



## **POCKET GUIDE**

Community-led Complementary
Feeding and Learning Sessions
for Pregnant & Lactating Women
Implementation Guidelines



CRS Ethiopia | Development Food Security Activity (DFSA)









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# Chapter 1: Introducing Community-led Complementary Feeding and Learning Sessions

### **Meaning of CCFLS**

CCFLS stands for Community-led Complementary Feeding and Learning Sessions, meaning:

- Community-led because it is owned by the community. Inputs are from the community, and community participants facilitate implementation.
- **Complementary** because it focuses on appropriate complementary feeding of young children.
- **Feeding** because children are fed a nutritious meal or snack during each day of the session.
- Learning because mothers learn and practice optimal feeding, care and hygiene practices, as well as food processing and preparation techniques during the session.
- Session because the activity lasts for 12 days in a row to ensure the new practices stick.

#### **Goals and objectives of CCFLS**

CCFLS aligns itself with the Government of Ethiopia's SURE Program to improve nutrition status and prevent the risk of

malnutrition among children 6 to 23 months through improved child feeding and caring practices by:

- Promoting adequate dietary diversity of at least four food groups and improving complementary feeding practices
- Improving knowledge, skills and attitude of mothers in child hygiene, feeding and caring with integrated health and agricultural extension messages
- Preventing growth faltering from progressing to moderate and severe malnutrition through improved feeding and caring practices

## Chapter 2: Main activities

CCFLS for pregnant and lactating women lasts for 6 consecutive days, during which the women meet in their community for a maximum of 2 hours each day. The approach incorporates several activities each day.

Note: All pregnant women and women breastfeeding a child under 6 months should be included in these sessions. Women breastfeeding children older than 6 months should be enrolled in the other CCFLS curriculum for caregivers of children aged 6-23 months

#### Nutrition assessment and making referrals to CCFLS

CCFLS relies on MUAC measurements to identify mildly malnourished pregnant and lactating women to be enrolled in CCFLS.

- All pregnant/lactating women with MUAC between 22cm and 22.9cm should be referred for CCFLS.
- Pregnant/lactating women with MUAC less than or equal to 22 cm should be referred to the nearest health facility for further evaluation.



Mid-Upper Arm Circumference (MUAC) tape

### **Community mobilization**

Effective community mobilization leads to active participation of communities in CCFLS for pregnant/lactating women. Mobilization should emphasize:

- Gaining support of local leaders to accept and promote CCFLS
- Increasing household participation in CCFLS
- Promoting regular attendance at CCFLS
- Promoting community and household contributions to CCFLS through provision of food items, cooking fuel, site establishment, etc.
- Promoting availability (i.e own production and market availability) of the six food groups in the community by promoting synergies with other sectors.



### **Conducting a CCFLS**

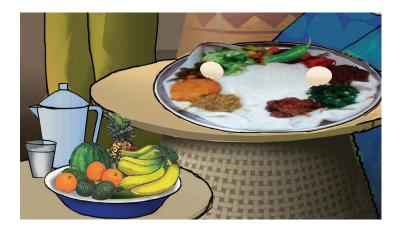
#### **Organizing session logistics**

- Divide participating pregnant/lactating women into groups of not more than 15 households, based on proximity to each other, and present the CCFLS approach to groups.
- Discuss and agree on the place to do CCFLS. This could be one place for all sessions or a rotation among households.
- Agree on a meeting time for CCFLS on each of the 6 days. Sessions should last no more than 2 hours per day.
- Create a food availability calendar to determine and establish food availability for CCFLS (Annex 1).
- Discuss any myths and beliefs about maternal and child nutrition. Emphasize that all nutritious foods are good during pregnancy and to children.
- Use a recipe book to select six nutrient-dense recipes for meals and snacks for the CCFLS, at least three meals and three snacks.
- Designate the ingredients (flour, animal products, fats/oil, fruit, vegetables) and materials (bowls, pots, spoons, water, soap, fuel wood) the participants must bring each day. Participants may also agree to contribute materials for more than one session at a time, upon which safe storage of materials should also be discussed.
- Identify a child minder(s) within the community to care for children during CCFLS.
- Discuss and set up CCFLS site fuel-efficient stove, dish rack, handwashing facility, mats, shade. (See Additional Information for more details.)

