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SUAAHARA II GOOD NUTRITION PROGRAM

YEAR FIVE WORK PLAN

JULY 16, 2020 – July 15, 2021

October 8, 2020

This publication was produced for review by the United States Agency for International Development. It was prepared by Helen Keller International under the terms of cooperative agreement number AID-367-A-16-00006.

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DISCLAIMER:

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The *Suaahara II* Good Nutrition (*Suaahara*) Program is supported by the United States Agency for International Development (USAID) under Cooperative Agreement No. AID-367-A-16-00006.

Suaahara II is managed by:

<p>Helen Keller International (HKI)</p>	
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In partnership with:

<p>Cooperative for Assistance and Relief Everywhere, Inc. (CARE)</p>	
<p>Family Health International 360 (FHI 360)</p>	
<p>Digital Broadcast Initiative Equal Access (DBI-EA)</p>	
<p>Environmental and Public Health Organization (ENPHO)</p>	
<p>Nepali Technical Assistance Group (NTAG)</p>	
<p>Vijaya Development Resource Center (VDRC)</p>	

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ACRONYMS

AKC	Agriculture Knowledge Center
APRO	Asia-Pacific Regional Office
BA	Bhanchhin Aama
CARE	Cooperative for Assistance and Relief Everywhere, Inc.
CB-IMNCI	Community-based Integrated Management of Neonatal and Childhood Illness
CHSB	Community Health Scoreboard
CNF	Community Nutrition Facilitator
COP	Chief of Party
CRC	Consortium Review Committee
DBI EA	Digital Broadcast Initiative Equal Access
DCOP	Deputy Chief of Party
DHIS2	District Health Information System-2
DoHS	Department of Health Services
DQA	Data Quality Assessment
eLMIS	Electronic Logistics Management Information System
ENPHO	Environmental and Public Health Organization
EPRP	Emergency and Preparedness and Response Plan
FC	Field Coordinator
FCHV	Female Community Health Volunteer
FHI360	Family Health International 360
FO	Finance and Operations
FP	Family Planning
FS	Field Supervisor
FWD	Family Welfare Division
GESI	Gender Equity and Social Inclusion
GoN	Government of Nepal
HFMOC	Health Facility Maintenance and Operations Committee
HFP	Homestead Food Production
HFPB	Homestead Food Production Beneficiary
HKI	Helen Keller International
HMG	Health Mothers' Group
HMIS	Health Management Information System
HTSP	Healthy Timing and Spacing of Pregnancies

IEC	Information, Education and Communication
IFA	Iron and Folic Acid
IMAM	Integrated Management of Acute Malnutrition
IMNCI	Integrated Management of Neonatal and Childhood Illness
IPC	Infection Prevention and Control
IPC	Interpersonal Communication
KISAN II	Knowledge-based Integrated Sustainable Agriculture in Nepal
LMIS	Logistics Management Information Systems
LMS	Logistics Management Section
LRP	Local Resource Persons
MAM	Moderate Acute Malnutrition
MER	Monitoring, Evaluation and Research
MIYCF	Maternal Infant and Young Child Feeding
MIYCN	Maternal Infant and Young Child Nutrition
MNF	Municipality Nutrition Facilitator
MoALD	Ministry of Agriculture and Livestock Development
MoFAGA	Ministry of Federal Affairs and General Administration
MoHP	Ministry of Health and Population
MSNP	Multisector Nutrition Plan
MUAC	Mid-Upper Arm Circumference
N&H	Nutrition and Health
NACS	Nutrition Assessment, Counselling and Support
ND	Newcastle Disease
NFSSC	Nutrition and Food Security Steering Committee
NHEICC	National Health Education Information and Communication Center
NHRC	Nepal Health Research Council
NiE	Nutrition in Emergencies
NPC	National Planning Commission
NRH	Nutrition Rehabilitation Home
NSSD	Nursing and Social Security Division
NTAG	Nepali Technical Assistance Group
NuTEC	Nutrition Technical Committee
ORC	Outreach Care
OTC	Outpatient Therapeutic Center
PC	Program Coordinator
PHC	Primary Health Care
PLGHA	Protecting Life in Global Health Assistance

PNGO	Partner Nongovernmental Organization
PPP	Public Private Partnership
PSA	Public Service Announcement
QI	Quality Improvement
RCT	Randomized Control Trials
RDQA	Routine Data Quality Assessment
SAM	Severe Acute Malnutrition
SATH	Self-Applied Technique for Quality Health
SBA	Skilled Birth Attendant
SBC	Social Behavior Change
SSBH	Strengthening Systems for Better Health
STA	Senior Technical Advisor
TIP	Trafficking in Person
USAID	United States Agency for International Development
VDRC	Vijaya Development Resource Center
VMF	Village Model Farm
WASH	Water Sanitation and Hygiene

INTRODUCTION

The *Suaahara II* Good Nutrition Program (*Suaahara II*) consortium presents the year five work plan for the United States Agency for International Development (USAID)-funded *Suaahara II*. Helen Keller International (HKI) was awarded the cooperative agreement on April 1, 2016, following successful design and negotiation with USAID. The implementation period of *Suaahara II* was originally programmed to last 60 months and has recently been extended by 24 months, with a new end date of March 2023.

This updated year five work plan covers the period from July 16, 2020 through July 15, 2021, as required by the cooperative agreement. *Suaahara II* technical, operations and finance managers consolidated intervention activities across the 42 *Suaahara* districts, which are now administratively broken into 389 rural and urban municipalities (3,353 wards). To prepare this new workplan, the staff reviewed *Suaahara II* goals and strategies, the program organizational structure, the results framework and the *Suaahara II* Five-Year Work Plan. In-depth discussions with all consortium partners were held to carefully consider emerging findings from *Suaahara II* datasets and other national Nepal datasets; this informed the prioritization of activities for the year five workplan. Government of Nepal (GoN) priorities and feedback during the workplan meetings, timelines and resource requirements were also considered. Furthermore, joint planning sessions were held with UNICEF and USAID funded projects such as project teams from Knowledge-based Integrated Sustainable Agriculture and Nutrition (KISAN II) and Strengthening Systems for Better Health (SSBH) to foster collaboration and coordination in overlapping districts. Finally, the new context of the Covid-19 pandemic and related lockdowns was taken into account, both because it has required intervention adaptations and new program approaches and also because it has resulted in new multi-sectoral challenges including to health, nutrition, and food security of the population.

Below, we present a summary of *Suaahara II* program activities, organizational structure, management structure and results framework, followed by narrative to describe the activities by thematic area, including cross-cutting activities planned for year five.

PROGRAM DESCRIPTION

Suaahara II works to improve the nutritional status of women and children, particularly in under-served rural areas, of 42 of Nepal's 77 districts. Technically, this will be achieved using a multisector approach with a special emphasis on gender equity and social inclusion (GESI), social and behavior change (SBC) and good governance. Operationally, this will be achieved through our multisector consortium and our partnerships with the GoN, the private sector, and other United States government funded projects in overlapping geographic areas.

In consultation with experts from the government, other USG projects and other agencies working to further implement Nepal's Multisector Nutrition Plan (MSNP), *Suaahara II* activities will drive change across four categories:

1. Health and Nutrition, including water, sanitation and hygiene (WASH)
2. Health Service Quality and Reach
3. Food Production/Security
4. Stronger Governance for Nutrition

Activities across these four areas can contribute to improved nutrition and health behaviors of pregnant and lactating women, their young children, and other household members; increased use of quality nutrition and health services; increased household access to diverse and nutrient-rich foods, including via increased linkages with markets and private sector actors; and the accelerated roll out of the MSNP through strengthened local governance. These outcomes, in turn, help to facilitate long-term shifts at the community (ward and municipality), province and national levels, to improve the nutritional status of women and children in Nepal. The *Suaahara II* intervention strategy is flexible enough to adapt to learnings from monitoring, evaluation and research findings that emerge and are incorporated into program actions on a regular basis. Over the five-year period, *Suaahara II* results aim to shift household, community and service provider knowledge and capacity, and in turn practices, to achieve the goal of improved nutritional status for women and children.

ORGANIZATIONAL STRUCTURE

The organizational structure of *Suaahara II* is shown in Attachment A. *Suaahara II* is headed by the Chief of Party (COP), who is supported by the HKI/Nepal Country Director, as well as the Asia-Pacific Regional Office (APRO) and HKI Headquarters in New York. The Deputy Chief of Party (DCOP) for Programs, the DCOP for Finance and Operations as well as the Senior Technical Advisor (STA) for Nutrition and Monitoring, Evaluation, and Research (MER) report to the COP. These four crucial positions comprise the *Suaahara II* Senior Management Team.

Most *Suaahara II* staff are field based to ensure ongoing assistance, reach and coverage of all programmatic activities in *Suaahara II*'s 389 municipalities. *Suaahara II* technical staff from consortium partners are field-based and managed by a Program Coordinator (PC), experienced in health and nutrition programming. Each field team is made up of technical staff members, based on program priorities for each location, and may include: Nutrition and Health (N&H) Officer; Water Sanitation and Hygiene (WASH) Officer; Homestead Food Production (HFP)/Marketing Officer, as well as a Finance & Operation (FO) Officer. These Technical Officers work closely with a partner non-governmental organizations (PNGO) in their district, who also have full-time staff working on *Suaahara II*: an Administration and Finance Office, who supports a Field Coordinator (FC) to oversee a team of frontline workers, who from Year 5 onwards will be in two cadres: Municipal Nutrition Facilitators (MNF) and Community Nutrition Facilitators (CNF).

