

# FANTA · 2

FOOD AND NUTRITION  
TECHNICAL ASSISTANCE



**USAID**  
FROM THE AMERICAN PEOPLE

## **FANTA-2 BRIDGE FINAL REPORT**

**July 1, 2011 – March 31, 2012**

June 2012

Cooperative Agreement Number  
**AID-OAA-A-11-00014**

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## Abbreviations and Acronyms

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ACF	Acción contre la Faim
ACONDA-VS	Alliance Nationale Contre le SIDA ( <i>National Alliance against AIDS</i> )
ADRA	Adventist Development and Relief Agency
AIDS	acquired immune deficiency syndrome
ART	antiretroviral therapy
AUW	Ahfad University for Women (Sudan)
C-FAARM	Consortium for Southern Africa Food Security, Agriculture and Nutrition, AIDS, Resiliency and Markets (Zambia)
CDC	Centers for Disease Control and Prevention
CMAM	Community-Based Management of Acute Malnutrition
CMAM ST	Community-Based Management of Acute Malnutrition Support Team (Sudan)
COUNSENUTH	Counseling on Nutrition and Health Care
CRS	Catholic Relief Services
CSB	corn-soy blend
CSB++	improved milk-fortified corn-soy blend
CSO	Civil Society Organization
DPS	Direcções Provinciais de Saúde (Provincial Health Directorates) (Mozambique)
DQA	data quality assessment
DRC	Democratic Republic of Congo
EGPAF	Elizabeth Glaser Pediatric AIDS Foundation
EHNRI	Ethiopian Health and Nutrition Research Institute
ENA	Essential Nutrition Actions
ER&S	emergency, reconstruction, and stabilization
EWR	early warning and response
F	Office of U.S. Foreign Assistance Resources
FANTA	Food and Nutrition Technical Assistance Project
FANTA-2	Food and Nutrition Technical Assistance II Project
FAO	Food and Agriculture Organization of the United Nations
FBF	fortified-blended food
FFP	USAID Office of Food for Peace
FFPIB	Food for Peace Information Bulletin
FH	Food for the Hungry
FMOH	Federal Ministry of Health (Ethiopia and Sudan)
FSCG	Food Security Country Guidance
FTF	Feed the Future – USG Global Food Security and Hunger Initiative
FY	fiscal year
GH	USAID Bureau for Global Health
GHI	Global Health Initiative
GHS	Ghana Health Service
Global Fund	The Global Fund to Fight AIDS, Tuberculosis and Malaria
GMP	growth monitoring and promotion
GWU	The George Washington University
HAI	Health Alliance International
HBC	home-based care
HCI	Health Care Improvement project (URC)
HEBI	High-Energy Bar for Integrated Management of Acute Malnutrition
HHS	Household Hunger Scale
HIDN	USAID Bureau for Health, Infectious Diseases and Nutrition
HIV	human immunodeficiency virus
HIV-FS	HIV-free survival
HKI	Helen Keller International
I-TECH	International Training and Education Center on HIV/AIDS
IACS GNC	Inter-Agency Standing Committee Global Nutrition Cluster

ICAP	International Center for AIDS Care and Treatment Programs
IM-SAM	Integrated Management of Severe Acute Malnutrition (South Sudan)
INCAP	Instituto de Nutrición de Centro América y Panamá
IP	implementing partner
IPTT	Indicator Performance Tracking Table
IRD	Institute of Research for Development
IYCF	infant and young child feeding
LIFT	FHI 360 Livelihood and Food Security Technical Assistance Project
LNS	lipid-based nutrient supplement
LQAS	Lot Quality Assurance Sampling
LSHTM	London School of Hygiene and Tropical Medicine
M&E	monitoring and evaluation
MAAIF	Ministry of Agriculture, Animal Industries, and Fisheries (Uganda)
MAM	moderate acute malnutrition
MCHN	maternal and child health and nutrition
MISAU	Ministério da Saúde (Ministry of Health) (Mozambique)
mm	millimeter(s)
MOH	Ministry of Health
MOHSS	Ministry of Health and Social Services (Namibia)
MSPP	Ministère de la Santé Publique et de la Population (Ministry of Public Health and Population) (Haiti)
MUAC	mid-upper arm circumference
MVC	most vulnerable children
NACS	nutrition assessment, counseling, and support
NFNC	National Food and Nutrition Commission (Zambia)
NGO	nongovernmental organization
NIH	National Institutes of Health
NIN	National Institute of Nutrition (Vietnam)
NUGAG	Nutrition Guidance Expert Advisory Group (WHO)
OGAC	Office of the U.S. Global AIDS Coordinator
OHA	USAID Office of HIV/AIDS
OICI	Opportunities Industrialization Centers International
OM	Outcome Monitoring
PECNAP	Prise en Charge Nutritionnelle Ambulatoire des PVVIH (Nutrition care and treatment for PLHIV) (Côte d'Ivoire)
PEPFAR	United States President's Emergency Plan for AIDS Relief
PHC	primary health care
PLANOCC	Food and Nutrition Security Plan for the Highlands of Guatemala (abbreviation in Spanish)
PLHIV	people living with HIV
PM2A	Preventing Malnutrition in Children under 2 Approach
PMP	Performance Management Plan
PMTCT	prevention of mother-to-child transmission of HIV
PNLT	National de Lutte contre la tuberculose (National TB Control Program) (Côte d'Ivoire)
PNN	Programme National de Nutrition (National Nutrition Program) (Côte d'Ivoire)
PRN	Programa de Reabilitacaõ (Nutrition Rehabilitation Program) (Mozambique)
PVO	private voluntary organization
QI	quality improvement
REACH	Renewed Efforts Against Child Hunger and Undernutrition
REST	Relief Society of Tigray
RF	Results Framework
RTM	Research, Training and Management (International)
RUSF	ready-to-use supplementary food
RUTF	ready-to-use therapeutic food
SAM	severe acute malnutrition
SAM SU	Severe Acute Malnutrition Support Unit (Ghana)

SAM TC	Severe Acute Malnutrition Technical Committee (Ghana)
SBCC	social and behavior change communication
SBM-R	Standards-Based Management and Recognition
SC	Save the Children
SC/FBP	Save the Children Food by Prescription Program
SLEAC	Simplified LQAS Evaluation of Access and Coverage
SQUEAC	Semi-Quantitative Evaluation of Access and Coverage
SSFP	Smiling Sun Franchise Program (Bangladesh)
SUN	Scaling Up Nutrition
TA	technical assistance
TB	tuberculosis
TFNC	Tanzania Food and Nutrition Centre
TI	trigger indicator
TOPS	Title II Technical and Operational Support program
TOR	terms of reference
TOT	training of trainers
TWG	technical working group
U.N.	United Nations
U.S.	United States
UHCA	Uganda Health Communication Alliance
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNAP	Uganda Nutrition Action Program
URC	University Research Co., LLC
USAID	United States Agency for International Development
USG	United States Government
VAAC	Vietnam Administration of HIV/AIDS Control
WFP	World Food Programme
WRA	White Ribbon Alliance (Bangladesh)
WHO	World Health Organization
≥	greater than or equal to

## **The FANTA-2 Bridge**

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The Food and Nutrition Technical Assistance II Project Bridge (FANTA-2 Bridge) continues activities previously conducted under FANTA-2. The FANTA-2 Bridge provides targeted technical assistance (TA) to key countries and advances the global evidence base, methods, and competencies for effective nutrition and food security policies, strategies, and programs.

The goal of the FANTA-2 Bridge is to provide quality TA focusing on maternal and child health and nutrition (MCHN); nutrition assessment, care, and support (NACS) in the context of HIV and other infectious diseases; food security and livelihood strengthening; and emergency, reconstruction, and stabilization (ER&S). The FANTA-2 Bridge also continues previously developed approaches to support the design and quality of field programs and build on field experience and research activities to improve and expand the evidence base, methods, and global standards for nutrition and food security programming.

The FANTA-2 Bridge implementation period was July 1, 2011, to March 31, 2012. The annexes contain tables that list all deliverables completed, trainings delivered, workshops facilitated, and presentations and posters delivered during the Bridge period.



## 1. Title II Food Security Program Assessment, Design, Implementation, Monitoring, and Evaluation

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- The FANTA-2 Bridge delivered three United States Agency for International Development (USAID) Office of Food for Peace (FFP) monitoring and evaluation (M&E) workshops to help newly awarded Title II development food aid programs in the Democratic Republic of Congo (DRC), Ethiopia, and South Sudan strengthen their M&E systems and design their baseline surveys. The workshop in the DRC also included participants from a newly awarded program in Burkina Faso. The workshops were held simultaneously in Kinshasa and Addis Ababa on September 19–23, 2011, and in Juba on October 17–21, 2011, with a total of 87 participants among them.
- To support the integration of M&E concepts, tools, and methods by Title II development food aid programs and inform headquarters staff members of FFP requirements in this regard, the FANTA-2 Bridge adapted the FFP M&E workshop adapted to headquarters staff members. The workshop was delivered in Washington, DC, on July 21–22, 2011, to 24 headquarters staff members of new Awards to help them understand the requirements and start planning their baseline surveys.
- In July and August 2011, the FANTA-2 Bridge provided significant technical review and input into the quantitative survey design for the final evaluations, carried out in August and September 2011, of the three Title II Awardees in Guatemala: Asociación Share de Guatemala, Catholic Relief Services (CRS), and Save the Children (SC).
- The FANTA-2 Bridge finished conducting Layers in Chad, Mali, and Uganda. In Chad, we completed the Layers questionnaires, enumerator training, and data collection. Results were analyzed in December 2011 with FFP Regional Staff based in Dakar, and Layers feedback letters to Awardees were written. In Mali, we analyzed the Layers data collected in June 2011 and prepared draft results tables. Final data analysis and the composition of Layers feedback letters to Awardees were completed in November 2011. In Uganda, the FANTA-2 Bridge completed the Layers process in August 2011 by analyzing Layers data, producing reports, and drafting and submitting to USAID/Uganda the Layers feedback letters to the Awardees. In addition, FANTA-2 Bridge conducted a Layers “catch up” visit to Haiti in November 2011. USAID/Haiti has been conducting Layers for a number of years, but needed an update of current Layers procedures, and was trained on Layers questionnaire development and data analysis.
- To support FFP in its M&E procedures, the FANTA-2 Bridge revised the FFP Standard Indicators that Title II Awardees are required to collect during baseline and final evaluations. The new indicators were officially released in the FFP Information Bulletin (FFPIB) 11-03 in September 2011. After we presented these indicators to Title II Awardees at the FFP M&E workshops (described in preceding paragraphs), we decided to slightly modify the indicator titles and definitions to improve clarity. In December 2011, the FANTA-2 Bridge submitted to FFP a revised version of the FFPIB 11-03 for rerelease and the accompanying *FFP Standard Indicators Handbook (Baseline-Final Indicators)*, which contains performance indicator reference sheets, questionnaires, and tabulation instructions for all of the Standard Indicators.
- The FANTA-2 Bridge, in consultation with FFP, revised the list of FFP Annual Monitoring Indicators that Title II Awardees must report on annually to align it with other United States Government (USG) initiatives and the Office of U.S. Foreign Assistance Resources (F) indicators. We submitted the revised indicators to FFP on December 21, 2011, and FFP released them to the private voluntary organization (PVO) community for public comments in January 2012.
- The FANTA-2 Bridge revised the data quality assessment (DQA) plan and accompanying checklists for FFP to conduct DQAs across all Title II programs to verify the indicator data that Title II programs report annually to FFP. In support, we provided a 2-hour training to FFP M&E technical leads on how to implement the DQA exercise on December 20, 2011.
- To support FFP country backstop officers with the monitoring of their programs and to provide advice directly to Awardees, the FANTA-2 Bridge reviewed and commented on the following documents:
  - ACDI/VOCA/Liberia’s baseline report

- Africare/Niger's final evaluation plans
  - Consortium for Food Security, Agriculture and Nutrition, AIDS, Resiliency and Markets (C-FAARM)/Zambia's final evaluation report
  - Counterpart International/Mauritania's Mauritania's Indicator Performance Tracking Table (IPTT) revisions
  - CRS/Burundi's final evaluation plan
  - CRS/Madagascar's mid-term evaluation plan
  - CRS/Malawi's mid-term evaluation and annual survey plans
  - Opportunities Industrialization Centers International (OICI)/Liberia's baseline report and revised IPTT and project management plan (PMP)
  - SHARE/Guatemala's final evaluation report
  - World Vision/Afghanistan's final evaluation plan
  - World Vision/Mozambique's final evaluation scope of work
- The FANTA-2 Bridge also reviewed the Results Frameworks (RFs), IPTTs, and baseline plans for newly awarded programs being implemented by the following organizations:
    - ACDI/VOCA/Burkina Faso
    - Adventist Development Relief Agency (ADRA)/DRC
    - CRS/Ethiopia
    - CRS/South Sudan
    - Food for the Hungry (FH)/DRC
    - FH/Ethiopia
    - Mercy Corps/DRC
    - Relief Society of Tigray (REST)/Ethiopia
    - SC/Ethiopia
- The FANTA-2 Bridge continued to provide support to FFP in the design of the next round of Title II development food aid programs. The FANTA-2 Bridge drafted Food Security Country Guidance (FSCG) documents for FFP for Afghanistan, Guatemala, and Niger. Food security background documents consisting of country-specific desk reviews assessing recent events of significance for food security, the current food security condition, and near-term forecasts of the future food security situation were also prepared for Haiti, Niger, and Uganda to inform the development of the FY 2012 Title II development FSCG documents. The three FSCG documents and the background documents for Niger and Uganda were submitted to FFP in August 2011. The background document for Haiti was submitted in December 2011.
- The FANTA-2 Bridge provided TA to FFP via two technical presentations to FFP staff. The first was on nutrition and principles of ration design, given as part of the Commodity Management workshop held August 22–24, 2011. The second, on September 13, 2011, was on the scientific basis and rationale for the Preventing Malnutrition in Children under 2 Approach (PM2A). We also provided technical review of the guidance being developed for food and nutrition programming in FY 2012 development food aid programs.
- In 1999, the Food and Nutrition Technical Assistance (FANTA) project drafted *Sampling Guide* to provide technical guidance to PVOs carrying out baseline and final evaluation surveys. The guide supported the M&E efforts of the PVOs' Title II Awards and provided instructions on basic methods for planning and executing all aspects of the surveys to help PVOs and their contractors develop appropriate sampling plans. The FANTA-2 Bridge published a short addendum to the existing *Sampling Guide* to present new guidance for translating the sample size required for collecting data on a specific target group (e.g., children under 5) into the number of households that need to be sampled.
- The FANTA-2 Bridge developed an early warning and response (EWR)-focused session on early warning trigger indicators (TIs) and emergency response thresholds in Title II development food aid programs for the Title II Technical and Operations Support (TOPS) program-hosted Food Security and Nutrition technical meetings in Maputo, Mozambique, held September 19–23, 2011. One output from this meeting was the creation of a virtual EWR working group, the members of which include Title II Awardees' field and headquarters staff, TOPS colleagues, and FANTA-2 Bridge staff. The

purpose of this virtual working group is to serve as a “central location” for technical discussions of Title II EWR within and between Awardees, the FANTA-2 Bridge, and other parties interested in Title II EWR. The virtual working group also acts as a repository for a growing library of published and grey literature on EWR.

- The FANTA-2 Bridge and TOPS began work to create a physical Title II Awardee-centered EWR Working Group, in addition to the virtual working group noted above. The FANTA-2 Bridge held an initial meeting, which included representatives from a growing number of Title II Awardees, to gauge interest in creating this working group in November 2011. Because interest was high, we began planning the new Awardee EWR Working Group and its first meeting, to be held later in FY 2012. The initial objectives of the EWR Working Group are to determine and address priority conceptual, technical, and procedural issues related to the implementation of TIs and thresholds in Title II development food aid programs.
- In the last half of the Bridge period, the FANTA-2 Bridge began collecting and documenting lessons learned and promising practices from initial work to implement the Title II EWR mechanism in Haiti, which began in October 2009. We also provided targeted TA to the Title II Awardees in Haiti, and to World Vision in particular, in their EWR activity reporting to USAID/Haiti and USAID/Washington.

