

Scaling up and sustaining prevention and treatment of Wasting in Bangladesh



Vision: By 2022, reduce the prevalence of wasting from 14% to 8% in Bangladesh in line with the National Plan of Action and national Nutrition Services Operational Plan

Issues	Action Plan - Activities	Time-line	Agency Responsible (e.g. UNICEF, National Government, etc.)	Milestone (how will we know if we have achieved it?)	Support required (e.g. technical, policy, resource mobilisation)
Preventing Wasting					
<p><i>Poor IYCF practices</i></p> <p>-Inadequate capacity of health workers on effective counselling</p> <p>-Poor awareness and enabling environment</p>	<p>-Expand competency based nutrition training in all districts</p> <p>-Design awareness creation and social mobilisation through facilities, volunteers and community platforms such as Mothers support group</p>	2019	<p>-NNS</p> <p>-PHC and NGOS</p>	<p>- Training completion report</p> <p>-BCC campaign launched in high burden districts</p>	NNS OP budget, technical support from UNICEF.
Poor health seeking practices for common illness and management	<p>-Training of health workers will be done through IMCI</p> <p>- Demand creation through social mobilization</p>	2020	MNCAH, NNS	Training completion report. IMCI training prioritised in high burden districts	
Poor WASH practices	<p>- Hygiene promotion through front line workers</p> <p>- Linkage with WASH programmes</p>	Ongoing	PHC,NNS, UNICEF	Inter-ministerial endorsement to promote nutrition through WASH committees and schools	

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Addressing severe wasting					
Inadequate coverage and poor performance of in- patient care	<ul style="list-style-type: none"> - Cover all facilities at district and Upazilla levels with inpatient service - Provide mentoring and supportive supervision to enhance quality of treatment in existing inpatient sites - Enhance supply chain management and forecasting-integration into LMIS 	2019	IPHN-NNS, UNICEF	<p>539 facilities providing the treatment and reporting through DHIS2</p> <p>Key indicators incorporated in LMIS</p>	
Low screening, identification and referral of malnourished children	<ul style="list-style-type: none"> -Strengthen routine screening of children in all IMCI & N corners, community Clinics and FWC -Active community screening utilising existing community outreaches, house visits and social mobilisation platforms by NGOs 	2018	NNS, PHC, NGO	Inter department agreement to screen children as part of EPI and household visits	
No service provision at community	<ul style="list-style-type: none"> -Implement community management in high burden Wasting districts and urban through CMAM package. Develop CBT training and SOPs -Conduct supply chain assessment 	2022	NNS, NGO, UNICEF	CMAM implementation plan endorsed	Technical support to design the package and resource mobilisation to support rollout

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Poor recording and reporting of data	<ul style="list-style-type: none"> -Provide technical support of districts and sub districts on data management. -Develop comprehensive M&E - Integrate CMAM indicators into DHIS-2 -Data collection on screening through national and real time monitoring survey -Real time monitoring and reporting using innovation-through tablets and SMS 	2018	IPHN and UNICEF	National nutrition MIS document finalised	Technical
Food insecurity and poverty as a key determinant	Link with Social safety nets initiatives-ensure households with SAM children eligible for cash transfers and other livelihood initiatives	By 2019	MoHFW and MoWCA	Inter-ministerial agreement	
Generate the evidence on the effectiveness of local RuTF	Conduct effectiveness trial of local RuTF	by 2018	Technical Advisory Group (TAG) of SAM	Trial report	
Sustaining local production and availability RuTF	<ul style="list-style-type: none"> -Initiate bulk production of RuTF with local ingredients -Ensure availability for externally produced RuTF as interim measure 	2020	Technical Advisory Group (TAG) of SAM	<ul style="list-style-type: none"> -Establishment of production unit -Approval to use external RuTF 	Support on quality control, technology transfer, supply chain management product qualification

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Acceptability of community based approach	<ul style="list-style-type: none"> -Develop advocacy strategy and implement activities to generate acceptance and leverage adequate resources -Develop policy/ advocacy briefs -Conduct costing analysis for scaling up CMAM -Mobilise civil society and media to generate political commitment and impose accountability on call for action and finance tracking 	2017-2018	IPHN & PHC	<p>Call for action workshop organised under the leadership of BNNC</p> <p>Annual progress report or score card</p>	Technical support to design advocacy strategy and resource mobilisation



Thank you for fruitful and memorable event