NS SAG MEETING

UNICEF Office | 17 August 2026 | 10:00 AM– 02:00 PM

Cox's Bazar, Bangladesh NUTRITION SECTOR

Meeting Minutes

Chair: Owen White Nkhoma, PhD; Nutrition Sector Coordinator
Note taker: Suparna Das Toma, UNV Nutrition Officer, NS
Participants: Concern, Friendship, GK, SCI, SHED, UNHCR, UNICEF and WFP. See Annex 1 for detailed participant list.

Welcome and Introductions

The meeting commenced with Owen White Nkhoma welcoming participants to the Nutrition Sector SAG Meeting followed by a brief introduction and transition to the main agenda.

Agenda

1. Prioritization of activities for the OCHA second allocation
2. Endorsement of the community outreach training package
3. Updates on the Health and Nutrition integration roadmap
4. Update on the nutrition survey 2026

1. Prioritization of activities for the OCHA second allocation

- The US Government has confirmed USD 145.9 million in funding through UN OCHA as 2nd allocation for life-saving and critical interventions, covering the implementation period from 1 October 2026 to 30 September 2027. Nutrition, Health, Protection, WASH, and Food Security are considered as the prioritized sectors. OCHA has indicated that applications will not be restricted to appealing partners but all partners in the response that have been vetted by OCHA and found as best fit. So, all Nutrition sector partners are welcome to apply. However, based on the current footprint, the NS expects submissions from UNICEF, WFP, and Concern Worldwide. The Nutrition sector will continue playing its role in defining activities for the sector, being part of the technical review committee and any other requests that may come through. The Allocation Board meeting was held on 17 August 2026 to review the allocation process.
- OCHA indicated that unlike the first allocation, there is some flexibility in the selection of activities under second allocation. While Priority 1 activities will remain the primary focus, critical activities categorized under Priority 2 may also be considered for funding. They also confirmed that sector coordination will not be considered under this allocation.
- The SAG agreed that existing 2026 JRP activities will be considered as life-saving and critical interventions and also be used for 2027 JRP planning process. The SAG reviewed and endorsed the following activities as Nutrition Sector life-saving and critical interventions-
    - ✓ Management of severe acute malnutrition (SAM) for children under-five
    - ✓ Management of moderate acute malnutrition for children U5 and management of acute malnutrition for pregnant and breastfeeding women
    - ✓ Prevention of malnutrition through blanket supplementary feeding for children 6-23 month with LNS -MQ
    - ✓ Nutrition sensitive E-Voucher for children 24-59 months
    - ✓ Nutrition sensitive E-Voucher for PBW (NEW)
    - ✓ Micronutrient deficiency prevention and control (Vitamin A, IFA, MMS and Deworming)
    - ✓ Maternal and Infant Young Child Nutrition (MIYCN)
    - ✓ Management of malnutrition for infants under 6 months
    - ✓ Community outreach activities for management and prevention of severe and moderate acute malnutrition

- ✓ Nutrition Information Management and Assessment
- ✓ Capacity building (Trainings)

The endorsed activities cover both Rohingya refugees and host communities. SAG members also enquired whether host community activities which are priority 2 for nutrition can be considered under this allocation. OCHA has not yet communicated on whether this allocation will also be applicable for host community and the NS will share once this information becomes clear.

2. Endorsement of the community outreach training package

- The community outreach training package for CHNV supervisors and CHNVs was presented to the SAG. The SAG members reviewed and endorsed the package.
- SAG members sought clarification on the timeline and responsible organization for volunteer capacity building. It was noted that the initial plan was to start the training in August 2026 with funding from UNICEF. However, a few issues including finalization of the outreach volunteer numbers and their mapping is a prerequisite.
- The number of outreach volunteers will be revisited, considering recent strategic changes to the integration model and differences in the workload and service packages of the two sectors. This will be further discussed during the Nutrition Sector Coordination Meeting. Once decided, the NS will inform the HS and consequently, the CHW TWG will start block wise mapping and UNICEF will organize training for the supervisors in parallel.