PROGRAM MANAGEMENT

Suaahara II key personnel lead the project, with all core team members from all consortium partners operating from the same office in Kathmandu allowing frequent and consistent interaction. Monthly SMT meetings are held to discuss management, operation and implementation issues. Based on program needs, regular meetings are held with program and MER teams to review progress, discuss program implementation issues and prioritize actions for the upcoming month. Likewise, an expanded management team, comprised of all managers and consortium partner focal points meets at least every quarter to review program and financial progress against plans, to share program learning, align plans and discuss management issues.

The *Suaahara II* key personnel meets with the USAID Agreement Officer Representative monthly to review program performance, discuss issues affecting the program, and to receive feedback from USAID regarding program performance.

District teams meet on monthly basis to review progress and adjust plans. Program review meetings are held at the provincial level, bringing together district teams, PNGO staff, and the Kathmandu staff to review progress and revise program activities and approaches, as required.

To foster consortium coordination, harmonize relationships and serve as a forum for knowledge sharing towards continuous quality improvement, HKI formed a Consortium Review Committee (CRC) to review *Suaahara II* progress and discuss key program issues. The COP chairs the CRC, which is comprised of the two DCOPs, STA, and the head of each consortium partner organization (or designated representative). The CRC meets quarterly to review progress and plans and ensure that the program continuously draws on the experience and best practices of each partner.

Suaahara II convenes regular meetings with Government stakeholders including National Planning Commission (NPC), Ministry of Health and Population (MoHP), Ministry of Agriculture Livestock Development (MoALD), Ministry of Federal Affairs and General Administration (MoFAGA), and USAID. This will galvanize support for *Suaahara II*, ensure linkages with GoN programs, enable the sharing of learnings, and increase the ownership and sustainability of program activities.

At Federal level, *Suaahara II* will continue to participate in various federal level forums such as the Nutrition Technical Committee (NuTEC), Family Planning (FP) sub-committee, Female Community Health Volunteers (FCHV) Committee, Integrated Management of Neonatal and Childhood Illness (IMNCI) sub-committee, Reproductive and Child Health Technical Committees of the National Health Education, Information Communication Center (NHEICC), and the NPC-led National Nutrition and Food Security Coordination Committee. These are used as platforms to share updates, coordinate and collaborate between nutrition partners. In the new Covid-19 context, *Suaahara II* also participates in several forums including the Nutrition Emergency cluster.

At the Province and local government level, *Suaahara II* will continue to collaborate with health and non-health (WASH, Agriculture, Livestock, Education) authorities to identify appropriate strategies to improve nutrition and engage in joint planning and monitoring. We will also actively participate in forums such as the Health and Nutrition Emergency Cluster, Nutrition and Food Security Steering Committee (NFSSC) and other thematic committees to enhance coordination, collaboration and support to resolve implementation-related issues.

Suaahara II collaborates on specific activities with KISAN II, SSBH, UNICEF and other USAID-funded projects. These collaborations include joint planning, coordination and monitoring, review meetings and exposure visits for cross learning and sharing. With KISAN II, *Suaahara II* will work closely to support and link Village Model Farmers (VMF), Local Resource Persons (LRP), and Homestead Food Production Beneficiary (HFPB) groups to markets and private sectors. With SSBH program, *Suaahara II* will collaborate on improving quality of maternal and child health services, Primary Health Care (PHC)/Outreach Care (ORC) strengthening, local health governance activities, and SBC activities on health and nutrition including FP.

SUBAWARD MANAGEMENT

In the first quarter of year five, the program finance and grants team will carry out (virtual) refresher training for all partners covering USAID regulatory and financial requirements. As in the first four years of implementation, quarterly reviews will take place for all consortium partners and field based PNGOs to review compliance matters and receive updates on their sub award management. Where required, consortium and local partners will be audited, or their audit report conducted under “The Guidelines for Financial Audits Contracted by Foreign Recipients” will be reviewed, for matters of compliance relevant to *Suaahara II*. To transition smoothly into year five, a new sub award agreement will be signed with all PNGOs after USAID approval by the end of September 2020. In the case of Rupendehi, an RFA will be issued to solicit proposals and to identify a new PNGO for the district. The subaward for the new Rupendehi PNGO will be issued in October 2020.

INTERNSHIPS

In year five, *Suaahara II* will offer five six-month internship positions to provide on-site learning opportunities to build the capacity of Nepali youth, particularly those from marginalized and disadvantaged groups and those who are seeking work experience to gain skills in the development field. Each intern will be assigned responsibilities matching their skills, potential, and interest and will have a staff mentor to assist them to prepare their internship plan as part of the program team and to guide their professional development, including regular reviews and learning sessions. Given the size and complexity of the program, it is anticipated that some interns will be assigned to districts where they can provide support to the field teams, engage in community activities and gain confidence through hands-on experience and technical guidance.

FAMILY PLANNING AND TRAFFICKING IN PERSON COMPLIANCE

In year five, *Suaahara II* will continue to place a high value on adherence to US abortion and family planning (FP) legislative and policy requirements, particularly the Protecting Life in Global Health Assistance (PLGHA) policy and Trafficking in Persons (TIP) compliance requirements. In year five, *Suaahara II* will conduct a refresher orientation to all new program staff including its frontline workers working across the program intervention areas. *Suaahara II* will also continue to regularly monitor GoN service delivery sites and PNGO offices to ensure that compliance requirements are met, including its proper documentation and response procedure. *Suaahara II* will reinforce the response procedure for potential non-compliance through continuous capacity building of field-based staff. *Suaahara II* will also ensure that detailed FP compliance files with all documentation required by the FP Compliance Plan, such as copies of all relevant laws and policies; compliance trainings/orientations related presentations and handouts; attendance sheets from the trainings/orientations; signed monitoring checklists used during field visits and reports from monitoring visits, are maintained both at the field and central level offices.

Suaahara II will also ensure adherence to TIP compliance requirements through regular monitoring and awareness raising among employees, interns, consultants, sub-recipients and other agents (suppliers, contractors). *Suaahara II* will distribute the TIP and FP informed choice posters to its intervention areas as needed.

RESULTS FRAMEWORK

Suaahara II has four primary results:

Intermediate Result 1: Improved Household Nutrition and Health Behaviors

Intermediate Result 2: Increased Use of Quality Nutrition and Health Services by Women and Children

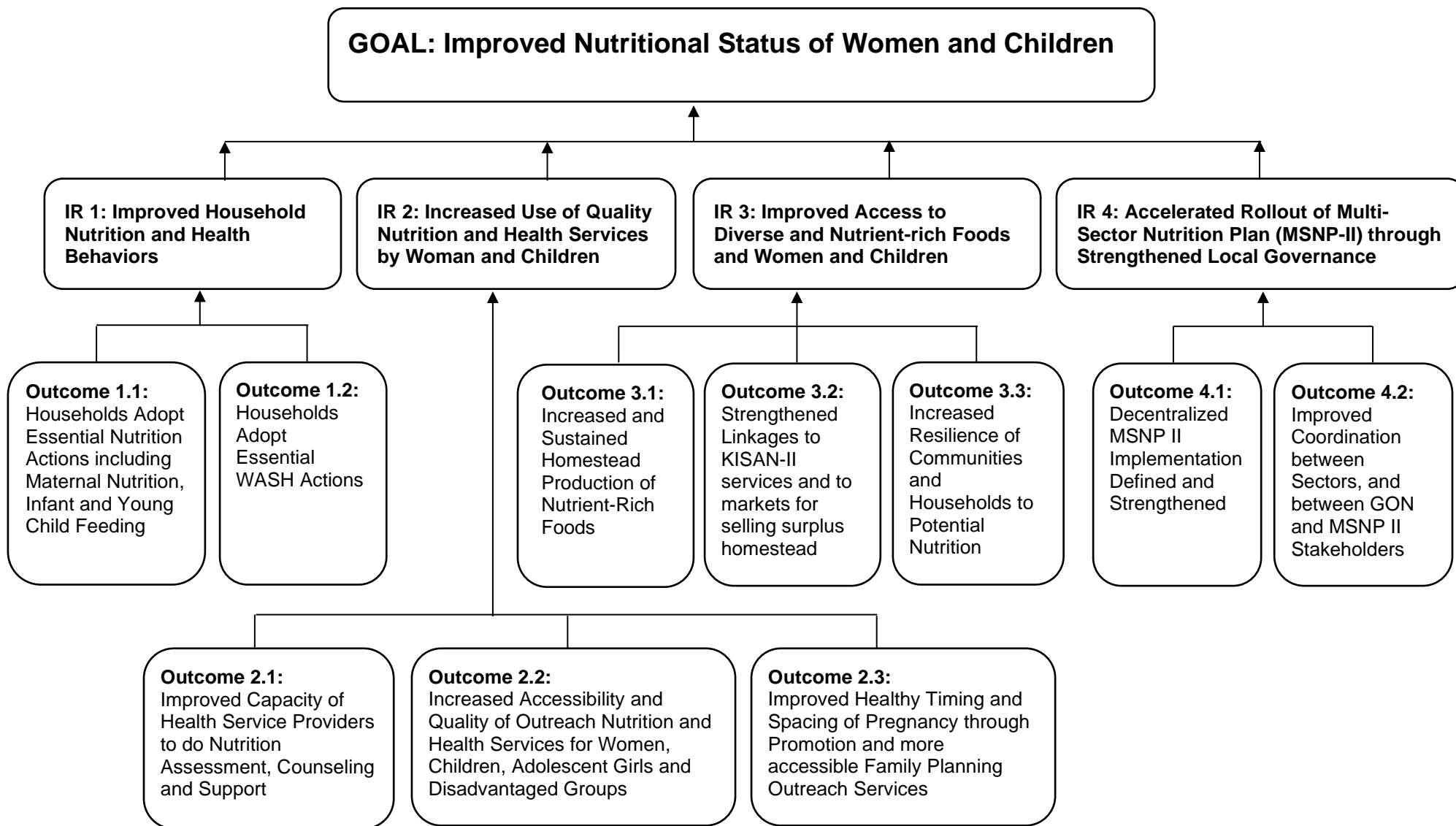
Intermediate Result 3: Improved Access to Diverse and Nutrient-Rich Foods by Women and Children

Intermediate Result 4: Accelerated Roll-Out of Multisector Nutrition Plan through Strengthened Local Governance

In addition to the above results areas, *Suaahara II* has several cross-cutting themes that include: GESI; SBC; public private partnerships (PPP); monitoring, evaluation and research (MER); and disaster preparedness and Emergency and Preparedness and Response Plan (EPRP).