## **2. Maternal and Child Nutrition Programs**

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### **2.1. Nutrition Program Design, Implementation, Monitoring, and Evaluation**

- In July 2011, in partnership with Helen Keller International (HKI)/Bangladesh, the FANTA-2 Bridge provided TA for a qualitative assessment of two USAID-funded health programs in Bangladesh, the Smiling Sun Franchise Program (SSFP) and the MaMoni Project, to understand how nutrition could be integrated into these two programs. Based on the assessment, the FANTA-2 Bridge and HKI, in consultation with key stakeholders, developed strategies to integrate nutrition into MaMoni and SSFP. The assessments and strategies were completed and submitted to USAID/Bangladesh in February 2012.
- The FANTA-2 Bridge reviewed the SSFP and MaMoni Project quality improvement (QI) tools and recommended the addition of Essential Nutrition Actions (ENA). Recommendations took into consideration Government of Bangladesh policies and standards in nutrition and the most up-to-date ENA. In response, MaMoni developed Standards-Based Management and Recognition performance improvement tools (standards). MaMoni will test and complete the standards and carry out next steps in implementing the tools.
- The FANTA-2 Bridge provided feedback to the Ghana Health Service (GHS) on a national nutrition policy.
- In Uganda, the FANTA-2 Bridge facilitated a number of technical meetings with various ministries (e.g., Health, Agriculture, Finance, Gender), local government offices, civil society organizations (CSOs), the private sector, and academia to review the Uganda Nutrition Action Plan (UNAP) and garner government support and endorsement. The FANTA-2 Bridge also completed the development of the UNAP document, *Uganda Nutrition Action Plan 2011–2016: Scaling Up Multi-Sectoral Efforts to Establish a Strong Nutrition Foundation for Uganda’s Development*. The plan was adopted by the cabinet on September 28, 2011, and launched by the President of the Republic of Uganda on October 4, 2011. The plan will guide the Ugandan government, development partners, CSOs, and other sectors in scaling up multisectoral efforts to establish a strong nutrition foundation for the country’s development in the years 2011–2016.
- Working with regional and district nutritionists, the National Planning Authority, and the Ministries of Health and Agriculture, the FANTA-2 Bridge held a dialogue in December 2011 to plan for the implementation of UNAP in south-western Uganda. The dialogue was attended by district chief administrative officers, planners, production officers, nutritionists, and CSO representatives. Outcomes of the dialogue will be used to plan for UNAP roll-out.
- The FANTA-2 Bridge supported the Uganda Scouts Association and Uganda Girl Guides Association through the departments of health and education in Kitgum district, Northern Uganda, to implement and monitor the Community Nutrition Star pilot program by developing a training for leaders, guides, and scouts and monitoring documents and by providing training to leaders and supportive supervision of the activity. By November 2011, 5,219 children under 3 years of age were enrolled in the pilot and over 480 nutrition stars (pupils in primary 5–6 registered in the pilot) were actively engaged in screening, referral, and provision of key nutrition messages to different households surrounding 18 primary schools in Kitgum district.
- The FANTA-2 Bridge continued its consultations with USAID/Madagascar regarding the redesign of its annual Outcome Monitoring (OM) Survey. As an initial step, the FANTA-2 Bridge helped the Mission identify different sampling options for carrying out OM in 2012. However, due to a lack of funding, further support to this activity was cancelled.

### **2.2. Community-Based Management of Acute Malnutrition**

- As part of the broader national nutrition approach to support the Scaling-Up Nutrition (SUN) movement in Ghana, the FANTA-2 Bridge developed a 5-year national Community-Based

Management of Acute Malnutrition (CMAM) scale-up strategy in partnership with the Ghana Health Service (GHS) and the Severe Acute Malnutrition Technical Committee (SAM TC). As first steps, a situation analysis was carried out and a framework detailing objectives, indicators, targets, and activities for scaling up CMAM in the next 5 years were developed.

- In October 2011, the FANTA-2 Bridge completed a report on a review of the integration of CMAM into the Ghanaian health system we conducted in August and September 2010. Recommendations from the review were then translated into activities that were integrated into the current annual workplan. Recommendations were also currently being used to inform the national CMAM scale-up strategy and plan 2012 to 2016.
- The FANTA-2 Bridge supported the GHS to scale up CMAM to six additional districts in Group One scale-up regions (Central, Greater Accra, Northern, Upper East, and Upper West). This brings total number of districts having integrated CMAM to 33. We also prepared the Group Two regions (Ashanti, Brong Ahafo, Eastern, Volta, and Western) to initiate CMAM and trained 31 health care providers from Konfo Anokye Teaching Hospital and Kumasi Maternal and Child Health Hospital on CMAM inpatient care. The hospitals are expected to set up initial learning sites for the Group Two regions.
- The FANTA-2 Bridge completed training materials and job aids for CMAM inpatient care in Ghana. We started preparing for a CMAM coverage investigation to be integrated as a continuous monitoring method for assessing coverage and barriers to access of CMAM. And, we initiated the development of a national CMAM documentation and information system for Ghana.
- The FANTA-2 Bridge facilitated a series of in-service trainings to health workers in Ghana. For CMAM inpatient care, we trained 161 health care providers in Central, Greater Accra, Northern, Upper East, Upper West regions and Konfo Anokye Teaching Hospital during seven sessions held between July 1 and December 17, 2011. For CMAM outpatient care, we trained 259 health care providers in Greater Accra, Northern, Upper East, and Upper West Regions during seven sessions held between July 1 and November 20, 2011. And, in community outreach for CMAM we trained 109 community outreach workers in Greater Accra Region during two sessions held in August 2011. We also oriented 73 health care providers on CMAM data management in Upper East Region in September 2011.
- The FANTA-2 Bridge provided TA to GHS/Nutrition to prepare and present on November 14, 2011, a case study on the “Effectiveness of Public Health Systems to Support National Roll out Strategies” at the Regional Conference on CMAM scale-up in Addis Ababa, Ethiopia.
- In South Sudan, the FANTA-2 Bridge supported the training of 81 health care providers (medical assistants, clinical officers, nurses, and nutrition assistants) in Integrated Management of Severe Acute Malnutrition (IM-SAM) (CMAM in South Sudan) outpatient care in Unity, Western Bahr El Ghazal, and Western Equatoria States in July, August, and September 2011. For community outreach for IM-SAM, we trained 46 community health workers in Morobo County, Central Equatoria State, in September 2011 and 50 community health workers in Kajokeji County, Central Equatoria State, in October 2011. We also provided continuous mentoring and support to the inpatient sites of the three learning sites’ (Juba, Malakal, and Wau) teaching hospitals until mid-October 2011.
- The FANTA-2 Bridge supported a learning visit to Malawi for four nutritionists and one pediatrician from South Sudan on October 1–8, 2011. The health staff observed IM-SAM program implementation, including its integration into the national health system in Malawi, highlighting the challenges in scale-up, lessons learned, and promising practices to inform IM-SAM implementation and scale-up in South Sudan. The team met with policy-makers, senior managers of national governments and health district management teams, and representatives from United Nations (U.N.) agencies and nongovernmental organizations (NGOs) and conducted field visits. The learning visit highlighted issues of institutionalization, collaboration with partners, capacity strengthening, supervision, monitoring and reporting, QI, and evaluation.
- The FANTA-2 Bridge initiated the development of a national IM-SAM documentation and information system for South Sudan. We also supported the Ministry of Health (MOH) and state nutrition focal points in South Sudan to review and strengthen the supply management system for the distribution of

CMAM equipment and supplies for the learning sites. The reporting format was updated and adopted by the Reporting Technical Working Group (TWG) and disseminated for use.

- FANTA-2 initiated the review of training materials and job aids for CMAM inpatient care in South Sudan. As a result of the review, the draft training materials and job aids were updated and made ready for a final review and field testing and shared with the MOH.
- In South Sudan, the FANTA-2 Bridge worked with the World Food Programme (WFP) to support the development of national guidelines for the management of moderate acute malnutrition (MAM) in emergencies.
- Until mid-October 2011, the FANTA-2 Bridge provided continuous support for the integration of CMAM into the Sudan health system and scale-up in the nine Group One scale-up states of Blue Nile, Gedaref, Kassala, North Darfur, North Kordofan, Red Sea, South Darfur, South Kordofan, and West Darfur. Support included initiating the development of a national CMAM documentation and information system. The FANTA-2 Bridge also supported Greater Darfur State in adhering to the CMAM national guidelines and the use of standardized job aids and tools.
- With support from UNICEF, the FANTA-2 Bridge and the Sudan CMAM Support Team (ST), which aims to support the Federal Ministry of Health (FMOH) and implementing partners (IPs) in strengthening the national capacity for CMAM, strengthening the technical leadership role of the FMOH, and promoting a phased integration and scale-up of CMAM at the state level, trained 25 health and nutrition staff in North Kordofan State on CMAM community outreach and outpatient care. The training, held on July 23–27, 2011, was the first on CMAM in the state and will be followed by the establishment of CMAM outpatient care sites in three localities.
- The FANTA-2 Bridge, in collaboration with the CMAM ST and WFP/Sudan, facilitated a 3-day TOT in October 2011 on the management of MAM using the revised Sudan MAM guidelines. Twenty participants from Blue Nile, Kassala, North Darfur, Red Sea, South Darfur, South Kordofan, and West Darfur States attended the training.
- The FANTA-2 Bridge supported Ahfad University for Women (AUW) in establishing a CMAM TWG to coordinate the development and incorporation of CMAM curricula into AUW's school departments and pre-service training. The TWG divided itself into three smaller working groups focused on CMAM training, research, and curriculum development. Since the TWG's establishment, TWG members provided orientations to approximately 160 AUW staff and students.
- The FANTA-2 Bridge supported the development of the Sudan CMAM ST quarterly newsletter, which provides progress updates and general information on CMAM management and implementation support in Sudan. We drafted a flyer describing CMAM in Sudan that, when completed, will be used as a CMAM communications and advocacy tool.
- The FANTA-2 Bridge supported national production of ready-to-use therapeutic food (RUTF) in Sudan through the Technical Committee for Therapeutic Food. We linked SAMIL Industrials (a Nutriset franchise of the Yagoub Group) with IPs in Sudan and facilitated the training of key SAMIL Industries staff by Nutriset in September 2011. The national RUTF product was registered and production commenced in February 2012.
- The FANTA-2 Bridge completed the review of and disseminated training materials and job aids for CMAM inpatient care in Sudan. We also participated in a CMAM coverage investigation and nutrition causal analysis training in Kassala State accompanied by a CMAM coverage survey for Kassala locality. The training targeted the CMAM ST and MOH and NGO nutrition experts to enable them to integrate coverage monitoring as a routine M&E activity of CMAM using Semi Quantitative Evaluation of Access and Coverage (SQUEAC) and Simplified LQAS Evaluation of Access and Coverage (SLEAC) methodologies.
- The FANTA-2 Bridge completed training materials and job aids for CMAM inpatient care in Ghana, South Sudan, and Sudan, along with a generic version based on the World Health Organization (WHO) 2002 *Training course on the inpatient management of severe malnutrition*. We also revised

the English version of the generic CMAM guidelines and job aids developed under FANTA-2, translated it into French, and began translating the materials into Arabic.

- FANTA-2 reviewed the integration of CMAM in Burkina-Faso, Mali, Mauritania, and Niger to provide ministries of health, IPs, and donors with lessons learned and recommendations for improving the quality of CMAM. The FANTA-2 Bridge completed a summary report on CMAM integration in the four West African countries, translated the report into French to reach a wider audience in West Africa, and disseminated both versions.
- The FANTA-2 Bridge participated in the regional CMAM scale-up conference in Addis Ababa, Ethiopia, on November 14–17, 2011, by supporting presentations and discussions made by the Ghana, South Sudan, and Sudan delegations. We also presented a poster on the summary report of the review of CMAM integration in four West African countries and held discussions on the integration of CMAM in Niger with that country's delegation.
- The FANTA-2 Bridge strengthened the capacities of ministries of health and IPs to use the CMAM Costing Tool through country-based mentoring and remote support. The tool consists of a Microsoft Excel workbook and user's guide (including a case study and exercise) and guides health managers to plan and cost CMAM activities. We translated the tool into French so it could reach a wider audience.
- The FANTA-2 Bridge supported the development of a technical document on CMAM coverage investigation methods with partner Valid International. The document will be completed later in FY 2012.
- The FANTA-2 Bridge completed the CMAM capacity assessment, planning, and supervision tools. As a first step, country-specific versions of tools were developed, field-tested in Ghana and Sudan and implemented. The CMAM capacity assessment tool is a set of matrices that determine the capacity of national health systems to carry out CMAM services/programs at different levels, a crucial initial and ongoing step to determine CMAM needs and areas that require strengthening. This tool will be used to support CMAM activities in a number of ways, including designing strategies for support, tailoring training based on identified needs, and strengthening access to supplies. The CMAM planning tool consists of a generic matrix based on the CMAM Framework that can be used as a basis for the development of a detailed timeline. The FANTA-2 Bridge used the draft planning tool to develop country-specific CMAM strategies and workplans. The CMAM supervisory tool is a set of checklists used for supportive supervision for community outreach, outpatient care, and inpatient care and for self-monitoring of QI in inpatient care.
- The FANTA-2 Bridge, with Valid International, completed the CMAM Coverage Tool, which describes the SQUEAC methodology and facilitates its implementation. SQUEAC is a simple approach for facilitating the frequent and ongoing evaluation of program coverage and barriers to access through routine CMAM program planning and evaluation data collection, analysis, and use.

### **2.3. Policy and Advocacy**

- In Bangladesh, the FANTA-2 Bridge completed a brief presenting PROFILES and costing study results and, in collaboration with Research, Training and Management (RTM) International, began drafting a final report on the results. We also worked with RTM International to develop a social and behavior change communication (SBCC) strategy for advocacy based on the PROFILES results. This strategy includes an implementation plan and identifies key audiences that need to be reached through planned advocacy efforts in Bangladesh. Additional advocacy materials were drafted targeting the media; policy makers; politicians; officials at the national, regional, and district levels; and civil society.
- In Bangladesh, the FANTA-2 Bridge participated in a number of taskforces and organizations that support scaling up nutrition and promoting promising practices.

- We participated in the RENEW Multimedia Presentation Task Force to develop a multimedia presentation for program planners and policy makers on the importance of investing in nutrition during the first 1,000 days of life.
- We participated in the Renewed Efforts Against Child Hunger and Undernutrition (REACH) working group, which facilitates collaboration between UNICEF/Bangladesh, WHO/Bangladesh, WFP/Bangladesh, the Food and Agriculture Organization of the United Nations (FAO)/Bangladesh, and all other NGOs to implement 18 nutrition interventions targeting mothers and children under 5 in one district of Bangladesh.
- We supported the national White Ribbon Alliance (WRA) to strengthen the contributions of the women and communities that are most impacted by maternal and newborn mortality and morbidity.
- The FANTA-2 Bridge, in collaboration with the GHS, developed a PROFILES presentation and script based on the Ghana PROFILES 2011 workshop held in May and June 2011 under FANTA-2. We completed the Ghana PROFILES 2011 workshop report, including documentation of assumptions and considerations related to the spreadsheet model. We also supported the development of an SBCC and national nutrition advocacy strategy for Ghana and worked with stakeholders to develop drafts of nutrition advocacy materials, including fact sheets, a nutrition FAQ, and a summary of the PROFILES results.
- The FANTA-2 Bridge continued to support ongoing nutrition advocacy efforts for the integration and scale-up of CMAM in Ghana. As a member of the Severe Acute Malnutrition Support Unit (SAM SU), we developed a paper describing the management of severe acute malnutrition (SAM) and its importance, as well as therapeutic supplies required to manage SAM countrywide. The document was used to advocate for the inclusion of CMAM supplies into the essential medicines and supplies list. Advocacy for the treatment of SAM using special foods, such as RUTF, one of the proven effective nutrition interventions, is also part of nutrition advocacy efforts based on PROFILES, for which the FANTA-2 Bridge provided TA to the GHS.
- The FANTA-2 Bridge held a district-level advocacy and rollout workshop for the Uganda Nutrition Action Plan on December 5–6, 2011, in Mbarara, Uganda. This workshop informed district-level budgeting and planning. We also continued to conduct national advocacy meetings with various key audiences, including parliamentarians, CSOs, and government ministries.
- The FANTA-2 Bridge developed *Nutrition Advocacy Training Guide and Participants Handbook: Strengthening Advocacy Capacity to Scale-up Nutrition Investments and Outcomes in Uganda* and held an advocacy training to pretest it in Jinja, Uganda, on July 25–29, 2011. The training materials were completed in March 2012.
- The FANTA-2 Bridge strengthened the capacity of the Ugandan media to report on nutrition. We supported journalists to continue conducting regional community and facility visits to identify and report nutrition situations as a means of creating awareness for the need to intensify nutrition interventions in the country. This has resulted in increased interest in nutrition by the media, and more articles, news, and features on nutrition have been published for public nutrition education.
- Through our partner the Uganda Health Communication Alliance (UHCA), the FANTA-2 Bridge engaged nutrition experts to dialogue with journalists during the 2011 World Breastfeeding Week. Intensive public awareness on breastfeeding was created by eight articles in three newspapers, one radio talk show, and one television talk show throughout August 2011.
- The FANTA-2 Bridge provided TA to the Uganda MOH and the Ministry of Agriculture, Animal Industries, and Fisheries (MAAIF) nutrition sections to organize national nutrition stakeholders meetings, where issues of strengthening strategies for improving nutrition outcomes in the country were discussed. We also supported the MAAIF in designing terms of reference (TOR) for Agriculture Nutrition TWGs, one of the strategies for scaling interventions outlined in the national nutrition action plan.



