



NNS Newsletter

A Bulletin of National Nutrition Services

Issue -30

January–March 2023



জাতীয় ভিটামিন 'এ' প্লাস ক্যাম্পেইন

সকাল ৮টা থেকে বিকাল ৪টা

৬-১১ মাস বয়সী
শিশুকে ১টি
মীল রঙের
ভিটামিন 'এ'
ক্যাপসুল খাওয়ান



শিশুর বয়স ৬ মাস
পূর্ণ হলে
মায়ের দুধের
পাশাপাশি পরিমাণ মত
ঘরে তৈরি সুস্বাদু খাবার
খাওয়ান



১২-৫৯ মাস বয়সী
শিশুকে ১টি
লাল রঙের
ভিটামিন 'এ'
ক্যাপসুল খাওয়ান

আপনার ৬ মাস থেকে ৫ বছর বয়সী শিশুকে নিকটস্থ স্বাস্থ্যসেবা কেন্দ্রে নিয়ে ভিটামিন 'এ' ক্যাপসুল খাওয়ান,
শিশু মৃত্যুর ঝুঁকি কমান



স্বাস্থ্য ও পরিবার কল্যাণ মন্ত্রণালয়

National Nutrition Services (NNS)
Institute of Public Health Nutrition (IPHN)
Directorate General of Health Services (DGHS)
Health Services Division
Ministry of Health and Family Welfare
(MoH&FW)





Editorial

Prof. Dr. Mijanur Rahman

Line Director

National Nutrition Services (NNS)

Institute of Public Health Nutrition (IPHN)

Directorate General of Health Services (DGHS)

Ministry of Health and Family Welfare

This is my immense pleasure to announce the 30th edition (January to March) of the newsletter of National Nutrition Services (NNS). This newsletter is a concrete piece of document that generally provides the current activities of NNS during the given period. It also highlights different aspects and approaches has been taken by the government and its development partners on regular basis.

This issue describes the core national and area-based (HSSP location) activities of NNS. For instance, the coverage status and findings of the National Vitamin 'A' Plus Campaign – February 2023, the divisional and district level workshop and training outcome on Disbursement Linked Indicators, the program of multisectoral, SDG, GMP, and so on. In addition to this, however, some information is also being added on the NVAC eLearning solution, progress status on Priority Nutrition Results Indicators (PNRI), Disbursement Linked Indicators (DLI), etc.

Special thanks to the Honourable Senior Secretary, MoH&FW, and the Director-General of DGHS & DGFP for their continuous support to NNS, and acknowledge the support of health managers and other service providers who collaborate with NNS.

I would also like to extend my heartfelt thanks to the hard-working professional of NIPU for their persistent efforts in making this newsletter. I am hopeful that NNS will continue developing the newsletter and share it with all stakeholders.

Prof. Dr. Mijanur Rahman

Line Director

National Nutrition Services (NNS)

Institute of Public Health Nutrition (IPHN)

Directorate General of Health Services (DGHS).

Activities of NNS OP (Chapter-5)

4th HPNSP: Brief Introduction of NNS

- | | |
|--------------------------------------|---|
| 1. Name of the Operational Plan (OP) | : National Nutrition Services (NNS). |
| 2. Name of the Sector Programme | : 4 th Health, Population and Nutrition Sector Programme (4 th HPNSP). |
| 3. Sponsoring Ministry and Division | : Ministry of Health and Family Welfare (MOHFW), Health Service Division. |
| 4. Implementing Agency | : Institute of Public Health Nutrition (IPHN), Directorate General of Health Services (DGHS). |
| 5. Implementation Period | : 2017-2024 |

From the last 26th issue of the NNS newsletter, the activities of National Nutrition Service have been published continuously. As part of this, here newsletter (30th issue) is also describing the activities of *Control of Micronutrient Deficiencies* under nutrition specific activities of NNS OP.

A4. Control of Micronutrient Deficiencies:

a) Vitamin A Supplementation:

Government is implementing bi-annual vitamin A supplementation Programme through National Vitamin A+ Campaign (NVAC) for children aged 6-59 months since long with high Programme coverage. NNS OP would further strengthen activities to address challenges e.g. appropriate target setting, improving coverage in hard-to-reach and Urban areas to increase overall coverage.

Awareness creation activities would be conducted on promotion of food based dietary approach for vitamin A rich food through mass media campaign, mobile messaging, counseling etc.