A graphic of the Results Framework is below in Exhibit A.

Exhibit A – Updated Results Framework



Gender Equity and Social Inclusion, Social and Behavior Change, Nutrition Governance, Monitoring and Evaluation and Research

YEAR FIVE IMPLEMENTATION OVERVIEW

INTERMEDIATE RESULT 1. IMPROVED HOUSEHOLD NUTRITION AND HEALTH BEHAVIORS

Outcome 1.1 Households Adopt Essential Nutrition Actions Including Maternal Infant Young Child Nutrition (MIYCN) Practices

In year five, *Suaahara II* will continue both household and community activities, conducted in the first four years to promote optimal maternal and child nutrition practices, prioritizing existing GoN platforms and maintaining safety in the COVID-19 context. *Suaahara II* frontline workers will engage in Interpersonal Communication (IPC) by conducting integrated nutrition home visits and tele-counseling, with a focus on households with high-risk women and young children to counsel and encourage mothers and family members using job aids and IPC materials. This will also be used as an opportunity to increase demand for the 60 GoN health contacts points during the 1,000-day period. In coordination with FCHVs, health service providers and using different platforms, *Suaahara II* will continue to identify new 1000-day households for proper counselling, referral and follow up.

Suaahara II will continue to coach FCHVs to lead high-quality health mothers' group (HMG) meetings, including identifying new pregnancies and referral for appropriate services, early identification and referral of sick children, SAM/MAM case referral for treatment and follow-up, celebration of key life events for pregnancy, delivery, and when the child turns 6 months of age, as well as key life events now for the child's 1st and 2nd birthdays, and food demonstrations in hard to reach/disadvantaged communities using the monthly calendar of 10 different integrated nutrition discussion topics: 1) Social mapping (mapping of 1000-day HHs), 2) disaster preparedness and risk management, 3) sick child feeding, 4) breast feeding, 5) sanitation and water treatment, 6) complementary feeding, 7) animal source foods, 8) food diversity and homestead food production, 9) gender and social inclusion, 10) growth monitoring and promotion 11) healthy timing and spacing of pregnancies, and 12) good governance and local level planning. FCHVs will be supported to continue to counsel 1000-day households to adopt ideal behaviors, encourage regular participation in HMG meetings, motivate them to listen to *Bhanchhin Aama* (BA). FCHVs will continue active screening of children for malnutrition during HMG meetings and counsel caretakers using wheel cards, as well as refer the family to appropriate facilities for treatment and regular follow-up after treatment. Given the low uptake of GMP to date, FCHVs will also be encouraged to promote uptake of GMP participation and to collaborate with local governments and local health workers on identifying ways to increase GMP, perhaps by linking it to HMG meetings, SATH activities, and so on in the community. *Suaahara II* will also support and monitor FCHVs in enrolling and recording newly pregnant women in their register and using their monthly planner.

Suaahara II will continue to support the Vitamin A supplementation campaign by raising awareness among households and providing monitoring support during the supplementation days across all intervention areas. Given the COVID-19 context, all safety measures and precautions, including use of PPE (e.g. masks, sanitizer) and social distancing will be used.

Suaahara II will also continue to provide technical assistance and quality assurance of services provided by health workers and FCHVs to ensure continuity of and improve the quality of maternal and child nutrition services, including MIYCN and Integrated Management of Acute Malnutrition (IMAM) services. *Suaahara II* will also focus on ensuring IYCF-E integration into nutrition services. *Suaahara II* will focus on supporting the government to develop and implement technology solutions, such as a mobile-based application and website, to improve delivery of nutrition services. *Suaahara II* will provide technical support and advocacy with local governments for continued capacity building of newly recruited health workers and FCHVs on MIYCN/MCH/FP.

Suaahara II frontline workers will also focus on demand generation for services through active nutrition screening and counselling during household visits and community events. Considering minimizing the impact of COVID-19, *Suaahara II* will support the FWD/MoHP to pilot test the family mid-upper arm circumference (MUAC) approach in two districts: Banke and Dhading. This pilot will take approximately 6 months; full rollout will be possible once the pilot is complete. In this approach, mothers/caretakers' capacity will be built on how to screen their children at home for early detection of malnutrition, so that they can be taken to health facilities for treatment and IYCF counselling. For this, training will be hands-on in small groups and/or individual household visits, using instructional videos and job aids, in collaboration and coordination with FCHVs, health facilities and municipalities. *Suaahara II* will also document the learnings from the pilot and share with GoN for further scale up the approach.

In year five, *Suaahara II* will design new IPC materials, job aids, a "how to video" on Family MUAC and take-home messages on maternal diet and nutrition. After field testing, these new materials will be used in different community platforms and during household visits. The popular "letter to father" will be widely distributed; health workers will give it to the family during their first ANC visit to health facilities to sensitize fathers on their roles and responsibilities during the 1000- day period.

Suaahara II will also work with the Safe Motherhood Section of the Family Welfare Division (FWD) to incorporate nutrition, especially maternal nutrition and breastfeeding components , into the safe motherhood program and to build capacity of the Skilled Birth Attendant (SBA) mentors/coaches to promote lifesaving MIYCN practices such as breastfeeding, complementary feeding, maternal nutrition, and supplementation of iron-folic acid (IFA) at birthing centers and health facilities.

The *Suaahara II* team in Kathmandu will continue to facilitate virtual meetings with N&H Officers to continuously provide them support and feedback, encourage them to share their experiences and challenges, and reinforce details in implementation guidelines.

Outcome 1.2 Households Adopt Optimal WASH Behaviors

In year five, WASH messaging will continue to be delivered in all *Suaahara II* intervention areas through *Bhanchhin Aama*, Public Service Announcements (PSAs) and IPC, with a focus on hand washing at the 6 critical times and treatment of water before drinking, as well as food hygiene. *Suaahara II* will gradually phase-out field level initiatives on total sanitation campaign but will advocate with the GoN, particularly at the municipal and provincial levels, to continue and scale up the campaign considering the importance of these types of investments for prevention of malnutrition and diarrheal diseases. This includes encouraging households to adopt WASH behaviors including hand washing with soap and water, safe drinking water, the importance of having a toilet, regular use and cleanliness of the toilet, safe disposal of baby's excreta, menstrual hygiene, food hygiene, clean indoor air, and clean household premises.

In year five, *Suaahara II* will intensify its advocacy efforts to local level WASH committees to improve to secure Infection Prevention and Control in health facilities and communities such as installation of hand-washing points. Likewise, *Suaahara II* WASH officers will provide technical support visits to health facilities and advocate with municipality leaders and health facility maintenance and operations committees (HFOMCs) to improve WASH facilities and services in the health facilities. *Suaahara II* will also support health workers and FCHVs to provide counselling on WASH behaviors to 1000-days household members through the relevant health platforms.

The *Suaahara II* team in Kathmandu will continue to facilitate virtual meetings with WASH Officers to continuously provide them support and feedback, encourage them to share their experiences and challenges, and reinforce details in implementation guidelines.

INTERMEDIATE RESULT 2. INCREASED USE OF QUALITY NUTRITION AND HEALTH SERVICES BY WOMEN AND CHILDREN

Outcome 2.1 Improved Capacity of Health Service Providers to Conduct High Quality NACS

In year five, *Suaahara II* will continue to provide technical assistance and quality assurance to ensure quality nutrition and health service provision and uptake of IMAM services including management of the nutrition information system at federal, provincial and local levels, in this new post-Covid19 context. *Suaahara II* will continue to mentor and guide health workers and FCHVs to prevent and manage malnutrition among children under five, adolescent girls, and pregnant and lactating women. *Suaahara II* staff will refer for treatment and follow-up regularly with severe/moderate acute malnourished (SAM/MAM) children and high risk 1000-day women to ensure treatment compliance and service-seeking and support FCHVs to update information in their registries. *Suaahara II* will also provide technical support to FWD to update IMAM training packages, to develop the NRH treatment protocol, and to develop guidelines on quality improvement for nutrition services in collaboration with other key nutrition partners. *Suaahara II program* will also continue its advocacy on strengthening nutrition assessment and counseling support /integrated management of acute malnutrition (NACS/IMAM) related referrals and follow-up systems from communities to health facilities. *Suaahara II* will also continue to conduct review meetings with municipal leaders, IMAM focal persons and Health Facility in-charges from outpatient therapeutic centers/nutrition rehabilitation homes (OTCs/NRHs) in its IMAM program districts to address implementation challenges and advocate with them on the importance of treating malnourished children in a timely manner. *Suaahara II* will support GON to scale up the IMAM program in two districts (Surkhet and Dailekh) and continue to advocate with the provincial and local governments to allocate funds for capacity enhancement of new recruited health workers and FCHVs in IMAM program districts. *Suaahara II* will coordinate with municipality, provincial, and central level government authorities and collaborate with other key nutrition partners to ensure IMAM related supplies, including Ready-To-Use Therapeutic Food, for identification and treatment of malnourished children are readily available.

Suaahara II will continue to mentor and coach health workers and FCHVs to address gaps in their knowledge and skills and in turn, strengthen nutrition and health services. *Suaahara II* will continue efforts to improve the quality of Health Management Information System (HMIS) related to nutrition and community-based integrated management of neonatal and childhood illness (CB-IMNCI) indicators through applying Routine Data Quality Assessment (RDQA).

