GNC Partner Update on
The nutrition response in Cox’s Bazar, Bangladesh
Findings from the joint Cluster and Programme mission

28 March 2018
Presentation Outline

- Objectives of the joint trip
- Areas and partner programmes visited
- Highlights from the response
- Highlights from integration options
- Highlights from CCPM discussion
- Key asks from partners
Objectives of the joint trip

I. Advise on the emergency preparedness and response plan for the sector and UNICEF

II. Sensitize sector Partners on the cluster approach

III. Advise on prioritization and strengthening Accountability to the Affected Population (AAP) in the current nutrition response.

IV. Advise UNICEF on components of response and strategic direction for transition to longer term programming

V. Review inter-sectoral integration

VI. Review Nutrition information system

VII. Identify existing gaps and needs and advise on new/future projects/Interventions
Snapshot of the situation
November 2017

Challenges:
• HR: limited number of partners, staff turnover, limited IYCF E and CMAM
• Finances: 70% funded but anticipated shortfalls in 2018
• Supplies: challenges securing pipelines and import

Initiatives to address:
• Updated planning figures
• Rationalization plan for nutrition sites
• Training plans for IYCF E and CMAM
• Coordination with other sectors
• Strengthening sector coordination
• Development of IYCF E Guideline, use of WHZ for SAM

Key asks:
• Support for intersectoral response and a clear minimum package
• Advocacy for additional land
• Remote technical support
Areas and Partner Programmes Visited

Areas
• Kutapalong registered camp
• Kutapalong extension
• Kutapalong makeshift camp
• Moynarghona
• Balukhali

Programmes and Partners visited
• Visited BSFP, TSFP, OTP, SC, CMAMI, Child Friendly Space, Learning Centers
• Run by a range of national and international agencies with support from UNHCR, WFP and UNICEF

Whole day workshop with partners
• Mini CCPM
• Programme review
• Facilitation of inter cluster discussion with WASH, Health, Food Security, Education and communicating with communities
Highlights on the Response
Assessment/Surveys

- Communication on timing of survey / SMART and coverage survey
- Planning and partnership around data collection
- Ability to expand data collection beyond anthropometry and mortality
- Role of CDC and external support
- Funding for the surveys
- Critical information needed from other sectors to help guide nutrition response
- Limited information on age groups other than 6-59 months
Community Based Management of Acute Malnutrition

- Adherence to national protocol
- Comprehensive capacity mapping, and capacity building strategy
- Harmonization of the package of intervention
- Linkage between programmes and continuum of care – including cares for infant under 6 months and links to health services
- Admission and discharge criteria, including expanded criteria – who is using it and when to phase it out
- Reporting tools, data collection – common boards with statistics at centre level, standardization and multiple report to UN agencies
- Cross learning between centres?
- Suggestion boxes and follow up procedures observed – other partner?
- IEC and counselling impact dependent on who brings the child (sibling, father)
- Options for coordinating/strengthening community outreach and follow up
Community Based Management of Acute Malnutrition

**Overall** clear flow from waiting to discharge, and effort made for engaging physical environment.

- **Stabilization Center**
  - Limited referrals into SC, and low numbers in care
  - Challenges for caregiver to remain

- **Outpatient Therapeutic Feeding**
  - Identification of centers using expanded criteria pending

- **Targeted Supplementary Feeding**
  - Patient often refer for systematic treatment outside of the centre
  - IEC materials for preparation (porridge v roti)

- **Blanket Supplementary Feeding**
  - IEC material for preparation (porridge v roti)
  - Porters for PLW rations when challenging to attend in person
Infant and Young Child Feeding in Emergency

- IYCF strategy – training material
- Content of the IYCF-package of intervention
- Application of the package across all programme and through various delivery channels
- Capacity of partners to deliver, including assessment of capacity and strategy for building strategy
- Monitoring of quality and reporting – beyond number of mothers/care takers attending sessions
- Leadership for enhancing IYCF service delivery - ??
- Updated understanding of drivers for behaviour and bottlenecks for implementation- focus on complementary feeding
Response Strategy and Deliver Mechanisms

- How to ensure continuum of care
- Standardization of community volunteer activities
- Standardization and adherence to same payment rate for volunteers
- How to link service delivery at household, community and facility levels better.
- Duplication of services
Supplies (Food, Equipment, Drug etc.)

