems, a process that is occurring with varying degrees of success in Ethiopia, Ghana, Malawi and Niger. To strengthen the capacity of countries to manage acute malnutrition in children, FANTA-2 works with Missions and national governments to introduce, integrate and scale up services for CMAM. Support includes program design, strategic planning, drafting national guidelines, and training and mentoring to build skills in implementing and M&E services, while coordinating with the United Nations Children's Fund (UNICEF) and private sector partners to facilitate national production of ready-to-use therapeutic food (RUTF). (See **Ghana** and **IR 1.4.**)

1.2.2. Outcome Monitoring (OM)

OM is a data collection approach that allows the USG to annually monitor the key health activities it supports and to facilitate the management of those activities in-country. Upon request, FANTA-2 will introduce OM to additional Missions and provide consultation, training, and direct technical support. In Project Year One, FANTA-2 will provide ongoing support to the Guatemala and Madagascar Missions where OM was piloted, to strengthen local implementation capacity. (See **Guatemala** and **Madagascar.**)

1.2.3. Community-Based Nutrition Program Approaches

The Essential Nutrition Actions (ENA) is a set of seven interventions that promote nutrition and child survival. Countries face challenges in operationalizing ENA due to limitations in training, supervision, supplies and community linkages, and to poor quality health services. FANTA-2 works with partners to develop community-based nutrition program approaches based on ENA through conducting formative assessments, facilitating dialog among stakeholders from the government to the community-level, and developing guidance for design of community-based approaches. This includes guidance on advocacy, community-level strategy, training and supervision plans, behavior change communication (BCC) strategies and tools, and in prioritizing interventions and implementation approaches. (See **Uganda.**)

1.2.4. National Nutrition Policies

FANTA-2 provides technical input and facilitation to governments in preparing nutrition policies and implementation strategies. Policy dialogues often revolve around resource allocation, and policymakers often require concrete data to justify investments in nutrition. FANTA-2 updates and applies data-based tools, such as PROFILES for advocacy, followed by TA to support action plans. Another challenge with government structures is the lack of human-resource

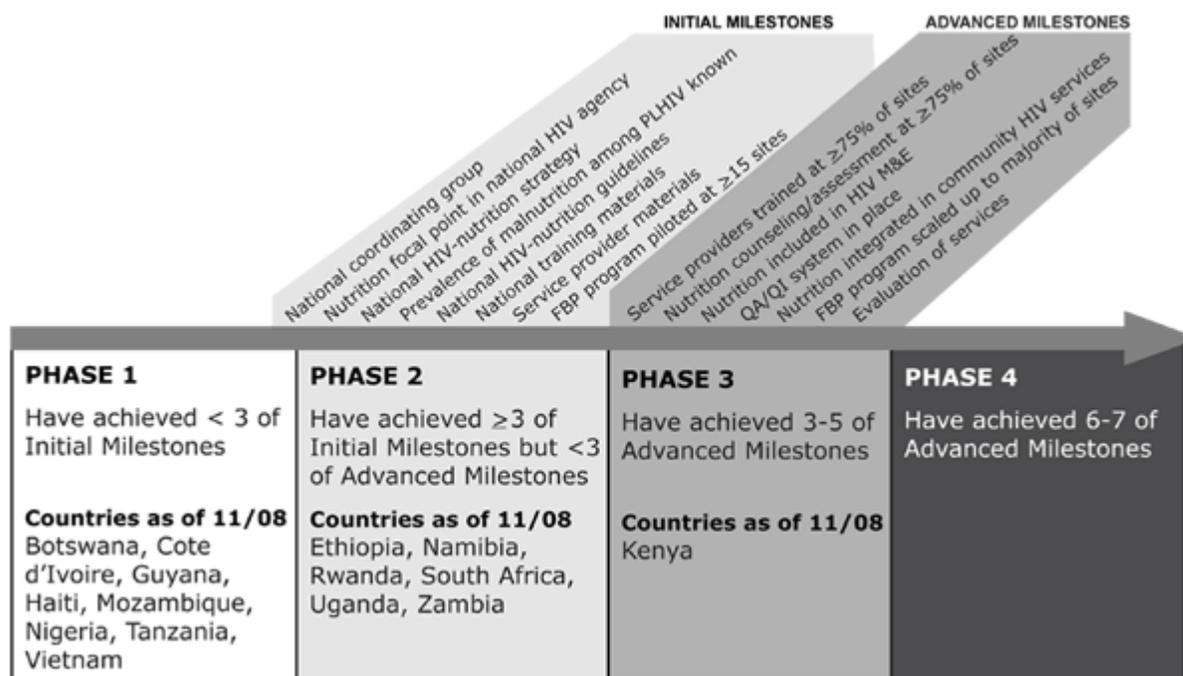
capacity in nutrition. FANTA-2 helps to address this through the establishment of nutrition focal points (FPs), pre-service and in-service training, and TA. (See **South Sudan** and **Uganda**.)

IR 1.3. Improving HIV nutrition and food security-related program design, implementation and M&E

The 2008 PEPFAR reauthorization supports a transition from addressing HIV as an emergency response to establishing sustainable systems and services. A growing number of PEPFAR focus countries recognize that food and nutrition interventions are critical components of an efficacious and sustainable response to the disease. A major focus for FANTA-2 is supporting PEPFAR partners, national AIDS control programs and IPs in operationalizing this recognition into programming by integrating food and nutrition into HIV responses at the national, program, clinic, household and individual levels.

A majority of PEPFAR focus countries have begun integrating food and nutrition into HIV responses, but they are at different stages and have varying human and institutional capacities. **Figure 2** organizes the 15 PEPFAR focus countries into four phases that categorize progress and identify steps needed. FANTA-2 will provide technical assistance to many of these countries in Project Year One: Ethiopia, Haiti, Kenya, Mozambique, Namibia, Tanzania, Vietnam and Zambia.

Figure 2. Phases of Integration of Nutrition into National HIV Response



1.3.1. National Nutrition and HIV Policies and Strategies

An enabling policy environment is critical for effective nutrition and HIV services. However, in many countries, the influx of considerable HIV resources and the pressure to rapidly roll out treatment services have made it difficult for governments to engage in the systematic, long-term and multi-pronged approach needed to integrate nutrition into HIV policies and services.

To integrate nutrition into a more coordinated and cohesive national HIV response, FANTA-2 will work closely with partners to help organize technical working groups (TWGs), establish nutrition FPs at the national level, and prepare national nutrition and HIV strategies and national guidelines. (See **Cote d'Ivoire, Ethiopia, Haiti, Kenya, Mozambique, Namibia, Tanzania, Vietnam, and Zambia.**)

1.3.2. Nutrition and HIV Capacity

As recognition of the critical role food and nutrition play in HIV care and treatment has grown, a clear need has emerged to strengthen partner capacities in nutrition assessment, counseling and the provision of specialized food products. To strengthen these competencies, FANTA-2 adapts existing resources to develop and roll out national nutrition and HIV training materials, as well as materials to support nutrition assessment and counseling. FANTA-2 also works closely with PEPFAR IPs and government facilities to provide on-site TA on the integration of nutrition assessment and counseling into client flow systems, information systems and protocols at HIV treatment and care facilities and in community programs. (See **Ethiopia, Haiti, Kenya, Mozambique, Namibia, Tanzania, Vietnam, and Zambia.**)

1.3.3. FBP Programming

FBP was initiated in a PEPFAR/Kenya program and has become an effective and replicable approach for meeting the nutritional needs of malnourished people living with HIV (PLHIV) in clinical settings, significantly enhancing the care and treatment provided. With PEPFAR support, the FBP model is being adapted and replicated in several countries. To better enable food provision programs to meet the needs of HIV-affected individuals, such as clinically malnourished adult PLHIV and pregnant/lactating HIV-positive women, FANTA-2 provides support to the design of and guidelines for FBP programming; for assessing progress, challenges, results, and gaps in ongoing programs; and for supporting scale-up where appropriate. (See **Tanzania, Vietnam, and Zambia.**)

1.3.4. Assuring the Quality of Nutrition Care

As nutrition interventions for PLHIV expand, establishing systems that ensure high quality program implementation becomes critical. To strengthen systems for monitoring, quality assurance, impact assessment, and information sharing, FANTA-2 assists countries integrate nutrition indicators into national M&E systems, incorporate data collection processes into existing information systems, and adapt, test, and apply quality assurance and quality improvement (QA/QI) tools. To complement program M&E, FANTA-2 also conducts specialized assessments of specific program approaches, such as the use of lay counselors, food delivery mechanisms and facility-community linkages for client follow-up. (See **Ethiopia, Kenya, Mozambique, and Vietnam.**)

IR 1.4. Improving ER&S nutrition and food security program assessment, design, implementation and M&E

Access to food is most acutely threatened and vulnerability to malnutrition is most severe in ER&S contexts. FANTA-2 provides targeted TA to strengthen USAID initiatives to improve the nutritional status and food security of people living in these contexts.

1.4.1. CMAM in Emergency Contexts

SAM is an urgent problem in many ER&S settings, and CMAM has been demonstrated to be a highly effective approach for managing SAM during and after emergencies. To strengthen capacity for inpatient care, outpatient care, and community outreach for CMAM, FANTA-2 assesses existing CMAM programs and conducts tailored training workshops for health sector and IP staff. This training is coupled with in-service training and other TA, in conjunction with local institutions. In Project Year One, FANTA-2 will initiate CMAM training in Africa, focusing on vulnerable countries, disasters and complex humanitarian situations where high malnutrition rates exist. (See **Sudan**.)

IR 1 MISSION SUPPORTED COUNTRY ACTIVITIES

Afghanistan

IR 1.1 – Food security program design, implementation, and M&E improved

World Vision will implement a MYAP for FY 2008-2010 in the Ghor Region of Afghanistan, focusing on MCHN and infrastructure development for food security. To support and strengthen this program, USAID/Afghanistan has requested that FANTA-2 support World Vision with TA to strengthen the program's M&E, including its baseline survey.

Côte d'Ivoire

IR 1.3 – HIV and nutrition and food security-related program design, implementation, monitoring and evaluation improved

Côte d'Ivoire is a PEPFAR focus country. In 2007 there were approximately 420,000 PLHIV in Côte d'Ivoire and national HIV prevalence among adults (ages 15-49) was estimated at 3.9 percent. During FY 2008, FANTA implemented a set of activities to begin strengthening capacity in nutrition care of PLHIV: an initial assessment of nutrition, food and HIV activities and related policies, materials and capacity; support for establishment of a national Nutrition and HIV technical working group (TWG) comprised of stakeholders from the Government of Côte d'Ivoire (GOCI), including the National Nutrition Program (PNN), the National Program for Care and Treatment of PLHIV (PNPEC), and PEPFAR IPs; and drafting of National Guidelines on Nutritional Care and Support for People Living with HIV (PLHIV). Côte d'Ivoire is currently a phase 1 country on the integration of nutrition into national HIV response scale (see **Figure 2**).

In Project Year One, FANTA-2 will support the Mission with the following activities:

- Place a FANTA-2 nutrition and HIV program manager in Abidjan to help implement the FANTA-2 activities listed below. Upon approval from PEPFAR/Côte d'Ivoire and contingent on availability of sufficient funding, FANTA-2 will replace the consultancy with a full-time program manager position for Côte d'Ivoire in April 2009.
- Complete and launch National Guidelines. FANTA-2 will assist PNN and the TWG to complete and finalize the National Guidelines, including review by key national stakeholders, incorporation of stakeholder comments into the final version, editing and formatting. Once the final version of the National Guidelines has been approved by the GOCI, FANTA-2 will support production, printing and dissemination.

