

# NS SAG MEETING

NS Coordination (Virtual) | 07 July 2025 | 04:00 PM– 05:00 PM



## Meeting Minute

Chair: Kibrom Tesfaselassie, NS Coordinator

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

Participants: Concern, SHED, UNHCR, UNICEF and WFP. See Annex 1 for detailed participant list.

## Agenda

1. Integration of Health and Nutrition
2. Prioritization
3. Operational approach for 2026 and agency-specific strategies
4. AOB

## Welcome and Introduction

Kibrom Tesfaselassie welcomed all the participants to the Nutrition Sector SAG meeting on 07 July 2025. Representatives from all the members were presented in the meeting. Following a brief introduction, the meeting was started.

### 1. Integration of Health and Nutrition

- ✓ Health Sector partners have agreed to integrate Stabilization Centers (SCs) within Primary Health Care (PHC) facilities using existing resources and have identified a potential partner to implement this activity. Once formal communication is received, NS will proceed with the handover of the SC to the designated partner. A joint field visit was carried out on 30 June 2025 in Camp 11 by representatives from the Health Sector partner (IRC) and the NS CMAM TWG of NS to review the situation on the ground to expedite the process of hand-overing SC to health partner.
- ✓ Additionally, the Health Sector is currently conducting a health facility assessment to evaluate its capacity to integrate NS activities using existing human resources. A taskforce is formed engaging both health and nutrition partners and NS is awaiting updates from the taskforce conducting this assessment. The TF must jointly visit at least 2 INFs to understand the modality of operation of nutrition sector. The TF is expected to share their findings and recommendation on integration of health and nutrition by mid-July, 2025. Yet, no joint field visit is conducted to facilitate the process.

### 2. Prioritization

- ✓ Activities related to malnutrition prevention and treatment have been identified as the highest priority. However, in the event of funding constraints, mitigation measures will be implemented. For instance, the BSFP (Blanket Supplementary Feeding Programme) ration size may be reduced by half to manage limited resources. Activities related to nutrition assessments and information generation are currently categorized as the second priority, while capacity-building initiatives are recognized as the third priority.
- ✓ During the SAG meeting, members raised concerns regarding the current prioritization. They emphasized that assessment and information generation should be elevated to first priority, as all programmatic planning and decisions are heavily reliant on assessment findings and prevalence rates. In response, the Nutrition Sector (NS) requested the AIM Technical Working

Group (TWG) to share an email outlining the key points that justify the need to reclassify assessment activities as first priority. The NS also requested a draft budget for the assessments, noting that in-house expertise will be utilized to support these activities.

- ✓ SAG members also inquired whether the Joint Response Plan (JRP) budget for 2026 will be based solely on activities classified under the first priority. The NS clarified that there has been no formal discussion on this matter at the ISCG level. The NS committed to providing updates as soon as further information or guidance becomes available.

### 3. Operational approach for 2026 and agency-specific strategies

- ✓ NS requested partners to share agency-specific strategic shifts that may influence their operational approach in 2026. Updates were received from Concern Worldwide, SHED, UNICEF, and WFP (listed alphabetically).
- ✓ Concern Worldwide confirmed their continued presence in Bangladesh in 2026 due to their engagement in the Rohingya refugee response. The Country Management Team is currently reviewing operational modalities to enhance cost efficiency and reduce overall programming costs. Additionally, Concern is actively involved in a task force formed by the NGO Platform, in collaboration with ISCG. This group is reviewing key documents related to localization and community-based approaches, with the aim of mapping local leadership and exploring governance models for the Country-Based Pooled Fund.
- ✓ As an implementing agency, SHED stated that their operational strategies are aligned with those of their funding agencies, primarily UN organizations. SHED is currently exploring opportunities to access direct funding for nutrition-sensitive interventions. If successful, they will inform the Nutrition Sector and coordinate accordingly.
- ✓ UNICEF outlined several strategic and programmatic changes planned for 2026-
  - Stabilization Centers (SC) will be integrated into Primary Health Care (PHC). While UNICEF will continue supporting SCs through 2025, responsibility will be handed over to health partners in 2026.
  - Cooking demonstrations will be discontinued, with increased emphasis on MIYCN (Maternal, Infant, and Young Child Nutrition) counselling.
  - Psychosocial support (PSS) counselling will also be phased out, retaining only screening and referral services. UNICEF stressed the importance of strengthening referral systems and follow-up to ensure that mothers in need access appropriate services.
  - Adolescent nutrition services will be removed from the programme.
  - The RUTF ration size will be reduced from 1.5 cartoon to 1 cartoon per child. UNICEF also emphasized the need of discussion to reduce the leakage of supply item in the market. They are discussing in the agency level to provide of supply item to partners in monthly basis instead of quarterly basis.
  - There are several programmatic shifts. One of them is integration of health and Nutrition. In 2026, there will be few nutrition services in the PHC level alongside the integrated nutrition facilities. While the exact strategy is still under development, UNICEF will communicate with NS once finalized. Localization will also be a focus area, with plans to build the capacity of Rohingya volunteers to provide basic nutrition services. UNICEF is also planning for multi-purpose volunteers (For example, Community health and nutrition volunteers). In 2026, they will focus on capacity building by developing curriculum, training etc.
  - In 2026, the sector coordination function will transition to become part of UNICEF's regular programme structure.
- ✓ WFP shared that both prevention and treatment of malnutrition will continue in 2026. Key programmatic shifts include-
  - WFP plans to phase out the use of Super Cereal (SC) and Super Cereal Plus (SC+) for the prevention of malnutrition in both pregnant and breastfeeding women (PBW)

