



SECTOR	Nutrition
SUB-SECTOR	Infant and Young Child Feeding in Emergencies (IYCF-E)
Indicator: Proportion of infants 0–5 months of age who are fed exclusively with breast milk	
INDICATOR DESCRIPTION	
<p>Definition(s): Fed exclusively: Infant is fed breast milk (including milk expressed from a wet nurse) and nothing else, not even water.</p> <ul style="list-style-type: none"> ● Infants may be given ORS, drops, syrups (vitamins, minerals, medicines). ● This is based on recall of the previous day. 	
Numerator: Infants 0–5 months of age who received only breast milk during the previous day	
Denominator: Infants 0–5 months of age	
Unit of Measure: Percent of infants 0-5 months of age	
Disaggregated by: Sex	
Suggested Data Collection Method: Household level surveys administered to a representative sample of the population served by the program (e.g., Knowledge, Attitudes, and Practice Surveys; SMART surveys)	
Suggested Data Source: Survey data of mothers and caregivers of infants less than 6 months of age at the time of the intervention	

SECTOR	Nutrition
SUB-SECTOR	Infant and Young Child Feeding in Emergencies (IYCF-E)
Indicator: Proportion of children 6–23 months of age who receive foods from 4 or more food groups	
INDICATOR DESCRIPTION	
<p>Definition(s): The 7 food groups used for tabulation of this indicator are:</p> <ul style="list-style-type: none"> - Grains, roots and tubers - Legumes and nuts - Dairy products (milk, yogurt, cheese) - Flesh foods (meat, fish, poultry and liver/organ meats) - Eggs - Vitamin-A rich fruits and vegetables - Other fruits and vegetables. <ul style="list-style-type: none"> • Consumption of any amount of food from each food group is sufficient to “count”. I.e., there is no minimum quantity, except if an item is only used as a condiment. • This is based on recall of the previous day. 	
Numerator: Children 6–23 months of age who received foods from ≥4 food groups during the previous day	
Denominator: Children 6–23 months of age	
Unit of Measure: Percent of children 6-23 months of age	
Disaggregated by: Sex	
Suggested Data Collection Method: Household level surveys administered to a representative sample of the population served by the program (e.g., Knowledge, Attitudes, and Practice Surveys; SMART surveys)	
Suggested Data Source: Survey data of mothers and caregivers of children 6-23 months	

SECTOR	Nutrition
SUB-SECTOR	Infant and Young Child Feeding in Emergencies (IYCF-E)

Indicator: Number of people receiving behavior change interventions to improve infant and young child feeding practices

INDICATOR DESCRIPTION

Definition(s):

People: Members of the communities that make up an area of intervention. This should include community and religious leaders, mothers and caretakers, grandmothers, husbands, mother-baby pairs, religious leaders, traditional birth attendants, women of reproductive age with and without children, etc.

Behavior change interventions: Information and education activities which adjust attitudes and practice to improve infant and young child feeding practices.

Numerator: N/A

Denominator: N/A

Unit of Measure: Number of individuals

Disaggregated by: Sex

Suggested Data Collection Method: Compile partner reports and records to calculate the sum of all people present and participating in behavior change intervention activities. Trainings, meetings and events should have a roster or sign-in sheet to tally participation.

Suggested Data Source: Activity logs and records, meeting and training sign-in sheets

SECTOR

Nutrition

SUB-SECTOR

Infant and Young Child Feeding in Emergencies (IYCF-E)

Indicator: Number of people receiving micronutrient supplement (type specified)

INDICATOR DESCRIPTION

Definition(s):

Micronutrient supplement: any vitamin or mineral (tablets), multiple micronutrient powders, or lipid based nutrient spreads. Vitamin supplements are considered a restricted good, requiring pharmaceutical approval.

