



LIFT II and FANTA: Collaborating on the Continuum



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Collaboration is central to LIFT II's approach to strengthening the continuum of care for people living with HIV and AIDS and other vulnerable households. There is a strong emphasis on working cooperatively with partners as seen during stakeholder workshops in Kingabwa, DRC (top) and Balaka, Malawi (bottom).

The **Livelihoods and Food Security Technical Assistance II (LIFT II)** project was launched in 2013 by USAID as a follow on to the LIFT project (2009-2013). LIFT II's primary goal is to build the continuum of care for people living with HIV and other vulnerable households by increasing their access to high quality, context appropriate, market-led economic strengthening, livelihoods and food security opportunities to improve their economic resilience and lead to better health. LIFT II is implemented by three core partners—[FHI 360](#), [CARE](#) and [World Vision](#).

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The needs of people living with and affected by HIV are complex and interconnected. For example, HIV both contributes to and results from economic and food insecurity. People living with HIV (PLHIV) have increased nutritional needs but decreased ability to work and provide for themselves and their family. Those who are malnourished benefit less from antiretroviral therapy, suffer more from its side effects, and are more vulnerable to opportunistic infections. Adult illness and death further worsen food and economic security for affected children.

The Livelihoods and Food Security Technical Assistance II Project (LIFT II) and the Food and Nutrition Technical Assistance III Project (FANTA) have collaborated at a new level in Tanzania and Democratic Republic of the Congo (DRC) this quarter to address complementary aspects of the HIV continuum of care. LIFT II's goal is to increase access for people living with and affected by HIV to economic strengthening, livelihood, and food security (ES/L/FS) opportunities to improve their economic resilience and health. FANTA helps to strengthen food security and nutrition policies, programs and systems. Both projects work with national and local stakeholders using Nutrition Assessment, Counseling Support (NACS) as the entry point and platform for strengthening and extending the continuum of care. Together they contribute to a holistic approach for helping the most vulnerable.

LIFT II and FANTA joined forces with other partners to provide intensive training on a broad range of skills related to livelihoods, economic strengthening and nutrition.

In Tanzania, FANTA and LIFT II collaborated with the Tanzania Food and Nutrition Center (TFNC) as well as the IMARISHA project, a local USAID-funded partner, to develop and implement a nine-day training focused on a range of ES/L/FS areas, measures to community-level assess to nutrition, and ways to strengthen the links between ES service providers and health facilities. The training, held in the Mufindi District of Iringa, was attended by 34 government and NGO representatives from a wide range of disciplines including social welfare, agriculture, livestock development, and food and nutrition. FANTA rolled out an assessment tool that involves using mid-upper arm circumference (MUAC) to help determine a person's nutritional status. LIFT II introduced elements for establishing a system that links malnourished clients to existing community-based organizations. With the skills and tools shared during the training, participants who work in non-health settings are now better sensitized and equipped to identify malnourished clients, identify the types of economic strengthening options most appropriate to meet household needs, and refer individuals to nutritional counseling and related support services.

In DRC, LIFT II and FANTA partnered with the USAID-funded ASSIST project to deliver a five-day training to 24 trainer-of-trainers—physicians, nurses, nutritionists, and HIV and AIDS specialists. Participants were introduced to FANTA's approach to training and counseling PLHIV on their nutritional needs related to antiretroviral therapy and how these needs can be met in low-resource environments. Participants also were introduced to the LIFT II model of linking vulnerable clients from health facilities to community-based ES/L/FS support services through referrals. The training prepared clinic nutrition counselors for their role in the referral process and encouraged them to reevaluate their role as health workers and to look outside the scope of their usual services in an effort to meet the full range of needs of people living with and affected by HIV.

These trainings marked a milestone in the collaboration between LIFT II and FANTA, drawing on each project's strengths and helping each meet their goals. Working together affords the opportunity to share data and sites and coordinate the bidirectional flow of people between health facilities and ES/L/FS services, thereby leveraging resources, improving coordination, and creating an enabling environment for clients. Through close partnership on developing technical materials and implementing activities, the projects are advancing a unified approach to addressing an expanded continuum of care.