Nutrition Subgroup Teleconference

May 27th, 2015 9-10am EST

Participants: Meghan, Maddie, Casie, Dolores, Saul M, Anna, Amelia, Justine, Saul G, Helen

Agenda	Notes
Item	
Review of	<u>Nutrition subgroup has a CORE Group liaison person</u> , Alfonso from World
Action	Vision. Saul has followed up but he has not heard back.
Points from Last Call	 <u>Google Doc Mapping: requested that IRC revise wording</u>. This is reflected in new version.
	• <u>Populate Google Doc and move forward with the document</u> . Received a
	couple additional inputs, nothing major.
	Ensure that in the Action Plan, the research agenda includes a section on
	challenges of current program. This has been included.
Review of	 We now have a draft Action plan compiled from Google Doc and the
Draft	original ToR of the group. We have tried to come up with very concrete
Action Plan	objectives, results, activities
	We need to be clear with our ambitious timeline in order to contribute to
	an evidence review by 2017. Need an Action Plan that will clearly state what
	we need to work on.
	Want to get these questions in the Operations Research subgroup for
	discussion. Outputs and preliminary protocol for SAM treatment will be
	clear.
	 Agenda will be very dependent on what kind of contributions members can make. There are parts of this agenda that are being done by certain.
	make. There are parts of this agenda that are being done by certain organizations already. Aligning things that are already happening.
	 Who wants to sign up to start developing some of this further? We need to
	identify targets for the countries. If everyone takes a piece they feel they
	can contribute to, we can move forward with the plan.
	 Depending on what certain relationships are linked to, reaching out to
	members on the Action Plan to bridge conversations.
Discussion	Three basic results have been highlighted:
on	Mapping of contexts in which current nutrition components if iCCM are
Objective 1	adequately implemented. We need to get a sense of where things are being
	done right.
	• Evaluate the impact of current nutrition components. The Review said that
	the evidence that current packages have any impact is limited. We need to
	help build that evidence.
	We need more analysis of factors negatively affecting the implementation of
	current nutrition components of iCCM. If things are not happening as they
	are expected, we need to understand why.
Discussion	 There were suggestions that we focus a lot more clearly on the cost-

on Objective 2	 effectiveness of linking iCCM and nutrition We need to investigate whether CHWs can provide quality of care for SAM, but the specific formulation of what quality of care means needs to be further explored. Casie will follow up with further feedback. Another crucial issue is exploring what happens to children once they recover. When children are referred and then treated, making sure that children don't fall back into SAM/AM cycle, after the treatment. The preventive route must be considered. The question of the protocol for the treatment of AM through ICCM is crucial and we need to get the wording right to ensure that its clear that it's a protocol that we need. Greater attention needs to be paid to the question of the type of CHWs that exist and how they influence the type of programmes one can build. Overall there is a recognition that exploring how far the SAM component
Discussion on Objective 3	 can be taken with iCCM remains very important for the group. The overall goal is to have better representation of nutrition during iCCM conversations. Supporting dissemination and lessons learned, strengthening coordination between different programs, collectively succeeding in leveraging funding. The question is how high can we set the bar? Should we aim higher (e.g. transform policy in a handful of countries) within the timeframe we have, or should we adapt the timeframe to the aims? We can't focus on an evidence review only, while we are fine-tuning policies now. We need to do both simultaneously. There is a sense that this process will not be linear and we need to be ready for that.
AOB	 June 24th (last Wednesday of the month) doesn't work for Saul, so we will find a different day to hold our next teleconference.

Action Points

- <u>Saul & Dolores</u> to review the Action Plan once all input has been received and ahead of the next call
- <u>Saul</u> to follow up with CORE Group.
- <u>Saul</u> to propose new date for the next call
- <u>Everyone</u>: now is the most critical time to contribute to the Action Plan. If there is anything you are particularly interested or feel you could pursue, please specify this.
- <u>Casie</u> to propose alternative formulation of the CHW and quality of care question