Numerator: N/A

Denominator: N/A

Unit of Measure: Number of individuals
Disaggregated by: Sex; Age <ul style="list-style-type: none"> • 6-59 months • Pregnant and lactating women; Type <ul style="list-style-type: none"> • Tablets • Powders • Spreads
Suggested Data Collection Method: Compile data from supported health facilities and nutrition centers.
Suggested Data Source: Patient registers



SECTOR	Nutrition
SUB-SECTOR	Management of Acute Malnutrition

Indicator: Number of health care staff trained in the prevention and management of acute malnutrition

INDICATOR DESCRIPTION

Definition(s):
Health care staff: People working in or alongside a health facility, working towards a common goal for improving the health status of the surrounding population/catchment area. Includes people formally trained (e.g., doctor, nurse) and informally trained (e.g., traditional birth attendants) as well as any cleaning staff and clerks. Technical narratives must specify the type of health care worker/staff and trainings to be given.

Trained: Completed all requirements specified for successful completion of a specific training that may include attendance and/or written, verbal, or hands-on demonstration of knowledge and skills. Training can include courses, workshops, or training sessions that build or update skills relevant to the support and provision of health care services.

Numerator: N/A

Denominator: N/A

Unit of Measure: Number of individuals

Disaggregated by: Sex

Suggested Data Collection Method: Compile data from training rosters and records.

Suggested Data Source: Training rosters and records from partner-supported trainings

SECTOR	Nutrition
SUB-SECTOR	Management of Acute Malnutrition
Indicator: Number of Management of Acute Malnutrition sites rehabilitated	
INDICATOR DESCRIPTION	
<p>Definition(s): Management of Acute Malnutrition site: An outpatient therapeutic feeding (OTP), supplementary feeding program (SFP), or Stabilization center (SC) that provides community management of acute malnutrition at a health post, health center, health clinic (fixed or mobile), hospital, or stand-alone site.</p> <ul style="list-style-type: none">• Outpatient Therapeutic Feeding Program (OTP): A unit within a health facility or a stand-alone site at which children are enrolled when diagnosed with Severe Acute Malnutrition (SAM) with no complications to receive a screening and treatment for disease and Ready to Use Therapeutic Food (RUTF) as a total therapeutic diet. After initial enrollment, children should return once each week for medical and nutritional follow up.• Supplementary Feeding Program (SFP): A unit or stand-alone site which may be within or attached to a health facility in which children or pregnant and lactating women (PLW) are enrolled when diagnosed with Moderate Acute Malnutrition and receive screening and treatment for disease and a ready to use supplementary food (RUSF) or fortified blended food (FBF) as a take home ration.• Stabilization Center (SC): An inpatient unit within a health facility in which children diagnosed with SAM with complications are admitted and receive screening and treatment for disease as well as therapeutic milk and RUTF. <p>Rehabilitated: Providing any type of structural improvement including electricity, repairing walls, ceilings, roofs, patient waiting areas, etc., with USAID/OFDA funds.</p>	
Numerator: N/A	
Denominator: N/A	
Unit of Measure: Number of Facilities/Treatment Units	

Disaggregated by: Type of Facility (OTP, SFP, SC)
Suggested Data Collection Method: Partner internal record keeping and reporting
Suggested Data Source: Workplans; Partner records

SECTOR	Nutrition
SUB-SECTOR	Management of Acute Malnutrition
Indicator: Number of supported sites managing acute malnutrition	
INDICATOR DESCRIPTION	
<p>Definition(s): Management of Acute Malnutrition sites: An outpatient therapeutic feeding (OTP), supplementary feeding program (SFP), or Stabilization center (SC) that provides community management of acute malnutrition at a health post, health center, health clinic (fixed or mobile), hospital, or stand-alone site.</p> <ul style="list-style-type: none"> • Outpatient Therapeutic Feeding Program (OTP): A unit within a health facility or as a stand-alone site at which children are enrolled when diagnosed with Severe Acute Malnutrition (SAM) with no complications to receive a screening and treatment for disease, and Ready to Use Therapeutic Food (RUTF) as a total therapeutic diet. After initial enrollment, children should return once each week for medical and nutritional follow up. • Supplementary Feeding Program (SFP): A unit or stand-alone site which may be within or attached to a health facility in which children or pregnant and lactating women (PLW) are enrolled when diagnosed with Moderate Acute Malnutrition and receive screening and treatment for disease and a ready to use supplementary food (RUSF) or fortified blended food (FBF) as a take home ration. • Stabilization Center (SC): An inpatient unit within a health facility in which children diagnosed with SAM with complications are admitted and receive screening and treatment for disease as well as therapeutic milk and RUTF. 	
Numerator: N/A	
Denominator: N/A	
Unit of Measure: Number of Facilities/Treatment Units	
Disaggregated by: Type of Facility (OTP, SFP, SC)	
Suggested Data Collection Method: Partner internal record keeping and reporting	

