

NS COORDINATION MEETING

NS Coordination Office/Online | 29 October 2024 | 10:00AM–01:00 PM



Meeting Minutes

Chair: Owen White Nkhoma, OIC, NS Coordinator

Note taker: Suparna Das Toma, UNV Nutrition Officer, NS

Participants: ACF, Concern, ECHO, Friendship, GK, HI, MSF, SHED, SCI, UNHCR, UNICEF, WFP, WHO, WVB. See Annex I for the list of participants from each organization.

Welcome and Introductions

Owen Nkhoma, OIC - NS coordinator welcomed all the participants to the Nutrition Sector Coordination meeting held on 29 October 2024. With a quick introduction, the main agenda of the meeting was started.

Agenda

- Review previous meeting minutes.
- Update from CMAM/IYCF/AIM TWG
- IM Update.
- AOB
 - ✓ JRP Update
 - ✓ Update on volunteer demand.
 - ✓ Staff Optimization taskforce update
 - ✓ Any Challenges or update.

Reviewing action points of the previous meeting:

	Action points	Focal point	Timeline	Status
1	To explore the available resources/documents to understand the feasibility of providing IFA as blanket distribution regardless of the service being provided at ANC in health facilities if there is no risk of overdose	IYCF TWG	ASAP	Will update the status by next meeting
2	To prepare one pager for each of the piloting scenario of WHO CMAM recommendations and to communicate with AIM TWG focal point regarding the exact sample size required to reflect the actual result of the piloting	CMAM TWG	ASAP	Ongoing
3	To consult with GNC technical expert regarding the process of piloting WHO CMAM recommendations	NS	ASAP	Completed
4	To demonstrate the FCRM to all partners	Concern Worldwide	28 th October 2024	Rescheduled in November

5	To share the possible component and flow to carry out CFM in the facility covering all child	SHED	28 th October 2024	Ongoing
6	A ToR of Volunteer will be shared with all partners for review	NS	24 th September 2024	Completed.
7	To engage all engineers to form a taskforce for proposing INF structure design	All partners focal point	26th September 2024	Completed.

Discussion on Action Points-

- ✓ IYCF TWG will update all partners on the existing evidence of feasibility to distribute IFA as blanket after exploring the resources in the next meeting.
- ✓ CMAM TWG drafted the one pager on each piloting scenario which will be shared with all partners as soon as possible.
- ✓ The demonstration of FCRM by Concern Worldwide was rescheduled to the next NS coordination meeting.
- ✓ SHED will share the possible component and flow to carry out CFM in the facility, covering all children.

Update from TWG

● CMAM TWG

- ✓ Recent WHO recommendation on prevention and treatment of malnutrition piloting is ongoing. The plan is to continue the enrollment till end of October 2024. UNICEF is supporting to calculate the sample size required. Based on the calculation, if necessary, CMAM TWG will extend the duration of piloting.
- ✓ The CMAM Admission & discharge criteria document has been reviewed and updated. The updated version will soon be shared with CMAM TWG members for further review. The plan is to finalize it by December 2024.
- ✓ Indicators for 0-5 months infant at risk assessment has been discussed and finalized based on the new WHO recommendations. These are incorporated in the new PiN target calculation for 2025.

● IYCF TWG

- ✓ The IYCF TWG has established a taskforce to address the recommendations from the recent IYCF workshop. One key recommendation is to develop a facilitator guide and training module, with a meeting scheduled for October 30, 2024, to discuss this further.
- ✓ A draft guideline on MTMSG has been circulated among IYCF TWG members for review and finalization.
- ✓ Following the IYCF workshop recommendations, all reporting tools have been shared with members for review, including a new register specifically for pregnant women (PW).
- ✓ The IYCF indicator target setting has been completed and approved by AIM TWG, with the PiN target shared with all partners. NS requested IYCF TWG to complete the process to update the recording and reporting tools within December 2024 as there are few major changes in IYCF in 2025 which need to be in line with the new recording tools.

● AIM TWG

- ✓ The JRP PiN and target calculations have been endorsed by the AIM TWG and shared with all partners.
- ✓ UNHCR has proposed a timeline for the quantitative portion of the NCA, with training anticipated to begin on November 10, 2024, followed by data collection until December

6, 2024. Two subsequent weeks will focus on server data validation, and results dissemination will follow within one week. Given that the implementing partner's budget expires on December 31, 2024, scheduling into the next year poses a challenge. Therefore, UNHCR has requested the development of the risk factor questionnaire by November 7, 2024. Once the questionnaire is received, UNHCR will prepare and review the KOBO form and proceed with enumerator training.