Figure 3. Matrix of Planned Country Activities in Project Year One

Countries	IR 1.1.1.1. Food Security Assessments and Programming Strategies	IR 1.1.1.2. Early Warning and Response Systems	IR 1.1.1.3. Harmonized and Integrated Monitoring and Evaluation Plan	IR 1.1.1.3. High-Quality Baseline Surveys	IR 1.1.1.3. Layers Approach	IR 1.2.1. Integration of CMAM into National Health Systems	IR 1.2.2. Outcome Monitoring	IR 1.2.3. Community-Based Nutrition Program Models	IR 1.2.4. National Nutrition Policies	IR 1.3.1. National Nutrition and HIV Policies and Strategies	IR 1.3.2. Nutrition and HIV Capacity	IR 1.3.3. Food-by-Prescription Programming	IR 1.3.4. Assuring the Quality of Nutrition Care	IR 1.4.1. CMAM in Emergency Contexts
Afghanistan	X		X											
Bangladesh	X													
Burkina Faso	X													
Burundi		X												
Chad			X											
Cote d'Ivoire								X	X	X	X			
Democratic Republic of Congo	X		X											
Ethiopia		X						X	X			X		
Ghana						X								
Guatemala						X								
Haiti				X				X	X					
Indonesia					X									
Kenya								X	X			X		
Liberia	X													
Madagascar						X								
Mali	X	X												
Mozambique	X	X	X					X	X			X		
Namibia								X	X					
Niger	X	X	X											
Sierra Leone	X													
South Sudan							X							
Sudan						X								X
Tanzania								X	X	X				
Uganda			X				X	X						
Vietnam								X	X	X	X			
Zambia								X	X	X				
TBD	X	X	X	X	X	X	X							X

- Provide training on application of the National Guidelines in care and treatment of PLHIV and OVC. The objective of the training will be to create master trainers at the central and regional level who will be charged with providing ongoing training to health care providers on application of the National Guidelines in their provision of services to PLHIV and OVC. FANTA-2 will assist PNN to develop a training plan for health care providers in nutrition care and support of PLHIV and OVC at health facilities around the country.
- Develop and produce nutrition counseling materials for PLHIV, building on FANTA's experience with the development of nutrition counseling materials in a number of other PEPFAR countries. FANTA-2 will work with PNN and the TWG to assess and determine which types of counseling materials are priority needs (e.g., counseling cards, posters, take-home brochures). FANTA-2 will oversee the field testing and adaptation of nutrition counseling materials developed in other countries to begin the process of adapting materials for the Ivorian context. FANTA-2 will take the lead on the adaptation, design, and layout of the counseling materials in collaboration with the TWG. FANTA-2 will support the production of 1,000 copies of the nutrition counseling materials.
- Develop a Food by Prescription (FBP) strategy and provide ongoing technical assistance to PEPFAR/Côte d'Ivoire and IPs on specialized food product provision for PLHIV and OVC. FANTA-2 will conduct an assessment of current food assistance programs, capacity for implementing a FBP program at PEPFAR sites and the potential for local/regional procurement of specialized food products. Based on the findings, FANTA-2 will develop a FBP strategy for Côte d'Ivoire. The FBP strategy will provide guidance on the selection of PEPFAR program sites for initial implementation of FBP and a plan for scale-up, appropriate specialized food products, forecasting for food product procurement, entry and exit criteria for food provision, targeting, staffing and capacity strengthening. The FBP strategy will include a matrix of action steps and a timeline for FBP implementation. In addition to the development of a FBP strategy, FANTA-2 will provide technical assistance and training to PEPFAR IPs to strengthen program design, implementation, and M&E of specialized food product provision.

Ethiopia

IR 1.3 – HIV and nutrition and food security-related program design, implementation, and M&E improved

Ethiopia is a PEPFAR priority country with an estimated 980,000 PLHIV in 2007. Given the high rates of malnutrition in Ethiopia and the demonstrated links between HIV and nutrition, USAID/Ethiopia supports the integration of nutrition interventions into HIV care and support programs. In FY 2008, the Food and Nutrition Technical Assistance Project (FANTA) provided TA to the Federal HIV/AIDS Prevention and Control Program (FHAPCO) and the Federal Ministry of Health (FMOH) to strengthen human resource capacity, establish nutrition and HIV services, and develop scale-up plans to take them to scale. Ethiopia is currently a phase 2 country in integrating nutrition into national HIV response (see **Figure 2.**).

In Project Year One, pending further discussion and agreement, FANTA-2 will support the Mission with the following activities:

- FANTA-2 will work with the FMOH, FHAPCO and PEPFAR IPs to scale up the training of clinical management of malnutrition among PLHIV. Using the national clinical

guidelines and training materials developed during FY 2008, FANTA-2 will support the training of service providers in the majority of HIV treatment facilities in urban and peri-urban areas. Resource persons trained during FY 2008 will serve as trainers.

- FANTA-2 will work with the FMOH, medical and nursing schools, and the IP implementing the FBP program to integrate nutrition and HIV into pre-service training for clinicians and other health care workers. FANTA-2 will provide input to the content of the curriculum and support the initial trainings.
- FANTA-2 will work with the FMOH and PEPFAR IPs to integrate nutrition into community-based HIV care and support services. This support may include adapting existing regional training materials for community-based care and home-based care (HBC) providers, developing simple tools that target community-based providers, and making field visits to help identify and refine systems for including nutrition in services.
- As the PEPFAR FBP program begins in early 2009, FANTA-2 will provide TA to help the program establish patient flow, data collection and other M&E systems, and ensure the technical soundness of training. FANTA-2 will draw on and share experience from FBP programs in other countries to help support the Ethiopia program. As part of its support to program M&E, FANTA-2 will assist the program in documenting successes and challenges during initial implementation.
- Continuing work begun during FY 2008, FANTA-2 will work with the FMOH and FHAPCO to integrate indicators on nutrition and HIV into the national health management information system (HMIS). Support will include helping to define and finalize indicators, supporting advocacy efforts to incorporate them into the national system, and integrating the information into data collection systems.
- FANTA-2 will introduce QA/QI methods into the nutrition care components of HIV services. Building on other QA/QI approaches being used, such as those University Research Corporation (URC) has introduced in HIV and other health care settings in Rwanda and Uganda, FANTA-2 will help partners introduce approaches such as quality checklists, supervisor support techniques and/or quality improvement collaboratives.

Ghana

IR 1.2 – MCHN program design, implementation, and M&E improved

Ghana has the world's 15th-highest burden of children suffering from severe wasting; however the management of SAM and the CMAM approach are entirely new to Ghana. To help the Ghana Health Service (GHS) improve technical capacity in nutrition, USAID/Ghana requested support from FANTA during FY 2008 for the introduction and scale-up of services for CMAM.

FANTA-2 will continue TA to USAID/Ghana to support the integration of CMAM into the health system. During Project Year One, FANTA-2 will focus primarily on technical capacity development and support to the GHS in order to establish a strong national capacity with tested guidelines, strategies, plans and sustainable competencies.

In Project Year One, pending further discussion and agreement, FANTA-2 will support the Mission with the following activities:

- FANTA-2 will strengthen the enabling environment for CMAM through a SAM Support Unit (SAM SU), to develop the technical leadership role of the GHS, provide technical and administrative support for strengthening national coordination through SAM technical committee (SAM TC) meetings, and engage with the Inter-Agency Nutrition Partnership (INP), UNICEF/Ghana, World Health Organization (WHO)/Ghana, and other stakeholders as appropriate. The SAM SU will support the SAM TC to advocate for CMAM integration into health policies and plans, and into health and nutrition initiatives, including integration in the national program of work and budget. A strategic plan for sustainable capacity development will be tested in CMAM learning sites and will inform national scale-up.
- FANTA-2 will strengthen competencies for CMAM by developing a capacity development model based on documented experiences from the two learning sites. The CMAM capacity model will involve national training institutions and collaboration with WHO/Ghana on the management of SAM with medical complications in inpatient care (a training of trainers [TOT]) and linkages with outpatient care for a comprehensive approach to the management of SAM. As a result, a core group of trainers or experts on CMAM will be established in-country, linking with the learning sites for in-service training and internships.
- FANTA-2 will support two national workshops that focus on CMAM. The first will focus on the quality and effectiveness of services, and on adopting CMAM interim guidelines for Ghana. The second will focus on enhanced learning from scaling up. FANTA-2 will collaborate with UNICEF/Ghana-funded training activities to scale up CMAM in the Central and Greater Accra regions.
- FANTA-2 will improve access to CMAM services by facilitating and supporting GHS efforts to begin scale-up in Central and Greater Accra regions, while assisting efforts to achieve district-wide coverage in the two learning sites. FANTA-2 will provide technical support to the GHS in developing plans and implementing strategies for national scale-up.
- FANTA-2 will improve access to CMAM supplies at the national level through the continued facilitation of access to therapeutic supplies and start-up of the national production of RUTF in partnership with UNICEF/Ghana. This will include advocacy efforts to support the appropriate use of RUTF in-country, facilitating and monitoring the progress of Nutriset's transfer of production technology, and identifying additional opportunities for ready-to-use supplementary food (RUSF) for the management of moderate acute malnutrition (MAM) and other new products that might be socially marketed (e.g. LNS for the prevention of chronic malnutrition).
- FANTA-2 will strengthen the quality of CMAM services by developing capacity, costing, supervision, and M&E tools, which measure performance and coverage, are adapted to the Ghana context, and enhance quality assurance. FANTA-2 will adapt other newly developed methods for costing and measuring coverage, in collaboration with international experts, the GHS and national research and training institutions.

- FANTA-2 will post an international CMAM expert to serve as the SAM Technical Advisor (SAM TA). The GHS SAM Focal Point (SAM FP) and the SAM TA will then constitute the SAM SU.

Guatemala

IR 1.1 – Food security program design, implementation, and M&E improved

Guatemala's MYAPs for the period of FYs 2007–2011 began in October 2006 and are being implemented by Catholic Relief Services (CRS), Asociación SHARE de Guatemala and Save the Children (SC). These CSs work in MCHN, water and sanitation, agricultural production, marketing, credit, natural resource management, and in strengthening the capacity of local governments to deliver services in those sectors in highly food-insecure areas in the Departments of Baja Verapaz, Chimaltenango, Huehuetenango, Quiché, and San Marcos.

In Project Year One, FANTA-2 will support the Mission with the following activities:

- Building on support provided to the Title II CSs in FY 2008, FANTA-2 will assist the CSs in applying the results of formative research to improve behavior change interventions, and, in particular, the strategy of Integrated Care for Children and Women at the Community Level (AINM-C), which is currently implemented by the Guatemalan Ministry of Public Health and Social Assistance (MSPAS) with the TA of bilateral URC/Calidad en Salud Project. Expected outcomes of this activity include the development of messages and activities that more specifically address barriers to adopting the recommended practices, and better targeting of messages to people who may be influencing decisions regarding infant feeding and agriculture practices.
- FANTA-2 will support CSs in addressing issues affecting the quality of implementation of their programs. During a November 2007 workshop facilitated by FANTA, the CSs discussed deficiencies in the current approach of training, supervising and monitoring the performance of field staff, which has often resulted in poor implementation of their activities at the field level. The poor performance of community health workers (CHWs), especially in the area of counseling, was also cited as a problem in the recent process evaluation of AINM-C by URC/Calidad en Salud. The CSs observations and URC/Calidad en Salud findings both point to the need to improve how programs are implemented. FANTA experience from Haiti and Nicaragua in improving the quality of implementation of MCHN programs will provide a basis for technical support in Guatemala.

IR 1.2 – MCHN program design, implementation, and M&E improved

In FYs 2007-2008, FANTA assisted USAID/Guatemala to carry out an OM survey that collects data on a set of basic health indicators in the geographic areas covered by USAID/Guatemala's Health, Population and Nutrition (HPN) program. In FY 2008, FANTA trained personnel of the USAID-funded bilateral health program URC/Calidad en Salud and private firm CIENSA in the implementation of the 2008 OM Survey. FANTA-2 will provide technical consultation to both organizations for the implementation of the 2009 OM Survey.

Contingent on further discussion with USAID/Guatemala and partners, FANTA-2 may also provide support to the MSPAS in the implementation and M&E of the "Mi Familia Progresiva" (My

Family Progresses) conditional cash transfer (CCT) program. The CCT program provides assistance based on a household's poverty status and completion of conditions for health services (e.g., completion of vaccination, monthly growth monitoring [GM]) and schooling (e.g., enrollment in school).

