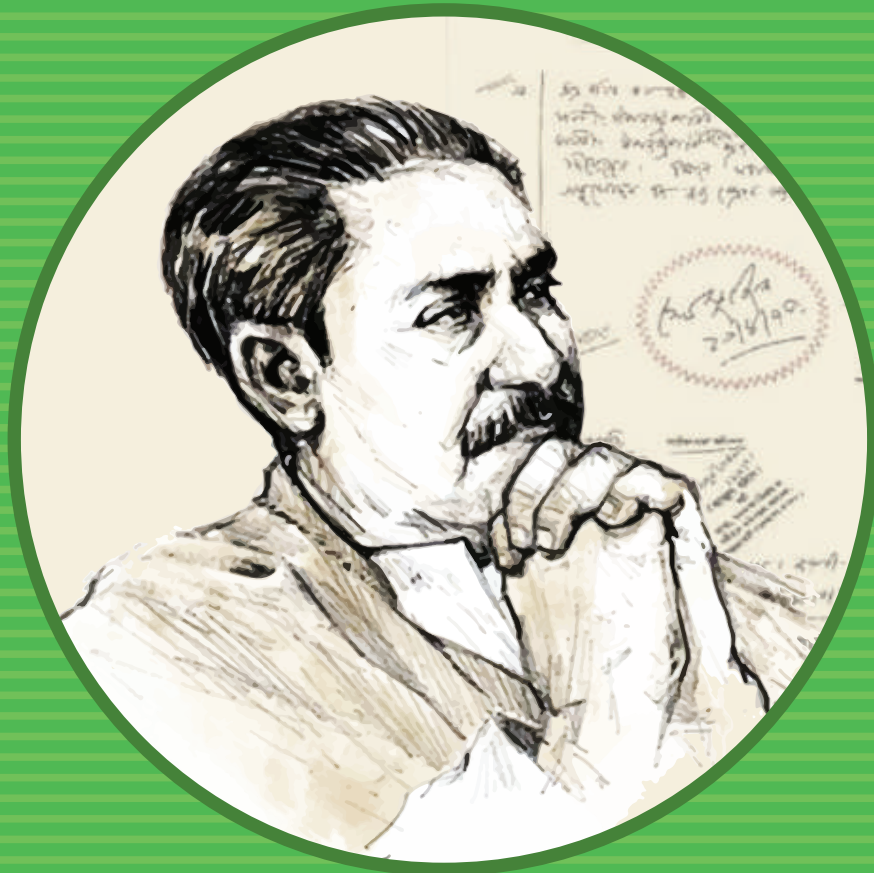


SPECIAL PUBLICATION ON THE MUJIB YEAR



# BANGLADESH NATIONAL NUTRITION COUNCIL: TOWARDS IMPROVED NUTRITION



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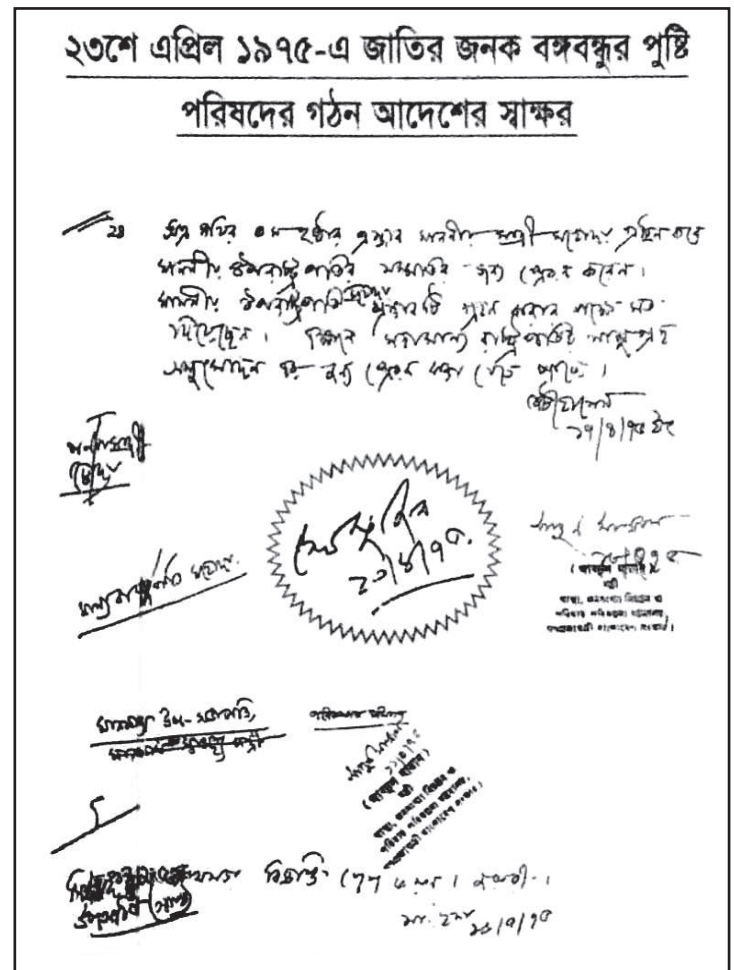
Website: [www.bnnc.gov.bd](http://www.bnnc.gov.bd)

## Bangladesh National Nutrition Council (BNNC): Converging for Nutrition

The Father of the Nation, Bangabandhu Sheikh Mujibur Rahman's commitment to improve nutrition of the people was reflected in the 1972 Constitution of Bangladesh that anchored adequate nutrition as a basic human right as "... the State shall regard raising the level of nutrition and improvement of public health as among its primary duties..." Article 18 (1) of the Constitution.

About half a century ago, the Father of the Nation proved to be a visionary by not only reflecting commitment to nutrition security for the population of Bangladesh in the Constitution, but also through the establishment of the Institute of Public Health Nutrition in 1974, and the formation of the Bangladesh National Nutrition Council (BNNC) on 23rd April 1975 to ensure multi-sectoral coordination and advocacy for nutrition.

2020 marked the 100th birthday of the Father of the Nation, and is coined "Mujib Borsho": the year of Sheikh Mujibur Rahman. This special issue is dedicated to this occasion and celebrates the establishment of BNNC by the Father of the Nation in 1975.





Government has already ensured food security for all by boosting food production. Our aim is now to ensure nutrition for all.

**HPM Sheikh Hasina**

## Reinforcing Bangladesh Commitment to Nutrition

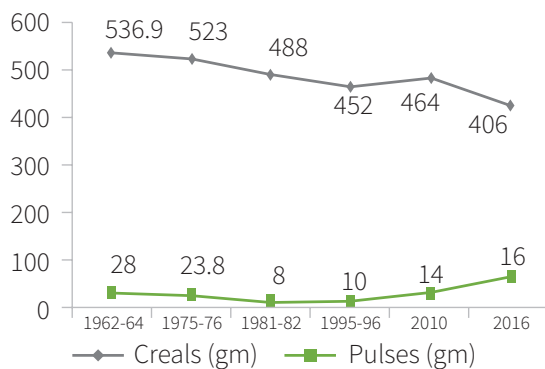
Following in her father's footsteps, the Hon'ble Prime Minister Sheikh Hasina has demonstrated her strong commitment and stewardship towards nutrition security of the people of Bangladesh both nationally as well as globally. During her different tenures nutrition has been high on her development agenda. For instance, her Government developed the National Food and Nutrition Policy as well as the first National Plan of Action for Nutrition in 1997. The Bangladesh Integrated Nutrition Project and the National Nutrition Programme were implemented between 1997-2010 which provided the evidence necessary for the development of the National Nutrition Policy in 2015. The 7th Five-Year Plan (2016-2020) prioritized food security and nutrition issues, after which the Second National Plan of Action for Nutrition (NPA2) 2016-25, a multi-sectoral, multilevel, multi-stakeholder action plan, was endorsed in 2017 by the Hon'ble Prime Minister. The latest, the Bangladesh National Food and Nutrition Security Policy (NFNSP) was approved in 2020.

In the global nutrition arena, Bangladesh has been an early adopter and one of the lead signatory countries of the global Scaling Up Nutrition (SUN) movement in 2012. The Honorable Prime Minister Sheikh Hasina was nominated as a member of the Global Lead Group of the SUN Movement to act along with a small group of other leaders. Bangladesh has endorsed the six global nutrition targets at the World Health Assembly in 2012, the Rome Declaration and the Plan of Action for the next decade during the FAO/WHO Second International Conference on Nutrition (ICN2) in 2014. Bangladesh has also committed to the 2030 Agenda and its Sustainable Development Goals (SDG) adopted by the United Nations General Assembly in 2015 which includes goal 2, to "end hunger, achieve food security and improved nutrition, and promote sustainable agriculture."

# Improving Nutrition and Food Security: Bangladesh Saga

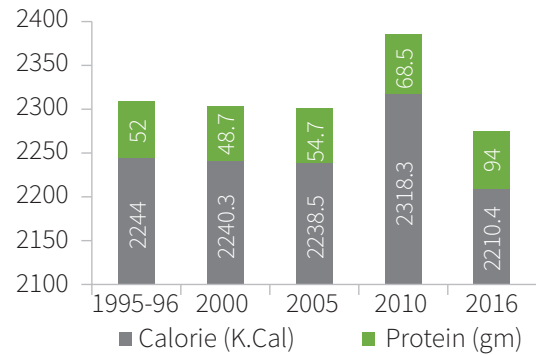
## Food Security Situation Since 1962-64

The first nutrition survey in 1962-64<sup>1</sup> ever conducted in Bangladesh revealed that 46% of the households surveyed had inadequate calorie intake; carbohydrates constituted about 83% of the total calorie intake. Moreover, 85% of the people did not meet their recommended level of daily protein intake and almost 70% of the dietary protein was from cereal proteins while only 14% was from animal sources. During seventies, Bangladesh experienced several disasters (both natural and manmade) resulting into a high distress situation for a vast group of people and some of them were forced to survive on food aid for long period. In 1970, prior to the war of Independence the country suffered from natural disaster followed by cyclone. Another major incidence being the independence war with Pakistan—a manmade disaster created by Pakistani roller in 1971, and million people were forced to live in relief camps in neighboring country, while nationwide floods and severe crop failures in the North increased food insecurity and malnutrition misery. Consequently, in 1985-86 about 69% and 15% of under-five children were suffering from chronic (stunting) and acute (wasting) malnutrition respectively.



