



NNS Newsletter

A Bulletin of National Nutrition Services

Issue-26

March- April 2022









National Nutrition Services (NNS)
Institute of Public Health Nutrition (IPHN)
Directorate General of Health Services (DGHS)
Ministry of Health and Family welfare (MoH&FW)

National Nutrition Services





Editorial
Dr. S M Mustafizur Rahman
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Directorate General of Health Services (DGHS)
Ministry of Health and Family Welfare

It is gratification for me to know that, National Nutrition Services (NNS) is going to publish 26th issue of its newsletter. This newsletter gives some programmatic information to understand the current nutrition information and interventions of NNS that will guide policy makers and others to plan effectively for future nutrition services in Bangladesh. It is also covers different approaches taken by government and its partners.

I hope that the facility specific data will guide and help the policy makers and other concerned to take future step in improving the Nutrition status of mother and child in reasonable manner.

This issue is covered National Nutrition Week, Workshop on NICC (Nutrition Implementation Coordination Committee), DLIs and DLRs Refresher Training, Child Nutrition Unit (CNU) of IPHN, SAM Workshop, Workshop on Progress Review and Demonstration of NVAC eLearning Solution, PNRI Report March 2022, Maternal Nutrition Services (DLR 13.4): April 2022, Child Nutrition Services (DLR 14.4): April 2022.

Special thanks to the Honourable Senior Secretary, MoH&FW, and the Director General of DGHS & DGFP for their continuous support to NNS, and acknowledge the support of health managers and others service providers who collaborate with NNS.

I would also like to acknowledge the commitment and efforts of the hard working professional of NIPU and UNICEF in making this newsletter a successful monitoring, knowledge & information and advocacy tool for sharing improving the nutrition activities for the population of Bangladesh.

I am hopeful that NNS will continue developing newsletter and share with all stakeholders.

Dr. S M Mustafizur Rahman

Line Director

Frankham

National Nutrition Services (NNS)

Institute of Public Health Nutrition (IPHN)

Directorate General of Health Services (DGHS)

4th HPNSP: Brief Introduction of NNS (Chapter-1)								
Name Health, Population and Nutrition Sector Programme(HPNSP)	Sponsoring Ministry Health Service Division, Ministry of Health and Family Welfare	Implement- ting Agency DGHS, IPHN	Implementa tion Period January 2017-June 2023	Program Area All over Bangladesh	Components 25			
			and the same of th					

Implementation Period:

	Date of Commencement	Date of Completion		
Original	1 st January 2017	30 th June 2022		
Revised-1	1st January 2017	30 th June 2022		
Revised-2	1st January 2017	30 th June 2023		

Basis of NNS-OP:

- NNS OP has developed based on Program Implementation Plan (PIP) for the 4th HPNSP and considering following documents:
 - Sustainable Development Goals (SDG) 2 & 3
 - Health Policy 2011
 - National Nutrition Policy 2015
 - Vision 2021
 - 7th Five Year Plan
 - National Plan of Action for Nutrition 2 (NPAN2)
 - National Strategy on Prevention and Control of Micronutrient Deficiencies, Bangladesh
 - Strategic Investment Plan (SIP)
 - Country Investment Plan (CIP)

Objectives of OP:

General Objective:

To reduce malnutrition and improve nutritional status of the peoples of Bangladesh with special emphasis to the children, adolescents, pregnant & lactating women, elderly, poor and underserved population of both rural and urban area in line with National Nutrition Policy 2015.

Specific Objectives:

- To strengthen the mainstreaming of nutrition issues into relevant sectoral policies, plans and programs.
- To scale up nutrition services through DGHS, DGFP and relevant ministries, departments and organizations to prevent and reduce under nutrition with special focus on children, adolescents, pregnant & lactating women, elderly, poor and underserved population.
- To prevent overweight and obesity.
- To develop and strengthen coordination mechanism for nutrition with key relevant sectors and stakeholders for ensuring multi-sectoral approach at national and sub-national level
- To strengthen the food safety activities including capacity development of national food safety Laboratory at IPH.
- To Improve capacity or human resources to manage, supervise and deliver quality nutrition services at different levels.
- To strengthen institutional capacity of IPHN
- To strengthen Monitoring, Evaluation & surveillance for nutrition by using HMIS.

Activities of NNS-OP

A. Nutrition Specific Activity (11 activities)

- 1. Promote, protect and support Infant and Young Child Feeding (IYCF) practices
- 2. Promote maternal nutrition
- 3. Promotion of adolescent nutrition
- 4. Control of micronutrient deficiencies
- 5. Management of moderate and severe acute malnutrition
- 6. Strengthen Nutrition services for elderly person
- 7. Strengthen Nutrition services in emergencies
- 8. Growth Monitoring and Promotion (GMP)
- 9. Strengthen De-worming program for children 24 to 59 months
- 10. Prevention of overweight and obesity
- 11. Social Behavior Change Communication (SBCC)

B. Nutrition sensitive activities (4 activities):

- 12. Food safety program
- 13. Good hygiene practices (GHP) including WASH at all level
- 14.Food fortification
- 15. Nutrition challenges due to climate changes

C. System strengthening (10 activities):

- 16. Revitalization of Bangladesh National Nutrition Council (BNNC)
- 17.Multi-sectoral coordination, collaboration of nutrition activities across different sectors at national and sub national level
- 18. Human Resource Development (HRD)
- 19.Institutional Capacity Development
- 20. Monitoring and enforcement of nutrition related legislations
- 21. Strengthen nutrition supply chain management
- 22. Monitoring, surveillance, survey, research and evaluation
- 23. Nutrition Information System (NIS)
- 24. Strengthen nutrition services in garment industries and other sectors, hard to reach areas and urban slum
- 25. Strengthening and expansion IMCI-Nutrition corner

