*Note: This PIRS reflects an Accelerator Behavior indicator for which data are readily available through The Demographic and Health Surveys (DHS) Program. The Accelerator Behavior that can be measured using this indicator is shown in the "Name of Result Measured" field below, and can be updated as needed. Data for this indicator are displayed for maternal and child survival priority countries at* [*acceleratorbehaviors.usaid.gov*](https://acceleratorbehaviors.org/index)*. Should a USAID Mission wish to adopt this indicator for its performance monitoring plan, this PIRS should be updated according to the needs of each Mission*.

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| **USAID Performance Indicator Reference Sheet** |
| **Name of Indicator:** Breastfed children 6-23 months fed both 4+ food groups and the minimum meal frequency |
| **Name of Result Measured (DO, IR, sub-IR, Project Purpose, Project Outcome, Project Output, etc.):**  Caregivers feed adequate amounts of nutritious, age-appropriate foods to children from 6 to 24 months of age, while continuing to breastfeed |
| **Is This a Performance Plan and Report Indicator?**  No  Yes  for Reporting Year(s)\_\_\_\_\_\_\_  **If yes, link to Foreign Assistance Framework:** |
| **DESCRIPTION** |
| **Precise Definition(s):** Percentage of breastfed children age 6-23 months fed four or more food groups and the minimum meal frequency  Food groups include: a. dairy products (cheese or yogurt or other milk products); b. foods made from grains, roots, and tubers, including porridge and fortified baby food from grains; c. vitamin A-rich fruits and vegetables (and red palm oil); d. other fruits and vegetables; e. eggs; f. meat, poultry, fish, and shellfish (and organ meats); and g. legumes and nuts.  For breastfed children, minimum meal frequency is receiving solid or semisolid food at least twice a day for infants age 6-8 months and at least three times a day for children age 9-23 months.  Calculated:   * Numerator: Children 6-23 months who are breastfed and were fed four or more food groups and received the minimum meal frequency in the past day and night * Denominator: Youngest breastfed children age 6-23 months |
| **Unit of Measure:** Percentage of children |
| **Data Type:** Percentage |
| **Disaggregated by:** |
| **Rationale for Indicator** *(optional):*This indicator represents a key behavior known to accelerate reduction of child mortality (<https://acceleratorbehaviors.org/complementary_feeding>). It represents standard infant and young child feeding (IYCF) practices established by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF). IYCF data are reported separately for breastfed and non-breastfed children. The breastfed group indicator was chosen as the best indicator, as it represents the recommended feeding practice to promote child health. Appropriate complementary feeding can prevent acute and chronic malnutrition, an indirect cause of 45% of child deaths (<http://www.who.int/mediacentre/factsheets/fs342/en/>). This is a set of habitual behaviors a caregiver must practice every day, starting when a baby is 6 months, through 24 months of age. |
| **PLAN FOR DATA COLLECTION BY USAID** |
| **Data Source:** Demographic and Health Survey Program (DHS), indicator ID: CN\_IYCF\_C\_BTB. Data are readily available through the DHS Stat Compiler website: <https://www.statcompiler.com/en/>. Secondary source: UNICEF Multiple Indicator Cluster Survey (MICS). |
| **Method of Data Collection and Construction:** DHS Household survey, Woman’s Questionnaire. Available here: <https://dhsprogram.com/publications/publication-dhsq7-dhs-questionnaires-and-manuals.cfm> |
| **Reporting Frequency:** Approximately every 5 years |
| **Individual(s) Responsible at USAID:** |
| **TARGETS AND BASELINE** |
| **Baseline Timeframe***:* |
| **Rationale for Targets** *(optional):* |
| **DATA QUALITY ISSUES** |
| **Date of Data Quality Assessments (DQA) and Name(s) of Reviewer(s):** |
| **Date of Future Data Quality Assessments** (optional)**:** |
| **Known Data Limitations***:*  Validity: IYCF data are reported separately for breastfed and non-breastfed children. This indicator does not capture the complementary feeding status of non-breastfed children and is therefore limited in assessing behavior across a full population. A USAID Mission may choose to also report complementary feeding among non-breastfed children (also available through DHS and MICS) as a secondary indicator.  Timeliness: DHS survey timing may not align with program cycles and may be too infrequent for planning. However, data from MICS and DHS surveys combined may sufficiently bridge data gaps, as their timing alternates to provide more consistent data. USAID Missions may also wish to incorporate the same DHS questions and methodology into their own population-based surveys to ensure timeliness, though results may not be fully comparable to DHS and MICS. |
| **CHANGES TO INDICATOR** |
| **Changes to Indicator:** |
| **Other Notes** *(optional)***:** |
| **This Sheet Last Updated On:** December 22, 2017 |