**Figure 1:** Trends in Per capita Cereals and Pulses Intake (gm) in 1962-64, 1975-76, 1981-82, 1995-96, 2010 and 2016

<sup>1</sup>Nutrition Survey of East Pakistan, March 1962-January 1964; Ministry of health, University of Dacca, and Office of the International Research, National Institute of Health. US Department of Health, Education, and Welfare, Public Health Services, May 1966.



**Figure 2:** Trends in Per Capita Per day Calorie (K.cal) and Protein (gm) (Fish, Meat and Egg) intake (HIES 1995-96 to 2016)

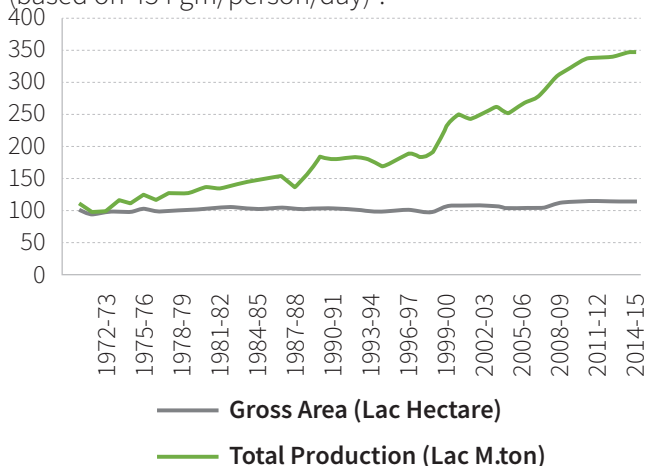
Against all odds, since independence in 1971 Bangladesh has turned around and started rebuilding its infrastructure and fragile economy. In response to the dire nutrition situation of children, Bangabandhu created the Institute of IPHN and BNNC, and initiated many pro-poor policies and programs. Since then, Bangladesh moved forward and never went back again.

The key strategy of the Government of Bangladesh to fight food and nutrition insecurity was to ensure agricultural production would be sufficient to provide enough cereal for everyone. Agriculture has been the most important sector of Bangladeshi economy, contributing more than 13% (8<sup>th</sup> five year plan) to the national GDP and providing employment for 43% percent of the population and for sustaining the food, nutrition and livelihood security for its ever-growing population.<sup>2</sup>

The total rice production as well as per hectare yield has increased progressively over the four-five decades. For example, the total production has increased from 108.68 M. ton in 1970-1971 to 347.1 M. ton in 2014-2015 and 364 M. ton in 2019 which is over 264% increase. During the same time the average yield rate (M.to per hectare) has also increased from 1.096 to 3.041. The country has passed a major

<sup>2</sup>45 years Agriculture Statistics of Major Crops (Aus, Amon, Boro, Jute, Potato & Wheat), January 2018, Bangladesh, Bangladesh Bureau of Statistics (BBS), Statistics and Informatics Division (SID), Ministry of Planning.

milestone in its efforts to achieve food security at the end of the 1990s, since for the first time in its history, food grain production exceeded target requirements (based on 454 gm/person/day)<sup>3</sup>.



**Figure 3:** Total rice production (Aus+Amon+Boro) and Area from fiscal year 1970-01 to 2014-15

Bangladesh has achieved self-sufficiency in rice production in 1996-1997 (synonymous for food security in Bangladesh)<sup>4</sup>. Households are gradually changing their diets with a larger share of calories coming from non-cereals, (e.g. vegetables, fruits and animal-products, etc.), only 64% of diets are now comprised of cereals compared to 82-83% in 1962-64<sup>5</sup> and 81% in 1998<sup>6</sup>. In recent decades encouraging developments in food production diversification, steady growth in rice production, remarkable progress in aquaculture, and recent progress in livestock production have been noted. Bangladesh achieved self-sufficiency in fish production with a per capita fish consumption of 62.58 g/day against set target of 60 g/day (BBS, 2016). According to FAO report The State of World Fisheries

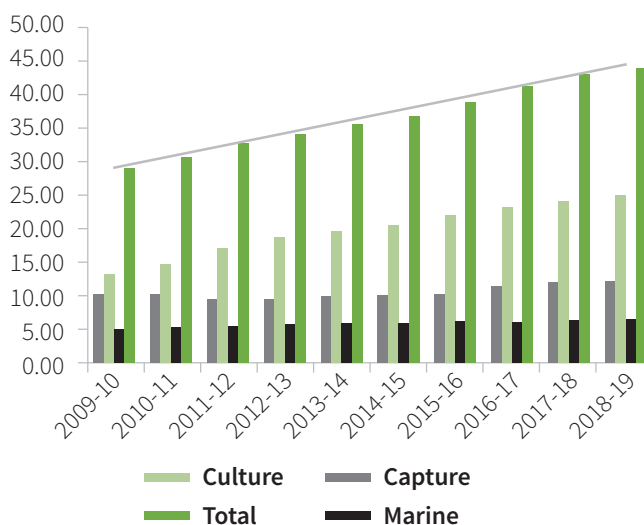
<sup>3</sup>Food Security and Nutrition in Bangladesh: Progress and Determinants; Mahabub Hossain, Firdousi Naher and Quazi Shahabuddin; International Rice Research Institute; Manila, Philippines. Vol. 2, No. 2, 2005, pp. 103-132.

<sup>4</sup>Dorosh, Paul. 2000, 'Food grain production and imports: towards self-sufficiency in rice?' in Raisuddin Ahmed, Steven Haggblade and Tawfiq-e-Elahi Chowdhury (eds.) Out of the shadow of famine, IFPRI, John Hopkins University Press.

<sup>5</sup>Nutrition Survey of East Pakistan, March 1962-January 1964; Ministry of health, University of Dacca, and Office of the International Research, National Institute of Health. US Department of Health, Education, and Welfare, Public Health Services, May 1966.

<sup>6</sup>Nature and Extent of Malnutrition in Bangladesh; Bangladesh National Nutrition Survey, 1995-96.

and Aquaculture 2018, Bangladesh ranked 3rd in inland open water capture production and 5th in world aquaculture production. With the current growth performance of fisheries sector, the fish production in the country is expected to be 45.52 lakh MT (Figure 4) by 2020-21<sup>7</sup>. Last 12 years average growth performance has been 5.01% with more than 12% of populations are directly or indirectly engaged in this sector for their livelihood, contributed overall current achievement of food and nutrition security. The fisheries sector contributes 3.50% to the national GDP and 25.72% to the total agricultural GDP of the country<sup>8</sup>.



**Figure 4:** Last 10 years fish production in Bangladesh

At present, agricultural value added per worker, a measure for agricultural productivity and a proxy for SDG 2.3.1, almost doubled over the period 2005–2017 compared to that of the period 1990–2004<sup>9</sup>. The percentage of household expenditure on food is a good proxy indicator to measure food security; the higher the expenditure on food, the less food secure is a household. The 2016 Household Income and Expenditure Survey (HIES) showed that Bangladeshi households spent about 48% of their household expenditure on food, compared to 55% in 2010. In 2016 in rural areas, the

<sup>7</sup>Yearbook of Fisheries Statistics of Bangladesh 2018-19, Fisheries Resources Survey System Department of Fisheries Bangladesh Ministry of Fisheries and Livestock Government of the People's Republic of Bangladesh, www.fisheries.gov.bd

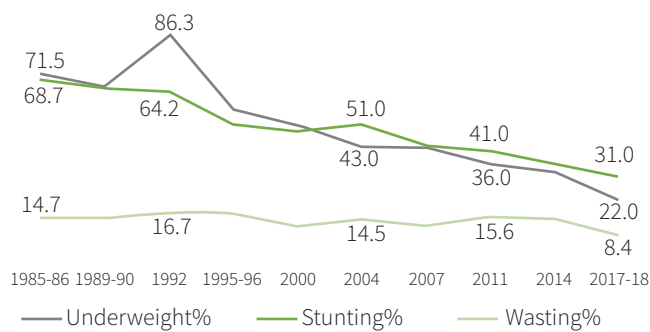
<sup>8</sup>Bangladesh Economic Review, 2019

<sup>9</sup>Monitoring Report 2019 of the Bangladesh Second Country Investment Plan, May 2019; Food Planning and Monitoring Unit (FPMU), Ministry of Food.

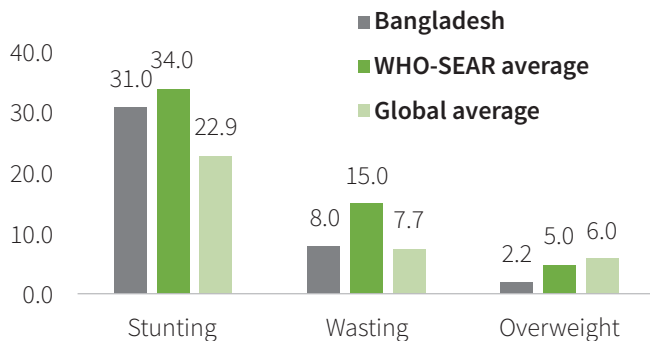
share of food expenditure was 50%; in urban areas however, the share of food in a household’s budget fell to 43%. In 2016, for the first time in HIES history, non-food expenditure exceeded food expenditure at the national level and in urban areas.. This indicates overall improvement in the quality of life of Bangladeshis<sup>10</sup>.

