

Nutrition and HIV

PEPFAR 3.0 focuses on sustainable control of the HIV epidemic. The plan supports a data-driven approach to control, with strategic investment in high-impact interventions for populations at highest risk in areas of greatest HIV incidence. Ambitious targets set by the Joint United Nations Programme on HIV/AIDS (UNAIDS) have been identified as markers of this plan's success: by 2020, 90 percent of people living with HIV (PLHIV) will know their status, 90 percent of those diagnosed will be receiving antiretroviral therapy (ART), and 90 percent of those on ART will achieve viral suppression.

Nutrition Integral to HIV Response

Food and nutrition interventions have considerable potential to contribute to global goals for epidemic control and other global health targets, and have long been recognized as an integral part of comprehensive HIV responses. Ensuring that PLHIV have access to adequate nutrition reduces the risk of opportunistic infection and promotes treatment effectiveness. Reaching mothers with ART regimens linked to infant feeding methods enables them to stay healthy and their children to live HIV-free. Orphans and vulnerable children (OVC), including those with HIV, benefit from food and nutrition support not only in terms of health status but also from consequent gains in the level of household resources available to devote to other needs. Food security and livelihood assistance further enable people in communities affected by HIV and poverty to seek testing, enter care, and sustain ART adherence.

Continued investment is essential in efforts to understand how food and nutrition interventions contribute to health and well-being in priority populations, support progress toward epidemic control, and define best practices for program implementation and scale-up. In 2012, a global multi-agency process led by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) produced a set of harmonized indicators to assist in the monitoring and evaluation (M&E) of nutrition assessment, counseling, and support (NACS) in the HIV care continuum. The PEPFAR-supported NACS framework was created to increase the inclusion of nutrition services in routine healthcare delivery at the facility and community level. PEPFAR has also worked closely with the World Health Organization (WHO) in efforts such as the Partnership for HIV-Free Survival (PHFS) to expand pregnant and breastfeeding women's access



Women in Mbarara, Uganda exhibit pineapples and green vegetables at a show to demonstrate nutritional foods that should be eaten by people living with HIV/AIDS, as supplements to the antiretroviral drugs (ARVs) they take. This exhibition in Mbarara was part of the launch of a youth awareness campaign. © 2006 Otushabire Tibyangye, Courtesy of Photoshare

to lifelong ART (Option B+) for the prevention of mother-to-child transmission (PMTCT) and to increase maternal, infant, and child nutrition through the optimal uptake of WHO's 2010 breastfeeding guidelines.

To build on these advances, rigorous and robust methods are needed to measure and synthesize data, strengthen technical capacity, harness cost-effective solutions, reach more people with effective programs, and share knowledge in timely and productive ways. The U.S. Agency for International Development (USAID), with its partners, is leading initiatives to provide technical guidance and support for countries to achieve global nutrition and HIV goals. MEASURE Evaluation is well equipped to lead USAID's efforts in these areas:

- Strengthening technical capacities
- Developing indicators for use in integrated health systems
- Tracking linkages to facility-based and community care
- Supporting multisectoral programming and coordination
- Conducting process, impact, and cost-effectiveness evaluations
- Implementing scale-up assessments
- Creating best practices guidance

MEASURE Evaluation works under a cooperative agreement with USAID to help stakeholders generate and use high-quality data for program and policy decision making in support of global priorities, including preventing child and maternal deaths and reaching the UNAIDS targets. Our activities strengthen health systems, by improving M&E practice in more than 30 countries. This includes technical assistance and capacity building to fill data gaps, strengthen health information systems (HIS), support rollout of DHIS 2, and promote the collection and use of data from multiple sources to interpret Data for Accountability, Transparency, and Impact (DATIM) and monitoring, evaluation, and reporting (MER) data.

MEASURE Evaluation has nutrition-related expertise in indicator development, impact evaluations, cost-effectiveness studies, knowledge management, and building capacity in M&E with local partners. Including nutrition in MER for the HIV treatment cascade is critical to inform recommended practices, learning agendas, and knowledge management for program scale-up.

Relevant USAID-funded MEASURE Evaluation initiatives are the following:

- Develop a practical, context-sensitive strategy to raise the profile of nutrition in national responses to HIV and tuberculosis
- Analyze the uptake of the PEPFAR and WHO 2012 joint nutrition and HIV indicators in 12 PEPFAR implementing countries
- Implement an assessment in six countries that participated in the PHFS
- Conduct a secondary analysis of data from the USAID- and PEPFAR-funded Kabeho study in Rwanda
- Investigate gender-related barriers in Malawi and Uganda using qualitative methods
- Conduct an organizational network analysis in Malawi to

Guatemala's Western Highlands Integrated Program (WHIP) Evaluation

In 2013, with support from USAID, MEASURE Evaluation designed the impact evaluation and conducted the baseline survey for a five-year study to examine the impact of integrated health, nutrition, and agricultural support programming in the country's western highlands, where poverty and malnutrition have historically been concentrated.

Documentation is available here: <https://www.measureevaluation.org/resources/publications/sr-14-106> and here: <https://www.measureevaluation.org/resources/publications/tr-14-100>.

improve linkages between NACS and economic strengthening, livelihoods, and food security programs. (See Reynolds, N.W., Curran, J., & Thomas, J.C. [2014]. *Organizational network analysis: MEASURE Evaluation's experience 2010–2014*. Chapel Hill, NC, USA: MEASURE Evaluation, University of North Carolina.)

- Develop manual and paper data-collection forms for malnutrition surveillance in Haiti for the Ministry of Public Health and Population, along with registers and reporting tally sheets for Haiti's epidemiological surveillance system for malnutrition
- Participate as a member of the Nutrition and HIV Collaborative Working Group of USAID's Office of HIV and AIDS

MEASURE Evaluation contributes to the evidence base for high-impact, synergistic nutrition and HIV programming worldwide. The project will continue to leverage its technical leadership and expertise to build capacity for M&E of such programming, identifying powerful, proven interventions for the people and places most affected by HIV and placing sustainable epidemic control within reach.

MEASURE Evaluation's Services

To access the project's capabilities statements, visit <https://www.measureevaluation.org/about/services/capacity-statements>. To access MEASURE Evaluation resources, country governments should contact their local USAID mission. The mission, in turn, can contact the USAID AOR for MEASURE Evaluation, Kristen Wares (kwares@usaid.gov). For more information, e-mail measure@unc.edu or go to our website: www.measureevaluation.org.