- Invite husbands and other family members to participate in the introductory meeting. This allows them to understand the purpose of CCFLS, and support their wives to attend and make food contributions.
- Husbands and other family members can also be encouraged to attend the CCFLS the last day for Lesson 6 on a father's role in family health and nutrition.

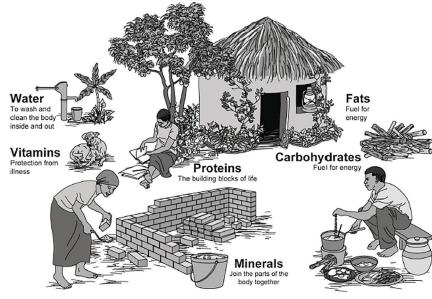
#### **Selecting recipes**

- Each day should have a recipe for a meal and a snack.
  The recipes should repeat once throughout the session.
- Participants should practice preparing the recipes at home throughout the course of CCFLS and provide feedback at the next session.
- When selecting recipes, choose those that highlight proper food processing, preparation and preservation techniques.
- Select recipes that use a variety of nutritious, locally available ingredients, considering what is in season. See table over the page.



Food group	Example foods	Benefits		
Cereals/ staples	Maize, wheat, teff, rice, millet, cassava, potatoes	Good source of energy		
Legumes	Beans, lentils, peas, groundnuts, seeds	Important for growth and repair		
Fruits	Mango, papaya, oranges, banana, pineapple	Vitamin A-rich fruit/vegetables protect eyesight		
Vegetables	Cabbage, onion, beetroot, carrot, dark leafy greens, tomatoes, pumpkin	Prevent infections, provide nutrients for overall health		
Animal- sourced foods	Meat, chicken, fish, liver, eggs, milk, yogurt	Provide protein, help children grow strong and be active		
Oil and fat	Butter, vegetable oil, avocado	Provide energy		

Cereals and legumes are processed before preparing foods for consumption. Methods like germination, roasting, soaking and fermentation, if well done, enhance nutrient quality of participating mothers' foods, thereby helping to better utilize the available nutrients in foods.



#### The Nutrient Village

Source: Nordin, Stacia. Sustainable Nutrition Manual: Food, Water, Agriculture & Environment. 2nd ed. Ed. Sarah Beare. Lilongwe: World Food Programme Malawi, 2016.

Use the SURE Complementary Food Recipe Book and the Ethiopia Complementary Recipe Book that is provided to you to identify and document recipes for meals and snacks that can be promoted in the respective kebeles at the different times of the year. The recipes in these books may have serving sizes for children; however, the recipes can be scaled up to feed a pregnant woman.



### Key reminders for each session

#### Leading the sessions

The health extension worker (HEW) should attend at least the first and last session of the CCFLS. It is important for the HEW to go on Day 1 to take MUAC measurements and introduce the CCFLS program. It is important for the HEW to attend Day 6 to answer any questions, engage with husbands, and close out the program. Ideally, the HEW should attend all sessions, if possible.

The HEW should be assisted by a health development army (HDA) volunteer or community health and nutrition promoter (CHNP). The HDA or CHNP will be responsible for running the day-to-day activities of the CCFLS, especially on days when the HEW is absent.

#### Starting each session

- The HEW takes and records MUAC measurements on the first day of CCFLS, referring any severely malnourished women or women with complications for further care.
- The HDA volunteer or CHNP marks the participants' attendance register on each day of the CCFLS.
- Facilitator asks for feedback from the previous sessions' home trials, and leads discussion on successes and challenges to cooking at home.

#### **Ending each session**

- Organize follow-up visits for women who did not come for the day's CCFLS.
- Summarize the day's activities.
- Encourage pregnant women to try the day's recipe and health and nutrition message at home for feedback the next day.
- Explain what will be covered the next day and remind participants of their obligations.
- Thank participants for coming for CCFLS and encourage them to come the next day.
- Clean all utensils and surrounding area after CCFLS.