### 3. HIV and Nutrition

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#### 3.1. National Nutrition and HIV Policies and Strategies

- At the request of USAID/DRC, in July 2011, the FANTA-2 Bridge and FHI 360 Livelihoods and Food Security Technical Assistance Project (LIFT) Project conducted a joint assessment of gaps and opportunities for nutrition, food security, and economic strengthening support targeting HIV-affected populations in DRC. The team submitted recommendations for strengthening nutrition, food security, and economic strengthening programming using resources from the United States President's Emergency Plan for AIDS Relief (PEPFAR)/DRC. Based on the report, USAID/DRC asked the FANTA-2 Bridge to conduct a follow-up visit to work with government and PEPFAR/DRC Partners to develop a workplan for 2012.
- In July 2011, the FANTA-2 Bridge conducted an analysis in Côte d'Ivoire to reassess contextual factors that could affect the policy and programmatic environment and discussed with key partners how we could more closely collaborate with them in light of the post-crisis reality. As a result, a list of recommendations was created for stakeholders and the FANTA-2 Bridge to adjust activities planned for Phase 1 of NACS implementation to better address the post-crisis situation. This list was vetted and approved by PEPFAR/Côte d'Ivoire, Programme National de Nutrition (PNN) (National Nutrition Program), and other stakeholders.
- The FANTA-2 Bridge assessed food support provided by the Government of Vietnam and PEPFAR/Vietnam Partners to people living with HIV (PLHIV) in Vietnam, including recommendations for future programming. We also supported a stakeholder meeting to discuss the phase-out of PEPFAR/Vietnam funding for food support for PLHIV.
- In July and October 2011, the FANTA-2 Bridge supported and participated in two workshops of National Institute of Nutrition (NIN) nutritionists and Vietnam Administration of HIV/AIDS Control (VAAC) officials to review revised draft national nutrition and HIV guidelines. Participants included 51 national and provincial MOH officials, UNICEF/Vietnam, managers of HIV care and treatment clinics, and PEPFAR/Vietnam Partners. The Nutrition and HIV Technical Writing Committee completed the draft for review by WHO/Vietnam, and NIN submitted them to the MOH for approval.

#### 3.2. Nutrition and HIV Capacity

- The FANTA-2 Bridge completed nutrition counseling materials for PLHIV in Côte d'Ivoire and a user's guide in partnership with PEPFAR/Côte d'Ivoire and the Ministry of Public Health.
- The FANTA-2 Bridge supported PNN in Côte d'Ivoire in organizing a national TOT on *Prise en Charge Nutritionnelle Ambulatoire des PVVIH* (PECNAP) (Nutrition care and treatment for PLHIV) on October 12–16, 2011. Twenty three participants for Ministry of Public Health and 11 participants from PEPFAR/Côte d'Ivoire Partners were trained using an innovative facilitation approach that allowed the PNN team to play a technical leadership role in the TOT through FANTA-2 Bridge coaching. The innovative approach also allowed for the facilitation guide to be further developed and tested during the training.
- At the request of the Ethiopia FMOH, the Nutrition and HIV Sub-Committee, and PEPFAR/Ethiopia Partners, the FANTA-2 Bridge coordinated a validation workshop, held July 13–15, 2011, in Adama, Ethiopia, titled "National Nutrition and HIV/AIDS Guidelines and Training Manuals." Based on the workshop and discussions with PEPFAR/Ethiopia Partners, UNICEF, WFP, and WHO, we drafted the national guidelines and consolidated feedback on them from partners. The materials will be disseminated once they are completed and then used for trainings.
- The FANTA-2 Bridge continued adapting the FANTA training manual *Nutrition and HIV/AIDS: A Training Manual for Nurses and Midwives* to the Ethiopian context and used the draft manual in a pre-service training at Jimma University on July 25–29, 2011. We also planned for similar pre-service

trainings in other universities in the north and northwest of Ethiopia, however this activity was put on hold due to time constraints.

- In Haiti, the FANTA-2 Bridge began implementing a plan developed under FANTA-2 to disseminate nutrition counseling materials for PLHIV that FANTA-2 developed. We also began a series of planning visits to MOH departmental offices to plan out departmental training on the use of the *National Guidelines for Nutrition Care of PLHIV*, also developed under FANTA-2.
- In November and December of 2011, FANTA-2 Bridge worked with the Haiti Ministère de la Santé Publique et de la Population (MSPP) (Ministry of Public Health and Population) at the departmental level to conduct six trainings on nutrition care and counseling of PLHIV. These trainings targeted MSPP and NGO health care providers working in care and treatment of PLHIV as well as counselors from PLHIV associations and workers who supervise community-level education and nutrition counseling of PLHIV. The trainings focused on the link between HIV and nutrition; personal, environmental, and food hygiene; nutrition assessment and counseling; and the use of the nutrition counseling materials *Bonjan abitiid nan manje ak liyè* (*Excellent food and hygiene habits*).
- In collaboration with Quisqueya University in Port-au-Prince, Haiti, the FANTA-2 Bridge developed two draft pre-service training modules, one on nutrition and HIV for medical students and the other on nutrition counseling for PLHIV for nurses and social workers.
- Because the nutrition counseling materials for PLHIV developed by FANTA-2 were so well received by the MSPP and PEPFAR/Haiti Partners, additional copies were needed to meet demand, and USAID/Haiti requested that the FANTA-2 Bridge print 700 copies. As a result of this printing and dissemination of the additional copies to MSPP and PEPFAR/Haiti Partner service providers, the number of service providers equipped to offer nutrition counseling to PLHIV increased from about 1,400 to about 2,100.
- The FANTA-2 Bridge continued working to strengthen the capacity of the Ministério da Saúde (MISAU) (Ministry of Health) and provincial health systems in Mozambique to implement the Programa de Reabilitação Nutricional (PRN) (Nutrition Rehabilitation Program) through TA provided directly to MISAU, Direcções Provinciais de Saúde (DPS) (Provincial Health Directorates), and PEPFAR/Mozambique Partners. To do this, we facilitated trainings in Cabo Delgado, Maputo, and Niassa Provinces and revised the PRN manual, training materials, job aids, and M&E instruments based on feedback from MISAU, DPS, and PEPFAR/Mozambique Partners. As a result, partners will be able to replicate the PRN trainings for health staff in the districts, and health staff will be able to improve the treatment of malnourished infants, children, and adolescents with and without HIV.
- Also in Mozambique, the FANTA-2 Bridge assisted the MISAU Department of Nutrition and partners to complete Volume 2 of the *Manual for the Treatment and Rehabilitation of Malnutrition*, which provides detailed protocols for treating malnutrition in adults over 15 years and for nutrition care of adults over 15 years living with HIV and tuberculosis (TB), including pregnant and lactating women.
- In Vietnam, the FANTA-2 Bridge continued work on the draft training manual *Nutrition Care for People Living with HIV: Facilitator Manual for Health Care Providers*. The facilitator manual will be accompanied by participant handouts and a reference toolkit once completed.
- The FANTA-2 Bridge worked with NIN to train data collectors to carry out a survey of the prevalence of severe and moderate malnutrition among adults in 30 randomly selected outpatient clinics for HIV treatment. The results will be used to inform NACS programming and PEPFAR/Vietnam procurement of RUTF. Data collection commenced in November and December 2011 and included assessment of diet quality and anthropometrics. The final report is expected later in 2012.
- In Vietnam, we also supported data collection for an RUTF acceptability study among HIV-positive adults and children at the National Pediatrics Hospital in Hanoi and the Tropical Disease Hospital in Ho Chi Minh City. The results will inform PEPFAR and MOH programming for the treatment of acute malnutrition in adults and children with HIV.
- In Zambia, the FANTA-2 Bridge revised the draft training manual *Community Nutrition Care for People Living with HIV* and worked with the National Food and Nutrition Commission (NFNC) to

assess the readiness of all HIV service facilities with health care providers trained in nutrition and HIV to implement nutrition assessment, counseling, and support (NACS) under a proposed bilateral Zambia Nutrition Assessment, Counseling and Support Project.

### 3.3. Nutrition Assessment, Counseling, and Support

- The FANTA-2 Bridge strengthened the introduction of NACS into key Phase One sites in Côte d'Ivoire by working with PNN to implement a planning workshop for service providers at NACS sites and their corresponding health officers at the district and regional levels. The planning workshop was held in Yamoussoukro on October 6–7, 2011, for 50 participants from Fromager, Lagunes1, Lagunes 2, Marahoue, Moyen Comoe, and Vallee De Bandama, regions, specifically Abengourou, Bouafle, Bouake Ouest, Bouake Sud, Dabou, Fromager, Koumassi, Oume, Treichville, Yopougon Est, and Yopougon Ouest districts. Participants comprised staff from PEPFAR/Côte d'Ivoire Partners, the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), Alliance Nationale Contre le SIDA (ACONDA-VS) (*National Alliance against AIDS*), International Center for AIDS Care and Treatment Programs (ICAP), and Health Alliance International (HAI). As a result, 10 districts have incorporated NACS activities into their regular support and supervision plans.
- The FANTA-2 Bridge assisted PNN in establishing a database to track all relevant NACS indicators from the Phase 1 NACS sites in Côte d'Ivoire by supporting the PNN to develop the indicators and purchase equipment to maintain the database. Data from this database will enable PNN and partners to analyze monitoring data from the Phase 1 sites on a regular basis. Results of these ongoing analyses will provide inputs into the impact evaluation of PECNAP to be conducted later in FY 2012.
- The FANTA-2 Bridge completed draft protocols for the mid-term and final evaluations of NACS Phase 1 in Côte d'Ivoire and for the evaluation of a modified NACS project conducted in 2009 and 2010 by the PNN and the National de Lutte contre la tuberculose (PNLT) (National TB Control Program) with funding from the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) targeting malnourished clients co-infected with TB and HIV. Both evaluations are scheduled to take place 2012 and will provide lessons learned to support scale-up of NACS Phase 1.
- The FANTA-2 Bridge facilitated a meeting between Supply Chain Management Systems (SCMS), the Save the Children Food by Prescription Program (SC/FBP), and the Ethiopian Health and Nutrition Research Institute (EHNRI) to discuss the content specification of a fortified-blended food (FBF) that could be locally produced and to identify potential local producers. Of the seven local factories that applied, three met the standard quality assurance approval set by USAID. Until FBF could be produced in-country, the FANTA-2 Bridge recommended that MAM be treated with ready-to-use supplementary food (RUSF), in-line with national guidelines for the nutrition care of PLHIV, and instead of the RUTF that was being used, which is designed for management of SAM. Because of this recommendation, the FMOH requested TA from SCMS to procure RUSF.
- The FANTA-2 Bridge led rapid reviews of the NACS services offered in Ghana and Malawi and provided recommendations on future program design and implementation, M&E, QI, and integration and scale-up plans.
- The FANTA-2 Bridge supported the launch of the national NACS program in Namibia. As part of this effort, we supported the launch of the NACS Operational Guidelines and on-site mentoring of health care providers in NACS sites in six districts.
- We supported a series of NACS training courses in Namibia in partnership with the Ministry of Health and Social Services (MOHSS) and the International Training and Education Center on HIV/AIDS (I-TECH)/Namibia. The trainings included sensitization of 21 antiretroviral therapy (ART) clinic in-charges in the importance of NACS, training of 55 facility-based health care providers, on-site refresher training for 78 facility-based health care providers, refresher training for 58 community-based health care providers, and infant and young child feeding (IYCF)/prevention of mother-to-child transmission of HIV (PMTCT) training for 22 facility-based health care providers. We also supported training of 30 community counselors in NACS and IYCF and 26 nurses on NACS in the context of the national guidelines for ART.

- In Tanzania, the FANTA-2 Bridge completed the development of a NACS clinical package in partnership with the Tanzania Food and Nutrition Centre (TFNC). The includes a training manual with facilitator's guide and participant workbook), PowerPoint presentations, protocols for the treatment of acute malnutrition, reference materials, M&E forms, and wall charts and job aids for individual and group nutrition counseling. The NACS clinical package fills a large gap in nutrition services in Tanzania by making available in one place a comprehensive set of nutrition materials.
- Also in Tanzania, FANTA-2 Bridge partner Counseling on Nutrition and Health Care (COUNSENUH) drafted NACS community materials for use by home-based care (HBC) and most vulnerable children (MVC) service providers. The materials include nutrition and food security assessment tools, nutrition information sheets, and guidance on referrals between health facilities and community services that provide support to improve food security.
- In Zambia, the FANTA-2 Bridge trained 24 health care providers as NACS trainers and 13 facility-based health care providers in NACS. We also mapped all health care staff trained in NACS.

### **3.4. Ensure the Quality of Nutrition Care Services**

- The FANTA-2 Bridge collaborated with the University Research Co., LLC (URC) Health Care Improvement Project (HCI) on a series of activities to promote quality adoption and expansion of NACS in HIV care and treatment services. At the request of USAID/Malawi, the FANTA-2 Bridge and HCI collaborated on a rapid review of nutrition and HIV services in Malawi, including QI, and provided recommendations on applying QI approaches to integrate NACS into HIV care and support and to improve the quality of NACS implementation in Malawi. And in Tanzania, we held discussions with URC to explore ways to collaborate on QI of NACS. As part of this, we drafted a preliminary mapping of sites where URC's Partnership for Quality Improvement program is actively supporting QI of PMTCT and ART services and the sites where health facility staff are trained in NACS.
- To improve the quality of NACS services, the FANTA-2 Bridge worked closely with the PNN to conduct coaching visits to four NACS sites in Côte d'Ivoire: one in Wassakara, one in Yopougon, and two in Abengourou.
- Based on the preliminary results of a situation assessment on QI in nutrition and HIV services carried out by FANTA-2 and URC and repeated discussions at the Nutrition and HIV Sub-Committee, the FANTA-2 Bridge advocated for small-scale implementation of nutrition-related QI activities at SC/FBP sites in Ethiopia. As a result, six SC/FBP sites in Addis Ababa, Amhara, and Oromia received targeted training for individual service-led QI teams from respected health facilities. Trainings were held in Bishoftu on October 12–14, 2011, in Bahardar on October 20–22, 2011, and in Addis Ababa on October 26–28, 2011. In addition, SC/FBP capacity building officers received ongoing mentoring and QI coaching. Initial QI activities culminated in a shared learning event on December 9, 2011, attended by representatives from the FMOH, PEPFAR/Ethiopia, USAID/Ethiopia, and the QI teams to disseminate lessons learned through the initial implementation.
- In Mozambique, the FANTA-2 Bridge continued to assist the MISAU Department of Nutrition to develop draft supervision checklists for inclusion in the *Manual for Supervising and Improving the Implementation of Nutrition Activities in Health Centers*. The checklists will assist provincial and district health directorates to assess the inputs necessary to implement nutrition activities, including infrastructure, equipment, supplies, and human resources, and to assess if nutrition activities are being implemented according to national protocols.

### **3.5. Harmonize and Coordinate CMAM and HIV Programs**

- The FANTA-2 Bridge carried out a contextual analysis of opportunities for harmonizing CMAM and HIV programs in Cote d'Ivoire in October 2011. Because of this activity, the MOH became supportive of plans to harmonize the national protocols of both programs as soon as possible and progressively harmonize training materials and referral systems.

## 4. Nutrition in Emergencies

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- To support disaster risk reduction, the FANTA-2 Bridge strengthened the capacities of MOH emergency nutrition focal points to address the crisis in South Kordofan State in Sudan and consolidated related training materials. We also supported the MOH and the National Nutrition Cluster in strengthening the capacities of IPs in emergency nutrition and surveillance to address the nutritional needs of returnees and refugees in South Sudan who are severely malnourished, as many of them coming from food-insecure areas.
- The FANTA-2 Bridge supported the establishment of a global CMAM Forum, for which we developed a workplan for phase one in coordination with Action contre la Faim (ACF) and UNICEF. We also participated in drafting the design of a web-based information/documentation sharing system for this Forum and assisted in the facilitation of phase one.
- The FANTA-2 Bridge continued to support the strengthening of global capacities in emergency nutrition by participating in the Inter-Agency Standing Committee Global Nutrition Cluster (IASC GNC) bi-yearly meetings, TWGs, and discussions. Important issues discussed included the IASC GNC annual workplan, the IASC GNC handbook, scaling up SQUEAC methods for CMAM coverage investigations, minimum reporting for emergency supplementary feeding programs, and the management of MAM in emergencies.

