



BULLETIN

NUTRITION SECTOR COX'S BAZAR, BANGLADESH

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SECTOR HIGHLIGHTS

- Nutrition Sector (NS) arranged a Community Management of Acute Malnutrition (CMAM) review workshop involving all NS partners to review updated WHO guideline published last year. In total, 38 participants (11 female, 27 male) from local and international NGOs and UN agencies attended the workshop and worked on the updated recommendations.
- The first round of Vitamin A campaign and mass MUAC screening in the Rohingya refugee camps was carried out on 7-11 July with over 147,400 children (49% female) screened for malnutrition and reached with vitamin A capsules.
- Nutrition Sector partners planned to celebrate the World Breastfeeding Week from 1 – 7 August in the camps and host community. However, owing to the prevailing political unrest in the country, the activities involving public gatherings were postponed till the second and third week of August. The chosen theme for this year of 'Closing the Gap: Breastfeeding Support for All' was formulated on a worldwide scale.
- Nutrition Sector arranged a blended training on sector coordination for the nutrition sector partners which is a combination of self-paced online learning of pre-defined modules and interactive sessions with online/in-person facilitator. Total 26 participants (8 female) completed the training successfully.
- An orientation on PSEA was organized for the Integrated Nutrition Facility Focal points as a refresher for 2024. Total 45 participants (9 female) completed the training successfully.

NUTRITION PROGRAMME UPDATE

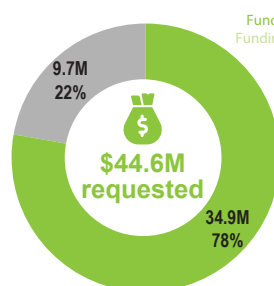
REFUGEE	2024 TARGET	PROGRESS (Jan-Sep)
SAM	12,200	8,621 (71% of target) Cure rate 90.42%
MAM	U5* - 59,400 PLW - 3,500	U5 - 37,977 (64% of target) Cure rate 98.49% PLW - 2,688 (77% of target)
IYCF	86,100	93,836 (109% of target)
BSFP	U2* - 57,900 PLW - 40,300	U2 - 56,551 (95% of target) PLW - 39,925 (99% of target)
NSEP	O2** - 86,700	O2 - 85,824 (99% of target)
IFA	PLW - 33,600 Adolescent - 99,000	PLW - 16,621 (49% of target) Adolescent - 76,871 (78% of target)
GMP	154,400	156,843 (102% of target)
VAS R1	152,000	143,706 (94% of target)
Deworming R1	92,000	92,457 (100% of target)

HOST COMMUNITY	2024 TARGET	PROGRESS (Jan-Sep)
MAM	U5* - 5,000 PLW - 2,400	U5 - 7,324 (146% of target) Cure rate 96.75% PLW - 1,930 (80% of target)
IYCF	27,200	29,297 (108% of target)
IFA	PLW - 12,000 Adolescent - 37,000	PLW - 15,005 (125% of target) Adolescent - 9,041 (24% of target)

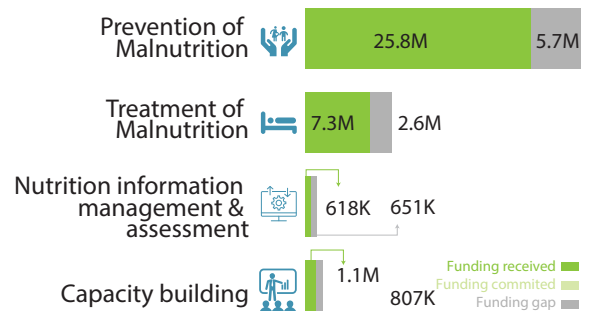
*U5 denotes children of 6 to 59 months; **O2 denotes children of 24-59 months.

FUNDING UPDATE AS OF 15 SEPTEMBER 2024

Overall Funding Status



Funding Status by Activity



Note: Prevention and treatment of malnutrition is the most critical priority needs where USD 8.3M are still needed.

MASS MUAC SCREENING AND VITAMIN A CAMPAIGN

UNICEF, in collaboration with the Nutrition Sector partners and the UN agencies (UNHCR and WFP), conducted a vitamin A campaign, targeting the children aged 6-59 months in 33 camps from 7 July 2024 to 11 July 2024. The campaign was carried out by obtaining crucial approvals from the Civil Surgeon Office, and the RRRC office in Cox's Bazar.

The campaign also included mass MUAC screening for the children with acute malnutrition as well as Infant

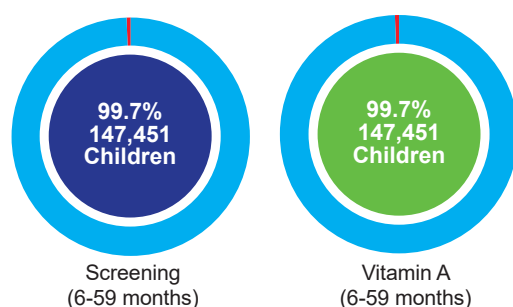


Photo: Mass MUAC Screening, Concern/2024



Photo: Vitamin A Campaign 1st round 2024

Figure 1: Mass MUAC Screening and Vitamin A Campaign Coverage



and Young Child Feeding (IYCF) messaging for the pregnant women and caregivers of children aged 0-23 months. A total of 147,451 children aged 6-59 months (49 per cent girls) received vitamin A capsules and were screened for malnutrition using MUAC, representing 99.7 per cent of the total target of 148,000. During the campaign, a total of 1,683 children with acute malnutrition were admitted (335 children to the Outpatient Therapeutic Programme for the treatment of SAM, and 1,348 to the Targeted Supplementary Programme for the treatment of MAM). Furthermore, a total of 56,910 pregnant mothers and caregivers of children aged 0-23 months received age-appropriate IYCF messaging.

