

Emergency Plan Policy Change in Food and Nutrition Programming:

Current guidance from the U.S. Office of the Global AIDS Coordinator (OGAC) requires recipients of Emergency Plan funds to target food support to the following priority groups:

- Orphans and vulnerable children born to an HIV infected parent (regardless of the child's HIV and nutritional status);
- HIV-positive pregnant and lactating women in programs to prevent the transmission of HIV to their children (PMTCT); and
- Adult patients in anti-retroviral therapy (ART) and care programs who have evidence of severe malnutrition, as defined by The World Health Organization (Body Mass Index less than 16).

This policy change relates to adult patients who are enrolled in ART and care programs. While ongoing studies have yet to determine the clinical benefits of food supplementation across the range of Body Mass Index (BMI) in clinically malnourished HIV patients, effective immediately, and in line with WHO guidance for adults and adolescents, U.S. Government Emergency Plan country teams may provide food support to patients in ART and care programs with a BMI less than 18.5. Supplementary feeding support should cease once the patient's BMI stabilizes above 18.5 (e.g., two consecutive months greater than 18.5).

As with other programmatic interventions, each U.S. Government Emergency Plan country team needs to determine funding allocated for this relative to other priorities, including the need to ensure food and livelihoods support to orphans and vulnerable children and HIV-positive pregnant and lactating women. Wherever possible, it is also still to the benefit of the program to leverage other resources and linkages with longer-term food-security activities. Recipients of Emergency Plan funds should follow other policy guidance from the Food and Nutrition Technical Working Group (*Policy Guidance on the Use of Emergency Plan Funds to Address Food and Nutrition Needs, September 2006*). U.S. Government Emergency Plan country teams that choose to elevate the BMI entry criterion for program intervention should consider current models, such as the Kenya National Food by Prescription Program, in their program design. Please contact Tim Quick (tquick@usaid.gov) and Dana DeRuiter (deruiterdm@state.gov) from the Food and Nutrition Technical Working Group for further details.