Priority Activities of the OP

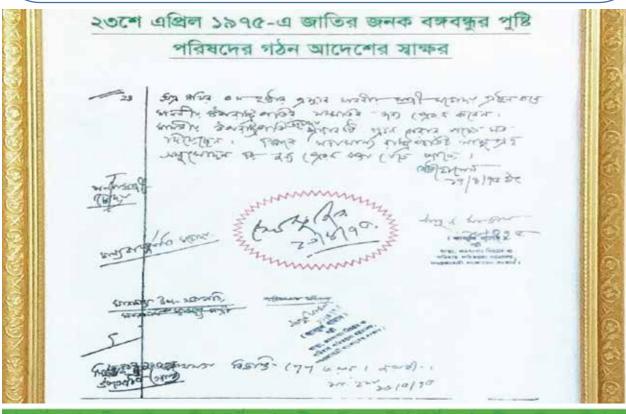
- Promote, protect and support Infant and Young Child Feeding (IYCF) Practices.
- Control of Micronutrient Deficiencies.
- Management of Moderate and Severe Acute Malnutrition.
- Growth Monitoring and Promotion (GMP).
- Food Safety Programme.
- Social and Behavior Change Communication (SBCC) on Nutrition.

(Continue....Next Chapter-2)

Celebration of National Nutrition Week 2022

Background:

The 1972 Constitution of Bangladesh, formulated, under the leadership of the Father of the Nation, Bangabandhu Sheikh Mujibur Rahman, enshrined access to adequate nutrition as a basic human right. Article 18 (1) of the Constitution1 describes the principles of State governance as: "...the State shall regard raising the level of nutrition and improvement of public health as among its primary duties..." Forty five years' age from now, such commitment of the State to improve nutrition of the people reflected the farsightedness of the Father of the Nation. He established the institute of Public Health and Nutrition in 1974 as part of institutional development for ensuring nutritional security. In continuation, he formed Bangladesh National Nutrition Council on 23 April 1975. The establishment of Bangladesh National Nutrition Council is lauded as a visionary creation of the Father of the Nation.





Celebration of National Nutrition Week 2022



Photo: The Honourable Minister, Zahid Maleque, MP, Ministry of Health & Family Welfare inaugurated the National Nutrition Week.

Based on formation of Bangladesh National Nutrition Council on 23 April in 1975, The government is set observe the National Nutrition Week from April 23 to April 29 every year. This year a colorful & splendid inaugural ceremony for the 'National Nutrition Week' took place at the auditorium of National Institute of Prophylactic and Social Medicine (NIPSOM) in Mohakhali on 24th April 2022 (Sunday). The honorable Minister, Zahid Maleque, Ministry of Health & Family Welfare inaugurated the event on as the chief guest while Mr. Lokman Hossain Miah, Senior Secretary, Health Services Division, Ministry of Health & Family Welfare preside the session. This year Bangladesh was celebrated National Nutrition Week under the theme "Proper Nutrition for Healthy Life (>1500 > 1200 > 1



Respected guests were Professor Dr. M Aziz, Secretary General, Swadhinata Chikishak Parishad. Professor Dr. M Iqbal Arslan president of Swadhinata Chikishak Parishad (SWACHIP), Dr. Eheteshamul Haque Chowdhury, Secretary General, Bangladesh Medical Association (BMA) and Dr, Mostofa Jalal Mohiuddin. Special guest was Prof. Dr. Abul Bashar Mohammad Khurshid Alam. The main objective was successfully implement the National Nutrition Week and inform the people about the importance and necessity of Nutrition Week.

As a part of the celebration of National Nutrition Week 2022, different activates was done. A seminar on Urban Nutrition was held at Dhaka North City Corporation Auditorium on Monday 25th April. Another seminar titled 'Nutrition: Opportunities and Challenges' was held on April 26 in this block of Bangabandhu Sheikh Mujib Medical University. Discussion meeting titled 'Nutrition Governance' was held on April 26 at Hotel Lakeshore in Gulshan. Besides, various programs including nutrition workshops and discussion meetings have been undertaken at district and upazila level. Nutrition Week activities were running in all the departments and community clinics.

Workshop on NICC (Nutrition Implementation Coordination Committee)



Photo: Honorable Director General (Health), DGHS, Prof. Dr. Abul Bashar Mohammad Khurshid Alam,was chair the workshop.

Workshop on NICC (Nutrition Implementation Coordination Committee) was held on 24th April, 2022 at 10:00 am in the conference room of Public Health Nutrition Institute. Prof. Dr. Abul Bashar Mohammad Khurshid Alam, Director General (Health), DGHS was present as the Honorable Chair at the workshop. Also present were Dr. Ahmedul Kabir, Addl. Director General (Administration), DGHS and Dr. Meerjady Sabrina Flora, Addl. Director General (Planning and Development), DGHS,

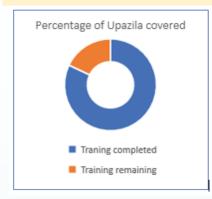
Dr. Rasheda Sultana, Director, Institute of Public Health, Prof. Dr. Nasir Uddin Mahmud, Director, Institute of Public Health Nutrition, Dr. S M Mustafizur Rahman, Line Director, National Nutrition Services, Amir Hossain, Director (IEM) and Line Director. Program Manager and Deputy Program Manager of National Nutrition Service were presents also. Representative from DGFP and development partners were present.



Photo: Dr. Meerjady Sabrina Flora, Addl. Director General (Planning and Development), DGHS, and Dr. Hasan Shahriar Kabir, Director (Chittagong Division), Dr. S M Mustafizur Rahman, Line Director, NNS, Dr. M Bulbul, Program Manager and Dr. Mahfuza Haque, Deputy Program Manager from NNS were presence at DLIs & DLRs Refresher Training Rangamat. Sadar.