3. Updates on the Health and Nutrition integration roadmap

- Health Sector and Nutrition Sector jointly conducted a verification assessment to the PHC. During the PHCs results validation process, it was noted there are a few PHCs had different recommendations from either Health or Nutrition Sector partners. The Coordination team from Health and Nutrition therefore visited those particular PHCs for further verification. After completing the visit by both sector coordinators, 12 PHCs were now confirmed to be eligible for full integration of the nutrition package including malnutrition prevention (BSFP and nutrition sensitive program). Of these, 11 PHCs are planned for integration by October 2026, while integration of one PHC is planned for January 2027. Although one additional PHC was identified as technically suitable for full integration, it was not recommended for integration due to the geographical location of the Health and Nutrition facilities in Camps 1E and 1W. Integration is not considered feasible in 20 PHCs, while partial integration through OTP/TSFP+IYCF services is considered feasible in the remaining 9 PHCs. A taskforce, led by Concern Worldwide and comprising representatives nominated by both the Health and Nutrition Sectors, has been established to operationalize the integration.
- The assessment findings and progress have been communicated to Heads of Agencies and the RCP. The assessment report is currently under joint review by both sectors and will be disseminated widely once finalized.
- Following the rollout of integration across the camps, two models of Nutrition service delivery will be implemented: (a) INF integrated within PHC facilities; and (b) standalone INFs.
- The 11 PHCs identified for integration were reviewed individually during the meeting, and the corresponding affected INFs were identified and agreed upon as follows:

Camp	Name of PHC	Affected INF	IP	Co-location
Camp 01E	BRAC PHC 454	1W site 1	GK	Co-located with 1W Site 1
Camp 03	IOM-034	3 site 1	GK	
Camp 04 Ext.	GK/UNHCR-208	4 Ext site	GK	Yes
Camp 09	IOM-093	9 site 1	SHED	Yes
Camp 11	IRC_PHCC_443	11 site	SHED	Yes

Camp 17	RTMI/UNICEF	17 site	SHED	
Camp 18	RTMI/UNICEF-179	18 site	SHED	
Camp 25	IRC-268	25 site	Friendship	Yes
Camp 26	TDH-564	26 site	GK	
Camp 27	TDH-416	27 site	Friendship	Yes
Nayapara RC	RHU/ IRC/ GK/ RTMI/ Ipas/ UNHCR/ UNFPA-594	NRC site 1	GK	Co-located with NRC site 1

- Following discussion, it was agreed that Camp 3 Site 1 INF will be closed and integrated with IOM-034 PHC, where Camp 3 Site 2 INF was previously located. The Nutrition Sector, with support from the Health and Nutrition Taskforce, will review and redefine the catchment areas of Camps 3, 4, 4 Extension, and 5 accordingly.
- SAG members sought clarification on the arrangements for security, cleaning, and facility rent for co-located services, as these may have implications for partners' agreements and budgets. The matter will be further discussed with the Health Sector to determine the appropriate arrangements. The Health and Nutrition Taskforce was tasked with assessing any additional restructuring requirements and defining the service flow for beneficiaries. Following operationalization of the integration, the CMAM Taskforce will actively monitor implementation and identify any emerging gaps.

4. Update on the nutrition survey 2026

- The survey protocol and questionnaire have been shared with the AIM Taskforce for review and inputs. An inception meeting is scheduled for 19 August 2026 with ACF Canada, which has now been engaged by UNICEF to conduct the survey. The Nutrition Sector Coordinator encouraged members to review the documents and share their inputs in advance to facilitate a productive discussion.
- The survey timeline will be reviewed during the inception meeting. ACF has already been requested to expedite the process, with the aim of completing the survey and producing the final report by 31 October 2026.
- Due to policy-related constraints, ACF will not be able to conduct field operations in Bhasan Char. Therefore, Innovision will be engaged to collect data in Bhasan Char using the same team of enumerators, while ACF Canada will provide remote technical support during data collection.
- The total estimated budget of the survey is about USD 155K. WFP and Concern Worldwide expressed interest in contributing financially to the survey. UNICEF confirmed a contribution of USD 110K for the survey. WFP agreed to contribute USD 35K, while Concern Worldwide agreed to contribute USD 10K, thereby covering the identified funding gap.
- A meeting was held between the AIM Taskforce and UNHCR to discuss the survey methodology, rationale for using SMART rather than SENS. The AIM Taskforce emphasized the importance of avoiding duplication with indicators already covered through ongoing or recently completed assessments and studies, including REVA and other food security assessments, WASH sector surveys, the 2025 Anaemia Study, and the 2025 Nutrition Causal Analysis etc.

Action points:

Action point	Focal point/agency	Timeline
Revisit the **number of outreach volunteers** considering the revised integration model, workload, and service packages of both sectors	NS	Next NS coordination meeting

Review and redefine the **catchment areas of Camps 3, 4, 4 Extension and 5** following the closure/integration of Camp 3 Site 1 INF.	Health and Nutrition integration TF	ASAP
Assess additional restructuring requirements and develop the proposed **beneficiary service flow** for the integrated facilities	Health and Nutrition integration TF	ASAP
Discuss and agree on arrangements for security, cleaning and facility rent for co-located facilities	HS and NS	ASAP
Monitor the implementation of nutrition services in the integrated PHNC	CMAM TF	Following operationalization

Annex 1: List of Participants

Name	Organization	Email
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For more information: Nutrition Sector (NS)
Website: https://rohingyaresponse.org/sectors/coxs-bazar/nutrition/