### Reminders during cooking demonstrations

- Encourage each woman to participate.
- Have one or two community members present to support pregnant women during CCFLS.
- Divide participants into two cooking places during food preparation, with a maximum of eight people for each.
- Use measurements commonly used in the communities to measure food items.
- Encourage optimal hygiene during cooking demonstrations - handwashing, clean utensils, a mat for the children.
- Encourage participants to continue eating a variety of foods at home to remain healthy and strong, and for their baby to grow and develop well.
- Eating a variety of foods also makes pregnant women strong to deliver without problems and enables lactating women to breastfeed well.
- Increase food intake through snacking coupled with an additional one meal. Encourage the concept of "eating for two - mother and baby." Yet eating for two does not mean eating twice as much; it means eating a healthy pregnancy diet rich in nutrients to support your baby's development.
- By the end of the 6 days, mothers should determine at least two recipes each for meals and snacks that they will continue after CCFLS.

### Activity checklist for a 6-day CCFLS for pregnant women

DAY	DAY 1							
✓	Activity	Responsible						
	Complete the Registration Section of the CCFLS Registration and Tracking Form (Annex 2) for participating mothers and fill the Attendance Form (Annex 3).	HDA/CHNP						
	Take the MUAC of all enrolled mothers. Record measurements on Registration and Tracking Form.	HEW						
	Refer to the nearest health facility all mothers screened with:  complications (e.g. edema of the feet, dehydration, fever, fast breathing)  severe malnutrition (MUAC less than 22cm)  a health problem that requires urgent medical attention	HEW						
	Check participants' ANC attendance record and medicines administration i.e. immunization to prevent tetanus, Iron and folic acid (IFA) to prevent or treat anemia, deworming tablets to keep healthy and prevent anemia, anti-malaria tablets if you are living in a malaria prone area.  Ideally, this should be done prior to first day of CCFLS.	HEW						
	Remind participants of general orientation on the objectives of the session and the importance of their participation.	HDA/CHNP						

DAY	DAY 1					
✓	Activity	Responsible				
	Remind participating mothers of the details of the day's menu and the procedure to follow.	HDA/CHNP				
	Demonstrate the food processing technology for the day's menu and ask each mother (individually or in groups) to do the same.	HDA/CHNP				
	Explain the procedures to follow in cooking the day's menu.	HDA/CHNP				
	Observe mothers' hygiene and feeding practice.	All members led by the HDA/CHNP				
	Deliver the day's health/ nutrition education message. (Refer to accompanying Pocket Guide: CCFLS for Pregnant Women Health and Nutrition Lessons.)	HDA/CHNP or invitee				

DAYS 2 TO 4							
✓	Activity	Responsible					
	Complete the Attendance Form. Identify mothers who did not attend the previous day's session and plan a home visit either the same day or the next day.	HDA/CHNP					
	Explain the day's menu and its cooking procedures.	HDA/CHNP					
	Demonstrate the food processing technology for the day's menu and ask each mother (individually or in groups) to do the same.	HDA/CHNP					
	Provide guidance in preparing the day's menu.	HDA/CHNP					
	Ensure that mothers are participating in the cooking, one by one.	HDA/CHNP					
	Observe mothers' hygiene and feeding practice.	All members led by the HDA/CHNP					
	Ask participating mothers if they have prepared the previous menu at home.	HDA/CHNP					
	<ul><li>If yes, ask them what was the most challenging task for them?</li><li>If they did not cook, ask them why not?</li></ul>						
	Discuss solutions to any challenges. Remind them that the sessions are just a time to practice and to develop their skills and that they will benefit more if they start applying their skills at home.						

DAY	DAYS 2 TO 4						
✓	Activity	Responsible					
	Deliver the day's health/ nutrition education message. (Refer to accompanying Pocket Guide: CCFLS for Pregnant Women Health and Nutrition Lessons.)	HDA/CHNP or invitee					
	Conduct home visits to households who did not attend the session.  Ask them why they did not come, and help the absent households to overcome their challenges. (If the challenge the household is facing is too complex to be addressed, consult other people to help and find a better solution. You may also arrange for the HDA/CHNP or neighboring participant to train her on the menu privately if the household is willing.)	HDA/CHNP					
	Encourage households try the recipes and promoted practices at home.	HDA/CHNP					

DAY	DAY 5						
✓	Activity	Responsible					
	Follow the same standard procedures for days 2 to 4.	All members					
	Work with mothers to plan a demonstration for Day 6 for invited family members and community guests.	HDA/CHNP					
	The demonstrations should highlight recipes and lessons learned.						
	All mothers should play an active role in planning and demonstrations.						