Haiti

IR 1.1 – Food security program design, implementation, and M&E improved

Three CSs—Agricultural Cooperative Development International/Volunteers in Overseas Cooperative Assistance (ACDI/VOCA), CRS and World Vision—will implement MYAPS for the period FY 2008-2012 in Haiti. In Project Year One, FANTA-2 will support the Mission with the following activities:

- Based on consultations with Title II CSs, Conseil National de Securite Alimentaire (CNSA), and FEWS NET, FANTA-2 will continue to provide input to the development of the Northwest Early Warning Systems (NEWS). Establishment of this system will involve coordination among Title II CSs, CNSA, and FEWS NET.
- FANTA-2 will work with the Title II CSs to strengthen their M&E systems and use of the information generated. FANTA-2 will provide support for the MYAP baseline survey, including input to and refinement of results once data collection is complete, as well as for the survey analysis. FANTA-2 will help incorporate indicator reporting systems into CS programs, and refine interventions if needed based on results. FANTA-2 will also assist the CSs to prepare for the Mid-Term Evaluation (MTE), which is due to be carried out during Project Year Two.
- Following up on FANTA's introduction of Layers in Haiti in FY2004, FANTA-2 will update Layers to incorporate environmental quality control indicators. FANTA-2 will also provide periodic support to the implementation of Layers, including trouble-shooting as challenges arise, input to the analysis of results, and the reporting of findings to USAID/Haiti and CSs.
- FANTA-2 will contribute to the planning of measures needed to address the ongoing food price crisis in Haiti. This will include participation in planning meetings, preparation of documents (e.g., talking points, strategies) as needed, and integration of assessments and analyses being done by others.

IR 1.3 – HIV and nutrition and food security-related program design, implementation, and M&E improved

Haiti is a PEPFAR focus country and had over 120,000 PLHIV in 2007. High rates of malnutrition in Haiti worsen the impact of HIV and pose significant challenges to care and treatment. During FY 2008, FANTA conducted an assessment to identify partners and related policies and materials, and to assess existing capacity and gaps in nutrition and HIV; drafted National Guidelines on Nutrition Care and Support for PLHIV; supported a workshop to finalize the National Guidelines; and provided technical support for the design of an FBP program targeting clinically malnourished antiretroviral therapy (ART) and pre-ART clients, pregnant and lactating women, and orphans and vulnerable children (OVC). Haiti is currently a phase 1 country in integrating nutrition in national HIV response (see **Figure 2.**).

To support further progress in integrating nutrition care and support into the national HIV response, USAID/Haiti has asked FANTA-2 to provide assistance to the Ministry of Public Health and Population (MSPP) and other PEPFAR IPs to facilitate a coordinated and integrated approach to food, nutrition and HIV activities, and strengthen the capacity of health providers, PEPFAR IPs, and community-based service providers to provide nutrition assessment, counseling, and palliative care that includes nutrition care and support.

In Project Year One, FANTA-2 will support the Mission with the following activities:

- FANTA-2 will provide ongoing technical support to the Haiti FBP program. FANTA-2 will meet with stakeholders, including Meds and Foods for Kids (MFK), CRS and Supply Chain Management Systems (SCMSs), about the procurement of therapeutic and supplementary foods for clinically malnourished PLHIV and OVC, and to provide TA on specialized food product formulations, effective entry and exit criteria, and systems for sustainable supply, quality assurance, and M&E.
- FANTA-2 will produce final versions of the National Guidelines on Nutrition Care and Support for PLHIV that were drafted in 2008. FANTA-2 will support final production, printing and dissemination of 1,000 copies of the National Guidelines.
- FANTA-2 will develop a pre-service training manual on nutrition and HIV for the purpose of training HIV care and treatment service providers. FANTA-2 will work with the MSPP and other ministries, United Nations (UN) agencies, and PEPFAR IPs to adapt existing training materials on nutrition and HIV to the Haitian context.
- FANTA-2 will draft nutrition counseling materials to strengthen care and treatment services for PLHIV. FANTA-2 will work with PEPFAR IPs and stakeholders in Haiti to prioritize the kinds of counseling materials needed, oversee the adaptation of existing materials produced by FANTA and other sources, and oversee the design, layout, and field testing of the materials in collaboration with the Nutrition and HIV TWG. The materials will be consistent with the nutrition messages in the National Guidelines for Nutrition Care and Support for PLHIV, and will be printed in Project Year Two, contingent on the availability of additional resources for production.

Kenya

IR 1.3 – HIV and nutrition and food security-related program design, implementation, and M&E improved

Kenya is a PEPFAR focus country and had over 1,750,000 PLHIV in 2007. Since 2004, USAID/Kenya has been supporting the integration of nutrition into HIV care and treatment services, and FANTA has provided technical support to USAID/Kenya, the Kenya National AIDS and STI Control Program (NASCO), and PEPFAR IPs. This support has included the development of national guidelines, the development and roll-out of training and counseling materials, the training of services providers, the introduction of nutrition into community-based HIV care services, the integration of nutrition into the national M&E system, and a randomized Targeted Evaluation to examine the impact of food supplementation. Kenya is currently a phase 3 country in integrating nutrition into national HIV response (see **Figure 2.**).

In Project Year One, contingent on the availability of resources, FANTA-2 will support the Mission with the following activities:

- Following up the initial integration of nutrition into the national HIV M&E system, FANTA-2 will support NASCOP in the national-scale roll-out of the nutrition monitoring forms and compilation, analysis and reporting system.
- FANTA-2 will work with the bilateral Nutrition and HIV Program (NHP)/AED to establish and strengthen the QA/QI methods for nutrition assessment and counseling, and the provision of specialized food products.
- FANTA-2 will work with the PEPFAR-supported AIDS, Population and Health Integrated Assistance II (APHIA II) IPs to strengthen linkages between community-based OVC services and facility-based health care for the food and nutrition needs of OVC.
- FANTA-2 will provide ongoing TA to NASCOP on food and nutrition issues.

Madagascar

IR 1.2 – MCHN program design, implementation, and M&E improved

The HPN office of USAID/Madagascar is supporting a variety of interventions aimed at improving the health and nutrition of the population living in targeted regions in four of Madagascar's six provinces. USAID/Madagascar-funded programs provide health services and products in the technical areas of malaria, child survival, child nutrition, reproductive health, family planning, neonatal/ maternal health, sexually transmitted infections (STIs), and HIV. For the last three years, FANTA has assisted USAID/Madagascar in carrying out an annual OM survey that collects data on a set of basic health indicators in the geographic areas covered by USAID/Madagascar's HPN programs.

In Project Year One, FANTA-2 will support sub-recipient PENSER to carry out an OM survey for the Mission's health programs and analyze the results.

Mozambique

IR 1.3 – HIV and nutrition and food security-related program design, implementation, and M&E improved

Mozambique is a PEPFAR focus country and had over 1.5 million PLHIV in 2007. By September 2008, PEPFAR/Mozambique has served approximately 111,778 ART clients, 69,781 HIV-positive prevention of mother-to-child transmission of HIV (PMTCT) clients and their infants, and 289,707 OVC. During FY 2008, FANTA began TA to Mozambique to support the integration of nutrition into government and PEPFAR-supported HIV care and treatment services.

Mozambique is currently a phase 1 country in integrating nutrition into national HIV response (see **Figure 2**).

During Project Year One, FANTA-2 will support the Mission with the following activities:

- FANTA-2 will develop a five-year nutrition, food and HIV strategy for PEPFAR/Mozambique to define its approach to nutrition care and support in the context of HIV across partners and USAID/Mozambique SO teams.

- FANTA-2 will update, produce and disseminate job aids and training materials for, and support training in assessment and counseling in nutrition and HIV. FANTA-2 will work with the Ministry of Health (MOH) Nutrition Department and a Nutrition, Food and HIV TWG to identify the job aids and training materials necessary for health care providers in Mozambique, develop and update job aids based on their input, field test the job aids, reproduce them and support training in their use. Training materials will build upon those in the MOH Basic Nutrition Package. This support will help ensure PLHIV and OVC receive nutrition assessment and, based on anthropometric results, are classified and treated according to MOH protocols.
- FANTA-2 will support the development of nutrition and HIV modules for the curriculum used in the national nutrition technician training program. Currently there are only about 50 nutritionists working in the MOH throughout the country of 21 million. Training of new nutritionists over the past year or two has been delayed due to the need for a revised nutrition curriculum and lack of human resources to complete the revisions. This activity for Project Year One is contingent on FANTA-2 discussions with the MOH and with MOH priorities and timelines.
- FANTA-2 will support the MOH in developing tools and mechanisms for the collection and analysis of data on SAM and MAM in adult PLHIV. FANTA-2 will work with the MOH and a Nutrition, Food and HIV TWG to identify, develop and reproduce data collection tools, integrate data collection and analysis approaches into existing monitoring systems, and establish data flow systems that enable the effective use and sharing of information about patient nutritional and clinical status among HIV service providers.
- FANTA-2 will plan and sponsor a study tour for Government of the Republic of Mozambique (GRM) and PEPFAR/Mozambique staff to the Kenya Nutrition and HIV Project (NHP) and the Academic Model for Prevention and Treatment of HIV/AIDS (AMPATH) program to learn about their successes and challenges, and bring back lessons that can be applied to possible nutrition and HIV programs in Mozambique.
- FANTA-2 will work together with the MOH and the Nutrition, Food and HIV TWG to develop and/or update the national guidelines, produce copies of the guidelines, assist with dissemination and provide orientation on their use. The guidelines will include recommendations and information on appropriate nutrition support for PLHIV to harmonize programming and services based on sound technical recommendations and established clinical norms and practices.
- FANTA-2 will organize and facilitate a workshop on nutrition, HIV and livelihoods to strengthen integrated programming among CSs and PEPFAR IPs, and will provide follow-up virtual TA to participants to review and discuss progress, plans, facilitators and barriers to implementation, and to brainstorm adaptations to overcome barriers.

Namibia

IR 1.3 – HIV and nutrition and food security-related program design, implementation, and M&E improved

Namibia is a PEPFAR focus country with an estimated adult HIV prevalence rate of 19.6 percent, one of the highest in the world. Namibia had 200,000 PLHIV in 2007. USAID/Namibia

and the Centers for Disease Control and Prevention (CDC) have supported the efforts of the Ministry of Health and Social Services (MOHSS) to strengthen its HIV services by developing ART guidelines and training curricula to help integrate food and nutrition interventions. In FY 2008, FANTA provided TA to the MOHSS for an assessment of food and nutrition needs of PLHIV. The assessment results fed into development of information, education and counseling (IEC) materials, job aids, a training module to support nutrition assessment and counseling, and an operational plan for food and nutrition assistance programming that defines the components of and resource needs for a PEPFAR-funded food assistance program for PLHIV. Namibia is currently a phase 2 country in integrating nutrition into national HIV response(see **Figure 2.**).

In Project Year One, FANTA-2 will support the Mission with the following activities:

- FANTA-2 will strengthen the capacity of a nutrition and HIV FP in the MOHSS Food and Nutrition Subdivision through technical mentoring, financial support, and facilitation of participation in key regional trainings and workshops.
- FANTA-2 will provide input to the MOHSS to operationalize a FBP program for PLHIV that can be integrated into service provision. FANTA-2 will help the program establish patient flow, data collection and other M&E systems, and ensure the technical soundness of training, drawing on and sharing experience from FBP programs in other countries. As part of its support to program M&E, FANTA-2 will assist in documenting successes and challenges during initial implementation.
- FANTA-2 will support the MOHSS in developing educational DVDs on food and nutrition issues pertinent to PLHIV, including food preparation demonstrations, to show in waiting rooms of ART clinics.
- In partnership with the International Training and Education Center on HIV (I-TECH), FANTA-2 will provide TA to the MOHSS to develop a nutrition and HIV course for regional health workers with follow-up mentoring to strengthen and supervise nutrition assessment and counseling in ART sites, and integrate the course into the University of Namibia (UNAM) or the Polytechnic of Namibia (PON).
- With I-TECH, the MOHSS, and either UNAM or PON, FANTA-2 will review the final content of a diploma course in nutrition to be integrated into a master's degree in public health (MPH) degree program.
- FANTA-2 will provide TA to the MOHSS to integrate indicators for nutrition and HIV into the national HIV M&E framework, including identifying indicators, adapting tools for data collection and use, and providing TA for the application of the tools.

South Sudan

IR 1.2 – MCHN program design, implementation, and M&E improved

The nascent government of South Sudan is in the process of establishing and strengthening policies and systems. The MOH does not yet have a national nutrition policy or strategy. Given the high levels of malnutrition in Southern Sudan, this is a priority. USAID/Southern Sudan has requested that FANTA-2 provide TA to the government in developing a national nutrition policy.