The national nutrition services (NNS) organized refresher training on Disbursement linked indicators (DLIs) & Disbursement linked results (DLRs) of NNS Operation Plan (OP) at upazila level in Chattogram and Sylhet divisions. The main objective of the refresher training was to capacitate the front-line service providers and supervisors on essential nutrition services under the DLR 13.4 (Maternal Nutrition Services) and 14.4 (Infant and Child Nutrition Services) and to identify key factors hindering the progress of online reports.

The training session started in March 2022 and a total of 114 upazila has been covered till April 2022. It is expected to cover the remaining 25 upazila by May 2020. Each day the session starts at 9:30 am and ends at 03:30 pm, each batch received 3 hours of orientation. All the training sessions were held at the conference hall of each upazila complex and chaired by respective Upazila Health & Family Planning Officers (UH&FPOs).



Training Status	Number of Upazila	Total Number of Upazila in Chattogram and Sylhet Divisions	Percentage	
Training completed	114	139	82%	
Training remaining	25	139	18%	

The training sessions are successfully facilitated by both Government and Non-Government representatives of NNS e.g Program Managers and Deputy Program Managers & the team members of the Nutrition Information Planning Unit (NIPU). The training participants were the frontline supervisors e.g Health Inspectors (HI), Assistant Health inspectors (AHI), Statistician, and Community Health Care Providers (CHCP). Some middle-level staff also (e.g MODC, and RMO) were also present in the training session in their respective Upazila.





Photo: DLIs & DLRs Refresher Training at Muradnagar Cumilla

Training Contents:

- 1. The following core concepts were covered in the training session:
- 2. Introduction of DLIs & DLRs
- 3. Orientation on registers (Maternal & Child register)
- 4. Orientation on appropriate nutrition counseling
- 5. Hands-on training on online reporting in DHIS2.

The facilitators have been provided guidelines to fill the newly printed registers and hands-on training on data entry procedures in DHIS2. This session helped to learn data recording and online reporting methodology and process. However, through the Q&A session participants also get information related to troubleshooting issues, and are aware of some common mistakes that have been occurring for a long period of time.

Key Findings:

Newly promoted Civil Surgeons, UH&FPOs have been oriented on the DLR-related activities. However, they will require additional support to improve their knowledge of DLRs and internalize the importance of regular field monitoring.

The newly published registers have run out, so the old registers are being reused. Upazila level managers have requested respective district civil surgeons to replenish the stock.

Some CHCPs are unable to report in DHIS-2 as they have been issued an online reporting ID.

Lack of functional anthropometric tools (e.g. height board, salter scale) was reported by a majority of CHCP during the DLI refresher training sessions. Anthropometric measurements are being collected for pregnant women but are being impeded for children (0-23 months) due to the lack of sufficient anthropometric measurement tools.

Weak mobile network is continuing to impede data entry (in the DHIS2) efforts in remote areas. Absence of functional laptops is reported in the majority of upazilas.

Due to the shortage of human resources e.g. Health Inspectors and Assistant Health Inspectors, the field level monitoring is being hampered in some upazilas.

Actions Required:

- ❖ Improve coordination with MIS to facilitate access to location-appropriate SIM cards, and online IDs for the CHCP to facilitate data entry. In this regard, the DMP of Nutrition Information System (NIS) needs to regularly follow up with the MIS.
- Need to flag the shortage of the new registers with the CBHC and request immediate corrective action.
- Identify ways through which anthropometric equipment can be supplied to the community clinics.



Photo: DLIs & DLRs Refresher Traning at Mirsarai

DLIs & DLRs Refresher Training 2022 at different Upazila



Photo: DLIs & DLRs Refresher Tanning at Bandarban Sadar



Photo: DLIs & DLRs Refresher Tanning at Rangamati Sadar



Photo: DLIs & DLRs Refresher Tanning at Nasirnagar Upazila



Photo: DLIs & DLRs Refresher Tanning at Laksham Upazila



Photo: DLIs & DLRs Refresher Tanning at Thanchi Upazila



Photo: DLIs & DLRs Refresher Tanning at Fatikchari Upazila



Photo: DLIs & DLRs Refresher Tanning at Moheshkhali Upazila.



Photo: DLIs & DLRs Refresher Tanning at Matlab Uttar Upazila.

Workshop on Progress Review and Demonstration of NVAC eLearning Solution



Photo: Workshop on Progress Review and Demonstration of NVAC eLearning Solution

Vitamin 'A' Deficiency (VAD) is a global public health problem affecting more than 100 countries. Night blindness, the clinical result of vitamin A deficiency (VAD), was a serious public health concern in Bangladesh in the pre-independence era. Following expert recommendations, the Government of Bangladesh (GoB) initiated the vitamin 'A' supplementation program (VAS) in 1973 with support from different development partners to protect children under-5 with two doses of vitamin 'A' each year. Over the period, following several alterations, the program has reached its current mature state.

Recently NNS-IPHN decided to develop a management guideline for its field-level service providers, first-line supervisors, volunteers, local-level health managers, and other potential stakeholders to improve the quality of the NVAC program, increase its coverage and ensure a standard procedure of implementation at the national level and under the dynamic leadership of National Nutrition Services (NNS), Nutrition International has been working to update, print and distribution of the National Vitamin 'A' Plus Campaign (NVAC) Management Guideline to the different health facilities in Bangladesh.

Besides that, Nutrition International is currently contributing to designing and developing an eLearning training program to digitalize the NVAC field training process based on the NVAC Management Guideline.

On March 14, 2022, NNS-IPHN and Nutrition International (NI) brought together the experts from the concerned government departments and development partners in a national-level workshop at NNS-IPHN to review the progress of the NVAC eLearning solution development.