Suaahara II in partnership with FWD will support the continued piloting and documentation of quality improvement (QI) demonstration effort for nutrition services in four municipalities of Rupandehi. In addition, *Suaahara II* will also scale up this QI effort in six municipalities of Kailali.

Suaahara II will also disseminate job aids to the health workers and SBCC materials to the community-level frontline workers and mothers/caretakers of children with SAM in IMAM districts, as possible.

Outcome 2.2: Increased Accessibility and Quality of Outreach Services for Women, Children, Adolescent Girls and Disadvantaged Groups

Suaahara II increases accessibility and quality of health and nutrition services through both demand creation and addressing supply level constraints (e.g. improving knowledge and skills of service providers, improving quality of counseling, addressing equipment and materials gaps). In year five, *Suaahara II* will organize events with Family Welfare Division (FWD) and Nursing & Social Security Division (NSSD), National Health Education Information and Communication Center (NHEICC) at MoHP, Department of Health Services (DoHS) and others so that lessons learned and results from *Suaahara II* datasets can be shared with key government stakeholders. Similarly, *Suaahara II* Kathmandu team and PC-Province Focal Points will continue to provide technical support at the provincial, district, and local levels, particularly contributing to the review and planning events in 6 provinces, 42 districts, and municipalities.

Suaahara II will procure and distribute nutrition and health equipment to scale up IMAM program in two districts and pilot Family MUAC in two districts as per the request of MoHP/FWD and replenish equipment in other *Suaahara II* districts, as needed. *Suaahara II* will continue to provide technical and logistic support to FWD and NSSD to improve CB-IMNCI and MNH services, including providing essential IMNCI and nutrition materials and printing treatment protocol and training materials to ensure uninterrupted services at health facilities and outreach clinics. *Suaahara II* N&H Officers will increase health coaches and service providers awareness on the new treatment protocol for pneumonia during regular meetings, workshops and during health facility visits.

Suaahara II will facilitate joint monitoring and technical support visits from DoHS, FWD, NSSD, NHTC and province officials to the district and municipalities for quality assurance and to motivate service providers. *Suaahara II* will also facilitate planning and quality implementation of the FWD's annual work plan (red book) that covers RDQA for nutrition and CB-IMNCI services, onsite coaching including developing coaches using local funds and operationalizing the *Suaahara II* initiated tools and techniques through equity and access activities. In 2017, FWD started the equity and access approach to benefit mothers and children within the package of CB-IMNCI. This followed the SATH technique to cover people from hard to reach areas. FWD, with technical input from SII, has developed separate guidelines that are scaled up in 77 districts. Technical assistance to the federal, province, district and local levels, including health facilities, will ultimately contribute towards system strengthening for quality health and nutrition services targeting mothers and children.

Suaahara II will continue its work with health facility staff and frontline workers to review and follow up community health score board (CHSB) and self-applied technique for quality health (SATH) implemented previously. *Suaahara II* technical officers will encourage local governments and health facilities to continue and expand SATH and CHSB in additional HMGs and health facilities wherever possible from local funding. SATH is a social mapping tool designed to be used in HMG meetings to enable women in a *community* to analyze the health status and service seeking behavior of their community. It ensures greater participation of 1000-day mothers in the regular HMG meetings, especially those from marginalized communities. The mothers indicate all the major health and nutrition indicator in the map and regularly follow up in the HMG meetings on these topics. CHSB complements the SATH approach, as a technique to improve the capacity of the Health Facility Operation and Management Committee (HFOMC), which further helps to strengthen the quality of service delivery from facilities. This involves an interactive meeting among service providers, HFOMC and service users from the community to review/score and follow-up on these scores, to come together to strengthen the services provided from the health facilities.

Outcome 2.3: Improved Healthy Timing and Spacing of Pregnancy (HTSP) through Promotion and More Accessible Family Planning Services

In year five, *Suaahara II* will continue to share essential health and nutrition commodities including FP stock-out data, from the *Suaahara II* monitoring system, on a quarterly basis with GoN and USAID stakeholders and support the implementation of electronic logistics management information systems (eLMIS) in the logistic management section (LMS), DoHS designated districts that are overlapping with *Suaahara II* through regular health facility monitoring visits by Kathmandu and district-based technical staff.

Suaahara II will also integrate monitoring and follow-up for quality FP services and compliance with USAID's FP requirements and statutory rules and regulations during any health facility on-site coaching visits conducted by *Suaahara II* Kathmandu and district teams. *Suaahara II* will also follow-up remotely with the LARC service providers trained in years 2 and 3.

In year five, *Suaahara II* will continue its efforts to improve FP knowledge, particularly HTSP key messages among frontline workers and 1000-day household members using diverse *Suaahara*

// platforms including home visits by the frontline workers, community events, *Bhanchhin Aama* and text messages. In addition, *Suaahara II* will continue to promote FP-focused Interactive Voice Response (IVR) messages through these SBCC activities to bolster demand for FP services among 1000-day households.

In year five, *Suaahara II* staff will also provide technical support to FWD for federal and provincial level review and planning meetings on FP/RH and adolescent sexual and reproductive health (ASRH), based on request of FWD. *Suaahara II* central and district staff will participate regularly in the federal and provincial level virtual or in-person coordination meetings among the GoN stakeholders and partners to discuss on the COVID-19 impacts on MNCH/FP services and design interventions jointly with other stakeholders to support the GoN's response to the COVID-19 pandemic. In the context of COVID-19, *Suaahara II* technical staff will continue regular phone follow up with health facilities to ensure continuity of MNCH/FP services and regular supply of essential commodities across the program districts.

Finally, *Suaahara II* will disseminate existing FP-related job aids and SBCC materials including FP informed choice posters to the GoN's health facilities, based on demand.

INTERMEDIATE RESULT 3. IMPROVED ACCESS TO DIVERSE AND NUTRIENT-RICH FOODS BY WOMEN AND CHILDREN

Outcome 3.1: Increased and Sustained Homestead Food Production (HFP) of Nutrient-Rich Foods

Suaahara II will facilitate a food security and nutrition advisory meeting with federal (Ministry of Agriculture and Livestock Development, NPC) and provincial government stakeholders, (such as Ministry of Land Management, Agriculture and Cooperatives, Ministry of Social Development, as well as other stakeholders such as USAID-funded programs (e.g. KISAN II). These review meetings will be to promote nutrition-sensitive agriculture investment, especially at the municipal- and provincial-level to ensure sustained and resilient food production systems in *Suaahara II* HFP communities. This will entail sharing findings from *Suaahara II* monitoring data as well as program materials (e.g. success story, video documentary, training manuals, technical/implementation briefs). During federal and provincial meeting, *Suaahara II* will continue advocacy of with emphasis on securing better policies and programs for small holder's access to agricultural supplies (e.g. improved seeds, fertilizers, irrigation, vaccine, chicks etc); gender friendly equipment and technology (e.g. power tiller, thresher, hatching machine, solar dryers etc.); reliable extension services and output markets. Furthermore, the *Suaahara II* team will develop videos on HFP models, focusing on LRPs, to support advocacy with national and provincial level agriculture and livestock government stakeholders regarding the need for community level agricultural and livestock frontline workers.

Suaahara II will increase municipality-based agriculture and livestock technical coordinators' capacity to plan and scale-up nutrition sensitive agriculture, in collaboration with Nutrition and Food Security Steering Committee at municipal level, Agriculture Knowledge Centers (AKC) and Veterinary Expert Centers through providing a two-day training on nutrition sensitive agriculture programming. This training is customized as per the district context with the major objective of increasing capacity of municipal agriculture and livestock coordinators in designing nutrition sensitive agriculture programs and mainstreaming a nutrition perspective into agricultural programs.

In year five, *Suaahara II* will prioritize technology based remote technical support (such as mobile based phone follows up, SMS, social media-Facebook messenger groups) to continue to support HFP households, VMFs, GESI champion VMF couples, and LRPs, in addition to in person follow-up and onsite coaching visits, when possible. *Suaahara II* will increase demand among 1,000-day households, VMFs and local resource persons (LRPs) for local agricultural services by sharing information about the government's new agriculture-related programs and opportunities (e.g. poor farmers social protection package, soft loan, land bank, insurance, input subsidies) through SMS and tele counseling. Mass media and other approaches will be used to raise awareness and

demand for Newcastle Disease (ND) vaccines, so that they can minimize risks of ND in poultry and its potential impacts on food security and nutrition. *Suaahara II* MNFs and CNFs will continue to connect new 1,000-day mothers with VMFs and HFP groups, where possible using integrated Suaahara II platforms (HMG meeting, food demos, celebration of key life events) who are in turn linked by the VMF with the local agriculture and livestock extension workers, where available.

Given the effect of COVID-19 on local food systems, *Suaahara II* will provide vegetable seeds as a critical input to selected 1000-day households, VMFs/LRPs, HFP group members to support them to continue food production that was affected as a result of COVID-19, in coordination with Agriculture Knowledge Centers, Nutrition and Food Security Steering Committees, and municipalities. Seed distribution will prioritize households within disadvantaged areas of *Suaahara II* districts who are severely food insecure, of lower socio-economic status, have limited access to agrovets/agri-input supply chain, and have lost standing crops and vegetable seeds due to floods and landslides. In addition, *Suaahara II* will reinforce message of importance of seed saving and producing seeds of at least self-pollinated vegetables at household level to increase sustainability and minimize seed inaccessibility, using multiple platforms such as HFP group meetings, VMF network meetings, SMS and tele-counseling. During VMF network meetings, *Suaahara II* will also explore the possibility of a seed production of nutrient-rich vegetable initiative at semi/commercial scale to support potential VMFs/LRPs to establish them as local seed producers through linkages support with seed companies and agro-vets.