In Project Year One, FANTA-2 will support the Mission with the following activities:

- FANTA-2 will facilitate a national forum on nutrition for clinicians and managers from the major hospitals in the country. The forum will serve to advocate for stronger integration of nutrition into health services, inform participants about the latest recommended approaches to preventing and managing malnutrition, and as an opportunity to identify opportunities for strengthening nutrition.
- Based on consultation with USAID/South Sudan and the MOH, FANTA-2 will work with the MOH to draft a national nutrition policy. The details of the process applied will be determined during an initial FANTA-2 temporary duty assignment (TDY), but steps may include reviewing recent literature and data on the nutrition situation in South Sudan, multiple consultations with a range of stakeholders, drafting of text, review workshops and presentations to policy makers.

Sudan

IR 1.4 – ER&S nutrition and food security program assessment, design, implementation, and M&E improved

FANTA-2 will support the Federal and State MOH, UNICEF, the DCHA Office of U.S. Foreign Disaster Assistance (OFDA)/Sudan, and NGO IPs to strengthen capacities for planning and implementing CMAM in Sudan. FANTA-2 will provide TA at national and regional levels with a particular focus on strengthening the knowledge and skills of senior health professionals in CMAM. This work will continue the collaborative initiative that began with the interagency review of selective feeding programs in Greater Darfur in March/April 2008.

In Project Year One, pending further discussion and agreement with OFDA and USAID/Sudan, FANTA-2 will support the Mission with the following activities:

- FANTA-2 will work with partners to plan and implement an initial orientation and planning workshop for CMAM capacity development targeting senior health professionals, such as staff from the MOH Nutrition and Curative Care units, pediatric associations, and universities and training institutions. FANTA-2 will support the drafting of a capacity development strategy that will form the basis for a longer-term interagency initiative for strengthening capacities in CMAM in Sudan and Greater Darfur. A national training institution will be closely involved in the planning with the aim to institutionalize learning and training capacity within the country.
- Based on the capacity development strategy, FANTA-2 will support the preparation of an implementation plan that identifies detailed activities and deliverables and specific roles and responsibilities of partners.
- FANTA-2 may post a CMAM capacity development FP in the FMOH to support capacity development activities in Sudan.

Tanzania

IR 1.3 – HIV and nutrition and food security-related program design, implementation, and M&E improved

Tanzania is a PEPFAR focus country with an estimated HIV prevalence of seven percent and had 1,400,000 PLHIV in 2007. USAID/Tanzania is planning to begin a FBP program during FY 2009 and has requested FANTA-2 TA in designing the program and building site capacities and service provider competencies to implement the program. Tanzania is currently a phase 1 country in integrating nutrition into national HIV response (see **Figure 2.**).

In Project Year One, FANTA-2 will support the Mission with the following activities:

- FANTA-2 will assess opportunities and capacities for a FBP program. An assessment will also be carried out of the prevalence of malnutrition among HIV care and treatment clients to project the need for provision of specialized food products.
- FANTA-2 will work with the Tanzania Food and Nutrition Commission (TFNC) to design and conduct a TOT in the FBP protocol, including nutrition assessment, counseling, and the provision of specialized food products. This training will cover the food protocol for the program and the appropriate management of the food supplies. During Project Year One, PEPFAR/Tanzania plans to implement the program in nine sites and those trained will provide training to service providers at all of the pilot sites.
- FANTA-2 will work with TFNC to provide training on nutrition assessment and counseling to a larger group of HIV care and treatment sites. To support these services, FANTA-2 may work with national partners to develop job aids, if resources are available.
- Working with TFNC and the PEPFAR IPs in each region, FANTA-2 will develop an M&E framework and M&E system for the program to meet PEPFAR reporting requirements and feed into the national M&E system.
- FANTA-2 will provide input to the SCMS to support the identification and procurement of appropriate specialized food products for the FBP program.
- FANTA-2 will develop a standard package of food and nutrition interventions for OVC and provide recommendations on how to integrate and monitor food and nutrition support into PEPFAR OVC programs. FANTA-2 will also work with PEPFAR IPs in the nine sites where FBP is being piloted to develop a model of linking community-based food and nutrition services for OVC to facility-based food and nutrition services.

Uganda

IR 1.2 – MCHN program design, implementation, and M&E improved

USAID/Uganda Population, Health and Nutrition (PHN) SO8 prioritizes reducing child and maternal mortality through, among other approaches, the promotion of breastfeeding and appropriate complementary feeding, and through growth promotion. In support of this work, USAID/Uganda has requested FANTA-2 to provide TA to build political interest in MCHN in

Uganda, and to develop a community-based nutrition program approach to reduce undernutrition among women and children.

In Project Year One, FANTA-2 will support the Mission with the following activities:

- FANTA-2 will provide technical input to USAID/Uganda for the development of nutrition-related strategies, programs, and policies, as requested.
- FANTA-2 will provide TA to the MOH/Nutrition Section to review the technical quality of policies, guidelines, strategies and other Nutrition Section documents and support the development of a national nutrition communication strategy, a national nutrition operational plan, a nutrition information and surveillance system, and guidelines and training materials for CMAM (known as integrated management of acute malnutrition [IMAM] in Uganda).
- FANTA-2 will provide support to the MOH to build political interest in MCHN at the national level by: re-establishing the National Sub-Committee on Nutrition (NSCN) to coordinate programs, identify gaps in programming, advocate for nutrition and provide technical updates; updating the Uganda PROFILES with 2006 Demographic Health Survey (DHS) data and presenting the results to MOH Senior Management; actively participating in national meetings; supporting and participating in the Uganda Action for Nutrition Society (UGAN) conference; and supporting senior MOH staff participation in international technical meetings on nutrition, as agreed upon and approved by USAID/Uganda.
- FANTA-2 will collaborate with USAID/Uganda, the MOH and other stakeholders to conduct a national nutrition situation analysis with a focus on the East Central, North and Southwest regions of Uganda, that will include a desk review of secondary data; meeting with and interviewing stakeholders at national, regional, district and community levels; and mapping current MCHN activities. FANTA-2 will write a comprehensive situation analysis report that will inform the development of the national nutrition operational plan, national nutrition communication strategy, and the community-based nutrition model.
- FANTA-2 will identify and review current BCC materials and programs which identify key elements of successful programs and barriers to behavior change, and produce a report with recommendations for improving BCC programming in Uganda.
- Building on the previous activities, FANTA-2 will collaborate with USAID/Uganda, the MOH, UNICEF/Uganda and other stakeholders to develop a community-based nutrition program approach based on ENA, to be implemented in two selected districts in Northern Uganda in FY 2010. FANTA-2 and USAID-funded ACDI/VOCA and URC/Nulife in the North will conduct formative assessments, engage in community dialogue, and develop a document describing a community-based approach, including community-level strategy, a training and supervision plan, and the prioritization of interventions and implementation approaches.

Vietnam

IR 1.3 – HIV and nutrition and food security-related program design, implementation, and M&E improved

Vietnam is a PEPFAR focus country and had 290,000 PLHIV in 2007. Though HIV prevalence in the general population was estimated at only 0.53 percent in 2007, transmission is increasing, and a large percentage of HIV-affected children less than five years of age suffer from food insecurity and nutritional deficiencies. PEPFAR/Vietnam supports ART and PMTCT at hospitals and outpatient clinics, and HBC and community outreach for PLHIV and OVC. A 2008 FANTA assessment identified a need to optimize the impacts of these investments in nutrition and HIV by addressing human capacity, infrastructure, program systems and commodities. Vietnam is currently a phase 1 country in integrating nutrition into national HIV response (see **Figure 2**).

In Project Year One, FANTA-2 will support the Mission with the following activities:

- FANTA-2 will provide financial and capacity building support for a Vietnamese nutrition and HIV FP or team in the National Institute of Nutrition (NIN) to coordinate the implementation and scale-up of nutrition and HIV activities, facilitate partner involvement, and monitor the quality of implementation of food and nutrition activities.
- FANTA-2 will support the development of a TWG on nutrition, food and HIV led by the Vietnam Administration of HIV/AIDS Control (VAAC) to ensure ownership and coordination of activities by the government, and provide access to expert opinion and input on nutrition, food and HIV. FANTA-2 will facilitate initial meetings, help develop terms of reference and an activity plan, and provide ongoing technical input and support. The TWG will provide technical input on materials and activities, and assist with dissemination and scale-up plans.
- Based on similar work in other countries, FANTA-2 will provide TA for PEPFAR/Vietnam's work with VAAC and NIN to develop and operationalize national guidelines on nutrition care and support of PLHIV, to advocate for the importance of nutrition in HIV services, guide programs and service providers, and ensure standard messages and approaches. After the guidelines are launched at a limited number of PEPFAR care and treatment sites and lessons are available, the TWG will revise the guidelines for national use and develop plans for dissemination, training in their use, and M&E of their operationalization.
- To inform national guidelines, nutrition and HIV interventions, and food supplementation for PLHIV, FANTA-2 will provide technical support for assessments of: the quality of anthropometric assessment of PLHIV and OVC in PEPFAR/Vietnam-supported sites to guide the completion and use of national nutrition screening, assessment and counseling tools and materials developed in-country in FY 2008; infant feeding practices and available replacement and complementary foods to inform counseling messages, capacity building, and training to reduce high-risk practices such as mixed feeding; the prevalence of SAM and MAM among PLHIV and OVC to improve forecasting the need for therapeutic and supplementary food, resource allocation, and geographic targeting; and the acceptability of RUTF such as Plumpy'Nut[®] among malnourished PLHIV and OVC.

- FANTA-2 will provide TA to PEPFAR/Vietnam to develop counseling, IEC, and training materials on replacement and complementary feeding of HIV-affected infants and young children. PEPFAR/Vietnam adheres to MOH policy recommending replacement feeding for children of HIV-positive mothers, but recognizes the risks of sub-optimal IYCF practices. Based on the results of the assessments of IYCF practices and available replacement and complementary foods described above, FANTA-2 will provide TA to develop counseling, education, and training materials to discourage high-risk infant feeding practices and make feasible IYCF recommendations for mothers and caregivers.
- FANTA-2 will provide TA to PEPFAR/Vietnam to support the design and implementation of a pilot replacement and complementary feeding program for HIV-affected infants and young children, and a FBP program for HIV-infected pregnant and lactating women regardless of their nutritional status and severely and moderately malnourished HIV-infected adults, infants and children in PEPFAR-supported sites. After the MOH approves a national-level replacement and complementary feeding program and FBP program, results will be used to guide scale-up.

Zambia

IR 1.3 – HIV and nutrition and food security-related program design, implementation, and M&E improved

Zambia is a PEPFAR focus country with high HIV prevalence and 1.1 million PLHIV in 2007, along with high rates of malnutrition. Government, donor, and PVO stakeholders recognize the critical role of nutrition care and support in an effective response to HIV. PEPFAR/Zambia has supported the roll-out of ART, reaching 46 percent of PLHIV by the end of 2007, and programs that include food and nutrition components for malnourished PLHIV and OVC. Following on support provided in FY 2008 under FANTA, FANTA-2 will help apply and scale up these approaches, ensure that technical resources and commitment lead to improved capacity of service providers, and operationalize improved capacity into expanded and higher-quality services to improve client treatment and care outcomes. Zambia is currently a phase 2 country in integrating nutrition into national HIV response (see **Figure 2.**).

In Project Year One, pending further discussion and agreement, FANTA-2 will support the Mission with the following activities:

- FANTA-2 will provide TA to USAID/Zambia and PEPFAR/Zambia IPs to support the establishment of a FBP program. Building on the guidelines developed in FY 2008, FANTA-2 will support implementation of the next phase of FBP for malnourished PLHIV and other HIV-affected vulnerable groups such as PMTCT clients and OVC. As a full-scale FBP program gets underway, FANTA-2 will provide technical input into the specialized food products and protocol, selection of an expanded set of sites, a training approach and curriculum, and an M&E system. Based on assessed need, FANTA-2 can support a survey of demand for specialized food products among public and private health care institutions (e.g., hospitals, clinics, pharmacies) to strengthen production planning for these products, improve the sustainability of private sector involvement, and conduct targeted assessments of FBP components. FANTA-2 will work closely with the FBP IPs and the Infant and Young Child Nutrition (IYCN) Project to ensure coordination and harmonization with activities at PMTCT sites participating in FBP.