Suggested Data Source: Workplans; Partner records

SECTOR	Nutrition
SUB-SECTOR	Management of Acute Malnutrition
Indicator: Number of people admitted, rates of recovery, default, death, relapse, and average length of stay for people admitted to Management of Acute Malnutrition sites	
INDICATOR DESCRIPTION	
Definition(s): Admitted: the number of malnourished people that enter a treatment program Rates: <ul style="list-style-type: none">● Recovery rate: Number of people who have reached the discharge criteria of success defined for the program● Defaulter rate: Number of people who did not return for treatment two consecutive times over the number of people enrolled in the program● Death rate: Number of people who died while registered in a community-based management of acute malnutrition program● Relapse rate: Number of beneficiaries re-admitted to the program after having been successfully discharged as recovered within the last two months (This is a new episode of Severe Acute Malnutrition [SAM]). Length of stay: The number of days elapsed between admission and discharge.	
Numerator: <ul style="list-style-type: none">● Recovery rate: Number of beneficiaries successfully discharged as recovered● Defaulter rate: Number of defaulters unconfirmed + number of defaulters confirmed● Death rate: Number of beneficiaries who died whilst registered in program● Relapse rate: Number of relapses● Average Length of Stay = Sum of Individual Length of stay (promoted to OTP beneficiaries) – in days <p>The sum of the first four above rates should always be 100% (thus the denominator “total discharges” (X) for calculation is the number of recovered + death + defaulter unconfirmed + defaulter confirmed + non-response + medical referral + transfer to therapeutic program)¹</p>	

¹ <http://www.cmamreport.com/sites/all/themes/stc/cmam-assets/STANDARDISED%20CATEGORIES%20AND%20INDICATORS%20FOR%20BETTER%20CMAM%20REPORTING%20%20FIN/AL%20Apr%202015.pdf>

Denominator: Total discharges (denominator for recovery rate, defaulter rate, death rate, relapse rate), Average Length of Stay-Number of promoted to OTP beneficiaries
Unit of Measure: Individual
Disaggregated by: Sex, and Age <ul style="list-style-type: none"> • Children 0<6 months • Children 6<24 months • Children 24-59 months • Children ≥ 5 • Pregnant and lactating women.
Suggested Data Collection Method: Compile data from supported health facilities and nutrition centers.
Suggested Data Source: CMAM Register

SECTOR	Nutrition
SUB-SECTOR	Management of Acute Malnutrition
Indicator: Number of people screened for malnutrition by community outreach workers	
INDICATOR DESCRIPTION	
<p>Definition(s): Screened: Refers to children under five and pregnant and lactating women measured by Mid-Upper Arm Circumference (MUAC) for malnutrition during community outreach work. This may be on a weekly, monthly, or some other frequency.</p> <p>Community outreach worker: Any community-level health or nutrition worker or volunteer trained to conduct MUAC screening alongside other community-based health and nutrition activities.</p>	
Numerator: N/A	
Denominator: N/A	
Unit of Measure: Number of Individuals	
Disaggregated by:	

Sex, and
Age

- Children under 5
- Pregnant and lactating women

Suggested Data Collection Method: Screening database linked to health posts/health facilities and/or MUAC tally sheet

Suggested Data Source: MUAC Tally Sheets