WORLD BREASTFEEDING WEEK 2024 CELEBRATION



The Cox's Bazar Infant and Young Child Feeding (IYCF) Technical Working Group (TWG), with the support the Nutrition Sector partners, led the celebration of World Breastfeeding Week from 01 August to 07 August. However, owing to the prevailing political unrest in the country, some activities involving public gatherings were postponed till the second and third week of August. The chosen theme for this year - **"Closing the Gap: Breastfeeding Support for All"** - was formulated on a worldwide scale. The week's campaign highlighted the vital health benefits of breastfeeding for both mothers and babies.

In collaboration with the UN agencies (UNHCR, UNICEF and WFP), the



Photo: Community Engagement with Influential Local Leaders. NS partners/2024



Photo: Roundtable Discussion with Health Sector Service Providers



Photo: Quiz Competition with Mothers and Caregivers.

nutrition partners (CWW, GK, SHED and WVB) carried out several awareness events around the camps. The events were attended by women, caregivers, community leaders, government representatives, and various other stakeholders.

The following activities were conducted:

- Rallies with stakeholders, beneficiaries, and service providers
- Quiz competition with mothers and caregivers at Integrated Nutrition Facilities (INF)
- Community engagement with influential local leaders.

ACCOMPLISHED A TRAINING ON “FCRM SYSTEM AND OPERATIONALISATION OF AAP FOR NUTRITION SECTOR PARTNERS”

Concern Worldwide, the AAP Lead, in collaboration with the Nutrition Sector, organised a three-day training session on 09-11 July 2024 in Cox's Bazar, supported by Irish Aid grants. Thirty-one participants (10 male and 21 female) participated from the nutrition partners: SHED, World Vision, and Gonoshasthaya Kendra (GK). Besides, the World Food Programme (WFP) observed the whole training and gave inputs on their experience. The WFP representatives expressed, “The training session will keep a significant role in AAP and CRM operationalisation, the initiatives of the training conduction by Concern is appreciable. We wish and will work for continuation of this kind of activity in future - yearly at least two times”.

The objectives were to clarify accountability obligations, integrate Accountability to Affected Populations (AAP) into project roles, conduct AAP assessments, develop action plans, and strengthen feedback and reporting mechanisms within the Nutrition Sector. The training enhanced the participants' skills in implementing AAP and using the Feedback Complaint Response Mechanism (FCRM) for humanitarian actions, employing interactive

methods, such as AAP learning modules, real-life case examples, community-led monitoring frameworks, and data-driven feedback analysis.

Key outcomes included a deeper understanding of AAP, improved operationalisation of FCRM, and better data collection and reporting practices. The event harmonised processes, tools, and techniques, improving accountability and operational efficiency within the Sector. It also laid the foundation for long-term, sustainable support by empowering the field teams to respond more effectively to the needs of the affected populations.

These outcomes align with the action plans by fostering a better understanding of AAP, standardising feedback mechanisms, and promoting data-driven decision-making. The event strengthened the quality of humanitarian assistance in Cox's Bazar by encouraging transparency, enhancing coordination, and ensuring accountability at every stage of humanitarian response, serving as a catalyst for more efficient, outcome-oriented interventions.

RE-LACTATION: SAVING THE LIFE OF A CHILD

Laila Begum and Kobor Ahmed were living in the C-1 Sub-block of Camp-1E in Cox's Bazar with their four children. After Laila became pregnant, she was enrolled to the Blanket Supplementary Feeding Programme (BSFP) of Gonoshasthaya Kendra (GK) Integrated Nutrition Facility (INF) of Camp-1E Site-01. Unfortunately, she died during the birth of her fifth child, Sirajul Jannat, on 05 March 2024. Jannat's father was anxious to ensure her feeding. After the respective Community Nutrition Volunteers (CNVs) informed the situation, the nutrition team went to Jannat's house and sensitised her father on the importance of breastfeeding, the adverse effects of Breast Milk Substitute (BMS) and requested to allow exploring interested caregivers for wet nursing. The nutrition team found her aunt (in A12 Sub-block), who was interested to breastfeed. It was a challenge to establish the re-lactation, as her youngest child's age was 12 years already. Jannat and her aunt were enrolled in the management of small and nutritionally at-risk infants under six months and their mothers (MAMI) programme whose birth weight was 2.1 kg. On the first visit, she was oriented on appropriate breastfeeding position and attachment and recommended hygiene and care practices and was admitted to the BSFP as a breastfeeding woman. Meanwhile, regular home visits were conducted and within a few days, breast milk secretion was observed. With appreciation, the mother was counselled on warm cloth compression and repeated suckling by the child. Through regular follow-up and counselling, the mother got the proper flow of breast milk some days after the second visit. Three-month-old Jannat's weight increased to 4.4 Kg on 25 June 2024. Jannat's father became happy and grateful to the nutrition team members for their continuous support.