## 5. Global Technical Leadership and Partnership

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- With WHO and the London School of Hygiene and Tropical Medicine (LSHTM), the FANTA-2 Bridge co-facilitated an Optifood User Acceptance Testing Workshop in Geneva, Switzerland, on August 29–31, 2011. The overall objective of the workshop was to test the Optifood software program with a group of nutrition professionals with field data and obtain feedback from participants on ease of use and recommendations for improvement. Twelve participants from eight countries participated. A final evaluation of the workshop showed that the vast majority of participants were very satisfied, found the methods of facilitation highly interactive and responsive to participant needs, and appreciated learning to use the new software. The first version of the Optifood software package and user manual were completed during the FANTA-2 Bridge based on workshop feedback and further testing by the Optifood team.
- Upon request from USAID, the FANTA-2 Bridge developed the first USAID Bureau for Global Health (GH) e-learning course on nutrition, titled “Nutrition: An Introduction.” The e-learning course was released in October 2011 and is available at [www.globalhealthlearning.org](http://www.globalhealthlearning.org).
- The FANTA-2 Bridge worked with WFP to draft a report on integrating gender indicators into FFP-funded emergency programming. A key focus of this report is to develop a set of harmonized indicators on gender in the emergency context that can be used by WFP to report to USAID and other donors on their progress in integrating gender into their emergency operations. As of the end of the FANTA-2 Bridge period, the report was being reviewed by USAID.
- The FANTA-2 Bridge carried out a food hygiene literature review to identify priority problem areas and critical points of action in food hygiene at the household and community levels in developing countries and successful household- and community-level interventions to improve food hygiene and decrease the vulnerability of community members to food-borne illnesses. The literature review will be completed later in FY 2012.
- The FANTA-2 Bridge coordinated a meeting to reach consensus on the scope of a new research initiative to build the evidence base for the use of mid-upper arm circumference (MUAC) as an indicator of moderate and severe malnutrition among adolescents and adults. The meeting was held on September 13, 2011, and included representatives from the National Institutes of Health (NIH), PEPFAR, Tufts University, and WHO.
- On September 14, 2011, the FANTA-2 Bridge supported a meeting of a sub-group of the WHO Nutrition Guidance Expert Advisory Group (NUGAG) to review draft nutrition guidelines developed by Tufts University for HIV-infected adolescents and adults, including pregnant and lactating women. The guidelines will provide simple and easy-to-use protocols based on available evidence from research and linked with other standard guidelines, including the integrated management of adolescent and adult illness. Discussion and feedback from participants, including the USAID Office of HIV/AIDS (OHA), WHO, NIH, Tufts University, Oregon State University, and the FANTA-2 Bridge, were incorporated into the draft and presented at the next NUGAG meeting, held November 29 to December 2, 2011. At this meeting, partners discussed the evidence for the guidelines, systematic reviews of the evidence and the GRADE evidence profiles for nutrition interventions were presented and discussed, and graded recommendations were drafted based on the strength of the evidence for benefits and harms, taking into account costs, values, and preferences.
- The FANTA-2 Bridge also participated in the NUGAG meeting at WHO in November 2011 to complete recommendations for nutrition care and support for patients with TB. The recommendations are expected to be disseminated in April 2012.
- On February 1–2, 2012, the FANTA-2 Bridge participated in the “Consultation for the Completion and Dissemination of Harmonized Global Indicators for Monitoring and Evaluation of Nutrition and HIV Activities” in Geneva, Switzerland. Objectives included completing detailed descriptions of the indicators, identifying gaps in the indicator set, planning next steps for field testing and learning from program use of the indicators, and developing a strategy to coordinate the dissemination and tracking of the indicators. Participants included the Centers for Disease Control and Prevention (CDC), the

George Washington University (GWU), the Office of the U.S. Global AIDS Coordinator (OGAC), the Joint United Nations Programme on HIV/AIDS (UNAIDS), UNICEF, URC, MEASURE DHS, OHA, EGPAF, WFP, and WHO.

- The FANTA-2 Bridge completed a randomized controlled effectiveness study in Malawi among children 6–59 months of age with MAM to assess the relative rate of recovery of children when provided WFP’s improved milk-fortified corn-soy blend (CSB++) and two ready-to-use supplementary foods (RUSF), a soy-peanut fortified spread and a soy-whey fortified spread (Supplementary Plumpy<sup>®</sup>), for a period of up to 12 weeks. Study results from the 12 week treatment intervention were published in the January 2012 issue of the *American Journal of Clinical Nutrition*. The findings showed that the recovery rate for CSB++ (85.9 percent) was similar to that for soy RUSF (87.7 percent) and soy/whey RUSF (87.9 percent). The 85.9 percent recovery rate observed for CSB++ in this study was higher than that for any other fortified-blended flour tested previously. Study results from the 1 year follow-up of children having received treatment for MAM showed that approximately 40 percent of children experienced a negative outcome (death, MAM relapse, or SAM). The results will be prepared for submission to a peer-reviewed journal later in FY 2012.
- The FANTA-2 Bridge completed a study in Malawi to evaluate the need for the presumptive use of antibiotics in the treatment of children with SAM without medical complications. Findings from the study show that children with SAM treated as outpatients who received 1 week presumptive treatment with amoxicillin or cefdinir had a significantly higher rate of recovery from SAM than children who received a placebo. The findings also indicate that in comparison to a 1 week course of placebo, the addition of 1 week of amoxicillin to standard RUTF therapy in the outpatient treatment of SAM reduces the mortality rate by 37 percent, while the addition of 1 week of cefdinir reduces the mortality rate by 44 percent.
- The FANTA-2 Bridge completed a randomized, single-blind, parallel group clinical trial in Malawi to compare the incidence and prevalence of very severe linear growth failure and symptoms of common childhood illnesses among infants (from 6 to 18 months) receiving dietary supplementation with milk-lipid-based nutrient supplement (LNS), soy-LNS, a corn-soy blend (CSB), or nothing. The results of the trial provide support to a hypothesis that, in rural Malawi, 12 months of complementary feeding of infants with milk-LNS, but not soy-LNS or CSB, reduces the incidence of very severe stunting between 6 and 18 months of age. The trial did not, however, provide support to a hypothesis that any of the tested supplements would reduce the longitudinal prevalence of common illness symptoms among infants 6–18 months of age.
- We completed the 12-month enrollment period of a study in Malawi to examine the safety of using mid-upper arm circumference (MUAC)  $\geq 125$  mm as a discharge criterion in the outpatient care of SAM without medical complications in children 6–59 months of age.
- The FANTA-2 Bridge also continued enrolling pregnant women into a study in Malawi examining the impact of LNS on maternal infection and pre-term birth. As of December 2011, 627 pregnant women were enrolled in the study. The total sample size for the study is 1,400.
- The FANTA-2 Bridge continued to prepare for data collection for a LNS effectiveness study in Bangladesh. Preparatory activities included hiring, training, and standardizing data collection field staff; providing refresher training to community health and development program staff responsible for the LNS delivery; rolling out supplementation in the 11 study unions in August 2011; and completing study protocols and procedures for data collection, severe adverse events reporting, and supplement distribution. We began enrolling participants and collecting data in mid-October 2011. As of December 2011, after approximately 9 weeks of recruitment, 848 pregnant women had been screened for participation, and 702 women had enrolled in the study. Enrollment of participants is anticipated to continue through September 2012.
- The FANTA-2 Bridge explored the possibility of conducting a situation analysis on nutrition and TB in Bangladesh and Ethiopia. We also explored the possibility of developing materials on nutrition and TB for use in Vietnam, where FANTA-2 Bridge partners expressed interest in collaborating in this area. A draft questionnaire to be administered online to better understand the Vietnamese target audience, their knowledge of nutrition as it relates to TB care, as well as their need for materials, guidance, or

training in this area was developed. The questionnaire, although developed for the Vietnam context, can be adapted and pre-tested in other settings as well.

- The FANTA-2 Bridge continued to carry out the FANTA-2 PM2A research studies in Guatemala and Burundi. Data collection continued in Guatemala, and as of December 2011, 1,061 women had been enrolled in the longitudinal study. We also prepared a baseline report for the Burundi study.
- Research to assess the effectiveness of exit strategies used by Title II Awardees in Bolivia, Honduras, India, and Kenya continued under the FANTA-2 Bridge. Activities included collecting, entering, and coding qualitative and/or quantitative data for the four countries and preparing a draft interim report to present the findings from the first round of qualitative data in India, collected about the time the Title II Program was closing.
- The FANTA-2 Bridge continued compiling and synthesizing findings for the Food Aid and Food Security Assessment-2 (FAFSA-2). The FAFSA-2 Conclusions and Recommendations were shared with USAID for review. FAFSA-2 will be completed later in FY 2012.
- The FANTA-2 Bridge published *Household Hunger Scale: Indicator Definition and Measurement Guide* to provide data collection and tabulation instructions for the Household Hunger Scale (HHS).
- The FANTA-2 Bridge facilitated a workshop titled “Integrating Food and Nutrition Programs into Global Fund Proposals” in Johannesburg, South Africa, August 8–10, 2011. Thirty-five participants representing more than 15 countries in Africa and Asia were invited. The objective of the workshop was to strengthen the integration of NACS as part of participants’ national HIV and TB programming through proposal applications to the Global Fund.
- The FANTA-2 Bridge completed a French translation of *Toolkit: For Countries Applying for Funding of Food and Nutrition Programs under the Global Fund to Fight AIDS, Tuberculosis and Malaria (Round 11)*, which was developed by FANTA-2 in 2011. This translation will be used primarily to provide TA to the PNN to incorporate NACS into Côte d’Ivoire’s upcoming Global Fund proposals, but will also be disseminated to a wider Francophone audience.



## 6. Field Support

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In addition to the country-level activities described in Sections 1 through 4, the FANTA-2 Bridge provided the following in-country support.

- The FANTA-2 Bridge took a leadership role in planning, coordinating, and collaborating with partners on World Breastfeeding Week in Bangladesh. This included planning and conducting a World Breastfeeding Week roundtable event with key stakeholders. We also participated in SUN meetings in Bangladesh and New York, and in government meetings for the planning and implementation of the National Nutrition Service by the Government of Bangladesh.
- The FANTA-2 Bridge participated in a working group commissioned by USAID/Guatemala to prepare a proposal for the integration of efforts by USAID health, education, and nutrition partners within the Feed the Future (FTF) and Global Health Initiative (GHI) frameworks to target activities in five departments of Guatemala.
- In Guatemala, the FANTA-2 Bridge provided technical support to the Secretariat of Food and Nutrition Security to complete the Food and Nutrition Security Plan for the Highlands of Guatemala (PLANOCC), which targets the areas of the country with the highest levels of poverty and prevalence of chronic malnutrition. PLANOCC was approved by the National Council of Food and Security and by the Vice-President of Guatemala on October 28, 2011, and will be presented to the new Government of Guatemala when it is instated.
- The FANTA-2 Bridge, at the request of USAID/Guatemala and in collaboration with Instituto de Nutrición de Centro América y Panamá (INCAP), developed an information-gathering activity around dietary practices in the Western Highlands. The goal of this activity is to develop evidence-based dietary intake recommendations for infants and young children and pregnant and lactating women in the Western Highlands of Guatemala using the Optifood tool as an input for food-based approaches to improve nutrition. Specifically, these approaches and recommendations will be developed by collecting dietary data of children 6–23 months of age and pregnant and lactating women utilizing the Optifood software to better understand consumption patterns, use of nutritious foods, nutrient gaps, and food availability and costs within markets in the prioritized municipalities from the Western Highlands.
- The FANTA-2 Bridge completed a literature review of Latin American agricultural and nutrition interventions and practices since the 1980s that influence nutrition outcomes. Additionally, interviews with key players in Guatemala were carried out to prepare a report that identifies agriculture, health, and nutrition practices in Guatemala with the potential to improve nutrition. The report included an identification of the barriers and facilitating factors that favored or hindered the adoption of these practices and provides an analysis of conditions (enabling factors) for the positioning or repositioning of the identified practices to favor linkages between agriculture, health, and nutrition.
- In Guatemala, the FANTA-2 Bridge, with the participation of two presidential candidates, collaborated with USAID's Local Governance Project to organize and finance national and departmental forums of newly elected mayors to sensitize them on issues regarding local governance and development, including food and nutrition security and reduction of chronic malnutrition. We provided support for the identification of key content and messages for mayors, which was included in a presentation given by the director of the Local Governance Project at the first workshop held October 12–13, 2011, and shared technical information and evidence. A second departmental workshop was held on December 5–6, 2011, in San Marcos with the participation of elected mayors and members of the municipal corporations from the 29 municipalities of San Marcos to sensitize the audience on local governance and key strategies/interventions to address chronic malnutrition. These events were organized by the National Association of Municipalities and the Guatemalan Association of Mayors Indigenous Leaders, with the leading support from USAID's Local Governance Project.
- At the request of USAID/Guatemala, the FANTA-2 Bridge analyzed levels of household food security in the five departments of the Western Highlands and the associations of household food security with the nutritional status of women or reproductive age and children under 5 years of age in this

region. This analysis follows on previous work performed by FANTA-2 to validate the food security module of the most recent National Maternal-Infant Health Survey performed in 2008–2009.

- USAID/Haiti requested that FANTA-2 provide TA to the TWG on food fortification, convened by the National Nutrition Unit of the MSPP. In October 2011, we completed an assessment on introducing micronutrient fortification of flour in Haiti to combat micronutrient deficiency and created a set of recommendations for the implementation of wheat flour fortification in-country.
- The FANTA-2 Bridge conducted a site visit to Zambezia Province in Mozambique to gather and document information for the development of the HIV-free survival (HIV-FS) study protocol and to identify potential challenges for the study.
- At the request of USAID/Mozambique, the FANTA-2 Bridge carried out two parallel assessments. The first identified promising practices in SBCC among USAID-funded Title II development food aid programs and recommended improvements in SBCC for future USG programs. The second was of current USG growth monitoring and promotion (GMP) activities in Mozambique, focusing on USAID/Mozambique programs, to identify specific steps to support the USG to strengthen the quality of GMP implementation. The GMP assessment recommended that MISAU implement various activities to strengthen GMP implementation at the health-center level and that USG programs support these improvements and strengthen growth promotion activities at the community level using effective SBCC methods.
- In Namibia, the FANTA-2 Bridge provided TA to the MOHSS to complete a Landscape Analysis tool for data collection on the readiness of health care facilities to integrate nutrition care services and supported the landscape analysis field-data collection. We supported the printing of 2,000 copies of the updated Child Health Passport to collect HIV-FS data on mother-infant pairs. And we provided support to complete NACS data collection forms and to print 500 NACS registers, 500 monthly report forms, and 500 monthly specialized food product consumption report forms.
- The FANTA-2 Bridge worked with the MAAIF in June 2011 to conduct formative research to inform the alignment of agriculture for improved nutrition outcomes in Northern Uganda and Southwestern Uganda. The findings of the study will be used by MAAIF and USAID/Uganda in designing, implementing, and monitoring nutrition and agriculture programs for improved nutrition outcomes among children under 2 years and women of reproductive age.
- In Vietnam, the FANTA-2 Bridge worked with the Institute for Research and Development (IRD) to carry out an acceptability study of Plumpy'nut<sup>®</sup> and a locally produced RUTF made of rice, soy, and mung bean called High-Energy Bar for Integrated Management of Acute Malnutrition (HEBI) among HIV-positive adults and children. Preliminary findings suggest that both RUTF were acceptable among adults and children. The final study report will be completed later in FY 2012.