- FANTA-2 will support the national roll out of training in nutrition and HIV. HIV service providers have limited knowledge of and skills in nutrition care and support. At the request of the National Food and Nutrition Commission (NFNC), FANTA helped finalize a national nutrition and HIV training manual in FY 2008. FANTA-2 will work with the MOH and NFNC to plan and apply a training strategy for service providers at HIV clinics using this manual. FANTA-2 will support initial training at national and provincial levels in partnership with PEPFAR IPs and, depending on the training approach, may support subsequent training with district health management teams (DHMTs). FANTA-2 will coordinate closely with the IYCN Project to ensure harmonization with the PMTCT and infant feeding training supported by IYCN in Zambia, and with the MOH and NFNC to assess the need for skills-based follow-up training in nutrition assessment and counseling. FANTA-2 also will provide TA as needed to develop training materials for CHWs and HBC providers to ensure effective outreach and follow-up, linking with the MOH effort to develop national guidelines on CMAM. Depending on available resources, FANTA-2 may support the printing of counseling materials translated into local languages, as requested by the NFNC.
- FANTA-2 will continue to provide technical and limited financial support for the activities of the HIV/AIDS, Nutrition and Food Sub-Committee established in FY 2008. FANTA-2 will help the Sub-Committee coordinate priority activities, such as support for pre-service training in nutrition and HIV, and integration of nutrition into the HMIS system for HIV services.
- FANTA-2 will strengthen the integration of nutrition information into national M&E systems. As HIV service providers are trained in nutrition and HIV, and FBP and other programs make specialized food products available to malnourished PLHIV, effective M&E of interventions will be critical to document program effectiveness. FANTA-2 will work with the MOH, NFNC and PEPFAR IPs to introduce a system to collect and analyze data on nutrition indicators in HIV services and integrate key nutrition indicators into the existing HIV M&E system at national and site levels.
- FANTA-2 will work with the MOH and PEPFAR/Zambia IPs to reach consensus on standards to define the quality of nutrition assessment and counseling at service delivery points, and design supportive supervision mechanisms and tools. FANTA-2 will then provide TA to the MOH and DHMTs to apply and refine the tools and introduce simple quality assurance approaches. FANTA-2 will coordinate with the IYCN Project for work with PMTCT and pediatric HIV sites.
- FANTA-2 will work with USAID/Zambia, other USG agencies and the IYCN Project to support the finalization and operationalization of the PEPFAR/Zambia Multi-Year Food and Nutrition Action Plan. As needed, FANTA-2 will support strategic planning, identification of opportunities to integrate resource streams, and translation of agreed action items into specific implementation plans. Depending on USAID/Zambia Multi-Year Food and Nutrition demand, FANTA-2 can facilitate this process and help link the PEPFAR/Zambia Action Plan to government nutrition and HIV approaches and strategies, for example, through the HIV/AIDS, Nutrition and Food Sub-committee.
- FANTA-2 will post a regional staff person in Lusaka to carry out and coordinate this work.

IR 2. Increasing the Global Evidence Base, Effective Methods and Competencies for Effective Nutrition and Food Security Policy, Strategy and Program Design, Implementation, and Monitoring and Evaluation

In consultation with USAID, FANTA-2 carries out priority R&D activities, and develops innovative methods and tools to strengthen the design and implementation of nutrition and food security interventions in both development and emergency/reconstruction/stabilization contexts. FANTA-2 studies and validates approaches that are relevant to implementation at different levels (e.g., regional, national, community) to expand the evidence base, while supporting and promoting the release of global standards by international organizations. FANTA-2 also helps USAID incorporate R&D results and country program lessons into policy and guidelines, and increases IP competencies through capacity strengthening activities at the central level that link to and interact with IR 1 country activities.

FANTA-2 works with an extensive network of international and in-country organizations and has strong collaborative relations with Title II, Child Survival and Health Grants Program (CSHGP), PEPFAR and OFDA IPs.

IR 2.1 EVIDENCE BASE FOR EFFECTIVE PROGRAM APPROACHES EXPANDED

Early in Project Year One, FANTA-2 will engage in a consultative process with USAID, IPs and other stakeholders to establish priority areas for research, given the amounts and sources of available funding. To gain input and consensus, FANTA-2 will reach out to the specific communities of practice to determine which research areas are most relevant. FANTA-2 will collaborate with existing mechanisms, such as the Inter-Agency Standing Committee (IASC) Nutrition Cluster, the PEPFAR Food and Nutrition Technical Working Group (F&N TWG), and the CORE Group. Potential research areas that will be explored for Project Year One will include food security and MCHN programs, and may include nutrition interventions in the context of infectious diseases. The following is an illustrative list of potential areas for R&D.

2.1.1. Effective Program Approaches for Title II

Refinement of Title II MCHN Program Components

A typical Title II MCHN program has several components, including food distribution, BCC, and growth monitoring. Research is needed to identify the most effective—and cost-effective—packages of interventions and delivery systems to strengthen Title II MCHN programs and maximize their impact on MCHN.

At the request of FFP, FANTA-2 will provide technical assistance to document the differential impacts of the various components of food-assisted MCHN interventions on child nutrition outcomes. A primary area of research will be to assess the impact of food aid alone versus a well-designed BCC component to better understand the contribution of each component. Similarly, the role of growth monitoring (GM) in enhancing the impact of BCC and food supplements on the adoption of recommended practices and on achieving long-term, sustainable behavior change will be assessed. Currently, there is renewed global attention and promotion of growth monitoring as a key platform to address child undernutrition. However,

evidence of GM's contribution to reducing child undernutrition is still controversial—in fact, anecdotal evidence and documented studies seem to indicate that growth monitoring and promotion (GMP) programs often fail to achieve expected benefits. Given limited resources, rigorous research is needed to carefully assess the true contribution and potential of GM in addressing child undernutrition, to clarify whether the costs and implementation challenges entailed are worth the investment, and to determine whether GM as currently practiced should be maintained, transformed or eliminated from traditional Title II MCHN programs.

Title II Commodities and Nutrition Supplements

Key Title II commodities (e.g., fortified blended foods [FBF] like corn-soy blend [CSB] and wheat-soy blend [WSB]) are inadequate in helping infants under the age of 12 months meet many of their micronutrient requirements, especially iron and zinc. Recent research shows that supplementing FBF with additional targeted products, such as micronutrient Sprinkles or LNS, can improve the linear growth of young children, be highly effective at reducing anemia prevalence, and improve the child's micronutrient status. Such specialized food supplement products could be promising complements to the usual food rations offered in Title II MCHN programs. During Project Year One, FANTA-2 will initiate research to assess the feasibility, effectiveness and cost of using such products in the context of Title II MCHN programs.

Scaling up the Preventive Approach

Finally, while the FANTA/IFPRI/WV studies in Haiti have shown that a preventive approach (PM2A) is effective in preventing child undernutrition by targeting all children less than 2 years of age, the relatively high program cost of PM2A remains an issue. Ways of reducing operational costs include reducing the duration of benefits (currently 18 months) for the child to shorter periods (e.g., 12 months, 15 months) or reducing the size of the rations. FANTA-2 will conduct a study to assess whether a reduction in the duration or size of rations yields the same impact as found in the Haiti PM2A study. FANTA-2 will also examine whether food rations given to pregnant women are always needed to ensure optimal delivery outcomes and reduce early child undernutrition.

The various questions listed above will be addressed in the context of FFP's intent to scale up PM2A in two countries during FY 2009. Linking FANTA-2's MCHN research with FFP's PM2A effort will ensure maximum efficiency in the use of research funds while allowing PM2A CSs to benefit from strong technical guidance in their implementation of the scale up. The large investment in the PM2A initiative (roughly US\$10 million per year in each selected country for five years) extends unprecedented opportunities to refine various components of Title II MCHN programs. This activity will be initiated in Project Year One.

Effective Exit Strategies for Title II MYAPs

One of the persistent challenges of development programs is to ensure that the benefits of their interventions are sustained after the program ends. All Title II programs must incorporate a specific exit strategy into their design that describes how the program intends to withdraw from the program area, while assuring that the achievement of development goals is not jeopardized and that further progress toward these goals continues to be made.

A review of documented experiences with Title II program exit strategies conducted under FANTA (Rogers and Macías 2003) found little rigorous evidence of the effectiveness of different types of exit strategies. This represents a critical gap in knowledge about program design and

implementation; filling this gap is essential to providing guidance on the design of effective exit strategies.

An exit strategy is considered effective if the infrastructure or systems created by the program remain in place, are operative, and the benefits achieved by the program are maintained or increased. The actual choice of exit strategy depends on a few factors: whether 1) permanent change needs to be created so no further input will be required, 2) continued provision of inputs will continue to be an essential part of the program, or 3) program impacts can be achieved through other activities. Different study questions are required in each of those situations.

To explore the effectiveness of exit strategies, FANTA-2 will initiate research in three countries where Title II programs are phasing out. Candidate countries include Honduras, Bolivia and Kenya. Each country study will begin with a review of CSs' planned exit strategies and their implementation during the final MYAP year. One year after the MYAP ends, FANTA-2 will conduct an interim situation assessment. Two years after the MYAP ends, FANTA-2 will conduct an in-depth qualitative and quantitative assessment of the extent to which the impacts of the MYAP were maintained or improved, and an in-depth qualitative review to understand factors of success or failure in the specific exit strategies that were used. Results from the study will provide guidance to future programs on how to incorporate exit strategies into their program designs to ensure sustainability of benefits after program exit.

EWR Capacity of MYAPs

FANTA-2 will document lessons learned in the course of providing TA to CSs to strengthen MYAP EWR systems (1.1.2) for the development and refinement of technical reference, training and guidance materials and Title II guidelines; and for the evaluation of the TI mechanism. Evidence will be documented regarding both the technical considerations and institutional processes for selecting TIs, defining TI thresholds, collecting and validating the data (including engaging community structures), identifying appropriate follow up steps when trigger levels are reached, and operationalizing the TI mechanism (i.e., shifting resources towards/away from emergency distributions). FANTA-2 will also assist FFP in establishing the internal policies and procedures to operationalize the development relief approach and respond to early warning information from MYAPs.

FANTA-2 will research key operational questions to build the evidence base and identify promising methods. This includes working directly with Title II CSs to learn from their experiences and strengthen field competencies related to nutrition M&E and EWR. Activities planned for these areas in Project Year One may include the establishment of a typology showing how different types of shocks affect various nutritional outcomes and the identification of essential elements for effective and timely EWR.

Gold Standard Evaluations

In an effort to increase evidence on the impact of Title II programs and contribute to the evidence base for effective interventions and modes of implementation, FANTA-2 may plan and initiate baseline information collection for gold standard evaluations in at least two countries with MYAPs approved to start in FY 2009.

2.1.2. Using LNS to Prevent Chronic Malnutrition

The term LNS refers to a range of products in which vitamins and minerals are embedded in a fat-based food product, which is generally composed of vegetable fat, peanut paste, milk powder and sugar. Until recently, LNS have primarily been used as RUTF for the treatment of SAM, for which they were shown to be very effective. Based on the success of Plumpynut® in the treatment of SAM, additional LNS have also been developed for the prevention of chronic malnutrition, which have been shown in efficacy trials to improve the linear growth of children, prevent severe stunting, reduce iron deficiency anemia, and enhance motor development when provided starting at six months of age for a period of 6 to 12 months. However, there are no data yet as to the performance of LNS when provided in a programmatic setting.

Effectiveness studies

During Project Year One, FANTA-2 will initiate an LNS effectiveness study in Guatemala to document the impact of LNS in an operational setting, compare its impact against that of FBF, and evaluate the economic costs and benefits of LNS for preventing chronic malnutrition, micronutrient deficiencies, and delayed motor development among children. The country site and target group for a second LNS effectiveness study will also be identified during Project Year One. Candidate countries include India, Ghana and Malawi.

Determining Alternative Formulations

Ready-to-use foods (RUFs) with high milk content and soy-peanut fortified spreads have been shown to be effective in treating SAM and MAM among children in controlled clinical effectiveness studies. However, the higher cost of these products may limit the number of malnourished children that could be treated in a programmatic setting. To identify the most cost-effective formulation of RUTF, in Project Year One FANTA-2 will conduct a randomized, double-blind, controlled clinical-effectiveness study in Malawi, comparing a 10 percent milk RUTF with a 25 percent milk RUTF (currently in use) in the treatment of SAM in children.