The *Suaahara II* team in Kathmandu will continue to facilitate virtual meetings with HFP/M Officers to continuously provide them support and feedback, encourage them to share their experiences and challenges, and re-enforce details in implementation guidelines.

Outcome 3.2: Increased Income from Homestead Food Production

Suaahara II will continue to support the strengthening of VMF networks established in years 2 and 3 in core+ areas as a platform to create demand related to sustained and increased food production for family nutrition and enhanced livelihoods with local private sector actors (e.g. agro-vets, cooperatives, agriculture traders) and government stakeholders (agriculture/livestock). During the network meeting, updates on government programs and plans will be shared and VMFs will learn mechanisms and procedures to obtain government resources through direct interaction with service providers and program planners. Through the network, VMFs will advocate with municipality officials to invest in local open-air markets (haat bazaars), contract farming (buy back guarantee) and collective marketing to build market opportunities for surplus HFP in remote areas. GESI champion VMF couples will motivate network members to disseminate GESI topics (such as the importance of effective communication between partners, joint decision making, women's leadership, the unpaid labor of women, and the sharing of workload among all family members) into HFP groups.

Additionally, *Suaahara II* will coordinate with KISAN II, in overlapping 23 districts, to enhance VMF business skills for advanced business literacy opportunities. Furthermore, *Suaahara II* will collaborate with KISAN II to link VMFs and potential HFP group members with private sector entities (e.g. KISAN II grantees particularly agro-vets, seed cooperative/companies, vegetable traders, cooperatives etc) for market and value chain opportunities that will improve production, post-harvest storage and processing. VMFs/LRPs/ HFP beneficiaries will be linked to KISAN II grantees where they can approach for micro-financial services (e.g. loan, saving credit etc).

Suaahara II will provide trainings on savings, credit, and group mobilization to select VMFs and HFP group members in four districts (Surkhet, Pythan, Dhading, and Darchula) to increase their capacity and facilitate enhanced agri-entrepreneurship development. These groups will be encouraged and supported to register their HFPB group with the municipality to gain access to government opportunities as well. This limited opportunity will be focused on communities with high levels of poverty and disadvantaged castes (e.g. dalit/Muslim populations).

In year five, *Suaahara II* will continue its follow-ups with VMFs/LRPs and HFPB group members especially those who have been trained and are working to enhance their skills on vegetable specialization, poultry breeding, group management, saving credit, business plan and agricultural marketing through in person visits, phone calls and social media FB groups. *Suaahara II* frontline workers will use the 'garden to market' toolkit to counsel VMFs and HFPB group members during the in-person follow up visits to VMFs households. The onsite coaching visits focus will be on improving skills related to understanding and analyzing the small-scale producers' operating environment for product-specific local value chains.

Outcome 3.3: Increased Resilience of Communities and Households to Potential Nutrition Shocks

Increasing resilience is an approach that is applicable across all four of *Suaahara II*'s intermediate results areas and needs to be long term and process oriented. *Suaahara II* will continue to lobby and advocate with local governments for integrated nutrition programming by targeting vulnerable 1000-day households and communities with nutrition, health, WASH, food security interventions to reduce undernutrition. The MIYCN package of *Suaahara II* including nutrition in emergencies (NIE) to FCHVs and health workers supports the development of a skilled and trained cadre for screening of nutrition status using mid-upper arm circumference (MUAC), counseling and management support to community during emergency. Many *Suaahara II* activities, such as the registration of homestead food production beneficiaries (HFPB) groups, stimulating VMF business and linking 1,000-days women producing surplus with markets where possible to earn income are agricultural-based *Suaahara II* activities that indirectly promote resilience to nutrition shocks as they help communities better prepare to cope with future shocks and uncertainties.

Furthermore, in year five, *Suaahara II* will follow up and endorse ward-level Emergency Health and Nutrition Contingency Plans prepared in years 3 and 4 with a focus on ensuring that nutrition-sensitive resilience has been integrated throughout the plans. Also, mounting evidence shows that rural food systems and food and nutrition security are vulnerable to climate change and natural disasters, as well as pandemics and other emergencies. *Suaahara II* will support VMFs, LRPs, and HFP households in Core+ areas in building resilience through the promotion of government initiated climate smart food system (e.g. tunnel agriculture, solar water irrigation, drip irrigation, improved food processing and quality storage systems, early warning and market information based cropping and harvest planning, crop and livestock insurance). Climate Smart Agriculture is not a one-size fits-all set of practices to be adopted by every household. *Suaahara II* will work closely with local and provincial government to identify context, manage risks and support community to adopt effective climate change adaptation strategies. *Suaahara II* will also link households with livelihood opportunities in collaboration with local government. *Suaahara II* will continue to advocate for nutrition sensitive resilience strategies, working closely with municipal and provincial governments to identify and scale up context specific climate smart agriculture and other resilience activities by leveraging local resources.

Suaahara II will also continue to follow up VMF networks' advocacy on access to local government technical and financial resources that allow them to better prepare for future shocks and uncertainties. *Suaahara II* will support VMF networks to assess vulnerability and build community capacity to minimize adverse effects of climate change and natural hazards on livelihoods, food production, and nutrition. During VMF network meetings, technical staff of *Suaahara II*, in coordination with municipal leaders and agriculture and livestock technicians, will reinforce the community resilience building activities initiated in years 3 and 4 of *Suaahara II* using the resilience job aid and garden to market booklet.

Suaahara II frontline workers (MNFs/CNFs) will attend HFPB group meetings to register their groups at municipality to access inputs and services and will also continue to reinforce and expand the cultivation of drought-resilient crops (e.g. kangkong, orange fleshed sweet potato, cowpea, brinjal, amaranths, pumpkin, asparagus, beet root, drumstick etc.).

INTERMEDIATE RESULT 4. ACCELERATED ROLLOUT OF MULTISECTOR NUTRITION PLAN THROUGH STRENGTHENED LOCAL GOVERNANCE

Outcome 4.1 Decentralized Multisector Nutrition Plan II (MSNP II) Implementation Defined and Strengthened

In year five, *Suaahara II* will continue to support the decentralized roll-out of MSNP II and will also promote GoN accountability and ownership, in part by incorporating its integrated nutrition-related activities in the GoN's annual workplans. The *Suaahara* governance team will continue to work closely with local governments to ensure the sustainability of program inputs and impacts after the program ends.

In year five, *Suaahara II* will continue to facilitate the regular functioning of provincial and municipal level NFSSC meetings to ensure the MSNP is institutionalized at local levels. *Suaahara II* will continue to advocate with the municipality/ward level NFSSC to conduct quarterly meetings and provide technical support to municipal level sectoral coordinators (health/WASH/livestock coordinators) to develop data driven joint plans of action. Specifically, the action plans created during the *Suaahara II* led sustainability workshops in year four will be followed-up on during year five NFSSC meetings. As per the MSNP guidelines, the NFSSC should meet quarterly where several agendas items on improving nutrition in their municipalities are discussed. *Suaahara II* technical teams and frontline workers advocate with municipality/ward level NFSSCs to conduct quarterly meetings and provide technical support to municipal sectoral coordinators (health/WASH/livestock coordinators) to develop data driven joint plans of action. Furthermore, *Suaahara II* will encourage municipal stakeholders to integrate nutrition indicators in their regular monitoring system as well as in their periodic and annual plans, support to analyze the data and continue support to strengthen local government capacity and ensure the proper implementation of these plans, conduct regular NFSSC meeting to review the progress and systematic documentation of the findings. *Suaahara II* will continue providing technical and management support to plan and implement nutrition-related activities as per the leveraged budget and commitment from municipality governments for improving the nutritional status of 1,000-day women and children.

In addition, *Suaahara II* will coordinate with stakeholders to encourage participation in the government's local level planning processes and encourage community level groups (such as civil society organizations, men and mother's groups, farmers groups, village model farmers, child clubs, local NGOs, cooperatives, private organizations) and elected representatives to identify nutrition-related issues, needs and priorities in their settlement, wards and municipalities.

Outcome 4.2 Improved Coordination between Sectors and between GON and MSNP II Stakeholders

Suaahara II will continue to work jointly to support municipalities to organize reviews and prepare regular updates during the committee meetings and sectoral reviews, as well as sharing best practices regularly with partners and stakeholders at all levels. In year five, the thematic teams will continue to fill federal and provincial level requests for technical support for the development of guidelines (integrated nutrition related, MSNP), strategy, and procedures, as per needs identified need at both levels. The Kathmandu *Suaahara II* team will continue to provide technical and financial support to federal and provincial level GoN activities (e.g.: NUTEC, NFSSC meetings, thematic sub-committees, MSNP-II MTOT for NFSSC members, workshops). *Suaahara II* also supports the SUN joint assessment meeting, which is a country level assessment where all MSNP partners work together to review progress, prepare a country status report and submit it to the SUN secretariat.

Suaahara II will also facilitate meetings with other development partners such as UNICEF, WFP, Action Against Hunger, as well as USAID-projects such as KISAN II, SSBH, and Swachchhata. For this, *Suaahara II* learnings from its field experiences and monitoring and research activities will be shared to further generate discussion and enable collaborative decision-making during *Suaahara II* and beyond.

Lastly, in municipalities where the sustainability workshop did not take place in year four (primarily due to Covid-19 and the related lockdown), *Suaahara II* district-based staff will conduct sustainability workshops during year five, in close coordination municipality stakeholders from various government sectors and existing EDPs.