#### DAY 6

Ideally, this session starts earlier than usual to last 3 hours (2 hours of CCFLS and 1 hour of community presentation)

✓	Activity	Responsible		
	Follow the same standard procedures from previous days.	All members		
	Complete the attendance column on the Registration and Tracking Form	HEW/HDA/ CHNP		
	Conduct the health/nutrition lesson and lead menu preparation for the day with mothers.	HDA/CHNP		
	Welcome guests to the session.	HDA/CHNP		
	Participants organize areas to showcase all the recipes - meals and snacks learned during the 6-day CCFLS. All participants take part in the community presentations.	All members		
	Participants in turn present all key health and nutrition messages to invited husbands, mothers, mothers-in-law, other family members, and people of influence in the community.	All members		

## **Chapter 3: Follow-up Home Visits**

Following up with mothers in their homes after CCFLS encourages them to adopt the eating and health practices that they learned.

- Ensure the household knows about your visit ahead of time.
- Plan your visit around meals or snacking times to better observe mother implementing learned practices.
- Encourage other family members husband, mothers, mothers-in-law and other family members - to be present.
- HDA/CHNP conducts at least one follow-up visit each month until the woman delivers her child (usually 6-8 months).
- Use GALIDRAA¹ approach to check and promote adoption of promoted feeding and caring practices from CCFLS
- Promote attendance at ANC sessions as directed.
- Ask mothers if they are continuing the practices learned during CCFLS. If not, ask them why not and discuss and agree on how best the household can be supported to overcome any challenges they are facing.
- Complete the CCFLS Monthly Follow-Up Form (Annex 4).



1. Greet, Ask, Listen, Inquire, Discuss, Recommend, Agree, Plan Action for follow up

## **Additional Information:** Site Establishment

It is suggested that each CCFLS implementation site has the following tools (fuel-efficient stove, handwashing station, drying rack, and play area) for high-quality implementation. Please discuss with the gender group and other ELRP groups to get more information on building and promoting these tools in your community.



### **Fuel-efficient stove**

The program promotes the use of fuel-efficient stoves to improve land quality and reduce burden on women and girls, namely the *harari* and *mirt* (locally called *amhara*) stoves. These also reduce smoke production, which protects the health of mothers and young children.

Fuel-efficient stove groups are trained in the production of fuel-efficient stoves in your community and should be consulted for guidance on how to build these stoves.



### Dish drying rack

A dish drying rack can be any size and uses small sticks tied together to form a table.

- They are over 100cm above ground and provide good dish protection from small animals.
- They should be placed in a sunny area so that ultraviolet light sterilizes the dishes.
- Small vegetables can be grown under the rack to benefit from dripping water.
- Dishes are kept on the rack until they are dry before taken inside for safe keeping.





### **Traditional handwashing facility**

Locally made handwashers keep hands clean where there is no running water. There are several designs of locally made handwashing facilities that can be erected. Handwashing facilities are used when people need to wash their hands and water is scarce or faraway.

- Erect your handwashing facility where you need it, e.g. outside a toilet or next to food preparation area.
- Always use locally available materials and incorporate a soap holder.
- The size of handwashing facilities varies according to the number of people they serve and their frequency of use. The larger the recycled bottle, the more water is available for washing.
- Minimize any hand recontamination after handwashing.

### Children's play area

- Ensure that older children are kept busy during cooking sessions and monitored by a childminder.
- Ensure that the area is clean and there is a mat to sit on. Clean mats allow children to play away from dirt and animal feces, which cause diarrhea and poor growth.
- The place should be safe from child injuries.
- Play materials can be made using local materials prior to CCFLS. Play materials can be borrowed from nearby early child development centers.