The Honorable Director of the Institute of Public Health Nutrition (IPHN) of the Directorate General of Health Services, Professor Dr. Nasir Uddin Mahmud; Deputy Director of IPHN, Dr. ABM Moshiul Alam; Deputy Director of the Management Information System (MIS) of the Directorate General of Health Services, Dr. Sha Ali Akbar Asharafi; Program Manager of NNS-IPHN, Dr. Md. Moniruzzaman; and the Technical Manager of Nutrition International, Dr. Md. Mofijul Islam Shuvro participated in the workshop alongside representatives from different government departments and development partners. The workshop was chaired by the Line Director of NNS, Dr. S M Mustafizur Rahman.

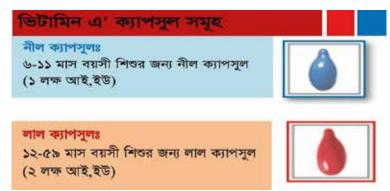




Photo: Dr. Gazi Ahmad Hasan, Deputy Program Manager, NNS was oriented the NVAC+ eLearning Solution VAC eLearning Solution

"Front-line health service providers and volunteers are at the forefront of the successful implementation of the Bi-Annual National Vitamin A Plus Campaign Program (NVAC+) in Bangladesh. Considering the need for their capacity development, NNS-IPHN working with the concerned experts and development partners to develop an eLearning solution based on the NVAC Management Guideline and we hope to complete it soon," the Line Director of NNS, **Dr. S M Mustafizur Rahman** added. Nutrition International has played a particularly crucial role in supporting the National Nutrition Services (NNS) throughout the last three decades for the successful implementation of the NVAC program in Bangladesh.

In his statement, the Technical Manager of Nutrition International, **Dr. Md. Mofijul Islam Shuvro** stated: "I convey my gratitude to the NNS for their one of the most time-sensitive initiatives to introduce the digitalization of the NVAC field training process on its journey towards attaining universal health coverage and Sustainable Development Goal 3. NI is proud to be part of this process with other development partners."







Notes on Inauguration Event

"Remodelling Child Nutrition Unit (CNU) of IPHN with A&T's Urban MIYCN Counselling Room Model"

BACKGROUND:

A study project has been implemented by A&T (Alive & Thrive) study project to demonstrate the modalities, feasibility and impact potential of strengthening the delivery of Maternal, Infant & Young Child Nutrition (MIYCN) counselling services in urban Maternal, Newborn and Child Health (MNCH) facilities. One of the objectives of the study is to create provision of a dedicated counselling room in each facility to offer a comfortable space for counselling by a trained counsellor. The counselling room (named as Mother and Child Nutrition Counselling Centre) has its own standardized lay out in terms of logo, colour scheme, furnishing, equipping etc. While sharing the concept and model with the government and other counterparts, the National Nutrition Services (NNS) authority of the Government impressed upon the concept and design of the room and requested A&T to support establishing such prototype in the newly constructed building of the Institute of Public Health Nutrition (IPHN). Point to note that NNS and IPHN are key focal Plan and Institute on Nutrition in the Government. Accordingly, A&T furnished and equipped two model rooms of Child Nutrition Unit (CNU) in the IPHN building. It was a unique chance that an A&T generated model has been adapted as the standard/reference by the national authority in remodelling the CNU.

INAUGURATION OF THE ROOMS:







The newly remodelled rooms of CNU were formally inaugurated on 28 March 2022, jointly by Dr. S M Mustafizur Rahman, Line Director-NNS and Professor Dr. Nasir Uddin Mahmud, Director-IPHN in presence of other officials. Dr Khalilur Rahman, ex DG IPHN/BNNC and Dr. Rashida Begum, Director-IPH were also present during the occasion. From Alive & Thrive Dr. Zeba Mahmud, Senior Advisor, Strategic Partnership and Knowledge Learning; Dr Mohsin Ali, Senior Consultant and Md. Rowshan Kabir, senior coordinator were also present.

INAUGURATION MEETING:

The inauguration was followed by a meeting with all the Assistant Directors, Deputy Directors and Director of IPHN, all the Deputy Programme Managers, Program Managers and Line Director of NNS, Director-IPH, Director General (in charge) BNNC, Ex-Director IPHN/ BNNC, all CNU staffs and A&T representatives. Line Director-NNS welcomed the participants. Dr. Mohsin Ali, Senior Consultant, A&T made a presentation highlighting the background of urban study, objectives, modalities, experiences and coverage of the urban implementation study. An open discussion session was held





participated by Ex-Director IPHN/ BNNC, DG BNNC (in charge), Director IPH, DD-IPHN, PM and DPM of NNS and others. Director-IPHN, LD-NNS and all others appreciated the support provided by A&T and expected continuation of technical assistances in terms of human resources and capacity development to extend the model into other facilities. Dr. Zeba Mahmud, Senior Adviser, A&T thanked for their expression of appreciation. Finally, Director-IPHN closed the meeting thanking A&T and all the participants.

Workshop on Finalization of National Action Plan of Severe Acute Malnutrition (SAM) in Bangladesh



Photo: 'Workshop on Finalization of National Action Plan of Severe Acute Malnutrition (SAM) in Bangladesh'

'Workshop on Finalization of National Action Plan of Severe Acute Malnutrition (SAM) in Bangladesh' on 19-20 March, 2022 at BRAC CDM, SAVAR. Purpose of the workshop was to finalize the national work plan of severe acute malnutrition (SAM) in Bangladesh and consultation with government partners on the costing for SAM action plan 2022. The workshop was started with inauguration speech of Professor Dr. Nasir Uddin Mahmud, director, institute of public health nutrition (IPHN). Then, background and objective of the workshop and malnutrition situation in Bangladesh was presented by Dr. Md. Maniruzzaman, program manager, National Nutrition Services (NNS) and Dr. Md. Abdul Alim, deputy program manager, NNS respectively. After that, honorable Syed Mojibul Huq, Additional Secretary (Public Health) and Health Services Division (HSD), Ministry of Health and Family Welfare. Dr. Md. Farid Hossain Miah, director (hospital), DGHS Dr. S M Mustafizur Rahman, line director, NNS; and Safina Abdulloeva, nutrition specialist, UNICEF made their valuable remarks regarding severe acute malnutrition in Bangladesh.

