1. Welcome and Introductions:
The meeting was chaired by Dr Ahmed Jama from MoH who welcomed members to the May 2013 Somaliland NWG meeting and introduced the agenda.

2. Review of previous action points and endorsement of minutes:
Minutes of the previous meeting (4th April 2013) were reviewed and endorsed as correct. Action points of the same meeting were also reviewed and updated (see page 7-8).

3. Berbera IDP Nutrition Situation Analysis:
Kaltun Hussein – National Health Officer from SRCS presented Berbera IDP Nutrition Situation Analysis.

   Action Point:
   - MoH, UNICEF, WFP, SRCS scheduled meeting to discuss about Berbera IDP Nutrition situation on May 7, 2013 at MoH Meeting Hall in order to come up with response plan and possible support required for these vulnerable populations.

4. Integrating other Nutrition Interventions into the Mobile OTP Teams:
Dr Ahmed Jama – MoH Nutrition Focal Person had a presentation Integration of other complementary nutrition interventions into the mobile OTP teams, a summary of the presentation is given below:

   Mobile OTP Team
   - Serve in a hard to reach communities
   - Health Post or trained health workers are limited
   - Private pharmacies are limited.
   - Access to services in the health facilities by the communities in the hard to reach area is limited.

   Missing opportunity for other nutrition and/or health services such as
   - Multiple Micronutrient Supplementation for mothers who bring their children in the nutrition screening or management of SAM
   - IYCF promotion
   - Nutrition hygiene and health promotion
   - Immunization (all antigens) for mothers and children
   - Vitamin A supplementation after delivery
Issues to consider

- Policy issues
- Integration EPI and Nutrition – EPHS
- Training of the staff
- Supplies
- Team members
- Recording and Reporting system
- Transport for the team members

Outcomes of the Discussion on the agenda

- IMC/ANPPCAN/MERLIN/SRCS Mobile OTP teams are already providing MMN supplementation to pregnant and lactating women
- A taskforce is needed to come up with a minimum standard package for mobile OTP teams in Somaliland. The taskforce will be composed of the following partners: MoH/UNICEF/SRCS/ANPPCAN/WVI/MERLIN
- SRCS have been implementing in the past years Mobile Clinic services which provide ANC, PNC, Healthy delivery services, EPI, HE promotion.

Action Point:

- SRCS (Kaltun) to share a mobile clinic service package contents with the NWG and MoH in order to review the mobile clinic service package, utilization, challenges, and other issues related to the services

5. Review of SL OTP Recording and Reporting Forms

Dr Ahmed Jama – MoH Nutrition Focal Person presented a review of Somaliland OTP recording and reporting forms, a summary of the presentation is given below:

Situation Analysis

- There is no existing standard printed OTP registers
- There was simplified reporting form for the southern Somalia nutrition emergency during 2011
- Revised OTP/SC form Jan2012 have difference from the previous reporting form
- Partners in Somaliland use different forms for reporting
- Partners report differently (by site and by cumulative of sites)
- Supplies (used and in stock) not included? Which supplies to be included
- MoH Somaliland email address to the reported missing
- MoH Somaliland expressed concerns partners reporting to UNICEF HMIS – Somalia? Analysis (regional representation)
- Other information missing, children screened, normal, MAM and SAM to indicate workload of the team and strengthen referral system
- Comment component of the reporting form not filled most of the partners
- Monthly reports not available in the fixed MCH’s

**Discussion Points**
- There is a need for standardization of recording and reporting formats
- A taskforce is needed to address the above situation analysis issues. The taskforce will be composed of the following partners: MoH/UNICEF/SRCS/ANPPCAN/WVI/MERLIN/Mercy USA/HPA/WFP
- Recommendations from the task force will be shared next NWG and updated with Nutrition cluster

**Action Point:**
- To establish a taskforce responsible for standardization of recording and reporting formats

6. **Gap analysis in Somaliland Nutrition Interventions:**
Dr Ahmed Jama – MoH Nutrition Focal Person presented on gap analysis in Somaliland nutrition interventions, a summary of the presentation is given below:

**Areas with gap for Nutrition services**
- GAVI Health facilities in Maroodijeex for MCHN, OTP,NHHP, IYCF and TSFP
- WVI operational sites, particularly Baki East for MCHN, OTP Mobile
- Sabawanaag district outreach, Mobile OTP
- Ainabo former Medair Sites: OTP Mobile Covered by MOH from April to June, TSFP not started
- Burao town IDP camps
- Borama Town MCH’s (two MCH’s).
- Elefwein rural areas for OTP,NHHP and TSFP
- Sanaag MCH’s Garadag, Huluul, Gudmo, Maydh, Barwaako MCH for OTP,MCHN,IYCF,NHHP and TSFP
- Gerisa SC
- Lasanod SC
- Erigavo SC
- Mobile TSFP Hargeisa Rural North TSFP
- Mobile OTP and TSFP for Burao south east sites
- Mobile TSFP for North and south Burao Rural.
Discussion points
- Baki area many sites not reached due to lack of funds for WVI
- New facilities from GAVI funds, however lacking nutrition services
- Hospital beds and equipment were donated to Gerisa MCH.