# **Annex 1: Food Availability Calendar**

Food Group	Туре	Sep	Oct	Nov	
Staples	Teff	400			
	Barley	A STATE OF THE PARTY OF THE PAR			
	Millet	al Gran			
	Sorghum	9			
	Maize	*			
	Wheat				
Legumes/nuts	Lentils				
	Beans	4			
	Ground nuts	B			
	Chick peas	-60g-			
Vegetables	Kale / swiss chard	A.			
	Pumpkin	(1)			
	Orange sweet potato	<i>€</i>			
	Carrot	4			
	Broccoli	•			
	Squash				
Animal foods	Egg	Ø.			
	Milk	Ű			
	Meat	6			
	Fish	<b>**</b>			
Fruits	Banana	3			
	Mango	Ø			
	Orange	ර්			
	Papaya	•			
	Guava	(ii)			
Oils	Cooking oil	<b>%</b>			
	Avocado	€			

Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug

# **Annex 2: Registration and Tracking F**

Name of HEW: .....

Kebele/Village:				Name of CHNP:				
Registration								
S/N	PSNP Client (Yes/No)	PSNP ID	Name of HH Head	Name of Pregnant/Lactating Woman (first name, father's name, grandfather's name)	Date of Birth (dd/mm/yy)	Age on Day 1 CCFI (years)		
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
				i				

#### Instructions:

Registration Section:

Woreda: .....

Purpose: This section of form is prepared to register the number and details of pregnant/lactating women registered for CCFLS in a pa
To be completed by: The section will be completed by HEWs in liaison with H&N Experts and CHNP.

When: This section must be completed during the initial CCFLS planning meeting, before day 1 of the session.

Reporting: When registration section is complete, remove one carbon copy of the form and submit to H&N Expert.

Tracking Days 1-6 Section:

Purpose: This section of form is prepared to track the number of days the participant attends CCFLS.

To be completed by: The section will be completed by HEWs in liaison with H&N Experts and CHNP.

When: This section should be completed after all 6 days of CCFLS have been completed. Refer to the Attendance Sheet to calculate the Reporting: At the end of day 6 when the Tracking: Days 1-6 section is complete, remove one carbon copy of the form and submit to H8

Tracking 6 Months Section:



Last Day o					st Day of CCFLS: st Day of CCFLS:			
							Tracking: Days 1-6	Tracking: 6 months
_	Trimester (first/second/thir			ANC Service	ce Check		No. of Days in	Completed 6 M onths follow-up (yes/no)
	d) or Age of child (months)		Tetanus	IFA	Deworm	Anti Malaria	CCFLS	
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i.	icular health post ca	atchment.						
tr	otal number of days each participant attended.							

### **Annex 3: Attendance Form**

### **CCFLS Attendance Form (Pregn**

Partner:	Name of HEW:
Woreda:	Name of CHNP:
Kebele/Village:	Date of CCFLS D
Name of Health Post:	Date of CCFLS D

#	PSNP Client	PSNP ID of HH Head	of HH Head .	Name of Pregnant/Lacta Woman
	(Yes/No)			(first name, father's name)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

#### Instructions:

Purpose: This form is prepared to register details of pregnant/lactating women when when the control of the con

To be completed by: The form will be completed by HEWs in liaison with H&N Exp When: This form must be completed over the course of the 6-day session.

Reporting: When the 6-day session is completed, HEW should save this form in the

### ant/Lactating Women)

•••••••••••••••••	•
ay 1:	
ay 6:	

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ne,	1	2	3	4	5	6	Present	

no complete the 6 days of CCFLS.

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## **Annex 4: Monthly Follow-Up Form**

#### **CCFLS Monthly Tracking Form (Pre**

Partn	er:				Name of Health Po
Wore	da:				Name of HEW:
Kebel	e/Village:		•••••		Name of CHNP:
#	PSNP Client (Yes/No)	PSNP ID HH Head	of	Name of Pregnant/Lacatating Woman (first name, father's name, grandfather's name)	Date of B
1				-	
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

#### Instructions

Purpose: This form is prepared to register details of pregnant/lactating women who completed six month To be completed by: The form will be completed by HEWs in liaison with H&N Experts and CHNP.

