Lebanon NUTRITION Sector

Updates for February and March 2021

coordination.lebanon.nut@humanitarianresponse.info
Context Updates

SyR (VASyR, 2020)
- Exclusive breastfeeding: 44%
- Children U2 (2019 to 2020):
  - 17 to 12%: minimum diet diversity
  - 71 to 51%: minimum meal frequency

MoPH HIS malnutrition data for 2020 (preliminary analysis) increase in GAM rates, with specific areas reaching alarming rates (such as Baalbeck-Hermel)
Context Updates

Unsolicited, untargeted donations of Breast Milk Substitutes
→ To organizations with no target population nor services

- Challenges for coordination, cooperation
  - Legal consequences?

- Effect on breastfeeding?
  - Consequences with WASH challenges and lack of support
  - Financial coercion, negative coping in absence
IYCF hotline

Requesting IYCF support (BF, CF, infant formula)

Increased requests for food assistance, cash assistance and MHPSS services

Reach more SyR → To improve reach to LB and other residents (eg: migrant workers)
IYCF hotline

- 656 calls
- 521 referred to IYCF specialist (79%)

Not referred:
- Refusal
- Reporting violations
- Older children
- Clarification on hotline

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<tr>
<th>Month</th>
<th>Calls received</th>
<th>Referrals to IYCF specialist</th>
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<tr>
<td>SEP &amp; OCT</td>
<td>5</td>
<td>4</td>
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<tr>
<td>NOVEMBER</td>
<td>69</td>
<td>20</td>
</tr>
<tr>
<td>DECEMBER</td>
<td>62</td>
<td>48</td>
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<tr>
<td>JANUARY</td>
<td>135</td>
<td>110</td>
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<tr>
<td>FEBRUARY</td>
<td>141</td>
<td>126</td>
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<tr>
<td>MARCH</td>
<td>244</td>
<td>213</td>
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Meetings with Dr. Inaya Ezzeddine

- Trigger for discussion: Concerns over shortage of infant formula in the market
- Presence of UNICEF, MOPH, IYCF Committee, MOET, NS CT
- Discussions:
  - Infant formula
  - IYCF practices
  - Need for complementary support

→ 6 months nutrition emergency plan
→ National IYCF campaign
6 months nutrition emergency plan

3 most urgent priorities
1. Scale up breastfeeding promotion and support
2. Scale up programmatic solutions for non-breastfed children and for complementary feeding and feeding for children up to 5 years
3. Improve the evidence base on malnutrition needs in Lebanon among all nationalities and across the country

• Additional priorities:
4. Improve access of the nutritionally vulnerable to essential nutrition and health services
5. Address inadequate diets among children under 5
SMART+ Survey

• Assess nutritional status of children 6-59 months, PLW
• Led by UNICEF
• Discussions to have a SMART+ survey, revising CN and methodology:
  • EOC/ISCG
  • LCRP WG
  • UNHCR, UNICEF PRIME team
• Includes collection of data on:
  • IYCF practices, with selected WASH, Health, FS
  • Anthropometric measurement
  • Anemia
  → COVID measures
  → Timeline: After Ramadan, Q2/3
National IYCF campaign

• Endorsed by MoPH in collaboration with UNICEF
• Led by national IYCF committee
• Started planning with timeline of launching: June
• AIM:
  1. Promoting optimal IYCF practices, as per WHO recommendations and the national policy for infant and young child feeding.
  2. Ensuring access to IYCF services including counselling and support through the IYCF national support hotline.
Malnutrition

• Data is needed

• Improve access to malnutrition treatment centers, improve referral pathway, amplify Family MUAC approach

• IOCC with UNICEF:
  • Training staff at malnutrition treatment centers in on screening, treatment with ongoing coaching
  • Malnutrition officers and area managers dedicated
  • Covering costs of transportation for malnutrition treatment
Cash and Voucher Assistance Guidelines

- Increase cash assistance programs prioritizing PLW and caregivers of children under 5
- Plan: draft CVA for nutrition guideline
- Discussions to be planned with BA, FS, Cash TF
- Dollarization?
NS identified crucial gaps, affecting the delivery of effective nutrition services to the affected population the following:

1. Lack of relevant data to present the current nutritional status of the population
2. Resources needed to ensure nutrition services and interventions are scaled up and reach the affected population
3. Capacity to reach out and support the affected population and engage the communities

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<th>Objectives</th>
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<td>1.</td>
<td>Suggests a standardized set of nutrition, IYCF questions for rapid MSNA</td>
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<td>2.</td>
<td>Encourage partner agencies across sectors to include relevant nutrition/IYCF questions in their MSNA</td>
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<td>3.</td>
<td>To increase the availability of relevant nutrition/IYCF information collected across vulnerable areas and populations</td>
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<td>4.</td>
<td>To standardize the methods used to collect nutrition/IYCF information when implementing MSNA</td>
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<td>5.</td>
<td>For partners to refer cases of infants and young children and their caregivers found needed nutrition support to the IYCF hotline whenever identified during the MSNA</td>
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Reporting

• 4Ws matrix for nutrition partners
• Internal reporting launched to feed into the CHWG quarterly updates for indicators not AI
• Understand scope of implementation
• Evaluate gaps and way forward
THANK YOU!

Please reach out to us for any support on interventions/services on nutrition, IYCF, malnutrition

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