## Annex 1. Performance Management Plan

PERFORMANCE INDICATORS BY RESULTS <i>(All indicators and targets are annual, not cumulative. LOA target will be cumulative.)</i>	DEFINITION, UNIT OF ANALYSIS	DATA COLLECTION METHOD, TYPE, AND SOURCE	BRIDGE TARGET	BRIDGE PERIOD RESULTS	
				Data	Details
<b>STRATEGIC OBJECTIVE: Nutrition and food security policies, strategies, and programming improved</b>					
<b>Indicator 1. # FANTA-2 Bridge-assisted countries that have reached phase 3 or 4, during the FY, on the Phases of Integration Continuum, for</b>	Countries are those receiving FANTA-2 Bridge integration assistance.	In a participatory process, relevant stakeholders and FANTA-2 Bridge specialists will assess the integration phase reached each year using clearly-defined milestones, as a part of annual goal setting and planning. The baseline phase of integration and targets for achieving future phases of integration will be written into the SOW for each country and into the FANTA-2 Bridge Workplan. The denominator is the number of FANTA-2 Bridge assisted countries in each respective activity.			
a) integrating CMAM into national health systems (NHSs)	The four phases for CMAM (draft): Phase 1: <4 initial milestones achieved Phase 2: at least 4 of the 9 initial milestones achieved Phase 3: all 9 initial milestones and at least 3 of the 6 advanced milestones achieved Phase 4: all 9 initial and 6 advanced milestones achieved		1	2	Ghana, Sudan
b) integrating nutrition into national HIV policies/strategies/services	There are 9 initial and 6 advanced milestones for CMAM.		1	1	Ethiopia
c) If applicable: integrating nutrition into other disease (TB, malaria, diarrhea, pneumonia) policies/strategies/services	The four phases for HIV: Phase 1: <3 initial milestones achieved Phase 2: 3 or more of the initial 8 milestones achieved and fewer than 3 of the 7 advanced milestones achieved Phase 3: 3-5 of the 7 advanced milestones achieved Phase 4: 6-7 of the 7 advanced milestones achieved		0	0	

PERFORMANCE INDICATORS BY RESULTS <i>(All indicators and targets are annual, not cumulative. LOA target will be cumulative.)</i>	DEFINITION, UNIT OF ANALYSIS	DATA COLLECTION METHOD, TYPE, AND SOURCE	BRIDGE TARGET	BRIDGE PERIOD RESULTS	
				Data	Details
<p><b>Indicator 2. # research and development (R&amp;D) activities that have advanced at least one stage on the <i>Pathway from Research to Field Implementation and Use</i>, during the FY</b></p>	<p>Pathway from Research to Field Implementation and Use is adapted from USAID/GH's Health-Related Research and Development Activities at USAID- Report to Congress. May 2006.</p> <p>FANTA-2 Bridge's adapted version of the Pathway contains six stages:                      1) Problem Identification (Strategic planning, problem identification and priority setting)                      2) Design and Development (Review of evidence and formulation of program theory; applied research and testing to create tools, approaches, and interventions)                      3) Releasing documentation (Packaging and release of written documents (policy, guidelines, tools))                      4) Implementation (Facilitation of adoption of approach, country-level program/policy rollout/diffusion into regular use, monitoring of program rollout)                      5) Assessment (Evaluate, refine program theory, revise documentation)                      6) Consensus (Agreement between researchers and practitioners that approach should be the norm)                      The R&amp;D activities are described under IR2 of the workplan. If additional R&amp;D activities are identified they can easily be added.</p>	<p>For each of the principle R&amp;D activities, FANTA-2 Bridge specialists in consultation with the agreement officer's representative (AOR) will identify at which stage on the pathway the activity is at baseline and what/how many stages FANTA-2 Bridge would like to take the topic through over the course of the FANTA-2 Bridge.</p>	3	5	<p>LNS Study: stage 1 to stage 2; CMAM antibiotic study: phase 2 to phase 3; CSB++ study: stage 2 to stage 3; LCNI-5 study: stage 2 to stage 3; Mozambique growth monitoring assessment: stage 2 to stage 3</p>

PERFORMANCE INDICATORS BY RESULTS <i>(All indicators and targets are annual, not cumulative. LOA target will be cumulative.)</i>	DEFINITION, UNIT OF ANALYSIS	DATA COLLECTION METHOD, TYPE, AND SOURCE	BRIDGE TARGET	BRIDGE PERIOD RESULTS	
				Data	Details
<b>Indicator 3. Average score on FANTA-2 Bridge customer satisfaction survey, for the FY.</b>	A customer satisfaction survey for all FANTA-2 Bridge TA activities. FANTA-2 Bridge clients (i.e., recipients of significant technical assistance) will be asked to fill out an online survey to assess their level of satisfaction regarding FANTA-2 Bridge technical materials, FANTA-2 Bridge in-person training, FANTA-2 Bridge staff's capabilities, impact of FANTA-2 Bridge services on client work, and overall satisfaction with FANTA-2 Bridge technical services. Quality criteria includes FANTA-2 Bridge technical services being technically accurate, useful and practical, effective at transferring information/skills, timely, culturally sensitivity, among other criteria. Survey average score to be reported will come from the last question in the survey, which is a 4-point scale measuring overall satisfaction and ranges from very satisfied to very unsatisfied. Average score will be weighed as follows: Very Satisfied = 4 Somewhat Satisfied = 3 Somewhat Unsatisfied = 2 Very Unsatisfied = 1 Not Applicable = not included in average. Data will be crosstabulated based on client type (U.S. government, Host Governments, and PVO/NGOs).	An online survey will be used to collect responses from clients that received significant technical assistance from FANTA-2 Bridge in FY10. Note: Significant technical assistance is defined as FANTA-2 Bridge staff having provided enough technical support to a particular person/organization during the fiscal year for the contact person to remember the technical assistance received from FANTA-2 and to have an informed opinion about the quality of the assistance received. Examples of significant technical assistance include: - training (e.g. M&E workshops, Nutr/HIV training, CMAM training, etc.) - review and write-up of technical materials - technical guidance and strategic thinking on program development, implementation and M&E			Customer satisfaction survey was not carried out, because FANTA-2 Bridge was closed earlier.
<b>INTERMEDIATE RESULT 1: Country-specific nutrition and food security policies, strategies and programming strengthened (<i>Field Support</i>)</b>					
<b>Indicator 1.1. % FANTA-2 Bridge country-specific recipients of capacity building TA in food security and MCHN advancing at least one Level of Appropriation, during the FY, for using</b>	FANTA-2 Bridge country-specific recipients of TA can be USAID Missions, Governments or specific IP programs. Appropriation refers to a recipient's ability to implement new methods with decreasing external TA from FANTA-2 Bridge. The levels of appropriation are borrowed from a USAID GH/OHA OP indicator: - Level 1- Implementing with significant FANTA-2 Bridge TA - Level 2- Implementing/replicating with limited FANTA-2 Bridge TA - Level 3- Implementing/replicating independently - Level 4- Serving as a resource for others/leveraging	At the end of each fiscal year, FANTA-2 Bridge specialists in consultation with the TA recipient will make a qualitative determination of the recipient's level of appropriation.			This indicator was dropped.
a) Layers			18%		
b) OM			0%		
c) LQAS (repeated uses)			0%		

PERFORMANCE INDICATORS BY RESULTS (All indicators and targets are annual, not cumulative. LOA target will be cumulative.)	DEFINITION, UNIT OF ANALYSIS	DATA COLLECTION METHOD, TYPE, AND SOURCE	BRIDGE TARGET	BRIDGE PERIOD RESULTS	
				Data	Details
d) CMAM (This may be disaggregated by country of <i>between services vs. training TRD</i> )	resources		0%		
e) Nutritional Care Services for PLHIV	Levels will be clearly defined by approach type in the scope of work and Workplan to ensure consistency over time. FANTA-2 Bridge specialists will propose specific activities to be included in this indicator, as not all FANTA-2 Bridge TA activities allow recipients to advance levels of appropriation. Not all activities should be expected to reach level 4 of appropriation (some activities might only be intended to achieve level 2 or 3). The maximum level of appropriation that each activity is expected to achieve will be included in the Scope of Work. Numerator is the number of TA recipients advancing one level during the FY. Denominator is the total number of recipients receiving that specific type of TA during the FY. Once activity reaches maximum expected level of appropriation according to Scope of Work/Workplan, it will be dropped out of the denominator.		22%		
f) Nutrition & HIV Training (FANTA-2 Bridge TOT to IP, then IPs conduct training on their own)			29%		
g) Community-based Nutrition			0%		
h) EWR			0%		
<b>Indicator 1.2. # countries that have advanced at least one phase, during the FY, on the Phases of Integration Continuum, for</b>	Countries are those receiving FANTA-2 Bridge integration assistance.	In a participatory process, relevant stakeholders and FANTA-2 Bridge specialists will assess the integration milestones reached each year using clear definitions for the milestones, as a part of annual goal setting and planning.			
a) integrating CMAM into NHSS	The four phases for CMAM (draft): Phase 1: <4 initial milestones achieved Phase 2: at least 4 of the 9 initial milestones achieved Phase 3: all 9 initial milestones and at least 3 of the 6 advanced milestones achieved Phase 4: all 9 initial and 6 advanced milestones achieved There are 9 initial and 6 advanced milestones for CMAM.		1	0	
b) integrating nutrition into national HIV policies/ strategies/services Note: this indicator is cumulative, it is defined as advancing one level since project inception	The four phases for HIV: Phase 1: <3 initial milestones achieved Phase 2: 3 or more of the initial 8 milestones achieved and fewer than 3 of the 7 advanced milestones achieved Phase 3: 3-5 of the 7 advanced milestones achieved Phase 4: 6-7 of the 7 advanced milestones achieved The 8 initial and 7 advanced milestones for nutrition and HIV are described in IR1.3 of the FANTA-2 Project Year One workplan.		2	4	Côte d'Ivoire, Ethiopia, Namibia, Tanzania
<b>Indicator 1.3. # countries with introduction OR expansion of cutting edge nutrition interventions, during the FY, for:</b>	Introduction means the country was not already implementing the intervention.	Simple count of the countries in which FANTA-2 Bridge is conducting these activities.			
a) CMAM	Expansion means the country already started implementing but is scaling up or replicating.		2	3	Ghana. South Sudan. Sudan

PERFORMANCE INDICATORS BY RESULTS <i>(All indicators and targets are annual, not cumulative. LOA target will be cumulative.)</i>	DEFINITION, UNIT OF ANALYSIS	DATA COLLECTION METHOD, TYPE, AND SOURCE	BRIDGE TARGET	BRIDGE PERIOD RESULTS	
				Data	Details
b) Nutritional care for PLHIV	Cutting edge interventions will include CMAM, nutritional care for PLHIV, integrating nutrition into protocols for other infectious diseases and others.		4	10	Côte d'Ivoire, Democratic Republic of Congo (DRC), Ethiopia, Haiti, Malawi, Mozambique, Namibia, Tanzania. Vietnam. Zambia
c) Integrating nutrition into protocols for other infectious diseases			1	3	Tuberculosis: Côte d'Ivoire, Mozambique, Vietnam
d) Preventing malnutrition in children under 2 years of age (PM2A)			2	0	
e) Quality Improvement			1	2	Ethiopia, Malawi
<b>Indicator 1.4. # countries engaged in capacity building activities, during the FY, to strengthen assessment, design, and implementation of Title II programs</b>			Countries are Title -2 intervention countries receiving TA assistance from FANTA-2 Bridge. This includes FSCG; regional and country-specific M&E workshops; baseline, midterm and final evaluation support; Layers; EWR/TIs; and IPTTs/RFs and development food aid program reviews.	Simple count of the countries in which FANTA-2 Bridge is providing TA.	~10
<b>Indicator 1.5. # people trained, during the FY,</b>	Number of people trained in different topics both in headquarters and in the field.	Simple count of training participants. Can use the list of participants, disaggregated by sex and type of training. A person attending more than one training (as long as training is different) can be counted more			CMAM clinical inpatient care training (case management training), CMAM outpatient care training, CMAM community outreach training, Assessment of public health in emergency settings; FFP M&E Workshop for FY2011 Title II Development Program Headquarters Staff; Refresher training of scout and girl guide leaders in School based community nutrition model, NACS Trainings

PERFORMANCE INDICATORS BY RESULTS (All indicators and targets are annual, not cumulative. LOA target will be cumulative.)	DEFINITION, UNIT OF ANALYSIS	DATA COLLECTION METHOD, TYPE, AND SOURCE	BRIDGE TARGET	BRIDGE PERIOD RESULTS	
				Data	Details
a) trained by FANTA-2 Bridge, overall		than once.	~1500	1872	See details in Annex 3.
i) # women trained			~750	1131	
ii) # men trained			~750	741	
b) in M&E, (partially or fully funded by FFP)					
i) # female IP staff trained in M&E funded by FFP			7		
ii) # male IP staff trained in M&E funded by FFP			32		
iii) # female USAID staff trained in M&E funded by FFP			10		
iv) # male USAID staff trained in M&E funded by FFP			10		
c) in child health and nutrition ---- (partially or fully funded by USAID Bureau for Global Health, Office of Health, Infectious Diseases and Nutrition (HIDN))	Number of people (health professionals, primary health care workers, community health workers, volunteers, non-health personnel) trained in child health care and child nutrition. Disaggregated by sex.	Simple count of training participants (funded partially or fully by HIDN). Can use the list of participants, disaggregated by sex.	~200	0	
i) # women trained			~125	0	
ii) # men trained			~75	0	
d) in maternal/newborn health and nutrition ---- (partially or fully funded by HIDN)	Number of people (health professionals, primary health care workers, community health workers, volunteers, non-health personnel) trained in maternal and/or newborn health and nutrition care. Disaggregated by sex.	Simple count of training participants (funded partially or fully by HIDN). Can use the list of participants, disaggregated by sex.	0	0	
i) # women trained			0	0	
ii) # men trained			0	0	
e) # of health care workers who successfully completed an in-service training program ---- (partially or fully funded by PEPFAR)	This indicator is ONLY for training that has been partially or fully funded by PEPFAR. This is a new generation PEPFAR indicator. Data will be collected for it starting in FY 2010 (FY 2009 data is only partial). Reporting separately for in-service training program on Male Circumcision and Pediatric Treatment is required. All other training goes together under "others", but type of training should be included in "details" column.	Simple count of training participants. Can use the list of participants, disaggregated by sex.	325	904	Training Of Trainers for: Nutrition Treatment and Rehabilitation, Community-Level; Nutrition and HIV for Community Health Workers; NACS; NACS Training of facility-based health workers; NACS and YCF Training; NACS training in the context of the national ART guidelines; Nutrition and HIV/AIDS: A Training for Nurses and Midwives
i) # women trained on Male Circumcision			0	0	



PERFORMANCE INDICATORS BY RESULTS <i>(All indicators and targets are annual, not cumulative. LOA target will be cumulative.)</i>	DEFINITION, UNIT OF ANALYSIS	DATA COLLECTION METHOD, TYPE, AND SOURCE	BRIDGE TARGET	BRIDGE PERIOD RESULTS	
				Data	Details
ii) # men trained on Male Circumcision			0	0	
iii) # women trained on Pediatric Treatment			0	0	
iv) # men trained on Pediatric Treatment			0	0	
v) # women trained on other training program			288	595	
vi) # men trained on other training program			88	309	
<b>1.6. # Missions accessing FANTA-2 Bridge [centrally-designed or managed mechanisms] using their own funding, during the FY</b>	USAID Missions accessing centrally-designed or managed mechanisms using their own funding	Simple count of USAID Missions from FANTA-2 Bridge records	7	11	Bangladesh, Cote d'Ivoire, Ethiopia, Ghana, Guatemala, Haiti, India, Mozambique, Namibia, Uganda, Vietnam
<b>1.7. Ratio of Mission funding to core funding in FANTA-2 Bridge [centrally-managed mechanisms designed to support the field], for the FY</b>	Mission funding: Mission + FFP + Office of Foreign Disaster Assistance (OFDA) + Regional Bureaus  Core GH funding: HIDN + OHA	Formula: MISSION / CORE GH	1.65	1.63	

**INTERMEDIATE RESULT 2: Global evidence base, effective methods and competencies for effective nutrition and food security policy, strategy and program design, implementation, monitoring and evaluation increased (*Global Leadership*)**

PERFORMANCE INDICATORS BY RESULTS <i>(All indicators and targets are annual, not cumulative. LOA target will be cumulative.)</i>	DEFINITION, UNIT OF ANALYSIS	DATA COLLECTION METHOD, TYPE, AND SOURCE	BRIDGE TARGET	BRIDGE PERIOD RESULTS	
				Data	Details
<b>Indicator 2.1. # FANTA-2 Bridge publications that contributed to the creation of global normative standards, during the FY</b>	"Contributing to the creation of global normative standards" is defined as when international organizations such as WHO or the USG have adopted/published/disseminated practices and materials that include work in which FANTA-2 Bridge was substantially involved.	Routine project records of publications	1	8	1. Toolkit: For Countries Applying for Funding of Food and Nutrition Programs under the Global Fund to Fight AIDS, Tuberculosis and Malaria (Oct 2011) 2. Household Hunger Scale: Indicator Definition and Measurement Guide (Aug 2011) 3. Prise en Charge Nutritionnelle des Personnes Vivant Avec le VIH et le SIDA (PVVIH): Manuel de formation pour les agents de santé communautaire et les agents des soins à domicile, Guide du facilitateur et documents à distribuer aux participants (Oct 2011) 4. USAID Global Health E-Learning Course on Nutrition (Nov 2011) 5. Dietary Diversity as a Measure of the Micronutrient Adequacy of Women's Diets in Resource-Poor Areas: Summary of Results from Five Sites 6. ProNUT HIV Stakeholder Consultation Report 2011 (Feb 2012) 7. Addendum to FANTA Sampling Guide by Robert Magnani (1997): Correction to Section 3.3.1 Determining the Number of Households That Need to be Contacted (Mar 2012) 8. Randomized, Double-Blind, Placebo-Controlled Trial Evaluating the Need for Routine Antibiotics as Part of the Outpatient Management of Severe Acute Malnutrition (Mar 2012)
<b>Indicator 2.2. # events at which presentations/posters of FANTA-2 Bridge work were delivered, during the FY</b>	FANTA-2 Bridge Presentations/Posters Delivered at Professional Meetings This includes formal professional meetings/workshops/conferences and not routine presentations made as a part of offering technical assistance. Presentations/posters could have been delivered by non-FANTA-2 Bridge staff, as long as presentations/posters were about FANTA-2 Bridge work or research/presentation was funded by FANTA-2 Bridge.	See tab "presentations/posters"	~30	14	See details in Annex 4.