National and sub-national level advocacy & orientation Programmes and volunteers orientation would be organized. Supervision and monitoring system would be strengthened through orientation of supervisors and establish system for analysis and sharing of supervision findings. Online Real Time Monitoring and Reporting system would be introduced, strengthened and scale up all over the country. National and Divisional level post evaluation workshop on NVAC would be organized.

Activities:

1. Vitamin A supplementation through campaign
2. Organizing national and sub-national level SBCC (advocacy/orientation etc.) programmes on NVAC+ and food based approach
3. Strengthening of Real Time Monitoring and Reporting (RTMR)
4. Procurement of micronutrient would be done through Essential Drugs Company Ltd (EDCL) by Direct Procurement Method (DPM)/CMSD (NCB)/NNS

b) Iron and Folic Acid (IFA) Supplementation:

Recent studies reported that the prevalence of anemia in the preschool age children was 33.1% (NMS 2011-12). It was 37.0% and 22.8% in the rural and the urban strata (NMS 2011-12), though more than half (51%) of the pre-school going children (6-59 months) were anemic reported by BDHS 2011. The prevalence of anemia in the NPNL women was 26.0% (NMS 2011-12). According to the nationally representative survey it was 42.4% (BDHS 2011). Moreover, according to BDHS in 2011, 49.6% pregnant and 47.8% lactating women were anaemic.

Evidence informed national policies/strategies with regard to anaemia and other micronutrient deficiencies would be updated. Surveillance mechanisms for situation analysis, to monitor and guide anemia prevention programs, using reliable and valid methods would be developed and strengthened.

Capacities of health workers and other related personnel would be developed to provide clear and specific messages to prevent and treat anaemia, to provide key messages on anaemia, iron deficiency/other causes to target populations in collaboration with Essential Health Service Packages (ESP). Linkage would be established with the other sectors to improve overall diets, promote and support consumption of micronutrient rich diets through dietary diversification. Based on current prevalence and determinants of anaemia one third reduction of anaemia among pregnant, adolescent and children are expected in the national setting.

IFA supplement to pregnant & lactating women and adolescent girls would be provided based on “National Strategy on Prevention and Control of Micronutrient Deficiencies, Bangladesh (2015-2024)”. The National Strategy for Anemia Prevention and Control (2007) strategy and guidelines would be updated and adopted.

Appropriate handouts, reminder tools, monitoring tools, communication materials would be updated/developed and adopted. SBCC activities would be conducted to promote food based approach and IFA supplementation.

As PAP of APR 2018 mentioned that promote the standard regimen and distribution of iron-folate supplementation of pregnant women during ANC and ensure adequate supplies in place.

Activities:

5. Awareness creation about food based approach
6. Update National Strategy and guidelines for Anemia Prevention and Control (2007)
7. IFA supplementation for pregnant during ANC, lactating women and adolescents girls
8. Procurement of Micronutrient would be done through EDCL by Direct Procurement Method (DPM)/CMSD (NCB)/NNS

Next Chapter-6 (Continue.....)

Inauguration Ceremony of National Vitamin 'A' Plus Campaign; 20 February 2023



Photo: Mr. Zahid Maleque, Honourable Minister, Ministry of Health and Family Welfare inaugurated the campaign of NVAC+ at National Institute of Preventive and Social Medicine (NIPSOM) on 20 February 2023.

The NVAC+ was held on 20th February 2023 and Child to Child searching (CtC) activities were accomplished from 22 to 26 February 2023. The administrative coverage of the Vitamin A supplementation (VAS) to children of age 6 to 59 months was 98.6% (21,322,735) where 6-11 months was 97.4% (2,511,053) & 12-59 months was 98.7% (18,811,682). For details, see table-1 & 2 below:

Table 1: Number of children (6-59 months) covered during NVAC+ February 2023 by Area