2.1.3. Emergency Food Products Development

In 2001, in response to the escalating scale and number of humanitarian emergencies, DCHA and GH began a process to develop an emergency food product (EFP) that would be nutritionally and culturally appropriate and logistically convenient for delivery to affected populations in the initial stages of an emergency. The EFP was envisaged as a compact, nutrient-dense RUF that would satisfy the complete nutrient requirements of the recipient population for up to 15 days. The EFP could be the only source of food for affected individuals during an initial two-week period after natural disasters (e.g., hurricanes, earthquakes) and civil disturbances, before a regular food aid supply could be established. The EFP could also be useful in situations where people have little or no access to food and/or cooking fuel, such as a sedentary population cut off by conflict or quarantined due to an outbreak of pandemic flu.

From 2001 to 2005, USAID collaborated with the United States Department of Defense (specifically the United States Army Natick Soldier Systems Center [SSC]), the Institute of Medicine (IOM) and FANTA to develop specifications and prototypes, and test the acceptability of cost-effective, high-energy, nutrient-dense EFP that would meet the following criteria:

1. Would satisfy all nutrient requirements for a population six months of age and over
2. Is appropriate for use as the sole source of subsistence for up to 15 days

3. Is acceptable to people of any ethnic and religious background
4. Can be eaten on the move without preparation steps
5. Can, without significant cost increase, be pre-positioned in harsh environments for at least three years
6. Can, without significant cost increase, withstand an airdrop without endangering people on the ground¹

The IOM-recommended specifications were published in *High-Energy, Nutrient-Dense Emergency Relief Food Product*, in March 2001 (see www.nap.edu/catalog/10347.html).

Based on the IOM specifications, the SSC prepared three prototypes: a wheat-based bar (A-28), a rice-based bar (A-29), and a paste (A-20). In 2005, these prototypes were field-tested for acceptability among a randomly selected and representative sample of refugee camp residents in Bangladesh and Ethiopia, and in extremely poor neighborhoods in Nicaragua. All three formulations were acceptable overall and in each of the dimensions investigated (appearance, aroma, taste, texture, and sweetness). Less than ten percent of respondents expressed significant reservations about consuming any one of the products.

In Project Year One, FANTA-2 will conduct an efficacy trial to ensure that the three products perform adequately for the purpose for which they were originally designed--being the sole source of food for a 15-day period. The study will be conducted with healthy adult volunteers in a non-developing country context.

2.1.4. Review the Evidence on the Performance, Impact, Integration and Scale-Up of CMAM

A review conducted under FANTA identified key elements that contribute to successful integration of CMAM. More work is needed, however, to refine the factors and processes that influence the quality of integration. FANTA-2 will use the key elements of CMAM analytical framework to assess health systems that are more advanced than others in terms of integrating CMAM, focusing on processes, a wider operational context, and sustainability. FANTA-2 will also document evidence on the sustainability of integrated and scaled-up CMAM services/programs in the post-emergency or development context, as well as performance during the next emergency. Documentation of good practices are needed to guide integration and scale-up. Also, lessons learned from introducing and supporting community-based primary health care (PHC; e.g., Integrated Management of Childhood Illness [IMCI], Community-IMCI, Expanded Program of Immunization [EPI]) and an analysis of their relevance to CMAM will be valuable for refining guidance on good practices.

FANTA-2 will also support the continued sharing of experiences and evidence on CMAM at international and national levels. Experiences from implementation and operational research (including from the “grey literature”) will be consolidated and made available.

¹ IOM. High-Energy, Nutrient-Dense Emergency Relief Food Product. National Academy Press. Washington, DC. 2002. page 2.

IR 2.2. COST-EFFECTIVE AND USER-FRIENDLY ASSESSMENT, M&E, COSTING AND PLANNING METHODS AND TOOLS DEVELOPED

Early in Project Year One, FANTA-2 will engage in a consultative process with USAID, IPs, and other stakeholders to establish priority areas for developing M&E methods and tools, taking into account the amounts and sources of available funding. To gain input and consensus, FANTA-2 will reach out to the specific communities of practice for which method and tool development are relevant, as in IR 2.1 above. The following is an illustrative list of potential methods and tools for development.

2.2.1. Tool and Approaches to Improve Title II Programming

Institutional Capacity Building (ICB) Assessment Tools

For the past 15 years, FFP has provided ICB grants to its CSs to improve the design and implementation quality of their Title II programs. A recent review of the ICB grants found a nearly-universal need among CSs for tools to assess field staff capacities in areas as diverse as commodity management, community organization, and M&E to improve capacity-strengthening efforts. Several CSs have developed their own tools, but harmonized tools would enable communities of practice to emerge while allowing the monitoring of progress across programs. During Project Year One, FANTA-2 will compile the experience from the use of existing tools and organize a TWG to produce, in collaboration with CSs, harmonized tools to address needs in this area.

LQAS for Title II Program Monitoring

Several Title II programs are now adopting LQAS as a sampling and analysis method. This is a positive development, however, safeguards are needed to ensure the proper use of LQAS. For example, LQAS can be useful for routine monitoring of Title II programs but is not appropriate for baseline and final evaluation surveys. FANTA-2 will prepare a guide on the use of LQAS in two areas where it is appropriate: collecting data for annual monitoring indicators and midterm assessments.

EWR Nutrition Indicator Tool

In the context of the global trend of increasing food prices, FFP has requested that FANTA-2 provide TA to link nutrition data to FEWS NET's Price Watch to inform resource prioritization decisions. Based on a review of experience and country visits to define what types of indicators would be useful and to determine whether feasible and realistic sources of data for these indicators exist, FANTA-2 will develop and pilot an information product (similar to the FEWS NET Price Watch) that summarizes, in comparable format, existing nutrition data for humanitarian decision making and resource prioritization decisions. Malawi and Burkina Faso may be selected as priority countries for this activity. (See IR 2.1.1)

2.2.2. Definition and Use of Nutrition and Food Security Indicators by the DHS

FANTA-2 plans to work with the DHS to support the incorporation of validated indicators that could be collected and reported as part of standard DHS country reports. These indicators include the women's dietary diversity (WDD) indicator and HFIAS. FANTA-2 will provide the

rationale for reporting data on the indicators, how to collect and tabulate data for the indicators, and provide standard text for the corresponding section of the DHS tabulation plan, if requested.

2.2.3. Developing a Women's Dietary Diversity Indicator

FANTA-2 will continue its efforts to validate dietary diversity as a measure of the adequacy of women's diets. A literature review addressing what is known about the micronutrient quality of women's diets, five country studies and a summary report initiated under FANTA's Women's Dietary Diversity Project (WDDP) will be completed during Project Year One. The country reports use a standardized analysis protocol to test whether dietary diversity indicators constructed from a simple set of food groups can serve as a proxy indicator to assess the adequacy of micronutrients in women's diets. The summary report will synthesize results across countries and make a recommendation regarding the most appropriate indicator to predict micronutrient adequacy of women's diets. The literature review, country studies and summary report will also be prepared in an abridged form for publication in a peer review journal supplement.

Building on this work, FANTA-2 will offer training to USAID, the CORE Group, and Title II CSs on how to collect and tabulate the WDD indicator (WDDI), and on the importance of addressing women's nutrition for improvement of MCHN outcomes.

Collaborating researchers from the WDDP are scheduled to make a presentation of the WDD summary results from the five countries at two scientific meetings: The Experimental Biology Meeting, April 18-22, 2009, in New Orleans, and the International Conference on Diet and Activity Methods (ICDAM), June 5-7, 2009, in Washington, D.C. In addition, FANTA-2 will provide support to the Institute of Research for Development (IRD) to present country-specific WDDP results for the Mali site at ICDAM.

2.2.4. Household food insecurity access scale (HFIAS)

To follow up on FANTA's validation and revision of the HFIAS, FANTA-2 will publish a technical report of the validation analyses conducted and provide recommendations for future use of the HFIAS. In addition, FANTA-2 will seek opportunities to carry out a rigorous study to assess the sensitivity and specificity of the revised, condensed HFIAS against gold standard measures of food security, such as food consumption and expenditure indicators. Ideally, the questions comprising the HFIAS could be added into a food consumption or expenditure survey already being carried out by a research institute, and the data could be shared with FANTA-2 for HFIAS validation purposes. If the timing of these additional sensitivity and specificity analyses allows, the results of these analyses will be included in the peer review paper FANTA-2 will prepare to report the results of the HFIAS validation study in a scientific journal. Building on this work, FANTA-2 will also work with FFP to assess the potential desirability of requiring the reporting of the HFIAS as part of the standard Title II MYAP indicators.

2.2.5. Indicators for Assessing Infant and Young Child Feeding Practices (WHO/UNICEF/USAI/UCD/IFPRI/FANTA/AED, 2008)

To support the adoption of the new WHO breastfeeding and IYCF indicators, FANTA coordinated a working group to develop operational guidance for the collection and tabulation of the indicators. FANTA-2 will seek opportunities to collaborate with PVOs or CSs who are

implementing child nutrition interventions to field test and provide feedback on the data collection instrument developed as part of the operational guidance document.

FANTA-2 will also conduct workshops with USAID, the CORE Group, and Title II CSs to raise awareness of the new WHO breastfeeding and IYCF indicators, and provide direction on how to use the operational guidance document developed to collect, report, and interpret the indicators.

2.2.6. Quality Assurance and Quality Implementation (QA/QI)

Assuring the quality of program implementation is key to program impact—especially in areas of rapid expansion, such as food and nutrition for PLHIV and the use of specialized food products for HIV and CMAM. FANTA-2 will collaborate with other Cooperating Agencies (CAs; e.g., the Quality Assurance Project [QAP], Health Care Improvement Project) to adapt QA/QI principles in the priority areas FANTA-2 supports. QA/QI packages might include descriptions of the critical components of food and nutrition services, criteria for assessing and improving quality, and algorithms or job aids for supervisory support. Global tools and methods developed under IR 2 will be adapted and applied to country programs supported under IR 1. For instance, in the area of nutrition and HIV, FANTA-2 support will be provided in the following activities during Project Year One:

- Identification and dissemination of quality standards of service care in nutrition assessment, counseling and education
- Development and dissemination of standards to ensure compliance with specifications for food and nutrition supplements for PLHIV and OVC
- Support of supervision and mentorship for health care providers at HIV care and treatment sites through the design of supportive supervision mechanisms and tools

2.2.7. Sampling Guide

During Project Year One, FANTA-2 will update and expand the FANTA *Sampling Guide (1999)*, focusing on key issues related to sampling, and an explanation of appropriate sampling methods for mid-term assessments and annual monitoring. A discussion on alternative sampling designs and LQAS will be incorporated into the Sampling Guide.

2.2.8. Validating Additional Thresholds for Alternative Sampling Designs

There is growing need/demand for additional thresholds to be addressed by the alternative sampling designs: i) The IASC Nutrition Cluster has now recommended the adoption of the WHO standards for emergency settings (which will lead to higher SAM prevalence levels being reported and make the detection of low levels of SAM (5%) useful in almost all emergency settings); ii) Additional institutions have adopted the alternative sampling design approach (WFP intends to begin using in the near future, FSAU is no longer piloting but the approach but using the designs in "isolation" as their standard methodology); and iii) ACF both scaling up the use of the designs within countries (to national levels in the case of South Sudan) and expanding the use of the designs for sentinel site surveillance to additional countries (Kenya, Uganda).

2.2.9. Exhaustive Measurement of Mortality Estimation Method

Mortality estimations provide valuable information to assess the severity of crisis situations. The 30x30 cluster method is commonly used to estimate mortality in a population, yet the method suffers from several limitations when applied to emergency settings. These limitations include being time and resource intensive, possibly leading to imprecise estimates, and providing estimates of mortality averaged over a retrospective period of three months or longer.

To improve the methods available for measuring mortality in crisis-affected populations, FANTA validated an alternative method using an exhaustive case-finding approach for the estimation of mortality. Known as the Exhaustive Measurement (EM) method, it allows estimations of mortality in real time and is more resource-efficient than the 30x30 cluster method. In FANTA-2, two peer-review papers reporting on the EM method will be published in open access journals, one reporting the results from the EM simulation work and the other reporting the results from the EM field work in four sites worldwide reflecting different types of human settlement (Afghanistan, Thai-Burma border, Malawi and Tanzania).

2.2.10. CMAM Integration Support Tools

Building on the three-country review of integration of CMAM services carried out by FANTA in FY 2007, and the growing evidence base on the performance, impact, integration and scale-up of CMAM (see **IR. 2.1.4**), FANTA-2 will continue development of a series of tools to facilitate decision-making regarding the appropriateness and feasibility of CMAM as an approach, planning for implementation and evaluation of CMAM service coverage.