### Trends in Nutrition Improvement:

Over the last four decades there has been 66% drop in underweight, 52% drop in stunting and 44% drop in wasting among under five children (See figure 5).



**Figure 5.** The trend in nutrition improvement in Bangladesh (1985-2018).



**Figure 6.** Comparison of nutritional status of < 5 children (%) in Bangladesh with WHO-SEAR & Global averages

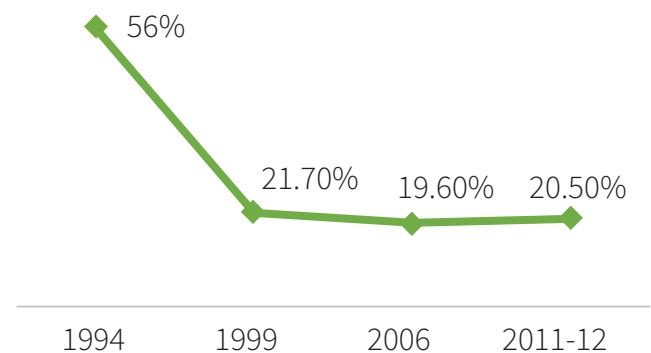
Figure 6 shows that Bangladesh has a lower prevalence of stunting (BDHS 2017-18) as compared to the South East Asia Region (SEAR) average (WHO 2017), but a higher prevalence of stunting than the global average

<sup>10</sup>Preliminary Report on Household Income and Expenditure Survey 2016; Bangladesh Bureau of Statistics (BBS), Statistics and Information Division (SID), Ministry of Planning, Government of the People’s Republic of Bangladesh

(WHO 2017). It also indicates that the proportion of children who are wasted in Bangladesh is almost at par with the global average, and is nearly 50% lower than the regional (WHO-SEAR) average. The prevalence of children who are overweight are lower than both the global and regional averages.

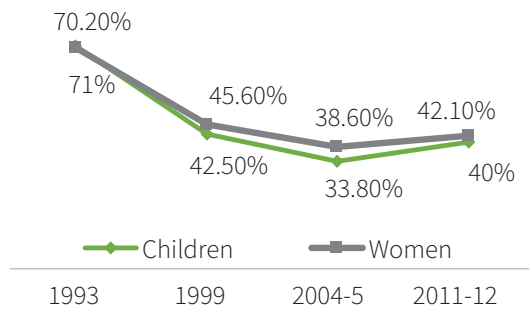
### Progress in Micronutrient Malnutrition

With regards to micronutrient deficiencies, Bangladesh has been making impressive progress. For example, during the 70-80s, vitamin A deficiency was a huge public health concern as nearly 4% of young children suffered from night blindness (WHO cutoff levels for public health problem is > 1%), more than half of whom had a subclinical vitamin A deficiency. As a result, more than 30,000 children became blind each year. With the advent of the nationwide vitamin A supplementation program, night blindness became history, and subclinical vitamin A deficiency reduced from 56% in 1994 to only 20% in 2011-12 – a 63% decline (figure 7).



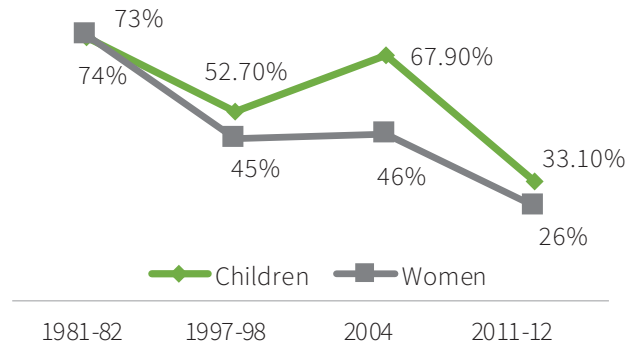
**Figure 7:** Trend of subclinical Vitamin A Deficiency in Young Children

Iodine is the mineral which supports brain development and maturing. A shortage can lead to hampered intelligence and goiter, which is a swelling of the thyroid gland in the neck. Three decades ago, half of all children and women in Bangladesh suffered from goiter and around 70% of them suffered from subclinical iodine deficiency. The introduction of the universal salt iodization program in the 1990s caused goiter to reduce to the level of a rarity. Subclinical iodine deficiency reduced to about 42% in women and 40% in children respectively by 2011-12 (Figure 8).



**Figure 8:** Trend of the Prevalence of subclinical deficiency both in children and women

Anemia is one of the bigger public health problems in Bangladesh. Back in the beginning of the 1980s, the prevalence of anemia was acrimoniously high at around 75% in young children and women. A gradual decline of the burden of anemia occurred over three decades from 73-74% in 1981-82 to 26-33% in 2011-12 which is 55-65% reduction among children and women



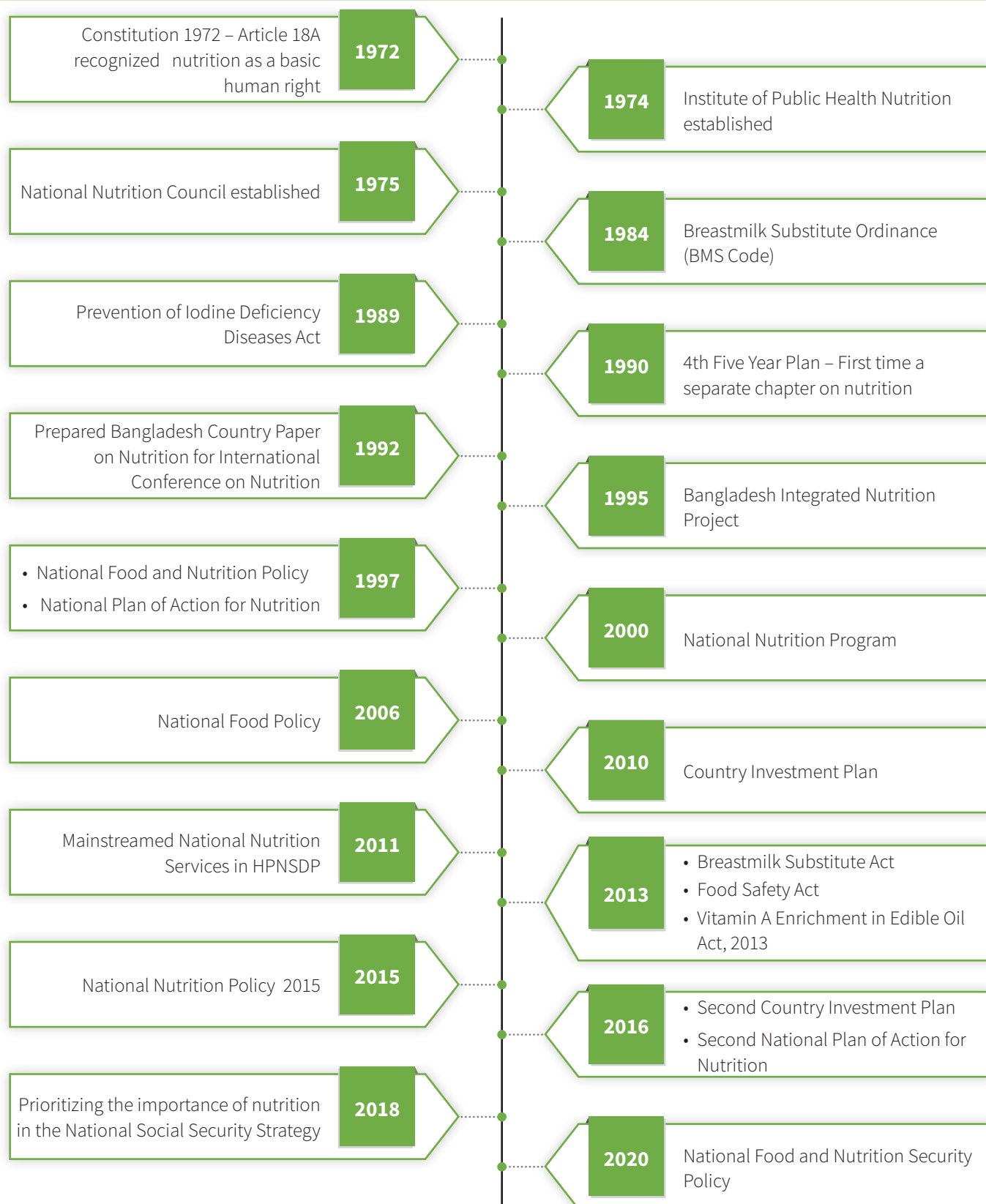
**Figure 9:** Trend of Prevalence of Anemia both in children and women

respectively (Figure. 9). Much of the improvement hinges on the gradual increase in the diversity of the diet and the intake of animal sourced food.

NB. The results of a recent national survey will be available soon.