Photo: Sirajul Jannat with her caregiver on the follow-up visit. GK/2024

REVIVAL OF ASIYA WITH INTENSE AND PERSISTENT CARE

Asiya Bibi was born in September 2022 in Camp-5. Asiya was weak during birth and became sick frequently. But her parents did not take her to the doctor and treated her by a local quack. So, her condition began to deteriorate day by day. Our community nutrition volunteers identified her as a severely malnourished child and referred her to our nutrition facility. She was admitted to our OTP on 17 September 2023. Her weight and MUAC were very low during admission (Weight: 6.5 Kg, MUAC: 11.4 cm, Age: 11 months). Despite the admission, her parents refused to feed RUTF to her, as the local quack forbade them to feed RUTF to their daughter. In this situation, the condition of the child became more vulnerable day by day, as the parents continuously refused to feed her RUTF and accept our treatment. They were also used to believing in superstition and had faith in the incantation of the local Tantric. Our



Photo: Feeding RUTF to Asiya by volunteer. WVI/2024

CNVs continuously advised them and when they refused repeatedly to take services, our staff and supervisor went to the block and discussed the problem with the majhi (leader) of that block. The majhi finally understood the necessity of the treatment of that child. We, along with the majhi, then counselled her parents and they finally agreed to take the services. Our CNVs went to Asiya's house regularly to ensure the feeding of RUTF, as we had some reservations about the parents' feeding and caring practices.

After the 12th visit, she was discharged from our OTP with a minimum healthy weight and MUAC measurements.

During discharge, her LOS (length of stay) was 84 days, and her average weight gain (AWG) was 2.75 g/kg/day.

After being discharged from OTP, the child was kept under our observation in OTP follow-up for 28 days. Then she was admitted into our TSFP (Targeted Supplementary Feeding Programme) as a moderately malnourished child (MAM). Her supplement shifted from RUTF to RUSF, and finally she was enrolled into Blanket Supplementary Feeding Programme (BSFP) following full recovery. WVB would like to express gratitude to UNICEF and WFP for their huge technical, financial and material support.

Asiya's mother Halima Khatun's testimony:

"We had a strong faith in our local Tantric. He told us that our child was possessed by some supernatural being, and he would help us to revive our child's health. So, we treated our daughter by him, but couldn't find any improvement in her health. Moreover, our child became weaker day by day.

The child started to get healthy only when we started her treatment at the nutrition centre and followed their advice. Now we motivate everyone around us, who has an unhealthy child like us, to get timely and proper nutritional care, rather than going to a Tantric or having superstition about these health issues."

Abbreviation

BSFP	Blanket Supplementary Feeding Program
FCRM	Feedback Complaint Response Mechanism
GMP	Growth Monitoring and Promotion
IFA	Iron and Folic Acid
INF	Integrated Nutrition Facility
IYCF	Infant and Young Child Feeding
MAM	Moderate Acute Malnutrition
MUAC	Mid-Upper Arm Circumference
NSEP	Nutrition Sensitive E-Voucher Programme
O2	Children over 2 years
PLW	Pregnant and Lactating Women
RUSF	Ready-to-use Supplementary Food
SAM	Severe Acute Malnutrition
TSFP	Targeted Supplementary Feeding Program
U5	Children Under 5 years
WHO	World Health Organization
WHZ	Weight for Height Z-score

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About Nutrition Sector (NS)

The Nutrition Sector was established in 2017 during the Rohingya refugee influx in Cox's Bazar, with the goal to provide coordinated nutrition interventions. To ensure effective delivery of nutrition services, the Sector collaborates with 10 partners, including the Government of Bangladesh in 2024. This collaboration allows the Sector to operate at the forefront of nutritional interventions. The Sector has a Strategic Advisory Group that advocates for strategic priorities and supports contingency plans. Currently, the Sector comprises three technical working groups, namely, the Infant and Young Child Feeding in Emergency Working Group, the Community Management of Acute Malnutrition Working Group, the Assessment, and Information Management Working Group. These working groups guarantee compliance with national and international standards.

This quarterly bulletin for the Nutrition Sector in Cox's Bazar in 2024 showcases the sector's achievements, updates, and emergency responses etc. The bulletin highlights the sector's success in strengthening humanitarian nutrition coordination, which has led to a predictable and accountable response. In addition, it captures the high-level brainstorming workshop that was held to enhance the sector's capabilities to address potential nutrition issues. Additionally, the bulletin features survey findings and success stories that illustrate the sector's outstanding work. The sector's commitment to cutting-edge humanitarian responses is evident in this bulletin, which doubles as a testament to its unwavering dedication. Consequently, the Sector has been able to provide effective nutritional interventions to those in need.