PERFORMANCE INDICATORS BY RESULTS (All indicators and targets are annual, not cumulative. LOA target will be cumulative.)	DEFINITION, UNIT OF ANALYSIS	DATA COLLECTION METHOD, TYPE, AND SOURCE	BRIDGE TARGET	BRIDGE PERIOD RESULTS	
				Data	Details
Indicator 2.3. # research publications, published during the FY	"Research publication" includes: - peer reviewed publications - research-related publications (research reports, occasional papers, technical briefs, articles) that are published by FANTA-2 Bridge and disseminated via the website	Routine project records of publications	~4	12	1. Dietary Diversity as a Measure of the Micronutrient Adequacy of Women's Diets in Resource-Poor Areas: Summary of Results from Five Sites (July 2011); 2. Household Hunger Scale: Indicator Definition and Measurement Guide (Aug 2011); 3. Toolkit for Countries Applying for Funding of Food and Nutrition Programs under the Global Fund to Fight AIDS, Tuberculosis and Malaria (Oct 2011); 4. Review of Community-Based Management of Acute Malnutrition Implementation in West Africa: Summary Report (Oct 2011); 5. Revue de la mise en oeuvre du programme de prise en charge à base communautaire de la malnutrition aiguë en Afrique de l'Ouest, Rapport récapitulatif [CMAM West Africa French Translation] (Oct 2011); 6. USAID Global Health E-Learning Course on Nutrition (Nov 2011) 7. ProNUT HIV Stakeholder Consultation Report 2011 (Feb 2012) 8. Acceptability of Lipid-Based Nutrient Supplements and Micronutrient Powders among Pregnant and Lactating Women and Infants and Young Children in Bangladesh and Their Perceptions about Malnutrition and Nutrient Supplements (Feb 2012) 9. A single-centre, randomised, single-blind, parallel group clinical trial in rural Malawi, testing the growth promoting effect of long-term complementary feeding of infants with a high-energy, micronutrient fortified spread (Mar 2012) 10. Randomized, Double-Blind, Placebo-Controlled Trial Evaluating the Need for Routine Antibiotics as Part of the Outpatient Management of Severe Acute Malnutrition (Mar 2012) 11. Household Food Insecurity and Nutritional Status of Women of Reproductive Age and Children under 5 Years of Age in Five Departments of the Western Highlands of Guatemala: An Analysis of Data from the National Maternal-Infant Health Survey 2008–09 of Guatemala (Mar 2012) 12. Addendum to FANTA Sampling Guide by Robert Magnani (1997): Correction to Section 3.3.1 Determining the Number of Households That Need to be Contacted

PERFORMANCE INDICATORS BY RESULTS (All indicators and targets are annual, not cumulative. LOA target will be cumulative.)	DEFINITION, UNIT OF ANALYSIS	DATA COLLECTION METHOD, TYPE, AND SOURCE	BRIDGE TARGET	BRIDGE PERIOD RESULTS	
				Data	Details
<b>Indicator 2.4. # methods and tools under development during the FY</b>	GH/HIDN refers to this indicator as "number of technologies under development". Tools and methods will be described in IR2.2. work plan and are partially or fully funded by HIDN. It does not need to be a publication; a tool might not get turned into a publication.	Routine project records of publications plus knowledge of other tools under development.	2	5	1. Household Hunger Scale: Indicator Definition and Measurement Guide (Aug 2011) 2. Toolkit: For Countries Applying for Funding of Food and Nutrition Programs under the Global Fund to Fight AIDS, Tuberculosis and Malaria (Oct 2011) 3. Prise en Charge Nutritionnelle des Personnes Vivant Avec le VIH et le SIDA (PVVIH): Manuel de formation pour les agents de santé communautaire et les agents des soins à domicile, Guide du facilitateur et documents à distribuer aux participants (Oct 2011) 4. USAID Global Health E-Learning Course on Nutrition (Nov 2011) 5. Addendum to FANTA Sampling Guide by Robert Magnani (1997): Correction to Section 3.3.1 Determining the Number of Households That Need to be Contacted (Mar 2012)
<b>Indicator 2.5. # information gathering or research activities, during the FY, partially or fully funded by:</b>					
a) HIDN	FANTA-2 Bridge research activities carried out under IR 2.1. partially or fully funded by HIDN	A count of all FANTA-2 Bridge research activities carried out under IR 2.1., partially or fully funded by HIDN	3	6	Studies on LNS effectiveness, LNS-RTI, CSB++, LCNI-5, CMAM antibiotic, MUAC only
b) FFP	A count of all FANTA-2 Bridge research activities carried out under IR 2.1. partially or fully funded by FFP	"A count of all FANTA-2 Bridge research activities carried out under IR 2.1." partially or fully funded by FFP	~4	9	Report on the integration of gender into M&E in emergencies; FAFSA-2; PM2A study in Burundi; PM2A study in Guatemala; exit strategies study in Bolivia; exit strategies study in Honduras; exit strategies study in India; exit strategies study in Kenya; CSB++ study
c) OFDA	A count of all FANTA-2 Bridge research activities carried out under IR 2.1. partially or fully funded by OFDA	A count of all FANTA-2 Bridge research activities carried out under IR 2.1. partially or fully funded by OFDA	1	0	CMAM antibiotic study; MUAC only study (note that these studies were funded by OFDA under FANTA-2, however no OFDA funding was provided under the FANTA-2 Bridge)
<b>Indicator 2.6. # of evaluations, undertaken during the FY, partially or fully funded by FFP</b>	Evaluation involves a systematic collection of information on the performance and impacts of on-going or completed USG-funded projects, programs, or sub-sets of activities.	A count of evaluations partially or fully funded by FFP	1	1	FAFSA-2
<b>Indicator 2.7. # Sector Assessments, undertaken during the FY</b>	Sector assessments are undertaken to provide comprehensive analyses of needs and opportunities in a particular sector so that informed strategic and programmatic decisions can be made. A sector is broadly defined to include gender, environment, agriculture, industry, food security, health, education, and democracy.	A count of sector assessments under IR 2.1. partially or fully funded by FFP	1	6	Food security country framework for Haiti; food security country framework for Niger; food security country framework for Uganda; Food Security Country Guidance for Afghanistan; Food Security Country Guidance for Guatemala; Food Security Country Guidance for Niger

## Annex 2. Publications and Deliverables Completed

Title	Author/Publisher	Release Date
<b>Periodicals</b>		
A novel fortified blended flour, corn-soy blend “plus-plus,” is not inferior to lipid-based ready-to-use supplementary foods for the treatment of moderate acute malnutrition in Malawian children ( <i>American Society for Nutrition</i> )	Lacey N LaGrone, Indi Trehan, Gus J Meuli, Richard J Wang, Chrissie Thakwalakwa, Kenneth Maleta, and Mark J Manary	January 2012
<b>Publications</b>		
Dietary Diversity as a Measure of the Micronutrient Adequacy of Women’s Diets in Resource-Poor Areas: Summary of Results from Five Sites	Mary Arimond, Doris Wiesmann, Elodie Becquey, Alicia Carriquiry, Melissa Daniels, Megan Deitchler, Nadia Fanou, Elaine Ferguson, Maria Joseph, Gina Kennedy, Yves Martin-Prével, and Liv Elin Torheim	July 2011
Acceptability of a Lipid-Based Nutrient Supplement among Guatemalan Infants and Young Children	Susana L. Matias, Camila M. Chaparro, Ana B. Perez-Exposito, Janet M. Peerson and Kathryn G. Dewey	August 2011
HIV and Nutrition Job Aids: Recognizing bilateral pitting edema, How to measure mid-upper arm circumference (MUAC), Body Mass Index (BMI) chart assessment, Critical nutrition actions for people living with HIV (PLHIV), Energy and nutrition requirements for PLHIV, Minimum requirements to pass an appetite test	Republic of Ghana MOH and the FANTA-2 Bridge	August 2011
Household Hunger Scale: Indicator Definition and Measurement Guide	Terri Ballard, Jennifer Coates, Anne Swindale, and Megan Deitchler	August 2011
Mozambique: Materials for Mozambique's Nutrition Rehabilitation Program: Programa de Reabilitação Nutricional [PRN]: Guião do Facilitador, Textos de Apoio	MOH Department of Nutrition; Hospital Central de Maputo, Pediatric Department; FANTA-2 Bridge; UNICEF; SC; and WFP	August 2011
Trở ngại trong việc cho trẻ ăn bằng thực phẩm thay thế của bà mẹ nhiễm HIV ở Hải Phòng và TP Hồ Chí Minh, Việt Nam: Nghiên cứu định tính [VIETNAMESE Translation of 'Challenges for Safe Replacement Feeding among HIV-Positive Mothers in Hai Phong and Ho Chi Minh City, Vietnam: A Qualitative Study' ]	Kavita Sethuraman, Wendy Hamond, Mai-Anh Hoang, Kirk Dearden, Minh Duc Nguyen, Ha Thi Thu Phan, and Nam Truong Nguyen	August 2011
Global Fund Toolkit: Toolkit: For Countries Applying for Funding of Food and Nutrition Programs under the Global Fund to Fight AIDS, Tuberculosis and Malaria	FANTA-2 Bridge and WFP	October 2011
Report on the Review of the Integration of Community-Based Management of Acute Malnutrition into the Ghana Health System, August/September 2010	Dr. Paluku Bahwere, Dr. Samuel Akortey Akor, Mr. Michael Neequaye, and Dr. Isabella Sagoe-Moses	October 2011

Title	Author/Publisher	Release Date
Review of Community-Based Management of Acute Malnutrition Implementation in West Africa: Summary Report	Hedwig Deconinck, Paluku Bahwere, Serigne Mbaye Diene, Diane de Bernardo, and Pierre Adou	October 2011
Revue de la mise en oeuvre du programme de prise en charge à base communautaire de la malnutrition aiguë en Afrique de l'Ouest, Rapport récapitulatif [Review of Community-Based Management of Acute Malnutrition Implementation in West Africa: Summary Report French Translation]	Hedwig Deconinck, Paluku Bahwere, Serigne Mbaye Diene, Diane de Bernardo, and Pierre Adou	October 2011
Uganda Nutrition Action Plan 2011 - 2016: Message for District and Lower Level Leaders	Government of the Republic of Uganda	October 2011
Uganda Nutrition Action Plan 2011 - 2016: Scaling Up Multi-Sectoral Efforts to Establish a Strong Nutrition Foundation for Uganda's Development	Government of the Republic of Uganda	October 2011
Haiti Prospective Food Security Assessment	Laura M. Glaeser, Peter Horjus, and Shannon Strother	November 2011
Sudan: Government of Sudan CMAM Training Course on Inpatient Management of Severe Acute Malnutrition: Training Materials, (Clinical Instructor Guide, Course Director Guide, Facilitator Guide, Training Modules 1-8, Job Aids, Planning Documents, Presentations)	FANTA-2 Bridge and Government of Sudan Federal Ministry of Health	November 2011
Government of Sudan CMAM Outpatient and Community Outreach materials (Job Aids, Forms, and Checklists)	FANTA-2 and Government of Sudan Federal Ministry of Health	November 2011
USAID Global Health E-Learning Course on Nutrition	FANTA-2 Bridge and JHUCCP	November 2011
FFP Standard Indicators Handbook (Baseline-Final Indicators)	FANTA-2 Bridge	December 2011
Acceptability of Lipid-Based Nutrient Supplements and Micronutrient Powders among Pregnant and Lactating Women and Infants and Young Children in Bangladesh and Their Perceptions about Malnutrition and Nutrient Supplements	Malay K. Mridha, Camila M. Chaparro, Susana L. Matias, Sohrab Hussain, Shirajum Munira, Stacy Saha, Louise T. Day, and Kathryn G. Dewey	February 2012
ProNUT HIV Stakeholder Consultation Report 2011	Pamela Fergusson	February 2012
Addendum to FANTA Sampling Guide by Robert Magnani (1997): Correction to Section 3.3.1 Determining the Number of Households That Need to be Contacted	Diana Stukel and Megan Deitchler	March 2012
A single-centre, randomised, single-blind, parallel group clinical trial in rural Malawi, testing the growth promoting effect of long-term complementary feeding of infants with a high-energy, micronutrient fortified spread	Charles Mangani, Per Ashorn, Mark Manary, Lotta Alho	March 2012
Household Food Insecurity and Nutritional Status of Women of Reproductive Age and Children under 5 Years of Age in Five Departments of the Western Highlands of Guatemala: An Analysis of Data from the National Maternal-Infant Health Survey 2008–09 of Guatemala	Camila Chaparro	March 2012

Title	Author/Publisher	Release Date
Randomized, Double-Blind, Placebo-Controlled Trial Evaluating the Need for Routine Antibiotics as Part of the Outpatient Management of Severe Acute Malnutrition	Mark J. Manary, Kenneth Maleta, and Indi Trehan	March 2012
<b>Deliverables</b>		
Analysis to explore the predictive value of MUAC to identify individuals with low CD4 counts	Megan Deitchler	July 2011
Ghana Bridge Period Workplan	FANTA-2 Bridge	September 2011
FFP Information Bulletin 11	FANTA-2 Bridge	September 2011
Investing in Nutrition to Achieve Bangladesh's Vision 2021 and Millennium Development Goals: Talking Points for USAID/Bangladesh	FANTA-2 Bridge	September 2011
Global Fund Workshop Summary	Simon Sadler	October 2011
Ghana Nutrition Advocacy Communication Plan	FANTA-2 Bridge	November 2011
FANTA-2 and FANTA-2 Bridge Ghana Annual Report (October 1, 2010, to September 30, 2011)	FANTA-2 Bridge	November 2011
Investing in Nutrition: Smart Power for Development in Bangladesh: Estimates of the Costs and Benefits of a Comprehensive National Program for Nutrition Brief 2011–2021	FANTA-2 Bridge	December 2011
Ghana PROFILES Brief for SUN Launch	FANTA-2 Bridge	December 2011
Malawi Nutrition Assessment, Counseling and Support Program: Rapid Review Findings	FANTA-2 Bridge	December 2011
FFP Information Bulletin 11-03 (re-issued)	FANTA-2 Bridge	December 2011
Evaluation protocol for mid-term evaluation of NACS Phase 1 in Côte d'Ivoire	FANTA-2 Bridge, PNN, and PNPEC	January 2012
Integrating Nutrition Services into the MaMoni Project in Habiganj, Bangladesh: Assessment and Strategy	FANTA-2 Bridge	February 2012
Integrating Nutrition into the Smiling Sun Franchise Program: Assessment and Strategy	FANTA-2 Bridge	February 2012
Evaluation protocol for final evaluation of NACS Phase 1 in Côte d'Ivoire	FANTA-2 Bridge, PNN, and PNPEC	February 2012
Evaluation protocol for NACS within a Tuberculosis Program in Côte d'Ivoire	FANTA-2 Bridge, National TB Program, and PNN	February 2012
Training of trainer's module on NACS in Côte d'Ivoire	FANTA-2 Bridge and PNN	February 2012
Pre-service training module on nutrition counseling for PLHIV for nurses and social workers (Haiti)	FANTA-2 Bridge and Quisqueya University	February 2012
Pre-service training module on nutrition and HIV for medical students (Haiti)	FANTA-2 Bridge and Quisqueya University	February 2012
Final Report: Pilot of Quality Improvement (QI) Activities to Integrate Nutrition into HIV Treatment, Care, and Support Services at Food by Prescription Project Sites in Ethiopia	FANTA-2 Bridge	March 2012
USAID/Ghana Case Study: Treating Acute Malnutrition at the Community Level in Ghana	FANTA-2 Bridge	March 2012

## **Annex 3. Trainings Delivered and Workshops Facilitated**

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During the FANTA-2 Bridge, trainings and workshops spanned 20 countries and over 2,500 participants. Partners included ministries of health, U.N. agencies, PVOs, universities, and research institutions.