Action Point:
- Meeting needed with MoH/UNICEF/WFP to discuss intervention plan for gap analysis concerns

7. Update on preliminary report Micronutrient Powder (MNP)/Lipid-based Nutrient Supplement (LNS) formative research in Maroodi Jeeh, Somaliland:
Dr Adam PSI Researcher – presented an update on preliminary report MNP/LNS formative research in Maroodi Jeeh Somaliland. Below is a summary of the key highlights:

Study Objectives
- Generate information about home feeding and purchasing practices
- To assess acceptability of MNP and LNS products
- To assess customer willingness-to-pay (WTP) for MNP and LNS products
- To identify potential marketing strategies for MNP and LNS

Methodology
The study consisted of three major components:
- 72 female caregivers were assigned to trial each product for 2 weeks. Interviewers had an initial interview with them before the products were given. After 2 weeks trial of each product (one after the other) a follow-up interview was completed from them, then they participated a WTP exercise and FGD
- FGD for men
- WTP for women who have not trailed the products

Sample
- 192 women of reproductive age (15-49) and 30 married males who are caregivers of at least one child aged 6-23 months participated
- All participants were from Marodi-Jeeh, and were stratified by urban, rural and IDP areas
- As SES may play a major factor in update of and willingness to pay for MNP and LNS, at each site we included a group of women from different SES levels.

Preliminary Findings – Initial Interview, FGD & Follow up Interview:
Biscuits, Potatoes, Shuuro, Carrots, Porridge, Bread (Boiled), Cabbage, Rice with milk, Barley and Mooshaali.
Most cited reasons for choosing children’s food

- Food that has protein or vitamins/nutrients,
- Food that gives energy or power,
- Food that are soft,
- Foods that give the child a full tummy.
- Do children share plates with others?
  - Eat from own plate = 83.3%
  - Share with older siblings = 15.3%
  - Share with adults = 1.4%

Household Roles for nutrition

- 86% of trialists reported that they made the decisions about what to feed their child 6-23 months of age, 15% said they decide jointly with a spouse
- The men’s FGDs support this finding, as most reported that their wife decided what to feed their child, through a few reported being involved in these decisions.

Action Point:

- PSI to share the final report to UNICEF and MOH for validation prior to dissemination

8. Quarterly training plan update:
Dr Ahmed Jama – MoH Nutrition Focal Person reminded all partners that Rahma – UNICEF has shared the quarter two training plan template with all partners and each one is expected to fill and return to MoH & UNICEF.

Action Point:

- All partners to share training plan template by Monday 6th May 2013 with Rahma – UNICEF

9. Joined Health and Nutrition Programme (JHNP) & Health Sector Strategic Plan (HSSP) update:
Mohamed Sheikh – UNICEF presented – an update on the JHNP & HSSP, a summary of the presentation is given below:

Major issues discussed in April SL WG Meeting:

- Update on Togdheer Essential Package of Health Services (EPHS)
- EPHS update (Sanaag or Marooodi – Jeeh region)
- Update on HSSP launch
- Update from last steering committee
Update on the Togdheer EPHS:
- Medair, SRCS and SCODO are the three partners involved in the EPHS implementation
- Micro-plan completed on rollout of the program
- Rehabilitation and top-up salary
- Odwanye, Canabo and Buhodle to be upgraded as referral health centres
- Proposal deadlines are end of May 2013 and to be finalized in ZWG by June

EPHS Update (Sanaag or Marodi-Jeeh Region):
- Maroodi Jeeh region was confirmed to be the region selected with a condition to get a justification letter from MoH
- Micro plan and assessment will follow for Awdal region
- Assessment tools need to be agreed
- Assessment timeline to be developed and must be facility based

Update on HSSP Launch:
- General recommendation put forward was to develop a booklet summarizing the HSSP and AWP (possibly in Somali)
- Funds made available for the launching HSSP.

Other Issues Discussed:
- Mid-year review of Annual Work Plans of agencies has been recommended
- Quarterly work plan to be discussed with the UN agencies
- MoH will review their annual work plans in May
- ToR’s for the construction engineer (for the construction unit of the MoH) must be developed

10. Key Agency/Organization Programme Highlights:

WVI:
Emergency Project ended and 2 months no-cost extension was issued very late, so training plans have been delayed, however will be conducted in the month of May 2013.

MEDAIR:
OTP Coverage survey will be conducted soon for Ainabo district.