Sustainability

At the outset of *Suaahara II*, a key agreement among the GoN DoHS, USAID and *Suaahara II* was that some portion of the program's nutrition-related interventions would be delivered through the health system. With the 2017 government restructuring and further consideration, the sustainability strategy now focuses on rural municipalities given the devolution of power and authority to the local level. *Suaahara II* will continue to provide support to help municipalities maintain high standards for health and nutrition services in their communities. Furthermore, the following factors have been identified as factors to guide the *Suaahara II* sustainability efforts:

- Improved knowledge and skills among households ensures that outcomes are sustainable, which makes the demand for programmatic inputs unnecessary. For example, if handwashing with soap and water at critical times becomes habitual, the need for SBC efforts on this goes away. *Suaahara II's* primary efforts have been at the household level with an aim to improve ideal health, nutrition, WASH, and nutrition-sensitive agriculture practices and change social norms so that optimal practices became more of the norm throughout the life of the project. Additionally, the strengthening of FCHV led HMGs via SATH and other programmatic interventions have increased utilization of health and nutrition services for current and future families in intervention communities.
- *Suaahara II* frontline workers such as CNFs and peer facilitators are mothers from the community; if they feel empowered and involved in changing their communities this can have ripple effects long after *Suaahara II*. These individuals have been trained, oriented, and coached for several years on nutrition-related themes and this new knowledge and the skills gained will be permanent in the communities.
- Capacity building of service providers' knowledge and skills is an important part of ensuring sustainability of quality services in communities and is why *Suaahara II* has worked closely with GoN health and non-health service providers. Additionally, *Suaahara II* strengthens community level platforms to ensure sustainable service delivery including ensuring that local suppliers provide affordable WASH products, VMFs and local breeders provide nutrient-dense foods including animal source foods.
- Strengthening local governance is a key strategy to support scaling up improvements in nutrition. Since local government bodies have substantial powers for planning and programming as well as access to resources. *Suaahara II's* systematic engagement at national, provincial, municipal, and ward level are intended to build awareness, skills, and motivation to prioritize integrated nutrition, including allocating and utilizing local resources for nutrition-specific and nutrition-sensitive investments.

Data efforts in *Suaahara II* are focused on "what works", "how", and "why" and concentrated effort is invested into presenting this at local, national and global levels so that an evidence based is built around which activities can cause change; this also helps to ensure sustainability of *Suaahara II* approaches.

ADOLESCENTS

Suaahara II will continue to support the GoN to scale-up adolescent Iron and Folic Acid (IFA) program, as the GoN scales-up these efforts globally, in 22 of *Suaahara II's* 42 districts through an orientation to health workers and FCHVs on adolescent IFA supplementation. Additionally, *Suaahara II* will provide technical support to 389 municipalities to build capacity of teachers and

health post in-charges on adolescent IFA supplementation and continue to ensure compliance of IFA consumption and deworming tablets among adolescents and to improve recording and reporting.

Additionally, *Suaahara II* will collaborate with USAID Advancing Nutrition team to finalize the Integrated Adolescent Package materials, improving the delivery mechanisms, approaches and activities based on field learnings as to which ones were most appropriate and engaging for studies. *Suaahara II* will also synthesize quality assurance and monitoring findings gathered during previous years' implementation to document learnings in 84 secondary schools in *Suaahara* Core+ areas of 4 districts (Bardiya, Dailekh, Nawalparasi-East and Nawalparasi-West). The specifics of revisions made to the content and delivery method of the package, based on lessons learned during rolling out the integrated package will be documented and disseminated to stakeholders in Nepal at federal, provincial and local levels and globally to inform adolescent programming beyond *Suaahara II*.

SOCIAL AND BEHAVIOR CHANGE (SBC) AND EXPANSION OF DIGITAL TECHNOLOGY

In year five, some field-based staff will be phased out, which means there will be a reduction in the number of home visits and community events conducted. Mass media and mobile technology interventions, on the other hand, will continue and expand with new channels and mediums for more effective SBC. The mass media effort, primarily the *Bhanchhin Aama* program and its call-in component, will continue. This includes localized production, now by 13 district-level FM partner stations, and airing on radio stations throughout intervention areas in different languages. Additionally, a centrally produced radio program is broadcast nationally by Radio Nepal National Network. and Kantipur FM. Production and broadcasting of Bhojpuri series will start this year, to complement the series in Nepali, Awadhi, and Doteli. A participatory design document workshop will be organized to develop *Bhanchhin Aama* episode specific guiding document for the development, under the leadership of NHEICC and other stakeholders and based on the evidence and behavioral priorities and needs for designing of the radio series. A review and refresher training will be organized for *Bhanchhin Aama* localized version production team including the content contributors. Additionally, SBCC orientation and content designing workshop will be organized targeting local journalists to encourage them to design and develop SBCC content for their media outlets.

Furthermore, to continue to address the changing demographic shift - from rural to urban and increased access to information and smart phones, the use and promotion of social media, especially Facebook and YouTube, will be continued in year five to enable *Suaahara II*'s reach to continue to grow, including to reach family members who have migrated out of Nepal but have access to the internet. Social media outreach will continue with a particular focus on engaging younger 1000-day household members and adolescents.

Suaahara II will also design and broadcast various public service announcements in multiple languages to promote listenership to *Bhanchhin Aama* as well as key health and nutrition related messages including the importance of and details regarding distribution of Vitamin-A and critical IYCF in emergency information. Similarly, *Suaahara II* will continue to distribute diverse promotional materials.

Suaahara II will establish partnership with local TV stations/cable networks, particularly in the *terai* districts of Province-5 where coverage of interventions has been low to date, to design, produce and broadcast video content/episodes. *Suaahara II*, in collaboration with the NHEICC, will broadcast Sesame Workshop videos via national and local television channels. The videos produced by Sesame promote hand washing and other ideal behaviors among young children to prevent COVID-19 transmission in the community.

The mobile technology component of *Suaahara II* is primarily text messages to each 1000-day household with a registered mobile phone. This will continue with key information on nutrition, maternal and child health services, family planning, gender-based violence, and other topics relevant to the emergency context being sent regularly. Relevant SMS will also be sent to *Suaahara II* frontline workers including MNFs, CNFs, VMFs and LRPs and government frontline workers including health workers and the FCHVs. In Kanchanpur, a specific package of messages will be continued to be sent as part of a trial, as documented in the MER section of the workplan.

Suaahara II will complement its telephone-based SMS with an internet based mobile application in year 5. *Suaahara II* has been supporting the GoN Nutrition Section to develop a nutrition application and will promote this application among the 1000-day households, so that age and stage (of pregnancy or the child) specific reminders and messages can be received through the interactive mobile apps, rather than via text, for those health workers and households with smart phones who have downloaded the application. Additionally, in year 5, *Suaahara II* will explore mobile apps to e-link potential VMFs/LRP/HFP group with market and private sector services to increase their access to information and shorten the distances between isolated small holders particularly in remote areas and other value chain actors.

GENDER AND SOCIAL INCLUSION (GESI)

Suaahara II uses a GESI-lens for its approach to programming. Not only are activities targeted based on how disadvantaged a community is, as per GoN classifications, but *Suaahara II* also selected some of its frontline workers, such as VMFs and CNVs, giving priority to women and men for championing GESI from disadvantaged backgrounds and communities of those areas. Furthermore, *Suaahara II* integrates GESI into all field activities across themes, where possible, through the SBC efforts focuses on addressing social norms related to health and nutrition and engaging men and decision-making family members rather than just women and children.

Some activities are designed and implemented specifically to address GESI-related barriers and social norms to improvements in health and nutrition. In year five, regular follow up and mentoring of GESI champions will be prioritized; technical officers will hold one-time reflection workshop with them to discuss and challenge social norms and structural barriers around health and nutrition. *Suaahara II* will mobilize GESI champions to champion GESI in the community using various *Suaahara II* platforms and other locally identified spaces. Male GESI champions will be mobilized to lead discussions with men, particularly 1000-day fathers and grandfathers, in the community highlighting men's role for improving health and nutrition. *Suaahara II* will connect GESI champions with local governments to recognize them and best mobilize them in the communities for sustaining these efforts.

Additionally, *Suaahara II* will continue to advocate and collaborate with local governments to support 16 days activism against gender-based violence and mark International Women's Day (IWD), with a focus on health and nutrition. Furthermore, at central level, *Suaahara II* will coordinate and collaborate with GESI section in MoHP and Ministry of Women, Children and Senior citizens to organize a workshop to share learnings and joint monitoring.

The GESI tools and other materials developed in preceding years will be updated and reproduced with the incorporation of learnings and identified gaps, as well as adapted to the new context and needs, such as psycho-social support needed in the Covid-19 and post-Covid-19 context. Also, coordination with different stakeholders will be done to share *Suaahara II* learnings and materials. The GESI team, with external support, will capture and document programmatic GESI learnings including both successes and failures/improvements needed.

PUBLIC PRIVATE PARTNERSHIP

Suaahara II will continue its work from the first four years to involve private sector actors in Nepal to achieve and sustain improvements in nutrition, health and WASH behaviors and food security. *Suaahara* primarily pursues PPPs in WASH and agriculture.

Suaahara II will follow-up on all established PPPs to ensure their continuity in the remaining time of the program and beyond, encouraging private sectors actors to scale up the establishment of WASH Marts, for example, in strategic markets where WASH materials are not available. *Suaahara II* will carry out follow up activities with the private sector actors to further strengthen the supply chain of WASH materials, capacitate them on WASH business models and ensure the quality of the products and services provided by them. *Suaahara II* will also share its learning on PPP in WASH and advocate local governments to work close with private sectors to address the supply side barriers on WASH materials, focusing on 18 districts in year 5: Darchula, Bajhang, Bajura, Doti, Kailali, Dailekh, Jajarkot, Rukum-West, Salyan, Bardiya, Arghakhanchi, Kapilvastu, Nawalparasi-West, Palpa, Myagdi, Lamjung, Dhading, Sindhupalchowk and continuing this advocacy work in the remaining districts in year 6. Similarly, *Suaahara II* will continue working with local cooperatives agro-vets and other private sector actors to enhance VMFs' and HFPB group members' capacity on business literacy, marketing of agri-products and to link them to financial services in selected districts. To strengthen the partnership model with different cooperatives and agri-service companies, *Suaahara II* will provide technical assistance on social marketing and service linkage.