### **Trainings Delivered**

The FANTA-2 Bridge held 111 trainings in 14 countries on a wide variety of topics. In total, we trained 1,945 people. Trainings were held in Bangladesh, Belgium, Côte d'Ivoire, DRC, Ethiopia, Ghana, Haiti, Mozambique, Namibia, South Sudan, Sudan, the U.S., Uganda, and Zambia.

The FANTA-2 Bridge trained the following number of people in each of the major subject areas.

- CMAM: 780
- M&E: 70
- Nutrition and HIV: 947

Notable training topics included:

- Incorporating IYCF into NACS
- Strengthening advocacy to scale up investments in nutrition
- On-site NACS training
- FFP M&E workshops

Participants included practitioners, such as clinicians, nurses, midwives, nutritionists, and other health workers; regional health, district health, and hospital management teams; USAID; ministries of health; NGOs; Title II Awardees; and academicians.

### **Workshops Facilitated**

The FANTA-2 Bridge also supported 20 workshops in 12 countries for 572 participants. Workshops were held in Côte d'Ivoire, Ethiopia, Ghana, Guatemala, Italy, Malawi, Namibia, South Africa, Switzerland, the U.S., Uganda, and Vietnam.

Notable workshop topics included:

- Ghana NACS Rapid Review Stakeholder Consultation Workshop
- Planning workshop for service providers at NACS sites and their corresponding health officers at the district and regional levels
- Integrating Gender in Emergencies at WFP
- Community-Based Management of Acute Malnutrition Data Management Review and Orientation, Upper East Region

Participants included national and state government bodies, such as the ministries, TWGs, and HIV support programs; national associations; USAID; U.N. agencies; NGOs; practitioners, such as nurses, clinicians, and CHWs; and the local media.



Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
<b>Trainings Delivered</b>								
NACS refresher training	Okahandja, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	July 4–6, 2011	3 days	MOHSS nurses from Oshikuku and Oshakati districts	19	3	22
Assessment of Public Health in Emergency Settings	Brussels, Belgium	CRED and Université Catholique de Louvain	July 5–7, 2011	3 days	Medical doctors and health managers of UNICEF, WHO, WFP, MSF, Merlin, IRC, IMC, ASVI, Sudan MOH, and academic institutions	10	10	20
CMAM Outpatient Care Training, Nadowli, Upper West Region	Nadowli, Ghana	GHS and UNICEF/Ghana	July 5–7, 2011	3 days	Senior nurses, medical assistants, community health nurses, and nutritionists	23	17	40
NACS refresher training	Okahandja, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	July 7–9, 2011	3 days	MOHSS nurses from Onandjokwe and Engela districts	19	3	22
NACS and IYCF training	Windhoek, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	July 11–12, 2011	2 days	Community health care providers from Windhoek district	18	6	24
CMAM Outpatient Care Training, Talesi Nabdam, Upper East Region	Talesi Nabdam, Ghana	GHS and UNICEF/Ghana	July 12–14, 2011	3 days	Senior nurses, medical assistants, community health nurses, and nutritionists	29	7	36
NACS and IYCF training	Windhoek, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	July 14–15, 2011	2 days	Community counselors and community health care providers from health facilities in Windhoek, Okahandja, and Mariental districts	28	6	34
TOT for Nutrition Treatment and Rehabilitation, Health Facility-Level	Matola, Mozambique	MOH and FANTA-2 Bridge	July 18–22, 2011	5 days	MOH provincial- and district-level health staff and EGPAF	27	16	43
FFP M&E Workshop for FY2011 Title II Development Program Headquarters Staff	Washington, DC	FANTA-2 Bridge	July 21–22, 2011	2 days	Headquarter staff of the Awardees who won 2011 Development Awards and FFP Country Backstop Officers	10	11	21

Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
CMAM Outpatient Care and Community Outreach Training	El Obeid, Sudan	FMOH, UNICEF/Sudan, and FANTA-2 Bridge	July 23–27, 2011	5 days	Medical doctors, medical assistants and nutritionists from North Kordofan state	14	11	25
TOT for Nutrition Treatment and Rehabilitation, Community-Level	Matola, Mozambique	FANTA-2 Bridge and SC	July 25–26, 2011	2 days	MOH provincial- and district-level health staff and EGPAF	14	15	29
Nutrition and HIV/AIDS: A Training for Nurses and Midwives	Jimma, Ethiopia	Tufts University, FANTA-2 Bridge, and PEPFAR/Ethiopia	July 25–29, 2011	5 days	Academicians	2	4	6
Strengthening Advocacy Capacity to Scale-Up Nutrition Investments and Outcomes in Uganda	Jinja, Uganda	FANTA-2 Bridge	July 25–29, 2011	5 days	Ministries of health, local government, and agriculture; U.N. agencies; civil society organizations; academia; and the private sector	13	14	27
CMAM Inpatient Care Training (case management training), Central Region	Agona-Swedru, Ghana	GHS, FANTA-2 Bridge, and WHO/Ghana	July 25–30, 2011	6 days	Pediatricians, clinicians, nurses, dieticians, and nutritionists	15	16	31
TOT for Nutrition and HIV for Community Health Workers	Matola, Mozambique	FANTA-2 Bridge and SC	July 26–27, 2011	2 days	MOH provincial- and district-level health staff and EGPAF	14	15	29
CMAM Outpatient Care Training	Yambio, South Sudan	MOH, UNICEF/South Sudan, and FANTA-2 Bridge	July 26–29, 2011	4 days	Medical assistants, clinical officers, nurses, and nutrition assistants	17	11	28
Refresher training of scout and girl guide leaders in school-based community nutrition model	Kitgum, Uganda	FANTA-2 Bridge	July 29–31, 2011	3 days	Scout and girl guide primary school teachers, district scout/guide executive council members	16	8	24
CMAM training of Community Volunteers in Community Outreach	Adafoah, Ghana	GHS and FANTA-2 Bridge	August 3–5 and 19, 2011	4 days	Community health workers and community volunteers	32	77	109
Training of HKI staff on qualitative data management, transcripts and coding	Dhaka, Bangladesh	FANTA-2 Bridge	August 8, 2011	1 day	HKI data collection staff	3	2	5

Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
CMAM Outpatient Care Training	Bentiu, South Sudan	MOH, UNICEF/South Sudan, and FANTA-2 Bridge	August 8–11, 2011	4 days	Medical assistants, clinical officers, nurses, and nutrition assistants	18	10	28
TOT for Nutrition Treatment and Rehabilitation, Health Facility Level	Pemba, Mozambique	MOH, FANTA-2 Bridge, and EGPAF	August 8–12, 2011	5 days	MOH provincial- and district-level health staff and EGPAF	6	10	16
Training in Nutrition Care and support of PLHIV	Lusaka, Zambia	NFNC, FANTA-2 Bridge and Natural Resources Development Council (NRDC)	August 12–16, 2011	5 days	Staff of SOS Children's Village, Police Victim Support Unit, Churches, Oxfam Great Britain, University Teaching Hospital, United Nations Development Programme, NRDC, and ISTT (In-service Training Trust)	8	5	13
CMAM Outpatient Care Training, Karaga Northern Region	Karaga, Ghana	GHS and UNICEF/Ghana	August 15–17, 2011	3 days	Senior nurses, medical assistants, community health nurses, and nutritionists	14	21	35
NACS Training of Trainers	Kabwe, Zambia	MOH, NFNC, FANTA-2 Bridge, and NRDC	August 15–19, 2011	5 days	Nutritionists and one registered nurse/midwife	12	12	24
CMAM Outpatient Care Training, Ga South, Ashiaman, and Ashiedu Keteke Districts of Greater Accra Region	Accra, Ghana	GHS and FANTA-2 Bridge	August 16–18, 2011	3 days	Senior nurses, medical assistants, community health nurses, and nutritionists	32	2	34
CMAM Basic Orientation	Omdurman, Sudan	AUW	August 20, 2011	1 day	Post-graduate students (Diploma in Nutrition students)	29	0	29
CMAM Outpatient Care Training, Tolung Kumbungu Northern Region	Tolung, Ghana	GHS and UNICEF/Ghana	August 22–24, 2011	3 days	Senior nurses, medical assistants, community health nurses, and nutritionists	29	11	40
NACS refresher training	Rundu, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, SCMS	August 22–24, 2011	3 days	MOHSS nurses from Rundu and Katima districts	14	10	24

Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
NACS and IYCF training	Okahandja, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	August 22–26, 2011	5 days	MOHSS nurses from Khomas, Hardap, and Omaheke regions	20	2	22
On-site NACS training, Okatana Health Centre	Oshakati, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	August 29, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Ondangwa Health Centre	Oshakati, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	August 29, 2011	3 hours	MOHSS nurses	2	1	3
On-site NACS training, Onamutai Clinic	Oshakati, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	August 29, 2011	3 hours	MOHSS nurses	2	0	2
On-site NACS training, Ondwediva Health Centre	Oshakati, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	August 29, 2011	3 hours	MOHSS nurses	3	0	3
On-site NACS training, Oshakati State Hospital	Oshakati, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	August 29, 2011	3 hours	MOHSS nurses	5	1	6
On-site NACS training, Oshakati Primary Health Care (PHC) Clinic	Oshakati, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	August 30, 2011	3 hours	MOHSS nurses	3	1	4
On-site NACS training, Ou-Nick Health Centre	Oshakati, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	August 30, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Elim Health Centre	Oshikuku, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	August 31, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Okando Health Centre	Oshikuku, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	August 31, 2011	3 hours	MOHSS nurses	2	0	2
On-site NACS training, Oshikuku PHC Clinic	Oshikuku, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	August 31, 2011	3 hours	MOHSS nurses	3	0	3

Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
On-site NACS training, Oshikuku State Hospital	Oshikuku, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	August 31, 2011	3 hours	MOHSS nurses	2	1	3
On-site NACS training, Onaanda Clinic	Oshikuku, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 1, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, St. Benedict's Clinic	Oshikuku, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 1, 2011	3 hours	MOHSS nurses	2	0	2
On-site NACS training, Onheleiwa Clinic	Oshikuku, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 1, 2011	3 hours	MOHSS nurses	2	0	2
On-site NACS training, Okathitu Clinic	Oshikuku, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 2, 2011	3 hours	MOHSS nurses	2	0	2
On-site NACS training, Okalongo Clinic	Oshikuku, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 2, 2011	3 hours	MOHSS nurses	2	0	2
On-site NACS training, Opoko Clinic	Oshikuku, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 2, 2011	3 hours	MOHSS nurses	2	0	2
On-site NACS training, Engela State Hospital	Engela, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 5, 2011	3 hours	MOHSS nurses	3	1	4
On-site NACS training, Engela PHC Clinic	Engela, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 5, 2011	3 hours	MOHSS nurses	1	1	2
On-site NACS training, Okangolo Health Centre	Engela, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 5, 2011	3 hours	MOHSS nurses	2	0	2
On-site NACS training, Ongha Clinic	Engela, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 5, 2011	3 hours	MOHSS nurses	2	0	2

Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
On-site NACS training, Ohalushu Clinic	Engela, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 6, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Endola Clinic	Engela, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 6, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Ohaukelo Clinic	Engela, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 6, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Odibo Health Centre	Engela, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 6, 2011	3 hours	MOHSS nurses	1	1	2
On-site NACS training, Onyaanya Health Centre	Onandjokwe, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 7, 2011	3 hours	MOHSS nurses	2	1	3
On-site NACS training, Onayena Health Centre	Onandjokwe, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 7, 2011	3 hours	MOHSS nurses	2	0	2
On-site NACS training, Okangolo Health Centre	Onandjokwe, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 7, 2011	3 hours	MOHSS nurses	2	1	3
On-site NACS training, Ontanaga Clinic, Onandjokwe	Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 7, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Oshigambo Clinic	Onandjokwe, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 7, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Onandjokwe Lutheran Hospital	Onandjokwe, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 8, 2011	3 hours	MOHSS nurses	6	1	7
On-site NACS training, Ndamono Clinic	Onandjokwe, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 8, 2011	3 hours	MOHSS nurses	2	0	2

Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
On-site NACS training, Omuntele Clinic	Onandjokwe, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 8, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Omuthiya Clinic	Onandjokwe, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	September 8, 2011	3 hours	MOHSS nurses	0	1	1
CMAM Inpatient Care Training (case management training), Upper East Region	Bolgatanga, Ghana	GHS, UNICEF/Ghana, and FANTA-2 Bridge	September 12–17, 2011	6 days	Pediatricians, clinicians, nurses, dieticians, and nutritionists	7	11	18
CMAM Outpatient Care Training	Wau, South Sudan	MOH, UNICEF/South Sudan and FANTA-2 Bridge	September 13–16, 2011	4 days	Medical assistants, clinical officers, nurses, and nutrition assistants	13	12	25
FFP M&E Workshop	Addis Ababa, Ethiopia	FANTA-2 Bridge	September 19–23, 2011	5 days	PVOs, DCHA/FFP, USAID/Ethiopia, and USAID/Kenya	6	29	35
FFP M&E Workshop	Kinshasa, DRC	FANTA-2 Bridge	September 19–23, 2011	5 days	PVOs, DCHA/FFP, USAID/DRC, USAID/Burkina Faso, and USAID/Senegal	10	20	30
NACS training in the context of the national ART guidelines	Windhoek, Namibia	FANTA-2 Bridge, MOHSS, and I-TECH	September 20, 2011	1 hour	MOHSS staff from Khomas, Karas, Otjozondjupa, Erongo, Hardap, Omaheke, and Kunene regions	22	4	26
CMAM Community Outreach Training	Morobo County, South Sudan	MOH, UNICEF/South Sudan, and FANTA-2 Bridge	September 25–27, 2011	2 days	Community volunteers	23	23	46
NACS and IYCF training	Oshakati, Namibia	FANTA-2 Bridge and MOHSS	September 26–27, 2011	2 days	Community health care providers from Oshakati district	37	3	40
NACS and IYCF training	Oshakati, Namibia	FANTA-2 Bridge and MOHSS	September 28–29, 2011	2 days	Facility-based community counselors from Oshakati district	21	9	30

Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
CMAM Community Outreach Training	Kajokeji County, South Sudan	MOH, UNICEF/South Sudan, and FANTA-2 Bridge	October 2–4, 2011	2 days	Community volunteers	25	25	50
NACS training of facility-based health workers	Windhoek, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	October 10–12, 2011	3 days	MOHSS nurses from Karasburg, Keetmanshoop, Luderitz, and Andara districts	21	7	28
Quality Improvement team training	Bishoftu Oromia, Ethiopia	FANTA-2 Bridge and URC	October 12–14, 2011	3 days	Provincial-level hospital and health center staff	14	16	30
Training of Trainers on NACS	Grand Bassam, Cote d'Ivoire	FANTA-2 Bridge	October 12–16, 2011	5 days	EGPAF, PNPEC, Institut National de la Santé Publique, HAI, Institut National de Formation des Agents de Santé, Division de Formation et Recherche, Centre de Prise en charge, de Recherche et de Formation, Centre Hospitalier Universitaire, SIP, Programme National de Promotion de la Medecine Traditionnelle, ICAP, PEPFAR/Cote d'Ivoire	10	13	23
NACS training of facility-based health workers	Windhoek, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	October 13–15, 2011	3 days	MOHSS nurses from Grootfontein, Tsumeb, and Outapi districts	23	4	27
FFP M&E Workshop	Juba, South Sudan	FANTA-2 Bridge	October 17–21, 2011	5 days	PVOs, GOSS, USAID/South Sudan, USAID/South Africa, and FFP	2	20	22
CMAM Inpatient Care Training (case management training), Greater Accra Region	Tema, Ghana	GHS and FANTA-2 Bridge	October 17–22, 2011	6 days	Pediatricians, clinicians, nurses, dieticians, and nutritionists	20	2	22
Quality Improvement team training	Bahardar, Amhara Region, Ethiopia	FANTA-2 Bridge and URC	October 20–22, 2011	3 days	Provincial-level hospital and health center staff	13	10	23
Quality Improvement team training	Addis Ababa, Ethiopia	FANTA-2 Bridge and URC	October 26–28, 2011	3 days	Provincial-level hospital and health center staff	23	7	30



Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
Nutrition counseling for PLHIV	Jacmel, Haiti	FANTA-2 Bridge and MSPP	November 14–15, 2011	2 days	Health care providers/counselors from MSPP and NGOs	16	10	26
CMAM Outpatient Care Training, Yendi District, Northern Region	Yendi, Ghana	GHS and UNICEF/Ghana	November 14–16, 2011	3 days	Senior nurses, medical assistants, community health nurses, and nutritionists	29	11	40
CMAM Inpatient Care Training (case management training), Northern Region	Tamale, Ghana	GHS and UNICEF/Ghana	November 14–19, 2011	6 days	Pediatricians, clinicians, nurses, dieticians, and nutritionists	11	18	29
Nutritional care and counseling of PLHIV	Les Cayes, Haiti	FANTA-2 Bridge and MSPP	November 16–18, 2011	3 days	Health care providers from MSPP and NGOs	26	2	28
CMAM Outpatient Care Training, Tamale Metropolitan, Northern Region	Tamale, Ghana	GHS and UNICEF/Ghana	November 17–19, 2011	3 days	Senior nurses, medical assistants, community health nurses, and nutritionists	30	4	34
On-site NACS training, Katima Mulilo PHC Clinic	Katima Mulilo, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 21, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Mavuluma Clinic	Katima Mulilo, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 21, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Ngoma Clinic	Katima Mulilo, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 21, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Bukalo Clinic	Katima Mulilo, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 21, 2011	3 hours	MOHSS nurses	1	0	1
CMAM Inpatient Care Training (case management training), Ashanti Region	Kumasi, Ghana	GHS, UNICEF/Ghana, and FANTA-2 Bridge	November, 21–26, 2011	6 days	Pediatricians, clinicians, nurses, dieticians, and nutritionists	25	3	28
On-site NACS training, Ngweze Clinic	Katima Mulilo, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 22, 2011	3 hours	MOHSS nurses	1	0	1

Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
On-site NACS training, Katima Mulilo State Hospital	Katima Mulilo, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 22, 2011	3 hours	MOHSS nurses	1	1	2
On-site NACS training, Sangwali Health Centre	Katima Mulilo, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 22, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Kanono Clinic	Katima Mulilo, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 22, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training	Katima Mulilo, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 22, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Sesheke Clinic	Katima Mulilo, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 23, 2011	3 hours	MOHSS nurses	1	0	1
On-site NACS training, Sambyu Health Centre	Rundu, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 24, 2011	3 hours	MOHSS nurses	2	0	2
On-site NACS training, Bunya Health Centre	Rundu, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 24, 2011	3 hours	MOHSS nurses	2	0	2
On-site NACS training, Mupini Clinic	Rundu, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 24, 2011	3 hours	MOHSS nurses	2	2	4
On-site NACS training, Sauyemwa Clinic	Rundu, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 24, 2011	3 hours	MOHSS nurses	2	0	2
On-site NACS training, Rundu PHC Clinic	Rundu, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 24, 2011	3 hours	MOHSS nurses	4	1	5
On-site NACS training, Kayengona Clinic	Rundu, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 24, 2011	3 hours	MOHSS nurses	1	1	2

Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
On-site NACS training, Nkarapamwe Clinic	Rundu, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 24, 2011	3 hours	MOHSS nurses	1	1	2
On-site NACS training, Rundu State Hospital	Rundu, Namibia	FANTA-2 Bridge, MOHSS, I-TECH, and SCMS	November 24, 2011	3 hours	MOHSS nurses	4	0	4
CMAM Inpatient Care Training (case management training), Upper West Region	Jirapa, Ghana	GHS, UNICEF/Ghana, and FANTA-2 Bridge	November 28 to December 3, 2011	6 days	Pediatricians, clinicians, nurses, dieticians, and nutritionists	9	10	19
Nutrition counseling for PLHIV	Saint-Marc, Haiti	FANTA-2 Bridge and MSPP/Artibonite	November 29–30, 2011	2 days	Health care providers from MSPP and NGOs	18	1	19
TOT for Nutrition Treatment and Rehabilitation, Community-Level	Lichinga, Niassa, Mozambique	FANTA-2 Bridge and MOH	November 29–30, 2011	2 days	MOH provincial- and district-level health staff, FHI360/ComCHASS	10	30	40
Nutrition counseling for PLHIV	Gonaïves, Haiti	FANTA-2 / MSPP Artibonite	December 1–2, 2011	2 days	Health care providers from MSPP and NGOs	18	6	24
TOT for Nutrition and HIV for Community Health Workers	Lichinga, Niassa, Mozambique	FANTA-2 Bridge and MOH	December 1–2, 2011	2 days	MOH provincial- and district-level health staff, and FHI360/ <i>Community Health and Systems Strengthening Project</i> (ComCHASS)	10	30	40
Quality Improvement shared learning event	Addis Ababa, Ethiopia	FANTA-2 Bridge and URC	December 9, 2011	1 day	FMOH, USAID, SC, and provincial-level hospital and health center staff	12	10	22
Nutrition counseling for PLHIV	Jacmel, Haiti	FANTA-2 Bridge and MSPP/Ouest	December 12–13, 2011	2 days	Health care providers from MSPP and NGOs (those who the earlier training in Jacmel could not accommodate)	17	4	21
TOT for Nutrition Treatment and Rehabilitation, Community Level	Pemba, Cabo Delgado, Mozambique	FANTA-2 Bridge and MOH	December 12–13, 2011	2 days	MOH provincial- and district-level health staff, FHI360/ComCHASS, and EGPAF	11	29	40

Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
CMAM Inpatient Care Training (case management training), Berekum and Eikwi Hospitals	Kasoa, Ghana	GHS, UNHCR/Ghana, and FANTA-2 Bridge	December, 12–17, 2011	6 days	Pediatricians, clinicians, nurses, dieticians, and nutritionists	10	4	14
TOT for Nutrition and HIV for Community Health Workers	Pemba, Cabo Delgado, Mozambique	FANTA-2 Bridge and MOH	December 14–15, 2011	2 days	MOH provincial- and district-level health staff, FHI360/ComCHASS, and EGPAF	11	29	40
Nutrition care of PLHIV	Jérémie, Haiti	FANTA-2 Bridge and MSPP Grande-Anse	December 14-16, 2011	1 day	Health care providers from MSPP and NGOs	21	5	26
<b>Workshops Facilitated</b>								
National Nutrition and HIV/AIDS Guideline and Training Manuals	Adama, Ethiopia	PEPFAR/Ethiopia Partners, WFP/Ethiopia, UNICEF/Ethiopia, WHO/Ethiopia, and FANTA-2 Bridge	July 13–15, 2011	3 days	PEPFAR/Ethiopia Partners, WFP/Ethiopia, UNICEF/Ethiopia, WHO/Ethiopia, and FANTA-2 Bridge	4	10	14
Second Workshop of the Nutrition and HIV Technical Writing Committee for the National NACS Guidelines	Ba Vi, Vietnam	FANTA-2 Bridge	July 15–17, 2011	3 days	Nutritionists and officials of the VAAC	8	0	8
Sharing of PLANOCC (Food and Nutrition Security for Highlands Plan)	Guatemala City, Guatemala	SESAN and USAID Partners	July 20, 2011	4 hours	USAID/Guatemala, partners, and SESAN	25	14	39
National Dialogue on the Transition and Sustainability of Public Health Nutrition Programs	Kampala, Uganda	FANTA-2 Bridge, GAIN, and SURE project	July 27, 2011	5 hours	MOH representatives, civil society organizations, U.N. agencies, academia, and private sector agencies	17	17	34
Integrating Food and Nutrition Programs into Global Fund for AIDS, Tuberculosis and Malaria Proposals Workshop	Johannesburg, South Africa	FANTA-2 Bridge, WFP, WHO, and PEPFAR	August 9–11, 2011	3 days	WFP, WHO, UNICEF, FANTA-2 Bridge, and government officials	21	11	32

Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
Review of Uganda Nutrition Action Plan (UNAP)	Kampala, Uganda	NPA and Ministry of Foreign Affairs	August 12, 2011	3 hours	Ministers, USAID/Uganda, NPA, U.N. agencies, civil society organizations, private sector, academia, and media	32	35	67
Optifood User Acceptance Testing Workshop	Geneva, Switzerland	FANTA-2 Bridge, WHO, and LSHTM	August 29–31, 2011	3 days	University of Copenhagen, Institute for Nutritional Investigation (IIN, Peru), Society for Applied Studies (India), Mahidol University (Thailand), CIAT, WHO, LSHTM, and FHI 360	10	3	13
Uganda Civil Society Coalition to Scale Up Nutrition initiative workshop to develop national proposal	Kampala, Uganda	FANTA-2 Bridge and SC	September 1, 2011	1 day	Academia and civil society organizations working in nutrition	14	18	32
Uganda Civil Society Coalition to Scale Up Nutrition Initiative proposal development retreat	Jinja, Uganda	FANTA-2 Bridge	September 2–4, 2011	3 days	Academia and civil society organizations working in nutrition	2	7	9
CMAM Data Management Review and Orientation, Upper East Region	Bolgatanga, Ghana	GHS, UNICEF/Ghana, and FANTA-2 Bridge	September 13–15, 2011	3 days	Community health nurses, nutrition officers, public health nurses, and disease control officers	52	21	73
Integrating Gender in Emergencies at WFP	Rome, Italy	FANTA-2 Bridge	September 27, 2011	1 day	WFP staff	17	4	21
Sensitization on the importance of NACS in HIV care and treatment	Windhoek, Namibia	FANTA-2 Bridge, MOHSS, and I-TECH	September 27–29, 2011	3 days	MOHSS in-charges and nurses from Windhoek facilities	18	3	21
Ghana nutrition communication planning and material development workshop	Ho, Ghana	GHS and FANTA-2 Bridge	October 3–7, 2011	5 days	PROFILES task team in Ghana, including GHS, Ghana Ministry of Food and Agriculture, WHO/Ghana, WFP/Ghana, and UNICEF/Ghana	11	4	15
Planning workshop for service providers at NACS	Yamoussoukro, Côte d'Ivoire	FANTA-2 Bridge and PNN	October 6–7, 2011	2 days	Regional and district health directors, service providers,	31	19	50

Topic/Title	Location	Facilitated By	Date	Duration	Audience	Number of Participants		
						Female	Male	Total
sites and their corresponding health officers at the district and regional levels					and PEPFAR/Côte d'Ivoire Partners supporting NACS			
Malawi NACS Rapid Review Stakeholder Consultation Workshop	Lilongwe, Malawi	Malawi MOH/Nutrition, USAID, PEPFAR, University Research Counsel, and FANTA-2 Bridge	October 12, 2011	8 hours	U.N. agencies (WFP, WHO, and UNICEF), USAID, FANTA-2 Bridge, MOH provincial and district level health staff, PATH, CMAM Advisory Service, Bunda College, Clinton HIV/AIDS Initiative, and URC	15	8	23
Second National Nutrition and HIV Guidelines Development Workshop	Nha Trang, Vietnam	FANTA-2 Bridge and NIN	October 12–16, 2011	5 days	National and provincial MOH officials, managers of HIV care and treatment clinics, PEPFAR/Vietnam Partners	27	24	51
Ghana NACS Rapid Review Stakeholder Consultation Workshop	Accra, Ghana	GHS/Nutrition and FANTA-2 Bridge	November 25, 2011	1 day	GHS provincial and district level health staff, WFP/Ghana, USAID/Ghana, FANTA-2 Bridge, OICI, PATH, Ghana HIV/AIDS Network, and Ghana Network of people living with HIV/AIDS	21	23	44
WHO Nutrition Guidance Expert Advisory Group (NUGAG) Sub-Group: Nutrition in the Life Course and Undernutrition: Area Nutrition and Infections	Geneva, Switzerland	PEPFAR and WHO	November 28 to December 1, 2011	4 days	WHO, WFP, PEPFAR, FANTA-2 Bridge, and technical experts	8	6	14
FFP Standard Indicators Brownbag	Washington, DC	FANTA-2 Bridge	December 20, 2011	1 hour	FFP Country Backstop Officers	9	3	12

## Annex 4. Presentations and Posters Delivered

Title of Event	Presentation or Poster Title	Presenter	Location	Date of Presentation	Audience
Congressional Hunger Center (CHC), Leland Fellows Training	Nutrition in the Developing World	Kristen Cashin (FANTA-2 Bridge)	Washington, DC	July 18, 2011	Mickey Leland Hunger Fellows, Congressional Hunger Center
International Seminar "Food and Nutrition Security in the Political Agenda"	Combating reduction of chronic malnutrition with medium-long term strategies	Jennifer Tikka (USAID/Guatemala)	Guatemala City, Guatemala	July 25, 2011	Representatives involved in food and nutrition security from political parties, government officials, congressmen, donors, and the media
Commodity Management Workshop	Introduction to Nutrition and Ration Design	Camila Chaparro (FANTA-2 Bridge)	Washington, DC	August 23, 2011	FFP Officers
Health and Nutrition Congress	Global initiatives and considerations in support of food and nutrition security	Maggie Fischer (FANTA-2 Bridge)	Quezaltenango, Guatemala	August 25, 2011	Faculty and students from Rafael Landivar University and staff from NGOs in the region
FFP Staff Meeting	Preventing undernutrition: What can TII programs do?	Camila Chaparro (FANTA-2 Bridge)	Washington, DC	September 13, 2011	FFP staff
OHA Partner Meeting	A Strong Partnership for Nutrition Assessment, Counselling and Support (NACS) Facilitates Swift Action to Avoid a Potential Nutrition Crisis Among PLHIV During the Recent Unrest.	Phil Moses (FANTA-2 Bridge)	Washington, DC	September 22, 2011	USAID, PEPFAR, FHI 360, and others
CMAM Coverage Investigation	National priorities for coverage survey	Ibtihalat M. El Hassan and Amira M. El Munier (FMOH) and Ali Nasr (FANTA-2 Bridge)	Kassala, Sudan	September 28, 2011	17 participants from UNICEF/Sudan, FMOH, and NGOs
USAID Global Health Mini-University	1000 days: Why nutrition between conception and age 2 really matters	Camila Chaparro (FANTA-2 Bridge) and Jessica Tillahun (HIDN)	Washington, DC	September 30, 2011	GWU students, NGO staff, and others

Title of Event	Presentation or Poster Title	Presenter	Location	Date of Presentation	Audience
National Mayors' Forum	The role of local municipal authorities in the development of the municipality	Jorge Escoto (USAID Local Governance Project)	Guatemala City	October 13 , 2011	Presidential candidates, elected and current mayors from 333 municipalities, and donors
American Public Health Association (APHA) annual meeting	Community and Household Sanitation and the Effect on Kenyan Children's Health and Nutrition	A. Elisabeth Sommerfelt (FANTA-2 Bridge)	Washington, DC	November 1, 2011	Attendees at American Public Health Association annual meeting
Regional Conference on CMAM Scale Up	Poster: The Review of CMAM in West Africa, Summary Report	Hedwig Deconinck (FANTA-2 Bridge)	Addis Ababa, Ethiopia	November 14–17, 2011	Over 150 participants from governments, U.N. agencies, and international NGOs from over 25 countries in Africa and Asia
Regional Conference on CMAM Scale Up	Effectiveness of Public Health Systems to Support National Roll Out Strategies	Michael Amon Neequaye (GHS Nutrition Division)	Addis Ababa, Ethiopia	November 14, 2011	Over 150 participants from governments, U.N. agencies, and international NGOs from over 25 countries in Africa and Asia
Nutrition Association of Ghana	Poster: Summary of FANTA-2 Bridge activities in Ghana	Alice Nkoroi and Catherine Adu-Asare (FANTA-2 Bridge)	Accra, Ghana	November 25, 2011	University of Ghana, University of Development Studies, GHS/MOH, UNICEF/Ghana, WHO/Ghana, WFP/Ghana, members of the nutrition association
Launch of the Scale-Up Nutrition (SUN) Movement in Ghana	Poster: Overview of CMAM	Amon Neequaye (GHS) and Alice Nkoroi and Catherine Adu-Asare (FANTA-2 Bridge)	Accra, Ghana	December 8, 2011	200 participants, including the First Lady of the Republic of Ghana, MOH, Ministry of Food and Agriculture, Ministry of Women and Children's Affairs, Ministry of Education, GHS, National Development and Planning Commission, CSOs, international and national NGOs, U.N. agencies, USAID/Ghana, Canadian International Development Agency, Japan International Cooperation Agency, Danish International Development Agency, University of Ghana, and other academic institutions



Title of Event	Presentation or Poster Title	Presenter	Location	Date of Presentation	Audience
Getting the Knack of NACS SOTA Meeting	"Building NACS: The view from 60,000 feet"	Tim Quick (OHA)	Washington, DC	February 22, 2012	NACS stakeholder and implementers
Getting the Knack of NACS SOTA Meeting	Guidance for NACS Implementation: Community Component	Phil Moses and Serigne Diene (FANTA-2 Bridge)	Washington, DC	February 23, 2012	NACS stakeholder and implementers