Minutes of Regular Nutrition Cluster Meeting
27th February 2019, Mogadishu

Agenda #1
Welcome and Introduction

The Nutrition Cluster Coordinator welcomed the participants to the meeting prior inviting MoH and UNICEF opening remarks.

Opening remarks by MoH and UNICEF
Head of Nutrition Unit, Federal Ministry of Health appreciated the tremendous work nutrition stakeholders are undertaking to save lives of mothers and children in the country. She further emphasized government strategy to transit from humanitarian to development programs- examples are resilience programs already taking place in the country.

To strengthen MoH system, the ministry took the decision of transition from ONA platform reporting system to DHIS2 which is government owned reporting system. A committee comprising of MoH, UNICEF, WFP and the cluster was formed to discuss and reach decision on the transition and customization of the nutrition indicators into DHIS2.

She further shared ongoing Micronutrient and Somali Demographic and Health Survey covers the entire country under the leadership of Federal Ministry of Health and Ministry of Planning.

Construction of National Nutrition Warehouse in underway with support from WFP, aimed to streamline supply chain management of nutrition and health product in the country. This will at least reduce burden of nutrition supply shortages in the country.

The chief of nutrition from UNICEF appreciate the performance of emergency response of the partners and Ministry of health for strong government leadership in nutrition.

Agenda #2
Situation update (overall situation and feedback from partners and FPs). Challenges and achievements

Discussions

Head of Nutrition Unit; FMOH presented situation update from field clusters.
Number of pending action points have been brought forward:

Reflections from the partners:
- Lack of SC Care take food in some SCs in the country: The SC care takers food issue have severally discussed, and WFP agreed to support SCs with food. However, still some SCs like Beletweyn, Baidoa, Kismayo and Afmadow SCs are still lacking SC care food.
- UNICEF raised an issue with the SHF funded partners that sometimes request nutrition supplies in an area where UNICEF partners covered.
- Partners participating Bakool Sub-National Cluster Meeting has been challenging due to security implications. SWS DG acknowledge their readiness to support agencies across the state. SWS head of nutrition worried about the shortage of nutrition supplies in Baidoa. This will have impact on quality of service and overall nutrition situation if not acted immediately.
- Lack of TSFP services in Berdale and Burhakaba: In Burhakaba UNICEF supported agencies are implementing expanded criteria for SAM treatment. For Berdale district; it was reported there is no TSFP services in the whole

Follow up action points
- Agencies implementing SCs to liaise with WFP for SC Care taker food
- Mapping of supply exercise to examine challenges of overlap.
- WFP and UNICEF to discuss SCOPE and how to take on OTP graduates into programs.
- MoH and partners to identify the partners workers in Baidoa IDPs thru joint monitoring process of pending PDs.
district, SCI approached WFP to cover the RUTF supplies part but as per WFP policy they don’t deliver supplies to the areas where WFP or their third monitors can’t access to monitor the services.

- Cluster meeting attendance has been an issue: some partners are not attending meeting regularly. Partners are needed their attendance not only their presence but meaningful contribution and constructive decision making. Consequently, partners are requested right staff who are knowledgeable about nutrition programing as well as the context to the meeting for meaningful contribution to the cluster.

- Pending PDs: UNICEF are asked to expedite pending PDs in Gedo and other regions.

- Ceiling of MAM admission figures: WFP confirmed no ceiling of MAM admission figures into the TSFP programs. Any moderately malnourished U5 children and PLW MUST be admitted into the TSFP program. The same have been communicated to all partners by WFP in 2017.

- Nutrition programs in Baidoa are many and partners should move to rural areas. While the RP3 exercise will aid in this process.

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### Agenda #3

#### 2018 Nutrition Performance

**Discussions**

Nutrition Cluster IMO presented 2018 achievement, challenges and way forward. The Nutrition Cluster Targeted 232,000 SAM and 539,500 TSFP <5 and reached 233,955 SAM (101%) of SAM and 310,800 (58%) of TSFP <5 respectively. With only 30% funding the cluster the admission for SAM surpassed its target. This is because of cluster commitment and value for money strategy in place.

Contributing factors to MAM underachieving could be linked to supply gaps or timely reporting. WFP indicated timely reporting is a challenge. WFP indicating has 87% coverage in some areas which is great and need to improve reporting to ensure MAM reached children are represented.

MOH stated capturing reporting rate would be good to know gaps as well as reporting on partners reporting timelines for transparency and accountability. We require all nutrition sites registered to be captured as we move to DHIS2 by July 2019. DHIS2 access and training can be provided by MoH as required.

**Follow up action points**

Nutrition Cluster will facilitate process to ensure elected nominees from each of local and Int’l partners take part in the joint committee lead by MoH that manages RPIII process alongside ONA transition.

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### Agenda #4

#### RP III – progress and way forward

**Discussions**

The cluster coordinator and Head of Nutrition Unit-FMOH led the discuss on the progress and way forward for Rationalization III. Most regions completed the RPIII exercise. As government is transiting towards developmental programs, RPIII will focus multisectoral integration and discourages stand-alone nutrition projects.

- All nutrition services will be integrated into health facility so that communities can access services from the same family. All partners implementing ongoing resilient program (KFW, SHINE) will by default be
rationalized. The RPIII will be equity based. Besides, partners with broader multisectoral capacity will also be rationalized. ONA/DHIS2 technical committee will discuss the RPIII and way forward before involving all nutrition stakeholders.

- Duplication: partners raised possibility of service duplication between KFW, SHINE and BRCiS; However, MoH and consortium lead agencies already put strategies ahead to avoid any possible service duplication between this consortium.
- The health and nutrition staff salaries/incentives to be harmonized.

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<th>Agenda #5</th>
<th>AOB: IMAM Guideline</th>
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<tr>
<td>Discussions</td>
<td>Follow up action points</td>
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<td>UNICEF presented the new IMAM guideline. Few technical/clinical changes have been made from old guideline. However, the document is now ready for printing, national ToTs is in place to cascade training nationwide to all relevant stakeholders and document will be translated into Somali to benefit Somali readers as well. MOH shared details regarding the Female health worker strategy and ensured harmonization of tools, trainings, incentives were necessary and need comprehensive approach by all including UNICEF, WFP and MOH.</td>
<td>MoH will lead a discussion between SCI and WFP around the possibility scale up TSFP services.</td>
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<tr>
<th>Key Action points</th>
<th>Responsible</th>
<th>Timeline</th>
<th>Status</th>
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<tbody>
<tr>
<td>Agencies implementing SCs to liaise with WFP for SC Care taker food</td>
<td>All partners</td>
<td>ASAP</td>
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<td>UNICEF to facilitate the process of pending PDs.</td>
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<td>MoH will lead a discussion between SCI and WFP around the possibility scale up TSFP services.</td>
<td>MoH</td>
<td>Early March</td>
<td>Open</td>
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<td>MoH and partners to identify the partners working in Baidoa IDPs thru joint monitoring</td>
<td>MoH/FP</td>
<td>5th March</td>
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<td>Partners were advised to routinely attend the field cluster meetings sending the right technical people.</td>
<td>All partners</td>
<td>Ongoing</td>
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<td>MoH will be looking into the reported overlaps between SHINE and KFW sites.</td>
<td>MoH</td>
<td>ASAP</td>
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<td>MoH/Nutrition Cluster to circulate final IMAM guideline document to all cluster members</td>
<td>MoH/NCC</td>
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