The main session was started with Dr. Gazi Ahmad Hasan, deputy program manager, by recapping the first workshop's findings. Then Dr. Md. Maniruzzaman shared the draft national action plan. The first day was closed with the group work on national action plan draft, facilitated by Asfia Azim, nutrition officer, UNICEF.

Second day started with the recap of first day activities and presentation of the group work. Group work's findings were presented by Dr. Shahabuddin Mahmud, assistant professor, Government Shaheed Suhrawardy medical College, and Dr. Iqbal Hossain, senior scientist, ICDDR,B on behalf of group one and group two respectively. After break, SAM management cost analysis was presented by Dr. Gazi Ahmad Hasan and Dr. Golam Mohiuddin Khan Sadi, nutrition specialist, UNICEF. Line director, NNS and Mayang Sari, nutrition specialist, UNICEF made their final remarks. Finally, workshop was ended with the closing remarks of honorable Dr. Meerjady Sabrina Flora, Additional Director General (Planning and Development), DGHS.



National Nutrition Services (NNS) launched Integration of Growth Monitoring and Promotion (GMP) into the Expanded Program on Immunization (EPI) platforms in selected Upazilas in Bangladesh



Photo: Dr. S M Mustafizur Rahman, Line Director, NNS along with TOT participants and the facilitators

The 2020 Mid-term Review (MTR) of the 4th Health Population and Nutrition Sector Program (HPNSP) 2017-2022 identified the lack of GMP as an weakness of the nutrition services in the Sector Program. The MTR called for linking GMP to EPI as a measure for immediate action within the 4th HPNSP. Considering the MTR recommendations, GMP integration into EPI platforms has already been incorporated in the NNS Revised OP (NNS ROP, January 2021 to June 2023).

Hence, NNS in collaboration with the Alive & Thrive (A&T) has started piloting, integrated GMP into the EPI platform following the EPI child vaccination schedule in selected geographies. Data, findings, and lessons learned emerging from the pilot will be used by NNS to inform nationwide scale-up. The pilot is being currently implemented in 18 selected unions of the following Upazilas:

Division	District	Upazila	Unions
Dhaka	Kishoreganj	Pakundia	Burudia, Chandipasha, Egarosindur, Sukhia
Chattogram	Chandpur	Sadar	Baghadi, Bishnupur, Maishadi, Shahmahmudpur
Sylhet	Moulavibazar	Rajnagar	Monsurnagar, Uttarbag, Tengra, Rajnagar, Fatehpur
Rangpur	Nilphamari	Sadar	Chapra Saramjani, Kachukata, Itakhola, Palashbari, Ramnagar

As part of the capacity-building approach during piloting, with the technical support from A&T, NNS organized a national level "Training of Trainers (ToT) on Integration of GMP into the EPI platform" which took place from 19-20 January 2022 at the NNS conference room, Mohakhali, Dhaka strictly maintaining COVID 19 national guideline. A total number of nine (09) participants from Alive & Thrive participated in the ToT. Participants from UNICEF and Nutrition Information and Planning Unit (NIPU) were also present in the ToT as observer.



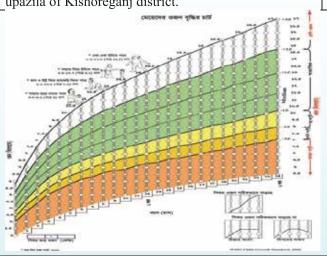
DR. MASUD REZA KABIR, LINE DIRECTOR, CBHC AT THE TRAINING SESSION IN NILPHAMARI SADAR

The objective of the TOT was to capacitate trainers and the A&T field staff for providing field level training as well as on operationalization of GMP service integration into the EPI platform. The ToT program was inaugurated by Dr. S M Mustafizur Rahman, Line Director, NNS and facilitated by Dr. Md. Abdul Alim, Deputy Program Manager (DPM)-NNS, Dr. Alamgir Murshidi, DPM-NNS, Dr. Mahfuza Haque Dalia, DPM-NNS, Dr. Zeba Mahmud, Senior Advisor, Strategic Partnerships and Knowledge Leadership, A&T and Dr. Md. Moinul Haque, Nutrition System Strengthening Advisor, A&T. NNS with technical support from A&T organized 2-days training for 259 front-line workers (CHCP, HA, FWA, FWV, MHV) and 59 front-line supervisors (AHI, HI, FPI) on "Integration of GMP into the EPI platform" of the respective 4 upazilas where the pilot is being implemented. Civil Surgeons, Deputy Directors Family Planning, Upazila Health and Family Planning officers, and Upazila Family Planning officers participated as resource person in the training.

National level Managers from relevant operational plans (OP's) visited along with A&T senior officials to observe the quality of field level training and the posttraining field implementation. Dr. Mahfuza Haque Dalia, DPM-NNS visited Rajnagar Upazila of Moulavibazar on 06-08 February 2022, Dr. Md. Abdul Alim, DPM-NNS visited Pakundia Upazila of Kishoreganj on 14-15 February 2022, Dr. Masud Reza Kabir, LD-CBHC, and Dr. Muhammad Shariful Islam, Program Manager (PM)-NNHP&IMCI visited Sadar Upazila of Nilphamari from 14-16 March 2022 to observe the training quality at field-level and the posttraining GMP into EPI session at Satellite Clinic (SC) and Community Clinic (CC) respectively. Visitors appreciated the quality of the training and the enthusiasms of FLWs and FLSs on GMP activities to roll out the pilot in the field. Joint field visits with national/divisional/district/upazila level officials to build nutrition champions and engage them in problemsolving will continue in the enter pilot project period.