Finally, relevant partnerships will be explored to support behavior change communication on key health and nutrition behaviors for digital communication and promotion as well. Because PPP is a learning agenda in *Suaahara II*, it is important to document learnings from the previous pilot models done with different private partners. *Suaahara II* will hire an external consultant for documentation of key learnings and suggested ways forward for increased access of agriculture and WASH services and market linkages.

EMERGENCY PREPAREDNESS AND RESPONSE PLAN (EPRP)

Suaahara II has overseen the development and implementation of an EPRP and developed a system across intervention areas, focusing on disaster prone districts, based on the essential elements from the Mission Order requirements and U.S. Nepal's Emergency Preparedness Guide. It includes emergency preparedness and response training to all *Suaahara II* partners with regular drills, preparing display information available in charts and DPR handbooks and relevant information, education and communication (IEC) materials regarding disaster and emergency. *Suaahara II* will maintain internal processes to ensure EPRP, safety and security plan is active.

A Risk and Rapid Response team was also formed with focal persons from each consortium partner and thematic area. A standardized procedures handbook, based on USAID, GoN and HKI policies, was created. *Suaahara II* staff and partners were trained in year two, in keeping with developments related to standards and innovations in the areas of DPR, especially nutrition security. The center team will regularly update DPR related information and district teams will update, share and discuss among and with the center team, as and when required. The district teams will also replace emergency response and safety materials, as and when required.

As a result of the COVID-19 pandemic, HKI has also drafted and received USAID approval of its Risk Mitigation and Contingency Plan, which has been disseminated to all staff, along with online training sessions for all staff regarding its content, tasks and applicability.

Suaahara II will continue to coordinate with USAID, GoN, UNICEF and other principle actors in the disaster preparedness and response sector to develop plans, procedures, activities and technical aspects of the EPRP and COVID-19 risk mitigation.

MONITORING, EVALUATION AND RESEARCH FOR LEARNING

Monitoring

In year five, the monitoring system will continue. Data quality assessments (DQA) will continue and the remaining 15 district-level DQAs by the Kathmandu-based MER team will be conducted.

The Kathmandu-based *Suaahara II* MER team will also facilitate remote meetings with PCs and FCs on reporting and recording. All district staff have District Health Information System-2 (DHIS2) logins to view their district-specific monitoring results and use them to support evidence-based program implementation plan adjustments, in their regular meetings. *Suaahara II* DHIS2 dashboards, some to enter and highlight implementation of activities and others to show input, output, and outcome level results from the monitoring checklist data, will continue to be used. All *Suaahara II* field offices share findings with provincial and local government actors and stakeholders regularly.

Suaahara II will also hold meetings with district-based staff to share learnings from ongoing monitoring, evaluation and research including further analyses that shed light on what is working (and not) and why/how/where/for whom.

Internal monitoring systems, including household, frontline worker and health facility checklists, will be updated at the beginning of Year 5 to take into account the new COVID-19 and post COVID-19 contexts and changes in programmatic approaches.

The annual survey for Year 5 will also be initiated at the end of Year 5, with preparatory work including ethics application, contracting the survey firm, updating questionnaires, and so on.

Evaluation

In Year 5, the *Suaahara II* impact evaluation will also be initiated. Preparatory work including contracting external evaluators; finalizing design including updating based on Covid-19 context and implications for health, nutrition, WASH and agriculture related outcomes and impacts; submitting the ethics application; contracting the survey firm; and so on will begin in early 2021. Data collection, following what was done at baseline in 2012, will take place in the summer of 2021. Further impact evaluation work will continue in Year 6 and be complemented by qualitative evaluation studies to take place in Year 6 as well.

Research

To build skills among staff at all levels and expand our formative research, a remote-based training on qualitative methods will be conducted with Kathmandu as well as district-based staff. This will enable all staff to conduct more rigorous interviews, focus group discussions, and so on related to specific thematic topics of interest or questions pertinent to specific locations and sub-populations.

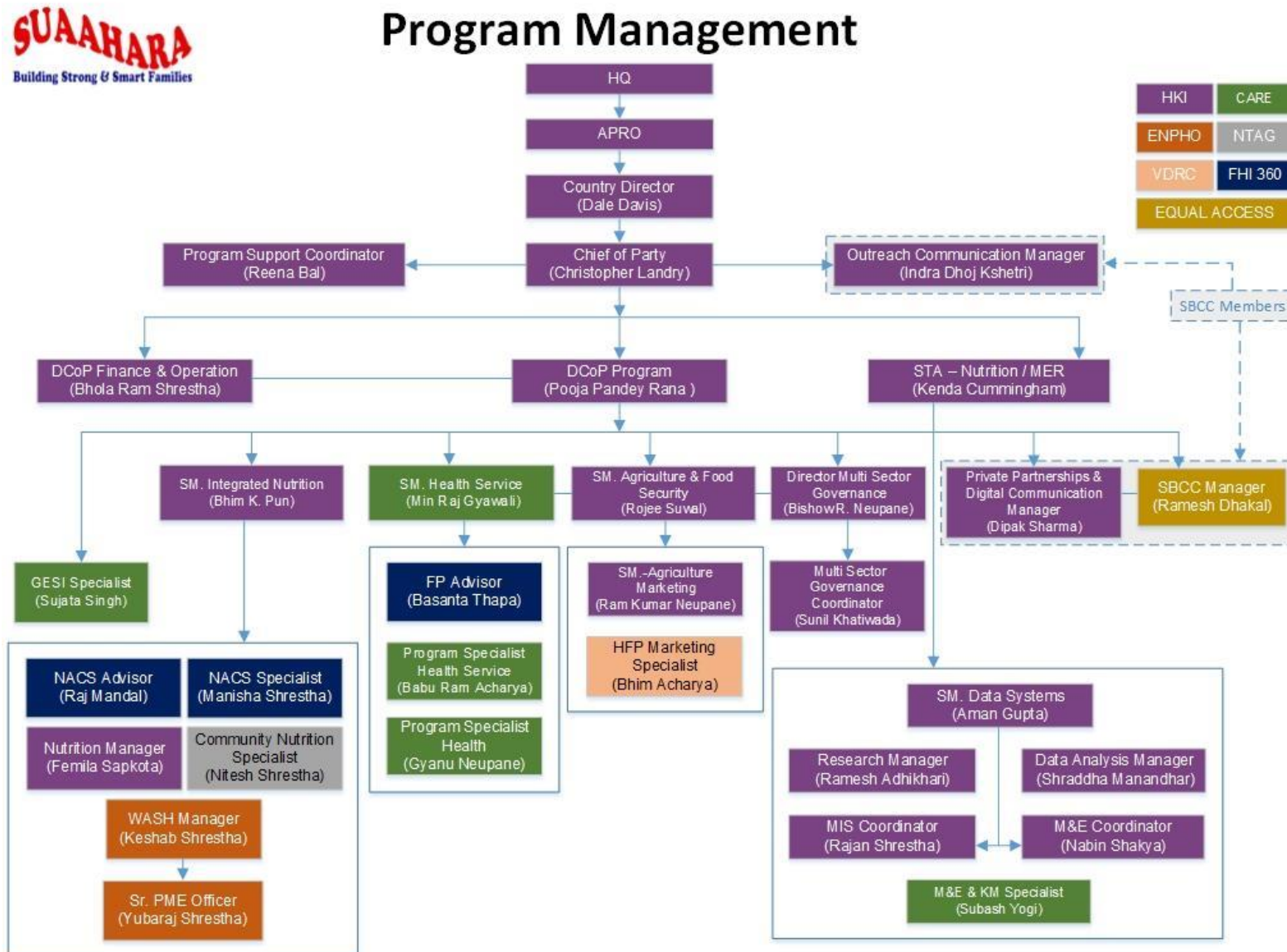
In year five, the endline for the Randomized Control Trials (RCT) in Kanchanpur to test the effectiveness of using SMS to trigger optimal behaviors (primarily egg consumption among children 1 to 2 years of age) will take place. The trial registration needs to be updated to note the change in data collection timing and any other changes and implications due to Covid-19 and an application will be filed with the Nepal Health Research Council (NHRC) for approval.

The fourth round of the adolescent panel will also take place during Year 5, alongside the Year 5 annual survey.