ANPPPCAN:
Current IYCF PCA ended, new PCA proposal submission on-going with UNICEF.
SOMALILAND NUTRITION WORKING GROUP

MERLIN:
Currently Seylac has one mobile outreach team due to tensions in the area, however from May 2013 there will be two mobile outreach teams working in the area.

11. AOB

➢ IDP WG meeting update was given by Ahmed Osman (ANPPCAN).

➢ Nutrition in Emergencies Training (NiE) invitation was circulated and partners are requested to send participants to take part in this training from 12-16th May 2013.

➢ Health Salary scheme analysis shows that top incentives for MCH workers will be increased; partners are informed to familiarize themselves with this document.

Action Point:

- To circulate health salary document again

Action Points:

<table>
<thead>
<tr>
<th>No</th>
<th>Action Points Meeting of 2nd May 2013</th>
<th>Focal Agency/person</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>To share the draft SL NWG meeting minutes internally and for everyone to comment and then to be shared externally.</td>
<td>ALL</td>
<td>One week time</td>
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<tr>
<td>2</td>
<td>Follow up with FSNAU IDP survey to be conducted mid-May 2013.</td>
<td>MoH &amp; UNICEF</td>
<td>One week time</td>
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<tr>
<td>3</td>
<td>SRCR to share mobile clinic service package contents.</td>
<td>SRCS - Kaltun</td>
<td>Before next NWG Meeting</td>
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<tr>
<td>4</td>
<td>To establish a taskforce responsible for standardization of recording and reporting formats</td>
<td>MoH &amp; UNICEF</td>
<td>Before next NWG Meeting</td>
</tr>
<tr>
<td>5</td>
<td>PSI to share preliminary Focus Group results on MNP/LNS formative research.</td>
<td>PSI – Dr Aden</td>
<td>Before next NWG Meeting</td>
</tr>
<tr>
<td>6</td>
<td>All partners to share training plan for quarter 2 with Rahma – UNICEF.</td>
<td>ALL</td>
<td>6th May 2013</td>
</tr>
<tr>
<td>7</td>
<td>Schedule meeting to discuss Berbera IDP Nutrition Situation</td>
<td>MoH/UNICEF/SRCS/HPA/WFP</td>
<td>5th May @ 10am, MoH Office</td>
</tr>
<tr>
<td>8</td>
<td>Schedule meeting to discuss gap analysis in Somaliland nutrition interventions</td>
<td>MoH/UNICEF/WFP/WVI</td>
<td>5th May @ 10am, MoH Office</td>
</tr>
<tr>
<td>9</td>
<td>To circulate new health salary document</td>
<td>MoH</td>
<td>Before next NWG</td>
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<tr>
<td>1</td>
<td>MoH, MERLIN and UNICEF to meet on 8th of April 2013 in order to find a solution for restarting OTP mobile team services for Zeila district.</td>
<td>MoH/MERLIN/UNICEF</td>
<td>Team resumed service before the meeting date than meeting was cancelled</td>
</tr>
<tr>
<td>2</td>
<td>MERLIN to share the summary of the health facility monthly nutrition report for the quarter one 2013 for the health facilities in Zeila district.</td>
<td>MERLIN</td>
<td>Pending - WVI will update us soon.</td>
</tr>
<tr>
<td>3</td>
<td>FSNAU to confirm the dates conducting the planned surveys for the 2nd quarter of 2013, before the next NWG.</td>
<td>FSNAU</td>
<td>Pending – planned mid-May still need confirmation.</td>
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<tr>
<td>4</td>
<td>MoH to review the list of sites covered by ANPPCAN OTP mobile and will report and discuss any over laps with the management of ANPPCAN.</td>
<td>MoH</td>
<td>DONE - List shared.</td>
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<tr>
<td>5</td>
<td>WFP to conduct NGO capacity assessment for SYS NGO for partnership on implementing TSFP in Togdheer region.</td>
<td>WFP/MoH/SYS</td>
<td>Pending – Waiting for colleagues in Nairobi to carry out assessment.</td>
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<tr>
<td>6</td>
<td>All partners to share monthly reports for WFP supported health facility based nutrition with MoH.</td>
<td>All WFP &amp; MoH partners</td>
<td>On-going.</td>
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</table>

**NB: Date for the Next SL NWG Meeting:** Thursday 6th of June 2013
Annex: SL NWG Meeting Attendance Sheet

<table>
<thead>
<tr>
<th>No</th>
<th>Name</th>
<th>Organization</th>
<th>Title</th>
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<tbody>
<tr>
<td>1</td>
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</tr>
</tbody>
</table>

Apologies: IMC

Not Present: SCODO and SOLSA

Not Punctual/Late comers: ANPPCAN, HEAL, HPA, Merlin, MoH (Farhiya & Ismail), SOLNARDO, SRCS and WFP.