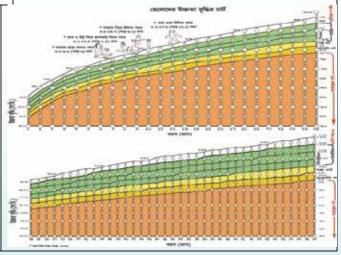


GMP into EPI post-training mentoring by Dr. Md. Abdul Alim, DPM, NNS and Dr. Zeba Mahmud, Senior Advisor, strategic partnerships and knowledge leadership, A&T at Thotarjangal CC at Pakundia upazila of Kishoreganj district.





Dr. Md. Moinul Haque, Nutrition System Strengthening Advisor, A&T observed the anthropometric assessment in Akkas Gazi House, Satellite Clinic at Chandpur Sadar Upazila.



Update on Priority Results & Indicators: March 2022

Under the dynamic leadership and guidance of Mr. Zahid Malek, MP, the Honorable Minister, MOHFW, respectable Senior Secretary Lokman Hossain Miah, HSD, MOHFW and respectable Director General of DGHS, Prof. Dr. Abul Bashar Mohammad Khurshid Alam, MIS department and National Nutrition Services (NNS), IPHN are releasing NNS PNRI report card. This score is derived from four Priority Nutrition Results Indicators (PNRIs) which are reported through DHIS2 monthly basis. A Composite Index (CI) is generated to assess overall implementation status of NNS and based on the average of achievement of mentioned four indicators, the divisions, districts and upazilas are categorized. Please find the attached PNRI National Report Card and link to the NNS-OP website (https://nnsop.gov.bd/en_US/) where more information can be accessed, including upazilla status. PNRIs trends up to March'22 presented below.

TREND OF National PNRI DATA MARCH 2022

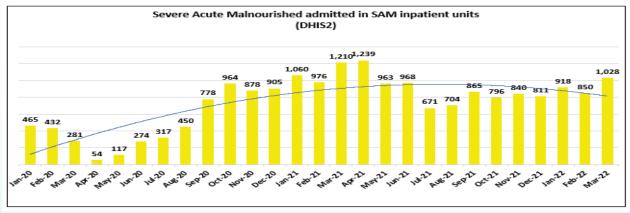
PNRI-Priority Nutrition Result Indicators Framework comprises of 4 functionality indicators and 5 service delivery data NNS score is generated by formulating Composite Index (CI) based on the 4 functionality indicators

PNRI functional data					PNRI service data							
Reporting Period	% of facilities reporting on complete nutrition indicator	% of facilities providing IYCF counselling to caregivers	% of pregnant women weighted during clinic visit (Cumulative)	% of children screened for SAM at facility	Composite Index	No of children screened for SAM at facility	No of Children Identified with SAM	No of SAM children admitted	No of PLW receiving IFA	No of caregiver receiving nutrition counselling	SAM Status by Screening	Admission Rate
Jan-20	52%	94%	62%	34%	0.60	145,968	1,432	485	296,778	548,711	1%	34%
Feb-20	52%	95%	65%	33%	0.61	168,029	1,563	432	289,769	578,015	1%	28%
Mar-20	49%	91%	59%	35%	0.58	125,083	1,664	281	252,980	459,694	1%	17%
Apr-20	43%	88%	59%	31%	0.55	27,832	938	54	204,488	233,132	3%	6%
May-20	43%	88%	Data is not available	39%	0.57	30,344	1,030	117	189,272	200,833	3%	11%
Jun-20	45%	89%	59%	52%	0.61	49,294	368	274	243,109	255,611	1%	74%
Jul-20	46%	89%	59%	51%	0.61	57,726	443	317	248,284	306,115	1%	72%
Aug-20	49%	91%	59%	54%	0.63	79,837	578	450	221,750	355,343	1%	78%
Sep-20	51%	92%	52%	57%	0.63	124,871	1,047	778	283,330	460,319	1%	74%
Oct-20	52%	93%	52%	57%	0.63	143,896	1,483	964	296,312	489,117	1%	65%
Nov-20	54%	93%	84%	63%	0.73	170,317	1,118	878	300,780	518,520	1%	79%
Dec-20	53%	92%	93%	60%	0.75	167,433	1,219	905	277,529	508,366	1%	74%
Jan-21	52%	91%	112%	49%	0.76	164,778	1,317	1,060	269,831	343,938	1%	80%
Feb-21	53%	92%	104%	50%	0.75	149,779	1,062	976	259,568	364,470	1%	92%
Mar-21	53%	91%	98%	54%	0.74	179,421	1,527	1,210	267,549	470,530	1%	79%
Apr-21	53%	92%	96%	56%	0.74	129,015	1,322	1,239	254,877	325,472	1%	94%
May-21	52%	91%	96%	55%	0.74	120,111	1,248	963	237,200	337,258	1%	77%
Jun-21	53%	91%	97%	65%	0.77	145,394	1,188	968	271,817	343,621	1%	81%
Jul-21	51%	90%	97%	67%	0.76	126,554	1,010	671	242,517	275,571	1%	66%
Aug-21	56%	92%	91%	59%	0.75	155,478	1,615	704	288,609	351,397	1%	44%
Sep-21	60%	93%	102%	65%	0.80	252,475	1,669	865	310,912	497,028	1%	52%
Oct-21	62%	94%	89%	77%	0.81	293,537	1,573	796	303,563	448,486	1%	51%
Nov-21	63%	94%	89%	79%	0.81	304,069	1,416	840	277,926	435,951	0%	59%
Dec-21	63%	94%	89%	84%	0.83	293,158	1,356	811	252,844	406,914	0%	60%
Jan-22	66%	95%	114%	84%	0.90	319,347	1,471	918	266,989	404,738	0%	62%
Feb-22	66%	95%	113%	81%	0.89	268,699	1,440	850	244,562	404,760	1%	59%
Mar-22	67%	95%	98%	78%	0.85	321,709	1,697	1,028	272,065	440,781	1%	61%

- · Since January 2020 to January 2022, National CI value has increased 0.60 to 0.85
- · Both PNRI functional and service data has also improved.