# Nutrition Roadmap in Bangladesh: Key milestones 1972-2020



## Multi-sectoral Nutrition Coordination Mechanism in Bangladesh

The BNNC is chaired by the Honorable Prime Minister, draws its members from all 15 ministries which have nutrition-related programming, and is the central coordination and governance body for nutrition in Bangladesh. The Council is directly supported by two high-level committees. The first is a multi-sectoral Executive Committee (EC), which is chaired by the Honorable Minister of Health and Family Welfare (MoHFW), has members from 18 ministries, and provides policy direction. The second is the Standing Technical Committee (STC), chaired by the Additional Secretary of MoHFW, and provides technical oversight of relevant policies and programs. In addition, BNNC is supported by five working level thematic platforms.<sup>11</sup>

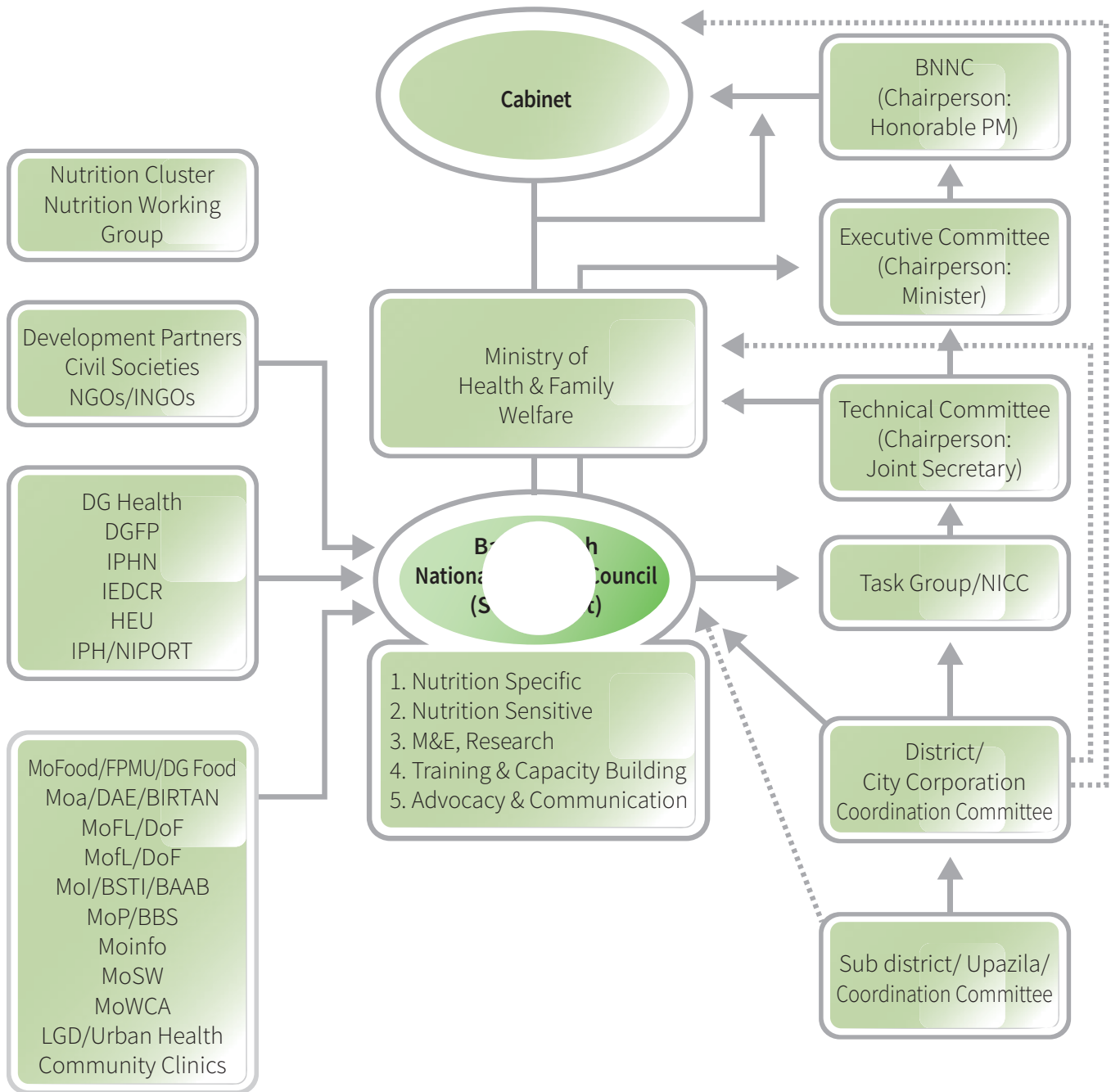
The BNNC office is placed at the core of this entire nutrition governance system to coordinate and monitor both horizontally and vertically; providing technical/analytical, policy advisory to Council, EC and STC; promoting an enabling environment for the successful implementation of the NPA2, overseeing advocacy activities.

District and Upazila Nutrition Coordination Committees (DNCC & UNCC) are the multi-sectoral coordination and governance structures for nutrition at sub-national level and are considered extended bodies of BNNC. DNCCs and UNCCs are responsible for developing multi-sectoral nutrition plans, coordinate and oversee, monitor nutrition activities of relevant sectors at sub-national level on BNNC's behalf.

A close collaboration is being maintained with the National Nutrition Services (NNS) Operational Plan housed in the Institute of Public Health Nutrition (IPHN). NNS is the lead operational plan for implementing nutrition services countrywide under HPN sector program through mainstreaming nutrition specific services within health and family welfare system.

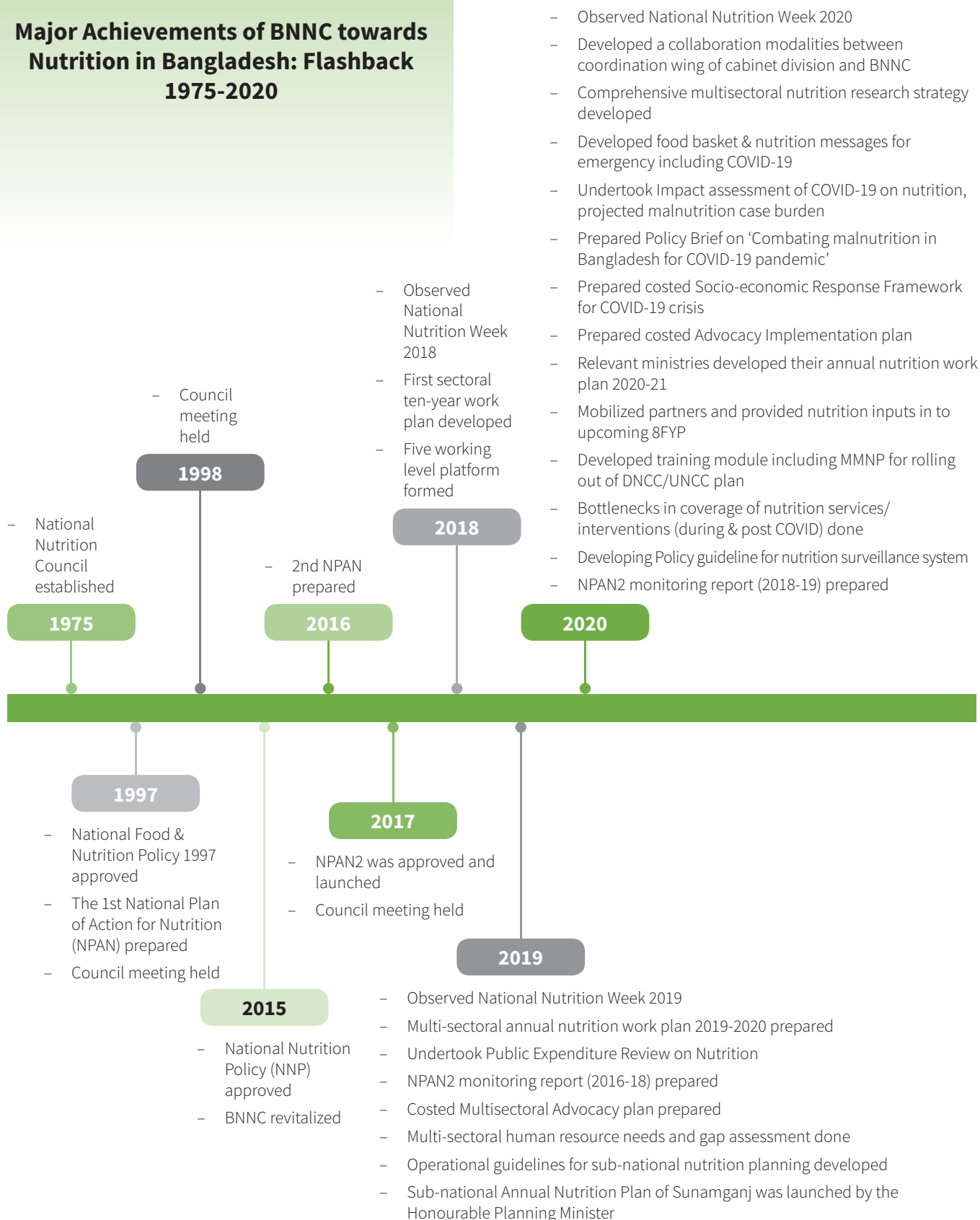
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<sup>11</sup>i. Nutrition specific, ii. Nutrition sensitive, iii. Monitoring, evaluation and research, iv. Training and Capacity Building and v. Advocacy and communication



**Figure 10:** Coordination Structure for Nutrition Following 3Ms Approach

## Major Achievements of BNNC towards Nutrition in Bangladesh: Flashback 1975-2020



# Highlights of key achievement

## National Food and Nutrition Policy (NFNP) 1997

The Policy recognized that nutrition is a multifaceted subject. Improvement in nutrition cannot be achieved in isolation. There is a need to strengthen the linkage between the important sectors concerned with the improvement of nutritional status of the people, namely agriculture, food and health. The main purpose of the food and nutrition policy was to significantly improve the nutritional status of the people, particularly vulnerable groups including the elderly and thereby contribute to the improvement in the quality of life and socio-economic development. The Policy intended to develop its own Desirable Dietary Pattern (DDP) based on availability of various food groups. The strategy for effective implementation of the NFNP was divided in the following four sectors: 1) Food, Agriculture, Fisheries, Livestock and Forestry; 2) Health, Family Welfare and Environment; 3) Nutrition Education and Communication, and 4) Community Development and Social Welfare.

