

## Rakhine State Nutrition Sub-Sector Meeting

**Date:** 10/03/2015  
**Venue:** UNICEF Field Office, Sittwe  
**Time:** 02:00- 04.00h  
**Meeting Chair:** Rakhine Nutrition Sub-Cluster coordinator  
**Participating agencies:** MHAA; UNICEF; WHO; SCI  
**Absentees:** WFP (with apology and inputs); ACF; SRNT

No.	Agenda	Time	Who
1.	Introduction	5 mins	Meeting chair
2.	Review of minutes of previous meeting (13 Feb 2015)	10 mins	Meeting chair/all participants
3.	Agency Updates on new activities, challenges, information sharing	15 mins	All agencies
4.	Planning for VAS and deworming activities/gap filling	15 mins	Meeting chair/ all participants
5.	Reporting for health related incidents (WHO)	10 mins	Dr. Sai Nyan Soe
6.	Preparation for Nutrition response strategy/work plan: Analysis of operational and programmatic constraints affecting achievements, new way of intervening	25 mins	Meeting chair/ all participants
7.	AOB	10 mins	

Agenda Item	Discussion Points	Action Point/Status	Timeline / Date
<b>1. Introduction</b>	<ul style="list-style-type: none"> <li>All members present introduced themselves.</li> </ul>		
<b>2. Review of minutes of previous meeting (13.02.2015)</b>	<p>Sector members reviewed the status of action points from previous meeting and updates provided as follows:</p> <ol style="list-style-type: none"> <li>SHD (SRNT) had been requested to invite participants from Local and INGOs (3 MHAA staff, 2 SC Staff and 2 ACF staff) to attend the growth monitoring and promotion training from 16-17 Feb 2015.</li> <li>SHD (SRNT) was to communicate to all partners the actual dates for VAS and deworming activities.</li> <li>SCI was to share the power point on SQUEAC and SMART survey presentation in Pauktaw.</li> <li>UNICEF had been requested to share the list of available IEC items to partners to enable them to make requisitions.</li> <li>The nutrition sub-sector coordination team drafted relocation package and shared with partners for comments and since not much input was provided, room is still there for members to provide their input.</li> </ol>	<ol style="list-style-type: none"> <li><b>Done</b></li> <li><b>Done</b></li> <li><b>Done</b></li> <li><b>Done</b></li> <li><b>Done</b></li> </ol>	<p>By 20. 02.2015</p> <p>By 20. 02.2015</p> <p>By 03.02.2015</p> <p>By 13.02.2015</p> <p>By 16.02.2015</p>
<b>3. Agency Updates and Information Sharing</b>	<p><b>SCI</b></p> <ul style="list-style-type: none"> <li>SCI shared the IEC video on IYCF, Ante Natal Care and OTP activities with SHD for feedback. SCI shot the video again and are now editing to finish in mid-March 2015.</li> <li>SCI will send the video clip to Naypyitaw for approval and this process will take approximately 1 month. The video will be available in April/May in both Myanmar language and in another language used by IDPs.</li> <li>SMART survey is completed and shared with partners. Final report will be available end of March 2015. Nutrition situation has not improved in both Pauktaw and Sittwe rural. Results showed high chronic stunting rate indicating the need to think of ways of addressing the situation beyond emergency response.</li> </ul>		