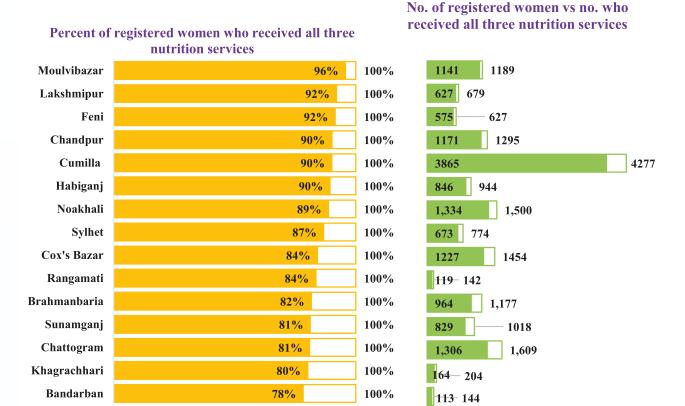
Compared to January 2020, proportion of children screened in IMCI-Nutrition corners was increased from 34% to 78% in March 2022 and in January (84%) was the highest percentage (%) of screening in IMCI-Nutrition corner.



- In March 2022 SAM admission has increased to 1,028 from 850 in February 2022.
- In March 2022, The IFA distribution coverage has increased to 272,065 from 244,562 (February).
- From the month of October, the caregiver of counselling coverage has been decreasing. In March 2022, the coverage has increased to 440,781 from 404,760 (February 202

Maternal Nutrition Services (DLR 13.4): April 2022

Proportion and number of registered pregnant women who received all three services (weight measurement, at least 30 IFA tablets and nutrition counselling)



Note: Figures show the district level performance of providing nutrition services to pregnant women. The panel on the left (yellow) shows the proportion of registered pregnant women who have received all three nutrition services. The panel on the right (green) shows the total number of registered pregnant women versus those who received all three nutrition services.

Key Findings

- The three districts achieving the highest proportion of services are Moulvibazar (96 percent), Lakshmipur (92 percent) and Feni (92 percent).
- In terms of absolute numbers, however, Cumilla, Noakhali and Chattogram provided the highest number of services.
- The three districts with the lowest proportion of services delivered are Bandarban (78 percent), Khagrachhari (80 percent) and Chattogram (81 percent).
- Bandarban, Rangamati and Khagrachhari provided the least number of services in terms of absolute numbers.





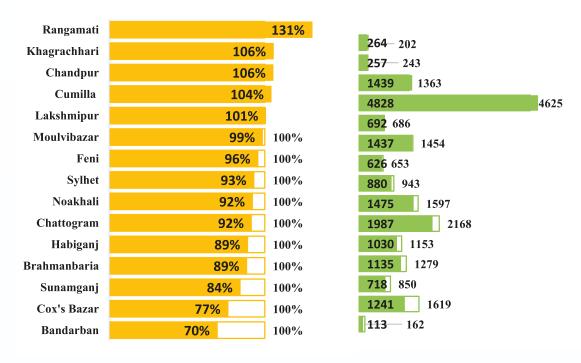


Child Nutrition Services (DLR 14.4): April 2022

Number of registered children (0-23 months) eligible to receive age appropriate nutrition counselling

Percent of registered children whose caregivers have received nutrition couselling

No. of registered children vs no. whose caregivers received nutrition counselling



Note: Figure shows the number of eligible children registered across the districts to receive age-appropriate nutrition counselling services.

Key Findings

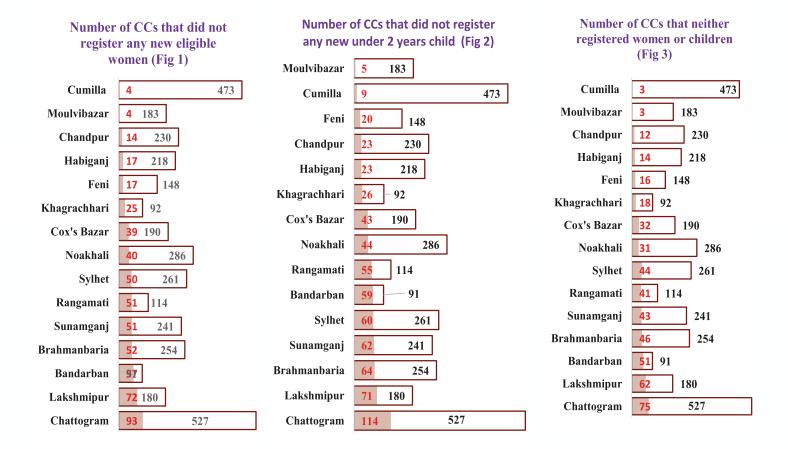
- The three districts with the highest proportion of services are Rangamati (131 percent), Khagrachhari (106 percent) and Chandpur (106 percent).
- In terms of absolute numbers, however, Cumilla, Chattogram, and Noakhali provided the highest number of services.
- The districts with the lowest proportion of services delivered are Bandarban (70 percent), Cox's Bazar (77 percent) and Sunamganj (84 percent).
- Bandarban, Khagrachhari and Rangamati provided the least number of services in terms of absolute numbers.