- ✓ The quantitative data needs to be shared with other UN agencies for the qualitative analysis; however, there are challenges related to data sharing policies. UNICEF and UNHCR will address these in a bilateral discussion.
- ✓ The AIM Technical Working Group will arrange a meeting with all stakeholders involved in the upcoming nutrition survey (quantitative and qualitative).
- ✓ UNICEF has finalized the contract with ACF UK and held an ad-hoc meeting to discuss the alignment process between the quantitative and qualitative components.

IM update as of September 2024

- ✓ NS IMO prepared in depth analysis till September 2024 and presented IM update including the summary achievement.
- ✓ Concern Worldwide is covering 39% of total beneficiaries targeted for JRP 2024 where 20% by GK, 29% by SHED and 13% by World Vision.
- ✓ As of September 2024, 71% of SAM target, 64% of MAM U5 and 77% of MAM PLW reached by all partners. IFA was received by 49% and 76% of the PLW and adolescent annual targets, respectively.
- ✓ The Health Sector Coordinator inquired about the current prevalence rate of IFA supplementation among PLW and informed participants that, per WHO guidelines, a blanket distribution of IFA is recommended if prevalence exceeds 20%. The HS coordinator suggested holding a bilateral discussion with the WHO technical team and the Nutrition Sector regarding the feasibility of implementing a blanket distribution of IFA and also explore collaboration between two sectors.
- ✓ Admission trends for SAM and MAM increased by 18% & 33% respectively in 2024 among children 6-59 months compared to the same period (Jan – Sep) in 2023.
- ✓ Out of total 33 camps, only 20 camps for SAM have reached over 70% of their annual JRP target as of September where only 12 camps reached up to 70% and more for MAM admission target.
- ✓ It was discussed regarding the hunger strike at the KTP RC and Concern Worldwide is requested to gather information on the proportion of households involved. If the numbers indicate a significant issue, NS will escalate it to ISCG for further action.
- ✓ NS plans to upload the interactive dashboard with program updates to the Rohingya Response website managed by ISCG by the end of 2024, following the incorporation of all partner recommendations.
- ✓ World Vision Bangladesh (WVB) was requested to analyze and triangulate data on SAM admissions by MUAC and cases of relapse (3% for WVB but 1% for the rest IP), as the percentage appears higher compared to other implementing partners.
- ✓ Non-response rate was always an issue especially for SAM. From the analysis it has been noticed that only 14 sites out of 45 (29%) have non-response rate less than 5% whereas 16 (35.5%) have non-response rate over 10%. On the other hand, for MAM, 8 sites (20%) have non-response rate over 3% whereas 10 sites (24%) with NO non-response rate. Partners were requested to arrange an in-depth conversation with the site supervisors and analysis the data to present the major reasons for non-responder in the next meeting. NS will share the presentation of IM update with all partners.

SAM		MAM	
Non-Response Rate	Number of sites	Non-Response Rate	Number of sites
>10%	16 (35.5%)	>3%	08 (18%)
5%-10%	16 (35.5%)	0%-3%	27 (60%)
<5%	13 (29%)	0%	10 (22%)

- ✓ A remarks section needs to be added to the CMC card (OTP) to note observations or reasons for being non-responder.
- ✓ For SAM, highest average weight gain is 3.48 g/kg/day and lowest length of stay is 67.39 days. NS will analyze the trend of LOS and AWG along the different period to find out the reasons and will present it in the next meeting.
- ✓ Overall, 78% of SC target reached (38% from NS partners and 40% from MSF). From the admission it has been observed that the admissions have doubled this month compared to other months. According to the partners, the SC admission is higher due the seasonal diseases (Ex- cholera, Diarrhea etc). It is also recommended to check with the health sector dashboard to gather evidence on outbreaks.
- ✓ For MAM PLW, the overall increase in admission is 3% compared to the data of 2023. 23 camps reached over 70% admission of their annual target where 10 camps reached below 70%.
- ✓ For NSEP, the number of reached children increased from July as the registered camps started the E-voucher program from July. Number of BSFP PLW reached every month is showing a decreasing trend. NS requested the partners to analyze and triangulate the data.
- ✓ Every month almost 102% of children under 5 receive GMP as well as 98% children are receiving BSFP and Nutrition Sensitive E-voucher (NSEP) as well as 99% PLW are receiving BSFP. 109% of IYCF target reached as of September 2024.
- ✓ GK and WVB reported zero volunteers trained in IYCF counseling. They clarified that the training was completed and confirmed they will update the data accordingly.
- ✓ Partners reached 102% children U5 during mass MUAC screening and 105% children 24-59 m were provided with deworming tablets in the deworming campaign second round.
- ✓ NS has two types of volunteers- Semi-skilled and Unskilled. The estimated monthly budget for volunteers is BDT 17 million. As per the recent data, the proportion of host community (HC) volunteer is 34% among the partners. According to the volunteer guideline, the HC volunteers should be around 25%. As of September, Concern worldwide, GK, SHED and WVB has 45%, 11%, 29% and 46% of the HC volunteers respectively. NS requested partners to provide the explanation for recruiting the HC volunteers more than 25% in the next meeting.
- ✓ A total of 694 (41%) of total volunteers are female. Concern worldwide, GK, SHED and WVB has 39%, 41%, 43% and 42% of the female volunteers respectively.
- ✓ In the host community, 7,324 children under 5 with MAM were reached, achieving 146% of the annual target. For MAM among PLW, 80% of the yearly target was reached. Regarding IFA supplementation, target achievements were 125% for PLW and 24% for adolescents. The lower achievement for adolescents is due to the absence of a specific program targeting this group in the host community.
- ✓ As of September, NS appealing partners secured 78% of the funding. For prevention and treatment of malnutrition, 8.3 million USD is still required.
- ✓ NS IMO informed the partners about all the digital products of NS link of which are attached as follows-