- *CMAM Costing Tool:* In FY 2007-2008, FANTA developed a draft tool to assist MOHs and IPs through the planning and costing of implementing CMAM services/programs. In the second phase of the process, FANTA-2 will field test the tool and finalize the accompanying guide.
- *CMAM Capacity Assessment Tools:* To better guide countries introducing and integrating CMAM programs into their national health systems, FANTA consolidated and refined draft CMAM capacity assessment tools. FANTA-2 will field test the draft tool in Ghana and other potential contexts, and will draft a simple user's guide.
- *SQUEAC Coverage Tool:* The semi-quantitative evaluation of access and coverage (SQUEAC) is a simple approach to facilitating the frequent and ongoing evaluation of program coverage and barriers to access through the routine collection, analysis and use of CMAM program planning and evaluation data. FANTA-2 will work with Valid International to refine and operationalize the SQUEAC approach for assessing and improving the quality and coverage of CMAM services.

2.2.11. Costing Tool for Nutrition and HIV Activities

FANTA-2 will begin developing a tool that can be used to estimate the costs involved in nutrition care and support for PLHIV. The costing tool will use the activity-based costing (ABC) centers approach and can be used by governments, donors, and IPs to plan activities and determine resource requirements associated with each activity. ABC centers will include policy-level components such as the development of national strategies, guidelines, and TWGs on nutrition and HIV; capacity strengthening components such as training, and counseling and assessment

materials; and program implementation components such as equipment, nutrition counseling and assessment, provision of specialized food products, M&E, and supervision and QA/QI efforts.

2.2.12. HIV Nutrition and Food Security Screening Tool

To support nutrition counseling of PLHIV, and to screen clients for eligibility for nutrition and food security interventions, including specialized food product provision, micronutrient supplementation and referral for livelihood and household food support, FANTA began developing a service provider screening tool in FY 2008. The *Guide to Screening for Nutrition Interventions among Adult PLHIV* is designed for use by HIV program managers and service providers who are responsible for designing and implementing nutrition assessment, counseling and eligibility protocols for food provision. The Guide can be used to select questions and criteria to determine if a client can benefit from specific nutrition interventions. Actions taken as a result of the screening will depend on the capacity of and services provided by the facility or program.

During Project Year One, the Guide will undergo field review and refinements.

IR 2.3. PROMOTING GLOBAL NORMATIVE STANDARDS IN NUTRITION AND FOOD SECURITY

Results from FANTA-2's R&D activities, as well as lessons from country programs, are used to generate and contribute to new global-level guidance and standards, and USG policies and guidelines.

2.3.1. Global-Level Normative Standards

Global codification of state-of-the-art, innovative, proven approaches through statements, policy and guidelines issued by international organizations such as the UN Food and Agriculture Organization (FAO), UNICEF, WFP, and WHO is essential to enable widespread and sustainable uptake. A number of new approaches and methods pioneered by USAID, such as CMAM, the IYCF summary indicator and HFIAS, have been endorsed by the international community through consensus-building meetings led by international organizations with active participation and technical input from USAID. FANTA-2 builds on its relationships with key international organizations to facilitate the uptake of FANTA-2 outputs, and supports global collaboration to further guidance and training materials, and to build the evidence and operational research base in relevant project focus areas. FANTA-2 also translates research and programmatic evidence into standards and guidance, and works to promote their adoption by the international community.

Interagency Standing Committee (IASC) Global Nutrition Cluster

Since the inception of the Cluster Approach in 2005, as part of the Humanitarian Reform to strengthen humanitarian response, FANTA has participated in the IASC Global Nutrition Cluster meetings and activities as active member of the Nutrition in Emergencies (NiE) community. FANTA-2 will continue to support the IASC Global Nutrition Cluster activities, and participate in assessment and capacity development working group activities. Participation in the cluster activities enables FANTA-2 to be better positioned to provide support to activities related to NiE.

FANTA-2 will collaborate with technical experts, cooperating and implementing agencies, OFDA, and GH/HIDN to share technical information and strategies on NiE. During Project year One, FANTA-2 will support and collaborate with the Global Nutrition Cluster's Improving Training for Nutrition in Emergencies: The University Network Initiative.

LNS Network

FANTA-2 will participate in the "LNS Network," an electronic roundtable to share information about LNS research, and contribute to the dissemination of knowledge about formulation, production, and use of LNS products for the prevention and treatment of malnutrition among children, PLHIV, pregnant and lactating women, and populations in emergency settings.

Complementary Feeding Working Group

FANTA-2 will also participate in the UNICEF/WHO working group on revision of the IYCF Planning Guide and tools for complementary feeding assessment, analysis and programming.

Additional Global Level Collaboration

During Project Year One, FANTA-2 will engage in the following collaborative activities:

- Support and participate in the WHO meeting on the management of moderate malnutrition and pursue opportunities to technically and, if necessary, financially support the next steps identified by the participants
- Support global collaboration aimed at furthering guidance and training materials for CMAM (see **2.4.4.**)

Support the development and harmonization of rapid assessment methods in emergencies that can be used by all IPs and institutions

2.3.2. Strengthening USG Policies and Guidelines

FANTA-2 provides support to the key USAID central offices responsible for the overall management of the programs targeted under FANTA-2. During Project Year One, FANTA-2 will provide technical information and language for briefing notes and responses to Congress, Executive Branch, and General Accounting Office inquiries; and will assist DCHA/FFP, the GH Office of HIV/AIDS (GH/OHA), and the GH Office of Health, Infectious Disease and Nutrition (GH/HIDN) in strengthening policies and guidelines in key areas of competencies.

GH/OHA and PEPFAR TWGs

In Project Year One, FANTA-2 will assist GH/OHA and the PEPFAR TWGs (F&N and OVC) with updated information on the evidence base, promising implementation practices, cost implications, and other issues as input to policy guidance, programming tools, M&E approaches and recommendations to the United States Department of State Office of the Global AIDS Coordinator (OGAC). FANTA-2 will also disseminate and share key evidence, methods and approaches with the wider HIV community (e.g., PEPFAR partners, the Global Fund to fight AIDS, Tuberculosis and Malaria [GFATM], UNICEF, WFP, WHO, private foundations) through strategically targeted forums.

DCHA/FFP Policies and Guidelines

FANTA-2 will update the *Title II Assistance Program Guidelines* to reflect lessons learned and promising practices. FANTA-2 will also review and update, as needed, the FFP Performance Management Plan (PMP), tabulate indicators for reporting to Congress and the Office of Management and Budget (OMB), and manage the annual data quality assessment of CS reporting.

If requested, FANTA-2 may also assist FFP in developing a standardized annual performance questionnaire (SAPQ) web-based module and M&E guidance for Single-Year Assistance Programs (SYAPs). FANTA-2 will build the capacity of FFP's Institutional Contractor in using the SAPQ, especially in terms of entering the SAPQ data and performing necessary quality control tasks. FANTA-2 will also support FFP in the development of an online version of the SAPQ, and will use the SAPQ data to tabulate and report on FFP's performance monitoring plan.

Other support to FFP will include assisting with its Results Report/Operational Plan (OP) as requested; designing, conducting and analyzing FFP's annual Data Quality Assessment (DQA); and helping FFP respond to the Program Assessment Rating Tool (PART) as requested.

MYAP Reviews

As part of its review of Title II MYAP proposals, FANTA-2 will provide technical input to those proposals. FANTA-2's input will focus on strengthening the assessment of vulnerabilities, the design of interventions, and the identification and measurement of appropriate indicators. FANTA-2 will also continue to assist FFP to improve the reporting capacity of CSs, by writing the M&E Issues Letter for FY 2008 MYAPs to help correct their reporting.

FFP Performance Management

FANTA-2 will assist FFP in meeting its reporting requirements and in using performance information to inform program policies and guidelines. FANTA-2 will provide TA in the ongoing improvement and tabulation of standard indicator data submitted by CSs, the implementation of a DQA exercise, the updating of the FFP PMP, and reporting to the OMB and other USG stakeholders.

Commodity Reference Guide (CRG)

The CRG is used widely by USAID, CAs, CSs, UN agencies, and the private sector to understand the food aid commodity list and determine the selection and size of food rations for food aid programming purposes. During Project Year One, FANTA-2 will provide TA and support for updating DCHA/FFP's CRG, which is both web-based and distributed in hard copy. Through dialogue with FFP, FANTA-2 will identify the process to address priority areas, including the following which have already been identified:

1. Updating nutrient values for current commodities
2. Incorporating approaches for the targeting and duration of ration benefits for the preventive and recuperative approaches
3. Incorporating approaches for addressing HIV which are consistent with guidance provided in *Food Assistance Programming in the Context of HIV* (USAID/WFP/FANTA, 2007)

4. Discussing the use of Title II commodities versus RUTF when children are malnourished; for example, current Title II commodities are not appropriate for the rehabilitation of severely acutely malnourished children but are often used by field programs for that purpose
5. Correcting ration calculations to take leakage into account, or formulating “household ration sizes”
6. Providing calculators that can assist with the design of Food-for-Work (FFW) rations (payment in food which is equivalent in value to a daily wage)

Surge Capacity in Emergencies

FANTA-2 will provide TA to FFP to develop and put in place the necessary internal policies and procedures to determine whether and how to respond when a CS requests additional resources based on early warning trigger levels being met. Policies and procedures that contain a clear description of the steps to be followed by CSs, Missions and FFP when a surge in local capacity is required will facilitate the expeditious and streamlined decision-making and resource allocation that is necessary to fully operationalize the development relief approach. These policies and procedures are a necessary complement to the assistance provided to MYAPs (see **1.1.3**) and development of the evidence base and best practices (see **2.1.1**).

Provide Technical Input on FBF's Role in Title II Commodities

FANTA-2 will provide technical input to USAID, the United States Department of Agriculture (USDA), the Food Aid Consultative Group (FACG), the WFP, and others in their efforts to optimize the formulations of FBF used in Title II programs, if requested.

IR 2.4. COMPETENCIES IN PROBLEM ASSESSMENT AND PROGRAM DESIGN, IMPLEMENTATION AND M&E STRENGTHENED

To strengthen the capacity of USAID IPs, FANTA-2 works to integrate R&D results, innovative methods and tools, normative standards, and field experience into their programs. These activities will include the creation of a technical support services (TSS) unit, development of technical reference materials (TRMs), and strengthening the capacity of development organizations.

FANTA-2 will disseminate evidence-based nutrition and food security approaches through collaboration with global-level partners and through TOT workshops, technical consultations, and dissemination of research findings. FANTA-2 will continue to strengthen partners' capacity to apply and adopt new indicators, tools and methods such as IYCF, WDDI, HFIAS, LQAS, Layers, OM, FBP by developing and making technical resources available to all CSs and IPs (see **2.1.**, **2.2.**, and **2.3.**).

2.4.1. TSS for Title II

During Project Year One, FANTA-2 will create a TSS Unit for Title II, to provide support to the Title II CSs as a group. The TSS Unit will be managed by one full-time staff member and will promote quality in Title II nutrition and food security programming through consistent capacity strengthening and direct technical support. The TSS Unit will serve as the forum for two-way communication and technical collaboration between FANTA-2 and the Title II CSs, and as a

roundtable to seek input on FANTA-2 R&D activities, including priorities for new tools and guides. The TSS Unit will also provide an avenue to participate in and support CS initiatives.

During Project Year One, the following activities are envisioned:

- In consultation with FFP and CSs, FANTA-2 will lay the groundwork to establish the TSS Unit, by organizing and facilitating meetings to conceptualize and create the Unit, and to set an agenda and an action plan for it.
- Once established, the TSS Unit will initiate the development of a capacity assessment tool to measure changes in the technical capacity of the CSs, set up an *ad hoc* consultation support, and initiate the development of the TSS web-based discussion space.
- The TSS Unit will provide other support, including continuing the M&E Harmonization Workshops, improving the quality of baseline surveys in specific countries and regions (see IR1.1), and holding TOT workshops targeting headquarters and field level CS staff to ensure strong continuity in capacity building.

2.4.2. Title II TRMs

In collaboration with Title II CSs, FANTA-2 will adapt the TRM model as developed by USAID's CSHGP to support Title II's specific needs. The Title II TRMs will provide concise, practical, up-to-date information on the essential elements of primary technical interventions and cross-cutting areas to be considered when designing and implementing MYAPs. They will draw directly on research conducted, and methods and tools developed under FANTA-2, and on technical work developed by USAID CAs, IPs, and international organizations, and will be an integral part of the capacity strengthening provided to Title II IPs.