## National Plan of Action for Nutrition 1997

Bangladesh prepared National Plan of Action for Nutrition (NPAN) to fulfill its commitment made at the International Conference on Nutrition (ICN) held in 1992. The Plan highlighted that the most burning problems on nutrition in the country were as follows: chronic food deficit, maternal malnutrition, low birth weight, gaps in breast feeding practices, inappropriate complementary feeding practices, protein energy malnutrition, and micro-nutrient deficiencies. Accordingly, NPAN proposed the following important targets to achieve by the year 2010: enhanced consumption/intake; reduced Protein-Energy Malnutrition (PEM); intensified control of infectious diseases and improved environmental sanitation; reduced prevalence of micronutrient deficiencies; promote appropriate diet and healthy lifestyle; and promote nutrition advocacy, education and community participation.

## National Nutrition Policy (NNP) 2015

Recognizing nutrition as the foundation of development, the Government of Bangladesh developed the National Nutrition Policy in 2015 aiming that the people of Bangladesh will attain healthy and productive lives through gaining expected nutrition. NNP includes the following objectives: (i) improve the nutritional status of all citizens, including children, adolescent girls, pregnant women and lactating mothers; (ii) ensure availability of adequate, diversified and quality safe food and promote healthy feeding practices; (iii) strengthen nutrition-specific, or direct nutrition, interventions; (iv) strengthen nutrition-sensitive, or indirect nutrition, interventions; (v) strengthen multisectoral programs and increase coordination



among sectors to ensure improved nutrition. This policy has been built on the successes, gaps and lessons learnt from the implementation of the National Food and Nutrition Policy (NFNP) 1997. While the NFNP 1997 considered reducing poverty and hunger as major strategies to improve human nutritional status, the NNP 2015 encompasses a multi-sectoral approach which can potentially improve the quality of life of the people by improving their overall nutritional status. The NNP 2015 identifies some specific key objectives including improving the nutritional status of the population in general and children, adolescent girls, pregnant and lactating women in particular; enhancing dietary diversity; scaling up nutrition-specific and nutrition-sensitive activities; and strengthening the multi-sectoral approach and coordination among relevant stakeholders.



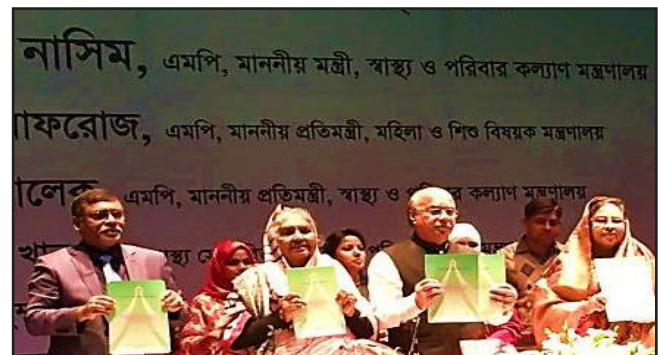
## The Bangladesh National Nutrition Council Meetings

Several Council meetings were held since the establishment of BNNC by the Father of the Nation in 1975. On 13 August 2017, Honorable Prime Minister, Sheikh Hasina approved the second Bangladesh National Plan of Action for Nutrition (NPAN2) 2016-2025. This landmark event coincided with the first meeting of the revitalized Bangladesh National Nutrition Council, chaired by HPM herself, at the Prime Minister's Office. Health and Family welfare Minister, Mohammed Nasim, Agriculture Minister Begum Matia Chowdhury, Food Minister Quamrul Islam, LGRD Minister Engineer Khandakar Mosharraf Hossain, State Minister for Health Mr. Zahid Maleque, MP, State Minister for Women and Children Affairs Meher Afroz Chumki and concerned secretaries were present at the meeting. Honorable Prime Minister instructed the concerned authorities for the inclusion of nutrition into all related ministries' work plans including budget from their own sources; the assessment of Human Resources for nutrition in each sector, a revitalized BNNC with adequate Human Resources; and the observance of a nutrition week to create awareness throughout the country from April 23-29 each year.

### The Second National Plan of Action for Nutrition (NPAN2) 2016-2025

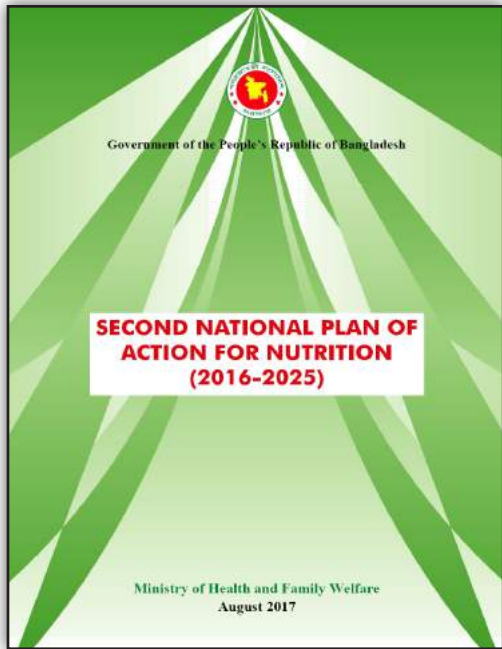
The revitalization of the Bangladesh National Nutrition Council in 2015, with the honorable Prime Minister as the chair, has catalyzed the development of a costed second National Plan of Action for Nutrition (NPAN2) to

operationalize the NNP 2015 over the next 10 years (2016-2025). First of all, NPAN2 was the first truly multisectoral articulation and prioritization for nutrition with concrete steps to ensure multisectoral coordination and emphasizing the importance of local level planning. It has further reinforced the country's existing promise to promote a multi-sectoral nutrition programme and inter-sectoral coordination mechanism towards a reality in Bangladesh as envisaged in the National Nutrition Policy (NNP) 2015. NPAN2 was formulated to testify to the GOB's commitments to global initiatives like Sustainable Development Goals (SDGs), Scaling



Up Nutrition (SUN), Second International Conference on Nutrition (ICN2) and World Health Assembly (WHA). NPAN2 is the culmination of efforts by many GoB ministries and development partners over a period of 2 years. A total of seventeen ministries were involved initially and five other relevant ministries were included later, along with all relevant partners for development and supporting implementation of NPAN2 2016-25. The estimated cost is approximately Taka 12,459 crore (US\$1.6 billion) to carry out the priority activities,

institutional development and capacity-building, as well as monitoring and evaluation (M&E) over the ten years period.



NPAN2 provides high-level guidance on the implementation, working and governance structures for nutrition and identifies the scope of budget required for the next 10 years by the respective ministries. NPAN2 is based on the agreed prioritization and sequencing principles and is divided into three time periods: short-term: Accelerated implementation over the next 3 years (2016 – 2018); mid-term: Implementation over the next 5 years (2016 – 2020); and long-term: Implementation over the next 10 years (2016 – 2025). The key to implementing the NPAN2 is to “plan collectively, implement sectorally and evaluate collectively”. NPAN2 follows a lifecycle approach and focuses on multi-sectoral interventions which can potentially improve nutritional status. The key target people include all age groups with special attention to ‘three generations’-critical periods- of the lifecycle through two windows of opportunities (first 1000 days to young children and women, and second window for adolescents including young mothers). In addition, elderly population and physically, mentally and cognitively disabled persons are also included.

## Celebration of National Nutrition Week

Several National Nutrition Weeks (NNW) 23-29 April every year, have been celebrated after the decision was made by the BNNC council meeting in 1997 to commemorate the day BNNC was established by Bangabandhu on 23<sup>rd</sup> April in 1975. With ups and down since its inception, the National Nutrition Week (NNW) was reinvigorated in 2017 by the direction of the Honorable PM. Since then, the country has been celebrating the NNW nationwide to promote good nutrition for all. This has been providing a unique platform for all sectors and all stakeholders to come together for a united common purpose. The NNW has mainstreamed nutrition across all 22 allied ministries, and has become a regular annual budgeted activity and is included in ministries’ respective annual sectoral work plans. Moreover, the NNW presents an opportunity for wide dissemination of scientific research and as such has become an important platform for knowledge sharing on nutrition. During the NNW, each District and Upazila nutrition coordination committee organizes their own activities to highlight the importance of nutrition.

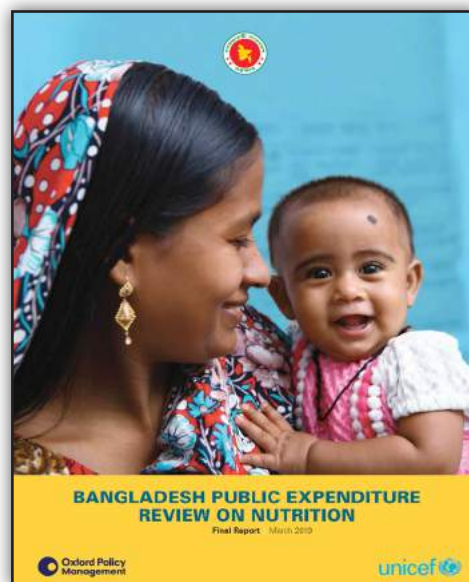
The 2020 COVID-19 pandemic forced the NNW to adopt innovative approaches to disseminate relevant messages. Both the BNNC and the National Nutrition Services (NNS) shared informative mobile, digital, and print messages to people across the entire country and developed and disseminated guidelines for uninterrupted nutrition service delivery. Moreover, instead of the usual activities organized as part of the



NNW, the Government decided to distribute food to the most vulnerable mothers and children country-wide.

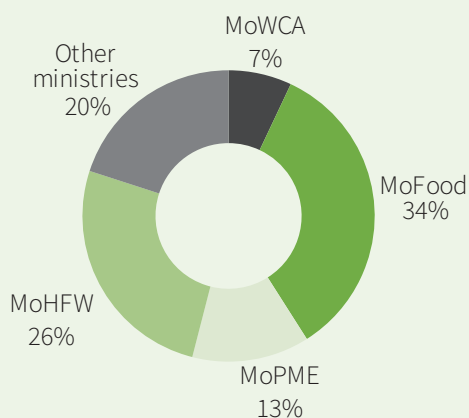
### Bangladesh Public Expenditure Review on Nutrition (PER-N)

In 2019, the Finance Division of the Ministry of Finance, BNNC, and UNICEF conducted a Public Expenditure Review on Nutrition (PER-N) to reveal the pattern of public spending on nutrition for the very first time in Bangladesh. The primary objective of the PER-N was to analyze the level and composition of public expenditure in nutrition over the past three fiscal years 2014-15 to 2016-17 and the projections for 2017-18.

