

Meeting minutes on 20th MNTN Meeting

(29 – 30 September 2015)

Participants: NNC/School Health/ CHD – DoPH, ACF, HPA, PATH, Plan, PSI, SCi, UNICEF, WFP, WHO, WVM

1. Presentations on Progress of MNTN Meeting

Discussions

- To set the membership criteria for becoming a MNTN member
- To include the salt and rice producers as business sector
- To include research and institutional centers in academia sector
- Due to current changing dynamic of nutrition, ToR and role of MNTN should be review.

2. Presentations on Progress of BFHI, cIYCF & IMAM and their roll out plan

Discussions

- National Treatment guidelines and strategy on IMAM already developed and finalizing
- Operational protocol will be rolled out next week from Dr. HL
- Supportive supervision is critical for initial phase.
- Involvement of NGO (local and international one) in the process of supervision need to be define as they have the expertise, the experience and the strong will to support MoH.
- In Stabilization centers, daily in-patient supervision should be practiced
- Integration of BFHI & HNU data into online data system (e.g. DHIS 2)

3. Presentations on Program Reviews and Updates

Discussions

Iron Tablets

- Target Groups – only Myanmar Pregnant Women throughout pregnancy once daily or Women in Reproductive age once a week
- Target group extend to under five age group or adolescent groups taking account of life cycle approach, with both gender
- Should also give to postpartum women in 1st 3 months of lactating period
- Need to consider of Multi Micronutrient tablets versus Iron Folate tablet supplementation of pregnant woman.

Folic acid

- Current folic acid dosage is only for anemia prevention, but not for birth defect prevention
- For reduction of birth defect prevalence, the dosage and target groups also need reconsideration

De-worming

- Need justification to expand de-worming to secondary school children
- De-worming to pregnant mothers by mebendazole/albendazole as some country use the same de-worming drugs
- De-worming to breastfeeding mothers or not
- De-worming to 1-2 years of children or not

Vitamin A capsules supplementation

- Whether continue Vitamin A supplements for Lactating mother or not; however, there are enough justifications for maintain the supplementation. Current justification of Vitamin A supplementation to Postpartum woman are
 - Not for mortality/ to reduce Vitamin A deficiency of 6 to 59 months
 - Low dietary Vitamin A consumption
 - No side effect is seen on existing supplementation program
 - No evidence on Vitamin A deficiency in mother

IDDE

- Need to strengthen the salt factory and farm and the following area.
 - Decentralization and standardization of Law (Law and Regulation)
 - Enforcement
 - Monitoring and action taken
 - PPP
 - Technology
 - Collaborate with Consumer UNION (testing and reporting)

4. Presentation from Partners

Main Challenges encounter by partners

- High rate of Non responder/Defaulter in OTP/SC due to: Poor health coverage, Limited access to the nutrition centre, Sharing/selling the ration due to food insecurity, Low Nutrition center
- Nutrition & health sector meeting in Maungdaw District done irregularly: Need for continuous coordination, information sharing and harmonization: MoH, UN and NGOs.
- No SFP for children in Maungdaw District
- Importation restriction/UNICEF is not the main Therapeutic product provider /no RUTF locally produced
- Nutrition trainers at the township level is limited. Sometimes, even at the regional level. (Partners should evaluate actual need of the training)
- High staff turnover rate: especially the medical ones

- BHS cannot conduct that regularly -. Hence, partners will need to discuss more on how we could collaborate at the community level to conduct GMP regularly.

5. Presentation on Operationalization of Sub National Integrated Plan for Improved Nutrition

Discussion

- Launching will be on the 26th & 27th October 2015 in Magway
- Sub national plan for improved nutrition should include and integrate with all related programs such as child health, maternal health, WASH, CLTS and so on
- Child health department wants to include nutrition in their training programs in all 330 townships with the utilization of World Bank loans
- Nutrition department should be one of the working groups under MCH-TSG

6. Presentation on Preparedness and response for flood from NNC/ MIRA assessment for flood/ Nutrition sector response for Flood

Discussion

- There is no treatment products available for identified MAM cases. WFP is providing blanket supplementary feeding to 40,000 (6 – 59 months) children in 4 States and Regions. (Chin, Sagaing, Magway and Rakhine)
- Due to the food security and WASH facilities insufficiency, acute malnutrition caseloads can be increased in coming months. Regular monitoring and reporting of nutrition situation is important and partners should prepare for responses.
- Lack of implementing nutrition partners in some flood-affected areas
- Need to strengthen nutrition coordination in states/regions beyond Rakhine and Kachin

7. Recommendations

- UNICEF will revised ToR and work plan for MNTN and circulate to partners for their inputs.
- Need a seminar/workshop including related programs (e.g. malaria, filariasis, RH, Child health, etc.), and the clinicians (e.g. ObGys, Pediatricians, etc.) to review the nutrition programs, at which, the strengthening the system such as developing the new guidelines, logistics and procurement and so on.
- Township level Nutrition trainings: Partners to submit a request letter to NNC and NNC will check and assign NNC team/ S/R Nutrition team for training to Township Public Health Department Staff.
- UN and NNC should support the re-establishment of the nutrition & health sector coordination meeting at Maungdaw District level
- SMART Survey should be done in Chin & Magway and some Townships affected in Rakhine state (Kyauktaw, Maruk U if there is approved funding. WFP will check for their funding whether it can use for SMART survey.
- Finalize the nutrition sector positioning on the flooding response.

- vii. Nutrition sector meeting to be conducted alternately in Naypyitaw and Yangon and next meeting will be in Yangon tentatively on the 22nd October 2015
- viii. One focal from National Nutrition Center should include and lead the nutrition sector meeting which is on every month
- ix. MUAC assessment should be done at least once a month in flooded area as to monitor the nutrition status of under five children
- x. NNC should supervise and monitor the rapid nutritional assessment by the BHS in flooded areas and share the screening result in monthly sector meeting.
- xi. NNC to update any difficulties and challenges encounter during SAM treatment.