and children aged 6-23 months. For children, SC+ will be replaced with lipid-based nutrient supplements (LNS), while for PBW, a nutrition-sensitive e-voucher approach will be introduced.

- WFP proposed to look at the operational cost, which cost categories are driver of higher operational cost that can be minimized. NS emphasized that this process must maintain the balance of workload and the quality of service provision.
- ✓ Upon discussion with SAG members, NS decided to convene a SAG meeting on Sunday 13 July, 2025 at 02:30 PM – 05:00 PM to discuss operational modalities, further staff optimization, consideration of potential adjustments to activities such as integration with other sectors or possible discontinuation.

#### 4. AOB

- ✓ **UNHCR supported 11 INFs update:** Due to funding constraints, UNHCR will be unable to support all 11 INF from 01 October through December 2025 for fund advocacy. NS escalated the funding issue to ISCG last month (May 2025) but not received any positive feedback till date. As a mitigation measure, all current activities will continue unchanged until September 2025. If funding remains unresolved by September 2025, UNHCR will close two INF centers - one in Camp 3 and one in Camp 4. Currently there are two INFs in Camp 3 and two INFs in Camp 4. Given the high population density, closure of these facilities may lead to overcrowding during service delivery. To proactively manage this potential impact, a discussion is scheduled for August 2025 to finalize mitigation plans. Possible measures include reassigning service blocks to neighbouring camps based on geographic proximity and population distribution.

#### Action points:

Action point	Focal point/agency	Timeline
To share an email outlining the key points that justify the need to reclassify assessment activities as first priority	AIM TWG	ASAP
To convene a SAG meeting to discuss operational modalities, further staff optimization, consideration of potential adjustments to activities	NS	13 July, 2025

#### Annex 1: List of Participants (Online):

Name	Organization	Email
Shahana Hayat	Concern	<a href="mailto:shahana.hayat@concern.net">shahana.hayat@concern.net</a>
Ziaur Rahman	SHED	<a href="mailto:ziaur@shedbd.org">ziaur@shedbd.org</a>
Md. Mahbub Murshed Khan	UNHCR	<a href="mailto:khanmd@unhcr.org">khanmd@unhcr.org</a>
Jecinter Akinyi Oketch	UNICEF	<a href="mailto:jaoketch@unicef.org">jaoketch@unicef.org</a>
Owen Nkhoma	UNICEF	<a href="mailto:onkhoma@unicef.org">onkhoma@unicef.org</a>
Mohammad Zahidul Manir	UNICEF	<a href="mailto:mmanir@unicef.org">mmanir@unicef.org</a>
Pauline AKABWAI	WFP	<a href="mailto:pauline.akabwai@wfp.org">pauline.akabwai@wfp.org</a>
Mohammad ASHIKULLA	WFP	<a href="mailto:mohammad.ashikulla@wfp.org">mohammad.ashikulla@wfp.org</a>
Kibrom Tesfaselassie	NS	<a href="mailto:ktesfaselassie@unicef.org">ktesfaselassie@unicef.org</a>
Suparna Das Toma	NS	<a href="mailto:stoma@unicef.org">stoma@unicef.org</a>

//////////////////// THE END //////////////////////

For more information: [Nutrition Sector \(NS\)](#)

Website: <https://rohingyaresponse.org/sectors/coxs-bazar/nutrition/>