- NS Website: <https://rohingyaresponse.org/sectors/coxs-bazar/nutrition/>
- GNC Website: <https://www.nutritioncluster.net/country/coxs-bazar>
- Online Map for Navigation:
https://www.google.com/maps/d/u/0/edit?mid=1nQh0RfdxI2Hc8lCIWqCwYMwdmwLO_iB9&usp=sharing
- NS Google Drive:
https://drive.google.com/drive/folders/1ckgNR2N3fJ3kGkgta_8FnTYy6nEchEt?usp=sharing
- NS SharePoint:
<https://unicef.sharepoint.com/teams/BGDNCoxsBazar/NS%20documents%20repository/Forms/AllItems.aspx>
- Facebook: <https://www.facebook.com/NutritionSectorCXB/>
- Instagram: <https://www.instagram.com/nutritionsectorcxb/>
- YouTube: <https://www.youtube.com/@nutritionsectorcxb>

AOB

- **JRP:** NS shared the PIN target to ISCG. The project template, guidelines and other supporting document is already shared widely with partners. The deadline of submitting the project template is 7th of November 2024. NS requested all appealing partners to adhere to this timeline. According to the 2025 JRP schedule, the peer review process—comprised of national NGOs, international NGOs, and UN agencies will take place following the submission deadline.
- **Update on volunteer demand:** The minutes from the last meeting with volunteer representatives and ISCG have been shared with all partners, site supervisors, and volunteer representatives. Additionally, the Nutrition Sector (NS) requested that partners help sensitize volunteers about the fundamental differences between volunteerism and employment.
- **Staff Optimization taskforce update:** Taskforce shared their final output with NS and requested to organize a SAG meeting to endorse the document.
- **Any Challenges or update:** NS requested partners to share any challenges/ burning issues till date in the meeting. Partners shared that all issues were already discussed in the meeting.

Summary Action Points

Action points	Focal point/agency	Timeline
To explore the available resources/documents to understand the feasibility of providing IFA as blanket distribution regardless of the service being provided at ANC in health facilities if there is no risk of overdose	IYCF TWG	ASAP
To share the one pager for each of the piloting scenario of WHO CMAM recommendations	CMAM TWG	ASAP
To demonstrate the FCRM to all partners	Concern Worldwide	25 th November 2024
To share the possible component and flow to carry out Child Functioning Module in the facility, covering all children.	SHED	25 th November 2024
UNICEF and UNHCR arrange a bilateral discussion on data sharing of NCA	UNICEF and UNHCR	ASAP
To complete the process of updating the recording and reporting tools	IYCF TWG	December 2024

To collect information on the proportion of HH in KTP RC involved in the hunger strike.	Concern Worldwide	ASAP
To place the interactive dashboard of NS program update in the Rohingya response website managed by ISCG	NS	December 2024
To analyze and triangulate the data regarding admission of SAM by MUAC and relapse	WVB	By 28 th November 2024
To arrange an in-depth conversation with the site supervisors and analyze the data to present the major reasons for non-responder	All partners	By 28 th November 2024
Analyze the trend of LOS and AWG along the different period to find out the reasons	NS	28 th November 2024
To check with the health sector dashboard to gather evidence on morbidity	All partners and NS	ASAP
To provide the explanation for recruiting the HC volunteers more than 25%	All partners	25 th November 2024
Submit the JRP project template within the deadline	All partners Appealing	7 th November 2024
To organize a SAG meeting to endorse the document of staff optimization taskforce	NS	ASAP

Closure: Nutrition Sector is grateful to all nutrition partners for their active participation and contributions. The meeting ended at around 01:00 p.m., and the next meeting has been scheduled 25th November 2024 at 10.00 AM to 01.00 PM.

Annex 1: List of Participants:

In person:

Name	Org	Email
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