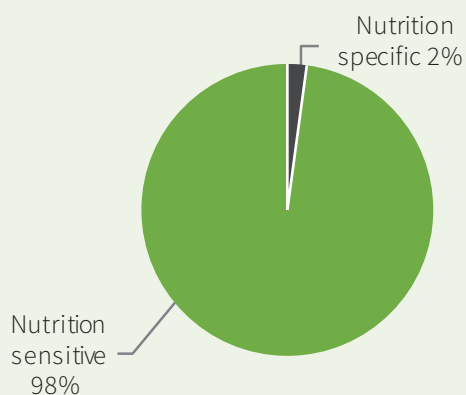


#### Key findings of the PER-N are as follows:

- The Government of Bangladesh spent BDT 23,210 crore (USD 2.7 billion) in nutrition relevant interventions in 2016/17, representing around 1% of GDP and around 9% of the national budget and level of investment remained stable. With about 15 million children under-five this translate into an average of of about USD 18 per capita.
- Non-development accounts for more than 70% of nutrition expenditures.
- Nutrition project/operational lines are found across at least 13 ministries, two of which have two divisions each.
- The ministries concentrating the largest amounts (80% of the total) are Ministry of Food (34%), Ministry of Health and Family Welfare (23%), Primary and Mass Education Ministry (13%) and Ministry of Women and Children Affairs (7%).
- The vast majority of expenditure is on nutrition-sensitive interventions, around 98%, while the remaining 2% is on nutrition specific.
- Execution rates of nutrition expenditures is low – which signals weaknesses in budget processes and performance.



**Figure 10:** Nutrition expenditure distribution across ministries, FY2014/15-2016/17



**Figure 11:** Nutrition-specific vs Nutrition-sensitive, FY2014/15-FY2016/17



While it was a necessary and useful process, the PER-N was an extensive, expensive and time-consuming process. To ease the process for future assessments, and based on PER-N recommendations, BNNC has initiated the establishment of an institutionalized mechanism for the generation of real-time information aiming to track public and partners financing (both on-budget and off-budget) at the national and sub-national levels.

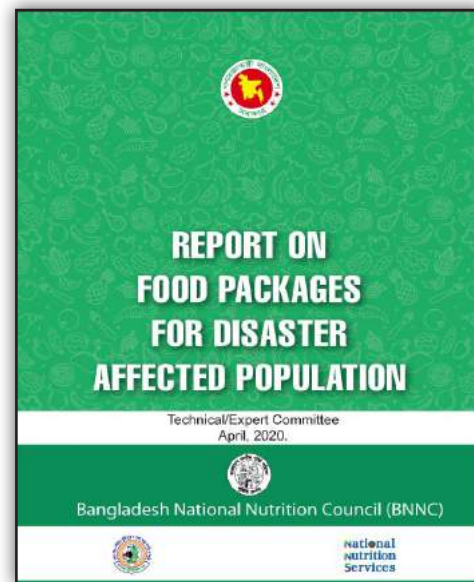
### Multi-sectoral Human Resource Capacity Needs and Gap Assessment

As per the directive of the Honorable Prime Minister, MoHFW and BNNC with support from partners conducted a study assessing the human resource need for nutrition in different ministries in 2019. The study undertook a comprehensive review of the human resources available for nutrition within 22 ministries. The study included mapping of existing workforce for nutrition, assessment of the human resource gap and requirement for nutrition in different sectors with recommendation on the ways to minimize the human resource gap for nutrition at different levels.

The study report suggests that most sectors do not have dedicated nutrition staff with the required knowledge and skills to manage and implement nutrition programs as envisaged under NPAN2. Findings revealed that about 72% of the nutrition focal points of the 22-nutrition specific and nutrition sensitive ministries are sensitized about nutrition, the remaining 28% was yet to be sensitized on the development of NPAN2 2016-2025 and understanding the alignment of the NPAN2 strategy with the activities of the respective ministry. The assessment concluded that human resources across the national and the field level in all 22 ministries require basic sensitization and orientation on nutrition policy, nutrition programming as well as customized technical training on required competencies for the implementation of ministry-specific activities. As a follow up on this conclusion, BNNC is developing a human resource strategy for the key relevant ministries.

### Nutrition Sensitive ‘Food Packages for Emergency’

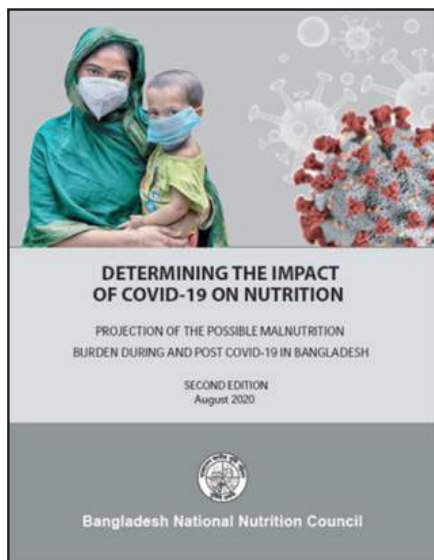
The COVID-19 pandemic and the subsequent extended Government Holiday to halt the fast spread of the virus (from 26 March until 30 May) caused a rapid increase in food and nutrition insecurity, as employment fell and access to food and health and nutrition services became limited. Within this context, it was understood that the distribution of food needed to be expedited to protect vulnerable mothers and children. The BNNC played a key advocacy role in bringing together the Ministry of Disaster Management and Relief (MoDMR) and the Ministry of Health and Family Welfare (MoHFW), and at the request of MoDMR, an 11-member Technical Expert Committee (TEC) was formed by the MoHFW under the leadership and guidance of the Director General, BNNC, and the Line Director, NNS to revise the food packages with increased attention to their nutritional value.



The Expert Committee in particular looked at: 1) food requirements of different age and target groups affected by any disaster including the COVID-19 pandemic; 2) the contents of current dry food relief packages; and 3) nutritionally balanced food considering their cost, nutrition value, safety, availability, accessibility, transportation, distribution, storage, preparation, etc. The resulting recommended guidelines and messages were followed by immediate relief response from government both in cash and kinds.

## Impact of COVID-19 on Nutrition: Assessment and Recommendations

At the onset of the COVID-19 pandemic crisis in Bangladesh, the immediate need from the government was to know the potential impact of COVID-19 on nutrition in the short, medium and long term in order to prevent a fall back of the country's current nutrition situation and also to avoid this health crisis to turn into a food security and nutrition crisis. Being the nutrition Apex body in the country, BNNC formed an expert committee on food security and nutrition. Members were drawn from eminent research organizations, academic institutions, UN agencies, NGOs, and members from the nutrition and food security clusters, etc., the task was to estimate the malnutrition case burden during and post COVID-19 period; prepare a policy brief with recommendations for higher authorities; and develop workable solutions for the Government to respond to the nutrition crisis in a swift and effective manner.



COVID-19's impact on nutrition would likely manifest itself through multiple pathways considering the multiplicity of factors related to malnutrition. In the process, social inequalities would contribute to differential impacts. Therefore, the key focus was to assess the impact of COVID-19 on the various underlying drivers linked to nutrition outcomes. A few highlighted issues were access and uptake of health and nutrition services; food security issues as food chain continuity, panic buying, access to market, food prices and the

availability of nutritious food; on-going Social safety net programs and their status; employment, income and coping mechanism adopted by poor for survival; and small and medium enterprises (SMEs) which are key drivers of the Bangladesh economy.

The combination of these underlying determinants leads to poor dietary intake and utilization, combined with increased occurrence of illness, resulting in increased malnutrition as well as higher morbidity. In July 2020, The Lancet published an impact projection, based on the LiST modeling methodology and macro-economic and micro-economic analysis of multiple indicators in 118 countries including Bangladesh concluded that wasting may increase by 14.3% in 2020.

The expert committee predicted that though the Government-imposed extended general Holiday which continued until the end of May might have a prolonged impact on the economy, there would be a moderate deterioration of underlying determinants considering other factors. However, in practice, even a moderate deterioration of underlying determinants of malnutrition could lead to dramatic increases of acute malnutrition. An increase in wasting has serious consequences on morbidity and mortality. A recent Lancet modeling exercise estimates that "if routine health care is disrupted and access to food is decreased [...], the increase in child and maternal deaths will be devastating". A 10-50% increase in wasting prevalence could account for an 18-23% increase in child deaths in the next six months. Another Lancet article predicts a 14.3% increase in wasting in LMICs due to COVID-19. If the Lancet's prediction would come true for Bangladesh, the number of acutely malnourished children would rise from 5.4 million to 6.2 million within 2020 alone. Prompt actions by policy makers based on evidence, mobilizing and coordinating all partners together and putting a system in place to monitor progress and accountability mechanism would be required to prevent such increases in wasting and eventually mortality. A three-pronged action strategy was recommended, which includes: (1) a comprehensive food and nutrition security response framework; (2) a multi-sectoral approach; and (3) a robust monitoring, evaluation, and surveillance system.

## Policy Brief: Combating Malnutrition in Bangladesh in the Context of the COVID-19 Pandemic

In August 2020, founded on the Impact of COVID-19 on Nutrition assessment report and its recommendations BNNC produced a Policy Brief – Combating Malnutrition in Bangladesh in the Context of the COVID-19 Pandemic for making policy decisions by the appropriate authorities in Bangladesh. This has been widely shared with the government agencies and partners organizations. The policy brief includes an overview of the improvements of nutrition situation in pre-COVID-19 time, the emergency response of the government of Bangladesh, the projected burden of malnutrition due to COVID-19, and policy recommendations.