Learnings: Compilation and Dissemination

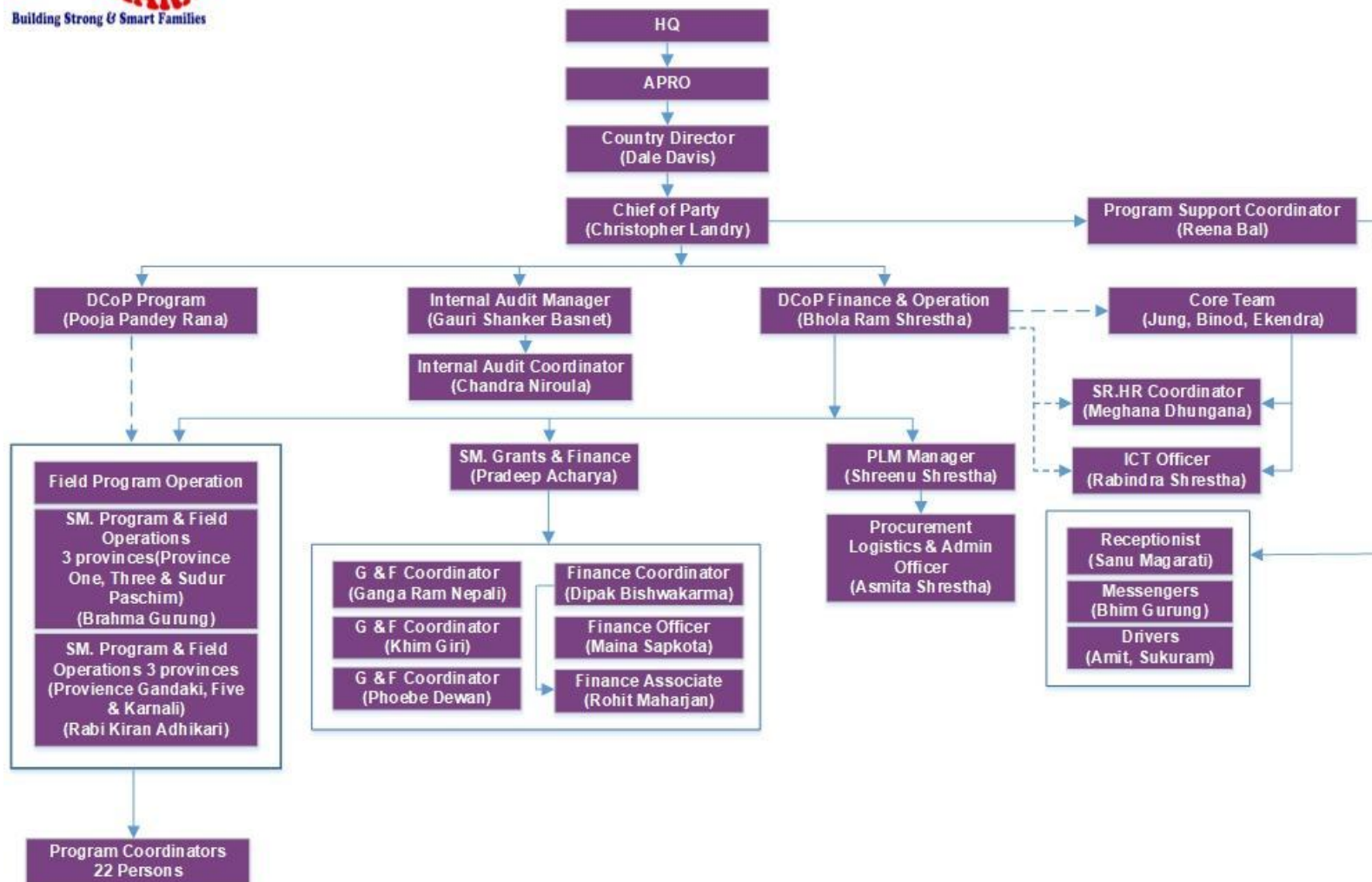
A core *Suaahara II* team (communications, governance, MER, etc.) has started working on documentation of best practices. We are keeping in mind that effective communication requires attention to the fact that different audiences need different products. Some of our ongoing work includes thematic PPTs to summarize technical progress, gaps and challenges; thematic success stories; and sectoral programming “how to” manuscripts in FEX/NEX. We are also planning videos, social media content, and 389 municipality-specific success stories (thematic/program, mgmt./logistics, policy, monitoring and reporting) helping local govt tell their story of how political commitment and resources can be used to prioritize nutrition.

ATTACHMENT A: PROGRAM MANAGEMENT





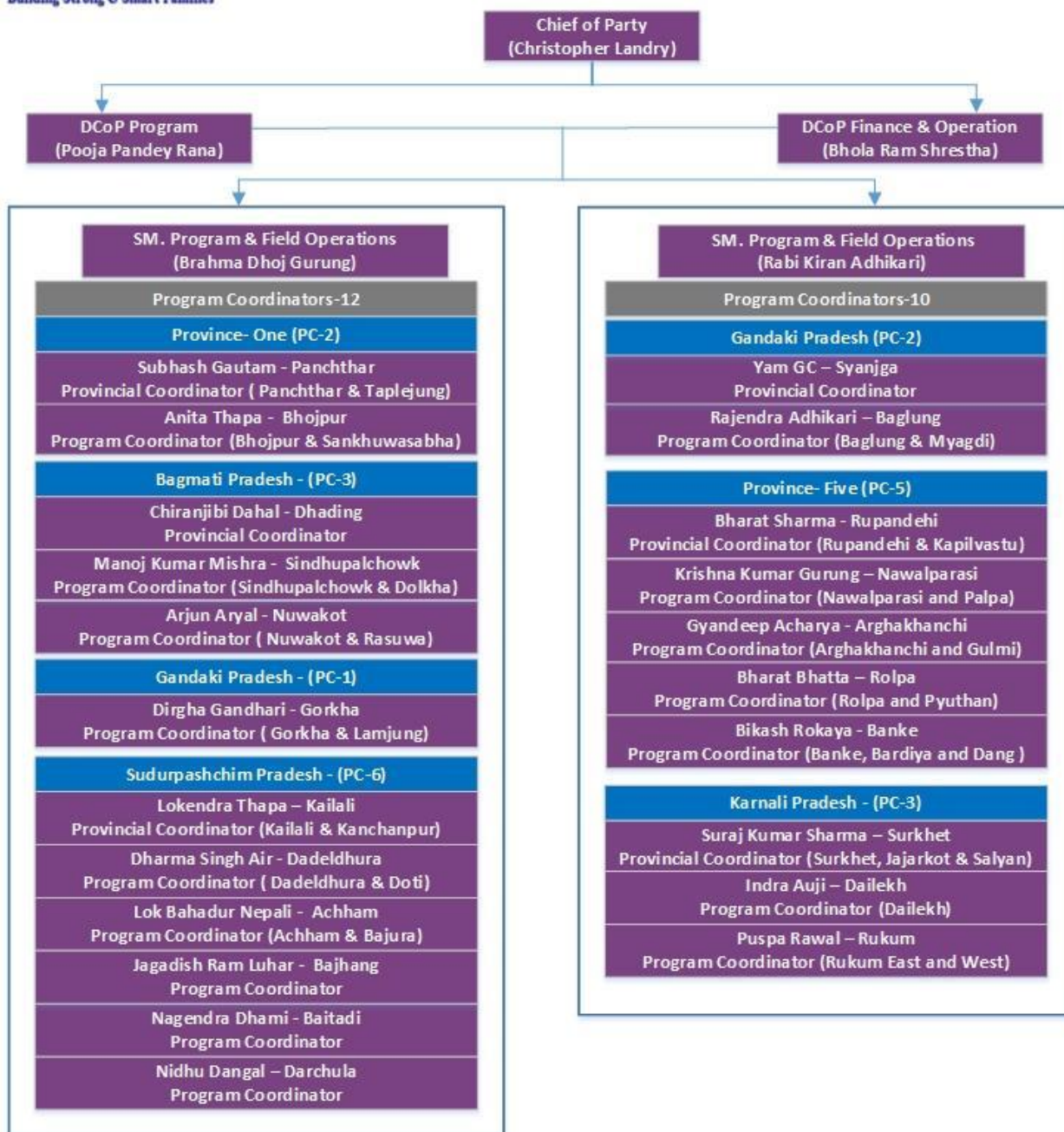
Finance & Operations



* Please see next page for Field Office Organogram



Field Program Operations Team (Province, District & Municipality Level)



PNGO Structure			
Field Coordinator	42	Community Nutrition Facilitator	461
Administration & Finance Officer	40	Municipalities Nutrition Facilitator	389
Total = 932			

Technical Coordinator & Officers District Level			
Nutrition & Health Officer	36	WASH Officer/ Coordinator	17
HFP Officer/ Coordinator	21	Finance & Operation Officer	22
Technical Coordinator	5	Total = 101	

ATTACHMENT B: WORKPLAN SCHEDULE

(see attached excel sheet)

ATTACHMENT C: BUDGET

Year 5 Annual Work Plan Summary Budget July 16, 2020 to July 15, 2021

<i>Line Item</i>		July 16, 2020 to July 15, 2021
a.	Salary and Wages	\$1,830,280
b.	Fringe Benefits	\$836,085
c.	Travel, Transportation and Per-diem	\$131,841
d.	Total Equipment (Capital) GMP, NACS and IMAM equipment Other equipment	
e.	Supplies (General Equipment)	\$122,250
f.	Contractual/ Subaward	\$6,786,993
g.	Rapid Response Fund	
h.	Other Direct Costs	\$918,184
i.	Total Estimated Costs	\$10,625,634
j.	Indirect Costs	\$1,302,708
k.	TOTAL ESTIMATED COST	\$11,928,342

*Does not include \$1.3M of COVID Emergency Funding in approved budget

IR	Budget Target Allocation (5 Year)	Budget Allocation (Year 5)
1	30%	30%
2	35%	35%
3	15%	15%
4	20%	20%

ATTACHMENT D: INTERNATIONAL TRAVEL

No	Position	Travel detail (RT)	Purpose	Travel Schedule
1	Suaahara Sr Technical Advisor (HKI)	London-Nepal-London	<ul style="list-style-type: none"> • TA on MER and nutrition programming 	4 trips 2020/2021 <ul style="list-style-type: none"> • Nov 2020 • Jan 2021 • April 2021 • June/July 2021
3	Sr. Manager Grants and Compliance (HKI)	USA-Nepal-USA	<ul style="list-style-type: none"> • Subaward compliance review 	1 trip 2021
4	Sr. Nutrition Advisor (HKI)	USA-Nepal-USA	<ul style="list-style-type: none"> • TA on multisectoral nutrition programming and documentation of learnings 	1 trip 2021
5	Senior VP, Nutrition (HKI)	USA-Nepal-USA	<ul style="list-style-type: none"> • TA on nutrition programming and impact evaluation 	1 trip 2021

ATTACHMENT E: EQUIPMENT AND COMMODITIES

Not applicable in Year 5

DISCLAIMER:

This plan is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The content of this plan is produced by Helen Keller International, *Suaahara II* Program and does not necessarily reflect the views of USAID or the United States Government.



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