Community Clinics with Zero Reporting: April 2022

Number of CCs that did not register any new eligible pregnant women or children to receive nutrition services for the reporting month of April 2022



Note: Figures report the number of CCs that did not register any new eligible pregnant women (Fig 1); new children under 2 years of age (Fig 2); and neither any new pregnant women or children (Fig 3)

Key Findings

- Districts with the least number of CCs with zero-reporting CCs with regards to new eligible women are Cumilla, Moulvibazar and Chandpur. Moulvibazar, Cumilla and Feni had the least number of zero-reporting CCs when it came to registering new eligible children. Cumilla, Moulvibazar and Chandpur once more, had the least number of CCs with regards to registering either one new eligible mother or child.
- Districts with most zero-reporting CCs, who neither enrolled any new pregnant women nor children, are Chattogram, Lakshmipur and Bandarban.
- The three districts with the highest number of CCs with zero-reporting for registering new eligible pregnant women are, Chattogram Lakshmipur and Bandarban. For children, the most zero-reporting CCs are from Chattogram Lakshmipur and Brahmanbaria.
- Overall, 586 CCs did not enroll any new eligible pregnant women, 678 CCs did not register any new eligible children while 491 CCs did not register either.



Photo: Workshop on 'PNRI release and Data Quality Review for Managers'

Supported by: unicef, Dhaka



Photo: Model Development Workshop of TCC on GMP Integration into EPI on 27 April 2022



Photo: Field Level actives at Teknaf Upazila for National Nutrition Week 2022.

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Acknowledgement
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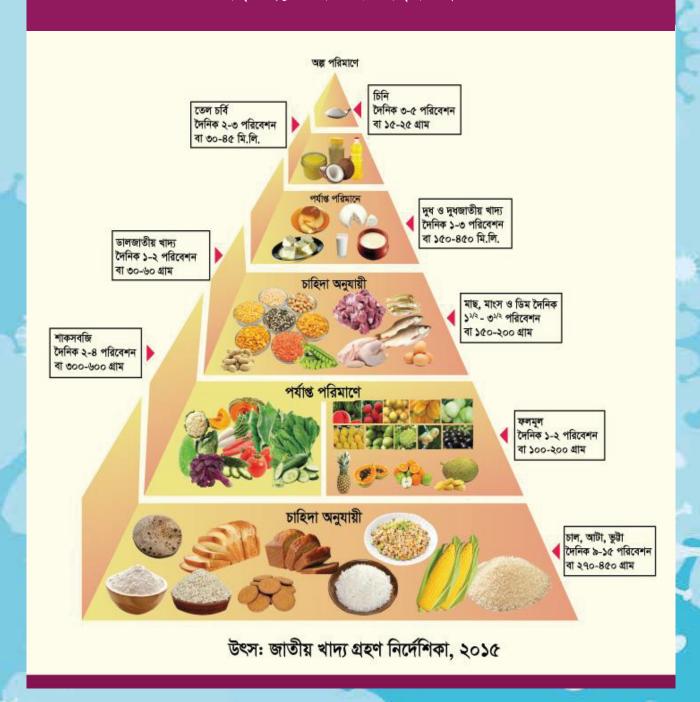
একজন সুস্থ প্রাপ্ত বয়স্ক ব্যক্তির প্রতিদিন নিম্নে বর্ণিত ১০ টি খাদ্যশ্রেণির মধ্যে কমপক্ষে ৪ টি খাদ্যশ্রেণি থেকে খাবার গ্রহণ করা উচিত

১০ টি খাদ্যশ্রেণি								
খাদ্যশ্রেণি		খাবারের পরিমাণ (দৈনিক কমপক্ষে)						
মাছ/মাংস	বড় মাছ	ছোট মাছ	মুরগী	কলিজা	১-৪ টুকরা (৩০-৬০ গ্রাম)			
ডিমের তৈরি খাবার	ডিমের পুডিং	সিদ্ধ ডিম	ডিম অমলেট	ডিম ভুনা	১ টি			
দুধ ও দুধের তৈরি খাবার	मूर्य	म र्डे	পায়েস	ফিরনি	১-কাপ (১৫০ মি.লি.) দুধ বা ½ কাপ দুধের তৈরি খাবার			
গাঢ় সবুজ ও রঙ্গিন শাক	কচু শাক	পুঁই শাক কলমি	শাক পালং শাক	লাল শাক	১০০ গ্রাম			
অন্যান্য সবজি	শিম	বাঁধাকপি	(15 to 16 to	লাউ	২ বাটি (২০০ গ্রাম)			
ভিটামিন এ সমৃদ্ধ ফল ও সবজি	আম	কাঁঠাল	মিষ্টি কুমড়া	গাজর	প্রতিদিন কমপক্ষে ২ টি			
অন্যান্য ফলমূল	তরমুজ	কলা	পেয়ারা	निष्ठ	মৌসুমি ফল (১০০ গ্রাম)			
বিভিন্ন রকম ডাল	বুটের ডাল	মসুরের ডাল	ছোলার ডাল	মুগ ডাল	১ বাটি ঘন ডাল			
শর্করা জাতীয় খাবার	ভাত	রুটি	মুড়ি	চিড়া	রুটি ২ টি, ২৭০ গ্রা: চালের ভাত, চিড়া/মুড়ি ১-/, কাপ (৮০ গ্রাম)			
বিভিন্ন বাদাম ও বীজ জাতীয় খাবার	চিনা বাদাম	কাজু বাদাম	পেন্তা বাদাম	শিম বীজ	১ মুঠো			

উৎসঃ জাতীয় খাদ্য গ্রহণ নির্দেশিকা, বাংলাদেশ (২০১৫)

প্রতিদিন জনপ্রতি (প্রাপ্ত বয়স্ক) গড়ে ৩০-৪৫ মি.লি. বা ২/৩ টেবিল চামচ তেল গ্রহণ করুণ

খাদ্য পিরামিড



জাতীয় পুষ্টিসেবা, জনস্বাস্থ্য পুষ্টি প্রতিষ্ঠান স্বাস্থ্য অধিদপ্তর, স্বাস্থ্য ও পরিবার কল্যাণ মন্ত্রণালয়