## Multisectoral Nutrition Workplan



At the directive of the Honorable Prime Minister, the BNNC and its partners organized six workshops between 2018 and 2020 at the national level with all the nutrition focal points from 22 ministries and directorates, high level government officials and partners to prepare ministry specific 10-Year and Annual Nutrition Work plans aligning with the NPAN2 nutrition activities and its M&E matrix. Also, nine inter-ministerial meetings were organized earlier with the sectoral nutrition focal persons to ensure that nutrition-sensitive programs identified in NPAN2 are captured in

the relevant ministries' Annual Development Program (ADP) and sectoral annual workplans. All these actions would result in better multi-sectoral coordination at national and sub-national levels.

In addition, the annual workplans for 2019-2020 for nine (9) Operational Plans (OPs) responsible for implementation of nutrition-specific and -sensitive interventions under the MoHFW were also developed through a workshop. The annual workplans included priority nutrition activities and budget. Respective

Line Directors (LDs) and related officials from the LDs' offices, Additional Secretary, Public Health Wing and other representatives from the MoHFW were also present in the workshop.



The District Nutrition Coordination Committees (DNCCs) and Upazila Nutrition Coordination Committees (UNCCs) were established to lead and coordinate planning, budgeting, implementation, and monitoring of multisectoral nutrition activities. The

DNCCs and UNCCs undertake similar work-planning exercises as BNNC at the national level for developing the district and upazilla nutrition plans across the country. A strategy for rolling out district and upazilla annual nutrition plans and the Multisectoral Minimum Nutrition Package has been developed to cover all 64 districts and 493 upazillas in phases. In addition, an operational guideline for district and upazilla nutrition planning has been developed by BNNC with support from partners. So far, this exercise has been completed in five out of six pilot districts and upazillas. The lessons learned from the exercise in pilot districts/upazillas will be used to scale up the pilots in the remaining districts and upazillas. To expedite the rollout process, a Central Multisectoral Resource Team (CMRT) and Regional Multisectoral Resource Team in each Divisions have been formed with specific TOR for each resource team. An orientation package for the CMRT has also been prepared and piloted.

## Participatory Annual Nutrition Action Plan for 2019-2020: Sunamganj Model



District Nutrition Coordination Committee, Sunamganj prepared a Participatory Multisectoral Annual Nutrition Action Plan (PMANAP) 2019 – 2020 through collaboration with government departments, local government bodies (all Union and Upazila Parishads) and civil society alliance. This Nutrition Action Plan is expected to support improving quality of life, nutritional status and sustainable development of people at Haor areas of Sunamganj. Honourable Planning Minister Mr MA Mannan, MP formally unveiled the Plan, first of its kind in Bangladesh.

## Operational Guideline for District and Sub-district Nutrition Coordination Committee

To guide and functionalize the DNCCs and UNCCs, BNNC has developed an operational guideline

detailing out the role and responsibility, planning tools and processes, monitoring and reporting for district and sub-district nutrition coordination committees. The launching ceremony of “Operational Guideline for district and sub district nutrition coordination committee” held in Dhaka, on July10, 2019.



## Multi-sectoral Minimum Nutrition Package (MMNP)

The MMNP consists of activities which should be available and implemented at all service delivery outlets, platforms of various line departments of the governments and other implementing partners including NGOs and civil societies at district, upazilla and below. The aim of this minimum package for multisectoral nutrition is to prioritize nutrition interventions (specific and sensitive) as deemed necessary to meet the nutritional needs of a particular geographical area and the people so that no one is left behind. The minimum nutrition package would serve to identify priority minimum nutrition services/interventions/activities by different line department in any district and upazilla and below given the context of that area. These activities will be included in respective districts' and upazillas annual nutrition workplans for implementation and will be monitored regularly by the DNCC and UNCC. The MMNP has been developed through a rigorous consultation process led by a

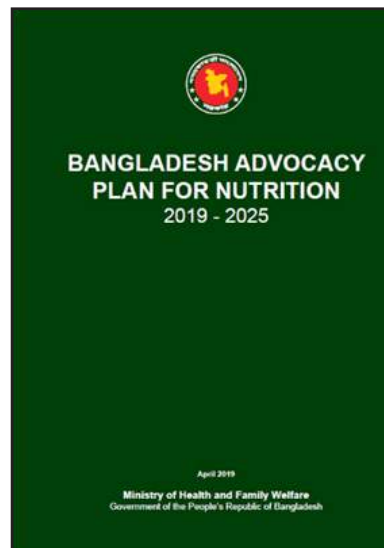
Technical Working Group formed by BNNC with the technical support from partners. The package has been validated in several stages, e.g. with district and upazilla officials of various line departments during the field visits by BNNC and partners, tested during the annual work planning exercise at district by the DNCC, and finally endorsed through a consensus building workshop.

The priority indicators and related activities included in multisectoral minimum nutrition package belong to seven ministries and their respective line departments at district and upazilla. The contents of the package are aligned with: (i) 20 priority nutrition indicators labelled by the BNNC (out of a total 64 indicators and related activities envisaged in NPAN2 monitoring framework; (ii) activities included in the Sectoral Annual workplan/OPs of the respective ministry at national level; (iii) nutrition specific interventions under DLI 13, 14 and other related DLIs; and (iv) activities emerging from and meeting the geographical and cultural needs/demands.

## Bangladesh Advocacy Plan for Nutrition, 2019-2025

Bangladesh National Nutrition Council (BNNC) formulated the Bangladesh Advocacy Plan for Nutrition 2019-2025 in 2019. The Goal of the Plan is to strengthen political and legal framework, increase commitment of stakeholders, change in organizational behaviour towards nutrition agenda, and enhance resource mobilization for nutrition. The Plan set multisectoral coordination, capacity and leadership development and engagement of stakeholders as its strategies. It has been developed through processes of key informant interviews, stakeholder consultations, development, and validation workshops, and finally approval by the Advocacy and Communication Platform under NPAN2. The Plan recommended a set of activities (stakeholder

analysis, development of advocacy materials, organization of events, mass media campaign etc.) and a work plan with estimated budget and financing options.



## Framework for Operationalization of the Advocacy Plan for Nutrition, Bangladesh

With the aim to materialize partnership and resource mobilization for operationalization of the Advocacy Plan, a 'Framework for Operationalization of the Advocacy Plan for Nutrition, Bangladesh' was also prepared in 2020. The Framework proposed a financing scheme for operationalization of the Advocacy Plan. In addition, for the partnership arrangement, a Priority Action Plan (PAP) for the period of 2020-2025 was prepared based on some set criteria as well as use it as basis for negotiation with potential partners. Further, a compilation of the advocacy components of the Ministry Plans and Operational Plans under HPN sector was made. The BNNC is recommended to set for improvement of the advocacy components of GOB Plans, and negotiation with interested partners (DPs and Others) to build partnership arrangement.

## Assessment of the Key Bottlenecks for the Coverage of Nutrition Sensitive Interventions in Bangladesh

It is a known fact that direct nutrition interventions (proven cost-effective nutrition specific interventions), even when scaled up to 90 percent coverage rate, only able to reduce stunting prevalence by 20 percent and severe acute malnutrition by 60 percent, inferring the importance of nutrition sensitive interventions implemented by relevant sectors in addressing these

factors<sup>12</sup>. Lancet Series 2013 stated that nutrition sensitive interventions are to be implemented at scale reaching the poor who have highest rate of malnutrition<sup>13</sup>. Nutrition sensitive interventions in Bangladesh are implemented at large scale and have the potential for reaching the poor at scale who also have highest rate of malnutrition. Study reveals most (98 percent) of the money spent for nutrition are spent within ten ministries and those sectors are outside of

<sup>12</sup>Lancet, Maternal and Child Nutrition Series, 2013

<sup>13</sup>Lancet, Maternal and Child Nutrition Series, 2013

health sectors<sup>14</sup>. Hence, it is of utmost importance to review the nutrition sensitive interventions of these ministries and sectors outside health sector to ensure the relevant impact on nutrition. Unfortunately, there has been a considerable gap in the baseline status of some of the nutrition sensitive indicators as indicated in Second National Action Plan for Nutrition (NPAN2), with the recent progresses.

BNNC conducted a bottleneck analysis to identify the constraints hindering the coverage of nutrition sensitive interventions. This was not only the first assessment of this nature of the country, but very few countries have ever done such assessment. A rigorous qualitative research methodology was conducted, involving relevant national and international experts from government, academies, research institutes and development entities. The analysis identified



the prevailing bottlenecks hindering the coverage of the nutrition sensitive interventions implemented by different ministries and departments, and came up with a series of short, medium and long-term recommendations along with a strategy for improving the coverage and quality of nutrition programs/interventions. The recommendations are also classified into policy level recommendations requiring multi-stakeholder and longer-term involvement, and programmatic level recommendations with shorter-

term involvement. BNNC is in the process of developing a policy brief to inform the relevant stakeholders on the bottlenecks and the recommended steps to address those. BNNC is also developing and testing a community-based model to implement short-term programmatic level recommendations. The result will encourage relevant ministries and departments adapt similar interventions to address programmatic level bottlenecks.