- Consolidation of supply needs
- Consolidation of pipeline information
- Consumption/utilization data to inform supply requirement
- Scale up plan data to inform supply requirement
- How to access food from pipeline agencies
- How to access anthropometric equipment
- Openness on supply information
- Role of the Supply Task Force/activation of this TF
- How to facilitate cross partner borrowing
- How to coordinate supply information better
Partnership between UN/NGOs and within implementing partners

- Alignment of partnership along the lines of which UN agencies is providing some support to the specific agency
- Co-leadership by NGOs??
- Alignment along the agency mandate, partially hindering ability to provide services that ensure continuum of care
- Numerous partners have expertise that is not necessary shared to enhance each other’s response quality.
- Lack of clarity around how implementing partners can access supplies e.g. anthropometric equipment from a UN agency that is not funding them or within the UN agencies themselves
- Confusion on what is common service – e.g., technical RRT support, thus the need to attach technical capacity to the sector for all sector members to access.
- Effectiveness of coordinating and leveraging support from the various partnership arrangement by the sector coordination team
- Un clarity on partnership arrangement - PCA/FLA etc.
Headlines from mini CCPM discussion
Support to Service Delivery

- Increase partner participation (government)
- Advocate and engage partner to better understand strategy
- Longer term positions for sector coordinator – turnover disruptive
- Engage dedicated technical reference points for the sector on – IYCF, CMAM, assessment and M&E
- Provide Platform for discussion operational issues – double dipping, effective use of community volunteers
- Support camp level coordination that supports microplanning and Nutrition coordination at operational level
- Co-lead or Co-coordinator/high turnover
- Sustainable support for the work of technical working groups
Informing strategy of the response

• Effective use of technical working group to support delivery of the collective response
• Participation in analysis of need and strategic planning
• Costing of response plan and support on for guidance on unit cost
Planning and Strategy Development

• Delays with the contextualization of guideline
• Finalization of the standardize guideline and systematic roll out
• Standardized unit could
Advocacy

• Successful advocacy on the importation of RUTF – RUSF but need for CLA advocacy and support on all support

• Systematic advocacy and support for experts on access- visas, limitation to work in the camps etc.

• Need for systematic morning of the access bottleneck and report to HCT and feedback mechanism the partners on action taken

• Space for common advocacy messaging
Monitoring and Reporting

• Consistency/completeness of report, and late reporting
• Site reporting verse summary of consolidated report
• Need for web based reporting system which is useful for partners and sector
• Join monitoring plans
• Single reporting – UN agencies, Sector and partners
• Inclusion of Nutrition report in HIS??
Capacity building for preparedness and contingency planning

• Effective mapping of capacity gap
• Preparedness planning/finalization of the plan and costing
• Taking advantage of the monsoon season to link intervention better
Accountability to affective population

- Missing of key targets groups
- Pressure to deliver – main contract is with donor - there is feedback from community.
- Limited focus group discussion with beneficiaries to adjust programs.
- Getting feedback from community, FGD with volunteers and random assessments may be exit interviews.
- Discuss the feedback at sector level.
- The mechanism is not using systematic.
- Every agencies are not using these mechanism.
- Writing has option to be biased.
- Review the information systematically and acting on it.
- Link with protection sector.
- Orientation of volunteers.
Highlights from integration options discussion with other sector
Sectors covered levels of integration

• **Sectors**
  • WASH
  • Health,
  • Food Security
  • Education
  • Communicating with Communities

• **Levels of integration**
  • Household
  • Community
  • Facility level
Household

• Cooked meals and HEB for new arrivals until they are registered for GFD
• GFD- 2 modalities- food in kind and e vouchers- which reaches almost all of the community
• Micro-gardening
• Shelter sector for cooking fuel
• Messaging and promotion- around food hygiene and nutrition intake
Community

• Communal kitchens
• Micro-gardening
• Skill development aiming to improve coping strategies
• REVA assessment - light in April/May and one year after the last one - around indicators, analysis and communication around the data
Linkages with other sectors

• BCC in the GFD and cooked meals distribution
• BCC with e vouchers on food choice and food use
• Distribution- having space for breastfeeding and perhaps reinforce with additional support
• Input into the triggers and criteria for the e-voucher
• Input into seed choice for micro-gardening
• Vulnerable cooked meals- linked with nutrition beneficiary lists
• May want to review AAP in light of integration
Reflections on UNICEF CLA and CCC role

• Coordination and streamlined communication CO, RO, HQ from the beginning enabling course correction as needed

• Strength of joint mission: reviewing UNICEF response in the context of the broader collective response, with explicit link to CLA role and provider of last resort accountability, and how to make UNICEF expertise support the collective

• Added value of sector facilitating partnership discussions between UN agencies

• Importance of surge mechanisms for short term, but requires additional tools/systems to maintain institutional memory and consistent follow up of recommendations

• Technical roles need operational support- eg administrative and operational support to facilitate best use of expertise and timely partner engagement

• Importance of orientations on UNICEF paperwork for partners and open dialogue/thought partnership, including partnership reviews

• Appreciation for UNICEF umbrella to ease operations and access

• Importance of making role clear when double hatting, and working towards separation of roles
Key asks for partners

• Support for sustainability of technical capacity
• Co-leadership??
• Effective communication on supply
• Support for reporting possibly web-based
• Comprehensive capacity analysis and systematic support
• First tracking of finalization of guidance and dissemination