During Project Year One, FANTA-2 will carry out the following activities:

- Develop a TRM, *The Preventive Approach in Food-Assisted Nutrition Programs*, on the PM2A approach, a topic that has already been identified as a priority for roll-out. This material, produced in collaboration with IFPRI, will be completed in early 2009.
- FFP and CSs will be consulted to identify additional priorities, develop an outline of the TRMs, and lay out a time frame for development. Modules will be rolled out progressively and cover areas such as nutrition, MCHN, water and sanitation, sustainable agriculture, livelihood protection and restoration, and HIV. Modules will also be developed for cross-cutting areas such as conducting assessments, identifying and addressing risk and vulnerability, M&E, and integrating MYAP program activities with each other and with Mission activities.

2.4.3. Supporting the CSHGP

FANTA-2 will continue to support the CSHGP through work directly with the Program, as well as collaboration with the CORE Group—especially its M&E Working Group and Nutrition Working Group (NWG)—and the Maternal and Child Health Integrated Program (MCHIP), USAID's \$600 million five-year project designed to support the introduction, scale-up and further development of MCH interventions.

During Project Year One, FANTA-2 will support the following activities:

- In collaboration with the CORE NWG, FANTA-2 will complete the development of the Nutrition Decision Tool that began in FY 2007 under FANTA. The tool will help nutrition program designers select nutrition interventions and approaches that are appropriate to their contexts, serving as a reference tool for program managers that complements existing resources, such as the Nutrition TRMs, and Nutrition Essentials. FANTA-2 will continue providing nutrition technical input as an active member of the steering committee that is guiding the development, as well as lead the organization, design and layout of the tool.
- Also in collaboration with the CORE NWG, FANTA-2 will organize a technical advisory group (TAG) meeting on the Positive Deviance Hearth approach (PD/Hearth), based on recent program evaluation and research experience.
- FANTA-2 will participate in the CORE Spring Meeting, making technical presentations and supporting the development of the NWG workplan.
- FANTA-2 will participate in CSHGP Detailed Implementation Plan (DIP) Reviews, TRM updates, and the Technical Development Meeting, making technical presentations as requested.

2.4.4. Promoting Quality Implementation of CMAM

To ensure that future CMAM implementers are proficient in the CMAM approach and can benefit from the lessons learned to-date, FANTA-2 will develop, in collaboration with its partners, a sustainable capacity development model for CMAM. The model will include training for CMAM program orientation, implementation and management, operational research on access and uptake of services (coverage) for improved quality assurance, and strengthened information systems (see **2.1.4 and 2.2.9**). Within the capacity development model, opportunities to address recommendations from the OFDA-funded CMAM program review will be explored and integrated, where appropriate.

In collaboration with UNICEF, Valid International and Concern Worldwide, FANTA completed training materials to strengthen capacity in CMAM program design and planning, outpatient care, inpatient care, community outreach, supplementary feeding, and M&E. FANTA-2 will develop a strategy for the roll-out of these materials, which includes working with the IASC Nutrition Cluster and the University Network to Improve Training for Nutrition in Emergencies.

Capacity development efforts will also utilize the CMAM costing tool, CMAM capacity assessment tools, and SQUEAC coverage tool. (See **2.2.9**.)

Technical Support to OFDA Partners

In response to the recent global food crisis, DCHA/OFDA has issued an Annual Program Statement (APS) seeking proposals in three priority sectors: Agriculture and Food Security, the Economy and Market Systems, and Nutrition in West Africa. A second APS, for the Horn of Africa (Kenya and Uganda) has goals of stabilizing humanitarian indicators, strengthening existing developmental programs and improving economic opportunities and livelihoods.

FANTA-2 will provide technical support to strengthen the implementation and monitoring of activities awarded through the APSs. Depending on the content of the activities and in consultation with OFDA and IPs, FANTA-2 may carry out workshops on project M&E to ensure better documentation of program impacts.

2.4.5. Support to Research on Supplementary Feeding Programs (SFPs)

FANTA-2 will participate in the steering groups for research initiatives led by the Emergency Nutrition Network (ENN) and Save the Children United Kingdom (SC-UK) related to SFPs:

- Developing Minimum Reporting Standards for Emergency SFPs: Objectives of the initiative are to develop a set of guidelines and data collection templates, develop supporting manuals and training materials, and develop a database application for data entry, analysis and reporting.
- SFP Defaulting and Access Study: Objectives of the initiative are to increase the understanding of the role of default in program performance and strategize ways to minimize its occurrence, and increase the understanding of causes of non-response and means of addressing this problem.

2.4.6. Food Security Assessment in the HIV Context

FANTA-2 will work with WFP to provide technical input to the continued roll-out and application of *Food Assistance Programming in the Context of HIV* (2007). FANTA-2 will participate in a consultation with regional WFP staff, other UN agencies and NGOs in Johannesburg in November 2008 to identify IPs' learning needs in food security and HIV, and develop strategies to meet these needs.

2.5. Publication and Knowledge Sharing

FANTA-2 will maximize the transfer of knowledge by translating research findings and program experience into policy briefs, open-access peer-reviewed journals, research reports, assessments, reviews and technical presentations. FANTA-2 will further facilitate the uptake of knowledge through the production of materials such as guides, manuals, TRMs, and Occasional Papers, as well as through training events and e-learning, workshops and virtual consultation.

FANTA-2 interacts with the relevant communities of practice regarding developments in research, policy, and tools; and maintains dialogue regarding needs, opportunities and lessons learned by participating in electronic fora, and directly engaging in working groups and other collaborative efforts.

To support these efforts, in Project Year One, FANTA-2 will:

- Develop a project web portal to allow open access to FANTA and FANTA-2 publications, with subsites focused on specific priority technical areas such as the TSS.
- Develop new user-friendly publication formats, such as TRMs, to effectively capture and present key technical information.

- Use online training methodologies, ToTs, workshops, mini-universities and virtual consultations to support outreach to IPs and local and national government partners.
- Draft and/or complete and disseminate the publications, tools and materials in Table 1 below.

Table 1. Publications under Development in Project Year One

Guides
<ol style="list-style-type: none"> 1. Sampling Guide 2. Layers for Title II: User's Manual 3. Guide for the use of LQAS in Collecting Standardized Annual Performance Questionnaire (SAPQ) Data and Midterm Assessments
Tools
<ol style="list-style-type: none"> 1. Nutrition Pathways: Decision Tool for MCHN Programming 2. CMAM Costing Tool 3. CMAM Capacity Assessment Tool 4. SQUEAC Coverage Tool 5. Costing Tool for Nutrition and HIV Activities 6. Guide to Screening for Nutrition Interventions Among Adult PLHIV 7. The Preventive Approach in Food-Assisted Nutrition Programs, Title II TRM
Training Materials
<ol style="list-style-type: none"> 1. Draft Nutrition Counseling Materials to Strengthen Care and Treatment Services for PLHIV in Haiti 2. Mozambique Job Aids and Training Materials for Support of Training in Nutritional Assessment and Counseling for Nutrition and HIV 3. Pre-service Training Manual on Nutrition and HIV for Training HIV Care and Treatment Service Providers in the Context of Haiti 4. Counseling and Training Materials on Replacement and Complementary Feeding of HIV-Affected Infants and Young Children in Vietnam 5. National Training Manual on Nutrition and HIV in Tanzania 6. Nutrition and HIV "short course" for Regional Health Workers in Namibia 7. National Nutrition Course for Namibia MPH program
Guidelines
<ol style="list-style-type: none"> 1. National Guidelines on Nutrition Care and Support for PLHIV in Haiti 2. National Guidelines Nutrition Care and Support for PLHIV in Mozambique 3. Draft National Nutrition Policy for Southern Sudan 4. National Guidelines on Nutrition Care and Support of PLHIV in Vietnam 5. National Guidelines on Nutrition Care and Support of PLHIV in Côte d'Ivoire 6. Draft and Final National CMAM guidelines GHS Ghana
Articles
<ol style="list-style-type: none"> 1. Summary Report Synthesizing the Results of the Women's Dietary Diversity Project (WDDP) Across Five Countries Journal Supplement

2. EM Method Peer Review Articles

Translations

Translations of the Following Publications into French:

1. Training Guide for Community-Based Management of Acute Malnutrition
2. CMAM Costing Tool
3. CMAM Capacity Assessment Tool
4. CMAM SQUEAC Coverage Tool
5. A Guide to Monitoring and Evaluation of Nutrition Assessment, Education and Counseling of PLHIV
6. Nutrition and HIV/AIDS: A Training Manual for Nurses and Midwives
7. Indicators for Assessing Infant and Young Child Feeding Practices: Part I Definitions

Annex 1. Document Management Workplan Supplemental

Title	Product Category	Purpose	Target Audience	Production			Output		
				Task	Staff	LOE (days)	Size (pages)	Print	Electronic medium
1. Sampling Guide	Publication - Guide	Provide a more expansive discussion of key issues related to sampling, including an explanation of appropriate sampling methods for midterm assessments and annual monitoring, and use of alternative sampling designs and LQAS	PVO Partners, Program Managers	Writing	Tech	50	80	1000	Y
				Editing & Formatting	Comm	7			
2. Nutrition Pathways: Decision Tool for MCHN Programming	Publication - Tool	Provide guidance to appropriate selection of context-specific nutrition interventions and MCHN	PVO Partners, Program Managers	Writing	Tech	95	65	100	Y
				Editing & Formatting	Comm	15			
3. Summary Report Synthesizing the Results of the WDDP Across Five Countries Journal Supplement	Publication – Journal Supplement	Synthesize results across the five countries reported on that used a standardized analysis protocol to test whether dietary diversity indicators constructed from a simple set of food groups could serve as a proxy indicator to assess the adequacy of micronutrients in women’s diets, and make a recommendation regarding the most appropriate indicator to predict micronutrient adequacy of women’s diets	PVO Partners, Program Managers, Researchers	Writing	Tech	5	10	All Journal Subscribers	Y
				Editing & Formatting	Comm	1			

6. EM Method Peer Review Articles	Publication – Article	Explain EM and results from the EM simulation work, and report the results	PVO Partners, Program Managers, Researchers	Writing	Tech	NA	2 articles 7 pages	All Journal Subscribers	Y
				Editing & Formatting	Comm	1			
7. Workplan Project Year One	Administrative report (contractual)	Plan activities for Project Year One	USAID CTO (Primary) Senior Management, PVO Partners	Writing	Tech & Comm	10	50	10	Y
				Editing & Formatting	Comm	3			
8. Workplan Project Year Two	Administrative report (contractual)	Plan activities for Project Year Two	USAID CTO (Primary) Senior Management, PVO Partners	Writing	Tech & Comm	10	50	10	Y
				Editing & Formatting	Comm	3			

Annex 2. Event Management Workplan Supplemental

Title	Type of Event	Purpose	Target Audience	Type of Participation	Number of Participants	Hand-outs	Length
1. WDDP Presentation at The Experimental Biology Meeting, April 18-22, 2009, in New Orleans	Meeting	Present the WDDP summary results from the five countries	Scientists, NGOs, academia, and international organizations	Presenter with collaborating researchers	60	N	20 minutes
2. WDDP Presentation at ICDAM, June 5-7, 2009, in Washington, D.C.	Meeting	Present the WDDP summary results from the five countries	NGOs, academia, and international organizations	Presenter with collaborating researchers	60	N	20 minutes
3. WDDP Presentation at ICDAM, June 5-7, 2009, in Washington, D.C.	Meeting	Present country-specific WDDP results for the Mali site	NGOs, academia, and international organizations	Presenter in support of the IRD	60	N	20 minutes
4-6. WDDP Indicator Training Workshops	Training	Explain how to collect and tabulate the WDD indicator and the importance of addressing women's nutrition for improvement of MCHN outcomes	USAID	Sponsor	20	Y	1 hour
			CORE Group	Sponsor	20	Y	1 hour
			Title II CSs	Sponsor	20	Y	1 hour
7-9. New WHO Indicator Workshops	Workshop	Raise awareness of the new WHO breastfeeding and IYCF indicators and provide direction on how to use the operational guidance document developed to collect, report, and interpret the indicators	USAID	Sponsor	20	Y	1 hour
			Core Group	Sponsor	20	Y	1 hour
			Title II CSs	Sponsor	20	Y	1 hour