<sup>14</sup>Public Expenditure Review of Nutrition (PERN), 2019

## Knowledge Management

### Strategy to Conduct Operational and Implementation Research

There are several institutions, organizations and NGOs responsible for managing and undertaking nutrition research in Bangladesh. Research is, though, done on an ad-hoc basis primarily to meet a specific need or to fulfill the requirements of a respective organization and therefore lack cohesive coordination. As a consequence, results are often not shared effectively and remain widely unused. To mitigate this, a strategy to conduct operational and implementation research has been developed by BNNC and the SUN Academia and Research Network. This strategy thereby aims to strengthen the capacity of BNNC to manage, coordinate, supervise, outsource; identify the role of various research entities; mapping of related nutrition research to avoid duplication; and identify priority research areas/topics based on importance, urgency and gaps in operational and implementation research. The strategy was based on a study conducted by BNNC with support from partners reviewing the existing research undertaken by various institutions, organizations, and individuals on nutrition in the last 10 years in Bangladesh. Based on the findings of this study, a list of priority topics for operational and implementation research related to nutrition under various sectors in Bangladesh were identified. These research topics were reviewed, prioritized and finalized through a consensus building workshop and finally included in the final research strategy document.

### Monitoring and Evaluation Framework

BNNC with support of its Monitoring, Evaluation and Research platform has developed a detailed Monitoring and Evaluation Framework of nutrition

key sector's activities in line with the strategic actions from the NPAN2 (2016-2025). This would help BNNC to track the progress, learning and evidence from the planned activities to enable informed decision-making while developing policy, and ensure that the programmes maintain a high level of quality while achieving their objectives. Additionally, it would also enable programme management to take the required corrective measures in a timely manner. In order to develop the M&E Framework, several Multi-stakeholder workshops were conducted with the relevant ministries and key sector partners to identify ongoing or planned nutrition activities, assess existing M&E mechanisms of relevant ministries for streamlining and supporting a multi-sectoral nutrition M&E mechanism. Similar actions were taken as a step to integrate nutrition indicators into existing monitoring & reporting systems. These framework identified and established 25 priority indicators, drawn from the 64 progress indicators included in NPAN2's monitoring and evaluation framework. The priority indicators were selected from nine out of 22 ministries which have the largest potential impact on nutrition. Finally, a guideline for capacity building has been developed and shared to present the data management framework that would support tracking of nutrition progress in line with NPAN2 target indicators. The guideline has been developed in the context of capacity building of BNNC and their relevant data managers and external users from different sectors. The outputs of the M&E framework are used to measure performance of a program at different levels. Inputs, processes and outputs are regularly monitored while outcomes and impact are periodically assessed either through surveys or evaluations. Finally, the analysis or findings are used in developing annual monitoring report of NPAN2 by BNNC.



## Annual Monitoring Report of NPAN2

The implementation status of 25 priority nutrition indicators for NPAN2 is monitored on an annual basis. To date, two monitoring reports (2016-17, 2017-18 and 2018-19) have been produced, published and shared by the Bangladesh National Nutrition Council (BNNC). These monitoring reports are the first of their kind for multisectoral nutrition programming in Bangladesh as they simultaneously put forward the successes and challenges of relevant sectors during the reporting periods as well. For instance, the reports



also reflect issues of food and nutrition security targets and progress, especially for the vulnerable people, women and young children. Annual monitoring report systematically presents the current nutrition situation, track progress of 25 NPAN2 priority indicators, and provides recommendations for future directions. The Monitoring Reports attempted for a thorough investigation of the present nutrition situation through its pre-determined activities. The 2018-19 NPAN2 monitoring report noted the steady progress towards

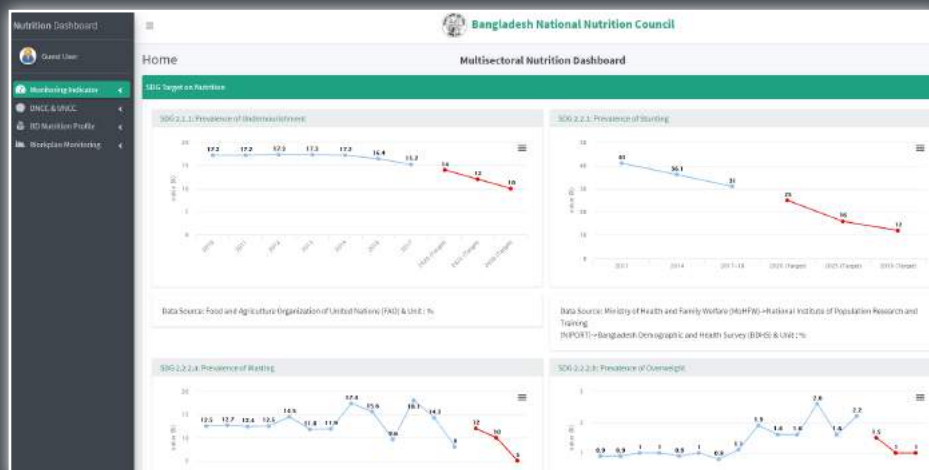
the attainment of the set target and demonstrated an impressive progress for many of NPAN2 indicators. They also outlined the budgetary analysis where sufficient funding has been recommended.

## Online Monitoring System

As BNNC has been reorganized and revitalized to be the highest-level coordinating office for nutrition under the leadership of the Honorable Prime Minister, it has high-level responsibilities to have close look out on nutrition data obtained from all reliable sources for advocacy to mainstream nutrition, ensure better coordination, take policy decisions, and resource mobilization as deemed necessary. Accordingly, a multisectoral nutrition data hub in BNNC is being created. BNNC has initiated to develop a dashboard where all relevant nutrition information in line with NPAN2 will be shown, analyzed and updated. The dashboard would help using nutrition information obtained from different platforms and visualization. Information in the dashboard is organized into the following categories: (i) monitoring indicators to track the progress of NPAN2; (ii) monitoring of DNCC/UNCC to assess functionality and progress of MMNP activities; (iii) Bangladesh nutrition profile based on composite indicators; and (iv) progress tracking of nutrition work plans of relevant ministries.

You can be more enriched about the information displayed on the dashboard through the website of Bangladesh National Nutrition Council: <http://www.bnncc.gov.bd>

## BNNC Multisectoral Nutrition Dashboard



## Bangladesh Nutrition Profile

Evidence-based planning and data-driven decision making is important to address bottlenecks and ensure effective coverage of nutrition services. In order to empower policy makers and districts government officials to assess and track the performance of nutrition specific and nutrition sensitive interventions, the Bangladesh National Nutrition Council (BNCC), in collaboration with nutrition stakeholders, has developed national, division, and district level nutrition profiles. On April 23, 2019, a web-based Bangladesh Nutrition Profile 2019 was launched which presents indicators and information on nutrition-specific activities and allows comparison across 64 districts and eight divisions. The indicators have been linked with the SDGs, as well as World Health Assembly targets on nutrition and include indicators on the underlying determinants of undernutrition, such as food security, health services, WASH, education, and social protection services. To provide reference and comparison, the profiles include both data on the current, and last year's status of key nutrition-related services and indicators. Nutrition Profiles is used by the DNCC and UNCC as the baseline for nutrition situations in preparing their annual nutrition plans and to monitor the progress.

NNS through its Nutrition Information and Planning Unit (NIPU) established part of the Nutrition Information System (NIS) based on nutrition specific indicators through DHIS2. A DLI (Disbursement Linked Indicator) monitoring system, real data time system for Vit A Campaign, publication of newsletters are other important achievements. Efforts are ongoing to integrate DGFP MIS and other nutrition service delivery agencies including urban and NGO as part of bigger NIS.

You can use this link to view Bangladesh Nutrition Profile: [www.nutritionprofiles.org](http://www.nutritionprofiles.org)



## Upcoming Activities:

To further elevate its role as the apex coordinating body of nutrition in Bangladesh and to eliminate existing bottlenecks for further improvement of nutrition outcomes, the BNNC will prioritize the following key activities:

1. Develop an appropriate community-based conceptual model for reducing bottlenecks and improving coverage.
2. Establish a comprehensive budget tracking mechanism to assess allocation and spending on nutrition across ministries.
3. Conduct a mapping exercise of partners working on nutrition-sensitive programmes.
4. Review the nutrition related policies of Government and development partners.
5. Review national policies and activities related to social safety net programs.
6. Prepare and promote strategies with guidelines for multi-sectoral nutrition capacity building of relevant Ministries which are implementing nutrition sensitive programs through various levels of human resources.

# BNNC Publications

The grid contains the following publications:

- Top Row:**
  - BANGLADESH PUBLIC EXPENDITURE REVIEW ON NUTRITION
  - MONITORING REPORT 2016-2017 & 2017-2018 SECOND NATIONAL PLAN OF ACTION FOR NUTRITION
  - MONITORING REPORT 2018-2019 SECOND NATIONAL PLAN OF ACTION FOR NUTRITION
  - OPERATIONAL GUIDELINE FOR DISTRICT AND UPAZILA/SUB-DISTRICT NUTRITION COORDINATION COMMITTEE
- Second Row:**
  - DETERMINING THE IMPACT OF COVID-19 ON NUTRITION PROJECTION OF THE POSSIBLE MALNUTRITION BURDEN DURING AND POST COVID-19 IN BANGLADESH
  - Policy Brief Combating Malnutrition in Bangladesh in the Context of the COVID-19 Pandemic
  - REPORT ON FOOD PACKAGES FOR DISASTER AFFECTED POPULATION
  - Participatory Multi-sectoral Annual Nutrition Action Plan 2019-20, Sunamganj
- Third Row:**
  - BANGLADESH ADVOCACY PLAN FOR NUTRITION 2019 - 2025
  - The Framework for Operationalization of the Bangladesh Advocacy Plan for Nutrition 2019-2025
  - Capacity Building Module for guidance of Multi-sectoral Nutrition Data Management and Reporting
  - Stakeholders Mapping for Nutrition M&E in Bangladesh
- Bottom Row:**
  - SOUTH ASIAN JOURNAL OF NUTRITION
  - BANGLADESH JOURNAL OF NUTRITION
  - Technical Assistance Progress Assessment
  - DETAIL MONITORING AND EVALUATION FRAMEWORK OF SECOND NATIONAL PLAN OF ACTION FOR NUTRITION (2016-2025)