When: This form must be completed once per month for six-months following the completion of the 6-da Reporting: When the monthly follow-up visits are completed for all participants, HEW should save this for

h	Age (Years)		Da	te of Follow-l	Jp Visit (dd/n	nm/yyyy)		
y)		Visit 1	Visit 2	Visit 3	Visit 4	Visit 5	Visit 6	
	L							

# **Annex 5: Quality Improvement Plann**

### **CCFLS Quality Improvement Plann**

<b>Prepare for:</b>	Name Woreda Health Office:
	Date (dd/mm/yyyy):CCFLS Planned S
Prepared by:	Name of HEW:Name and C
Checked by:	Name and Signature of ELRP H&N Expert

#	Activity
1	Complete CCFLS registration form for participating women
2	Anthropometric measurements taken and recorded
3	Refer pregnant women with MUAC less than 22 cm to health facility
4	Check ANC attendance and advised/ encouraged accordingly
5	Mark Attendance register
6	Provide general orientation on the goal and objective of CCFLS and attendance and participation
7	Explain nutrition values and preparation procedure for the days menu
8	Provide guidance during preparation of the menus
9	Demonstrate the food processing technology for the day's menus and participant (individually or in groups) to do the same
10	Ensure good hygiene during CCFLS
11	Deliver the day's health/ nutrition education message as planned
12	Ask participants if they cooked one of the new CCFLS recipes at hon day off, the same way that they learned during CCFLS. Any challeng
13	Put in place a home-visit follow-up plan for households who missed
14	Conduct home visit to households who did not show-up for the session
15	Discuss and share the plan for follow-up with caregivers
16	Complete tracking section of registration and tracking form

# ning Checklist

### ing Checklist for Pregnant Women

Name of Health Post:
start date (dd/mm/yyyy) and Time (hh:mm):
ell No. of HEW:

	Day of CCFLS						Responsible Person
	1	2	3	4	5	6	
					/		
					$\setminus$		
importance of full							
s to participants							
ask each							
ne and during the es							
the day's CCFLS.							
on							
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# **Annex 6: Quality Improvement Verifi**





#### **CCFLS PLW Quality Improvement Verification Checklist**

Obse	ervation Conducted By:	<u>P</u>	ositio	<u>ı:</u>
Date	of Observation (dd/mm/yyyy):	CCFL	S Day	<u>No</u> :.:
#	Essential CCFLS Component	Yes	No	Feedback For Improvement
1	CCFLS facilitator (s) were at the venue prior to CCFLS starting time			
2	CCFSL facilitator warmly and enthusiastically greeted and praised women for coming.			
3	Did the CCFLS planning session use results from community-based observations?			
4	Were the CHNP actively involved during CCFLS?			
5	Were all women's ANC visits verified on Day 1?			
8	Were women identified with malnutrition referred to the nearest health facility?			
9	Did all women bring the agreed contribution to the CCFLS session?			
10	Did the recipe use locally available foods?			
11	Were the ingredients used in the recipe affordable?			
	Does the recipe include foods from at least four			
12	food groups (source of protein, fat, carbohydrate, and vegetable or fruit)?			
13	Has the group agreed to conduct CCFLS for 6 days?			
14	Was the attendance form completed neatly and accurately?			
15	Was the Quality Improvement Planning Checklist completed neatly and accurately?			
16	Was the registration and tracking form completed neatly and accurately?			
17	Was the group composed of 15 or fewer women?			
18	Did CCFLS facilitator recap the day's menu and activity at the end of CCFLS and reminded participants about the next day's activity			
19	Did the CCFSL session last within 2 to 3 hours?			
20	Is the CCFLS place conducive to women (distance, sanitation, hygiene)?			
	TOTAL number of yes/no			General Comment:

## cation Checklist

Positive feedback to CCFLS participants and facilitators and encourage them to keep up the good work				
Discuss and Agree on 3 goals for CCFLS facilitators and Participants for next session to improve serformance:				
1				
2-				
3-				

ff	Name	Position
1		
2		
3		
4		

## faith. action. results.

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