	<ul style="list-style-type: none"> <li>• SQUEAC assessment reporting has already started. Findings showed moderate coverage. Some barriers e.g. referral and community sensitization were among those identified as impacting on programme coverage.</li> <li>• SCI short term Nutrition Advisor will be arriving and will manage the KAP survey to be conducted in towards end of April 2015.</li> <li>• Nutrition Project Manager is not yet on board and U Saw Emaric Aye is acting PM for the moment.</li> </ul> <p><b>UNICEF</b></p> <ul style="list-style-type: none"> <li>• The Ministry of Health with the support of UNICEF has recently concluded a successful MR campaign nationwide, including Rakhine State.</li> <li>• Currently UNICEF Field Office's (Sittwe) Health and Nutrition Officer is participating in annual review of Expanded Programme on immunization (EPI) in Nay Pyi Taw. The meeting will define key priorities for 2015 for intensification of routine immunization through the Reach Every Community (REC) strategy.</li> <li>• UNICEF is supporting Vitamin A supplementation and deworming campaign with supplies and monitoring will be done especially in hard to reach areas.</li> <li>• The subsector in Rakhine is working closely with the National Nutrition Sector Coordinator to develop a more detailed Nutrition response strategy/work plan for the State.</li> <li>• Long term extension of partnerships in 9 townships to cover health and nutrition needs of IDP populations and other vulnerable populations is being worked out with MHAA (7 townships) and ACF (2 townships) to cover a years' period.</li> </ul>	<p><b>UNICEF to liaise with SRNT to get the amount of Vitamin A/ deworming supplies used for the campaign</b></p> <p><b>Draft nutrition response Strategy/work plan to be developed in subsequent weeks.</b></p> <p><b>Project agreements between UNICEF and the 2 organizations to be developed by end of March.</b></p>	<p>By 26.03. 2015</p> <p>By end of April 2015</p> <p>By 30. 03.2015</p>
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	<p><b>MHAA</b></p> <ul style="list-style-type: none"> <li>Operational research will be included as part of activities in targeted townships in the new project agreement with UNICEF; Nutrition situation assessment will also be done in Ramree and Kyaukphyu townships. Information gathered from the assessments/research will guide future health and nutrition programming in the townships.</li> <li>Following concerns about possibility of more acute malnourished cases in the IDP camps than identified, MHAA and MNMA conducted active screening Last week, in Taung Paw camp in Myaebon Township. Of the 451 children (6-59 month old) children screened, only 4 new MAM cases were identified. Total MAM cases- 14. No SAM cases were identified the 2 camps during the screening. There are only 5-6 (6-59 month old) children in Kan Thar Htwet Wa camp in Myebon Township and none of them is malnourished.</li> <li>Last week in Tha Da camp in Minbya, there was an assault and one IDP who suffered from head injury was referred to Myaung Bway hospital and is now recovering in hospital.</li> <li>A point of information was shared that 2 camps in Mrauk U were relocated to their original villages; MHAA mobile clinic is operating between the villages and previous camps and services are running well.</li> <li>Vitamin A and deworming campaign activities are currently underway in Sittwe and Kyauk Taw.</li> <li>For Pauk Taw MHAA and SCI will conduct the VAS and deworming campaign, after consultation with PaukTaw TMO. MHAA will lead the activity with UNICEF will support.</li> </ul> <p><b>WFP</b></p> <ul style="list-style-type: none"> <li>Distribution of a 30 day full ration started last Friday. There is no short fall for ration this month as all the commodities are available.</li> </ul>	<p><b>MHAA to monitor how the relocation may impact on the health situation.</b></p> <p><b>VAS activities to be monitored by all</b></p> <p><b>MHAA to update on progress with VAS activities in Pauktaw</b></p>	<p>Meeting of 23.03.2015</p>
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<b>4. Planning for VAS and deworming activities/gap filling</b>	<ul style="list-style-type: none"> <li>• The sub sector coordinator presented the uncovered areas for this year VAS and deworming campaign in Sittwe.</li> <li>• Partners committed to fill in the gaps but some areas remained with gaps.</li> <li>• All the partners agreed to discuss with ACF first for some gapping areas.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>UNICEF to discuss with ACF Sittwe Nutrition Project Manager on how to cover some of the gaps.</b></li> <li>• <b>Supplies to be obtained from SNRT/SHD</b></li> </ul>	11 March 2015
<b>5. Reporting of health related incidents</b>	<p><b>WHO</b></p> <ul style="list-style-type: none"> <li>• WHO explained the use of Report Form for health related Incidents to the nutrition sector partners. It is meant to formalize the communization, provide accurate and necessary information to Health Cluster and avoid double counting, misinformation, incomplete reports and also to ensure that the right person receives the information.</li> <li>• After feedback from partners, WHO will advocate with the MOH in the central level as well as in the State Level to be able to use as official reporting forms.</li> <li>• The tool is meant to formalize the communization, provide accurate and necessary information to Health Cluster and avoid</li> </ul>	<ul style="list-style-type: none"> <li>• <b>WHO to finalize and follow up to see if the reporting form for health related issues can be adapted as a national tool.</b></li> </ul>	

	double counting, misinformation, incomplete reports and also to ensure that the right person receive the information.		
<b>6. Preparation for Nutrition strategy/work plan-Analysis of operational and programmatic constraints affecting achievements, new way of intervening</b>	<ul style="list-style-type: none"> <li>The nutrition sub- sector coordinator presented the nutritional strategy/work plan development process and why a detailed strategy was needed.</li> <li>Partners were requested to give inputs and comments on the operational and programmatic constraints impacting on delivery of response.</li> <li>UNICEF to compile a final document highlighting constraints and share with National Nutrition Sector Coordinator.</li> </ul>	<ul style="list-style-type: none"> <li><b>Partners to provide more inputs if any into the draft document operational and programmatic constraints.</b></li> <li><b>UNICEF to compile and share with national sector coordinator.</b></li> </ul>	12 March 2015.
<b>7.AOB</b>	<p><b>WHO</b></p> <ul style="list-style-type: none"> <li>WHO brought up the issue of camp-based staff salary harmonization.</li> <li>Members do not see any clear way forward with harmonization of salary and would seek further direction from OCHA.</li> </ul> <p><b>UNICEF</b></p> <ul style="list-style-type: none"> <li>UNICEF requested partners to update the 3 W matrix for March 2015.</li> </ul>	<ul style="list-style-type: none"> <li><b>Provide feedback to OCHA that members do not see clear way forward with salary harmonization.</b></li> <li><b>All partners to update 3W matrix with latest information</b></li> </ul>	<p>Next ICC meeting (24.03.2015)</p> <p>By 25.03 2015</p>

### Participants

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