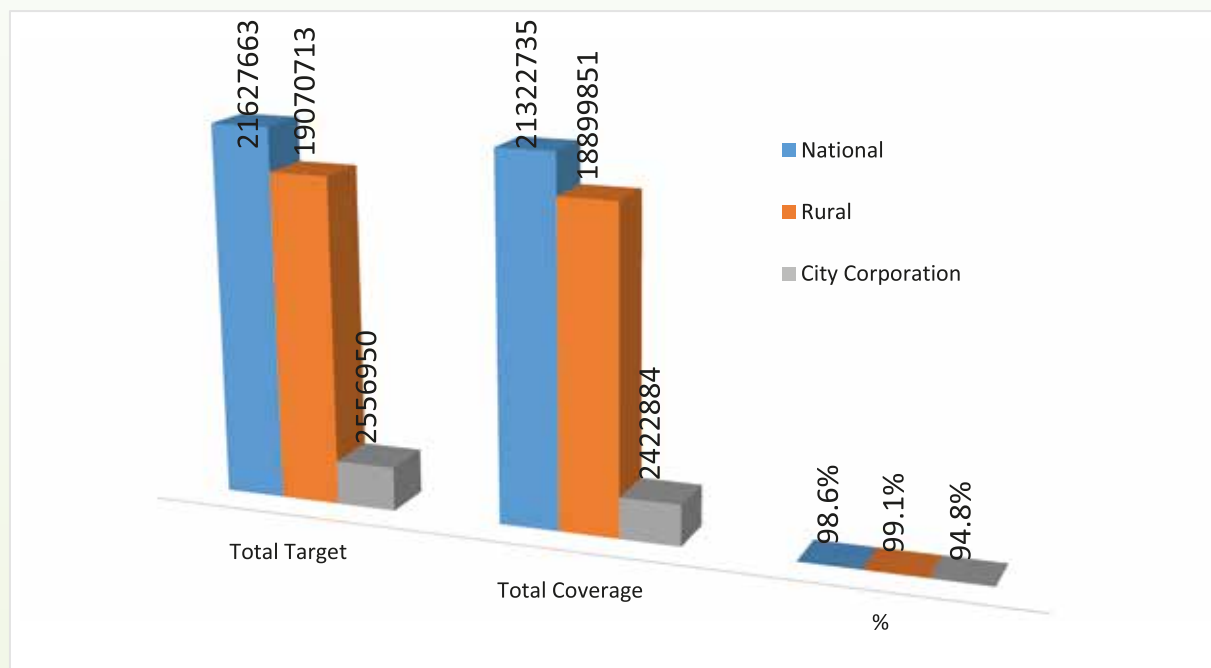


Table 2: NVAC+ coverage by Area and Age:

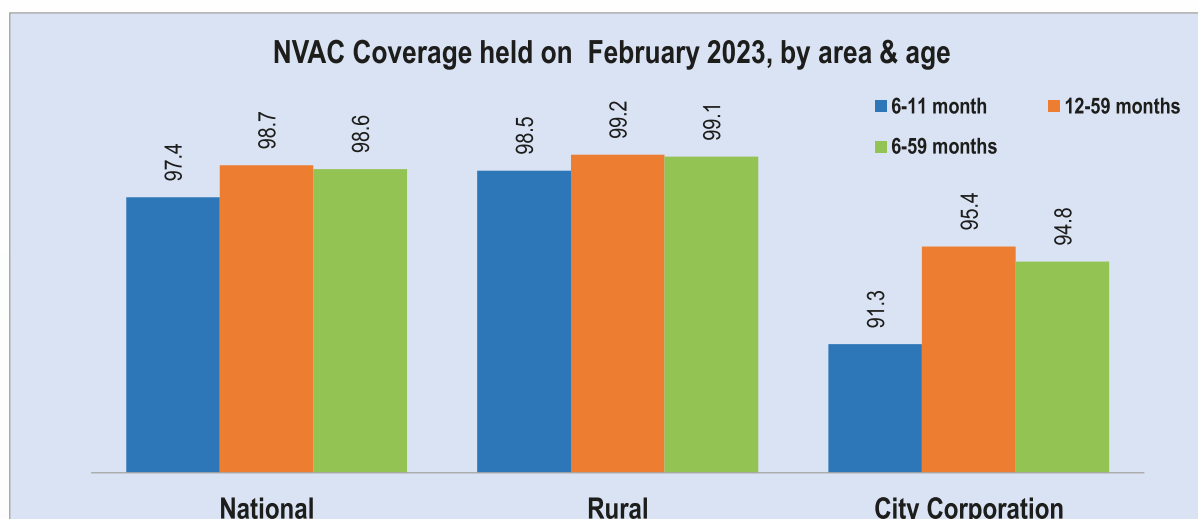


Figure-2: NVAC+ coverage by Area and Age

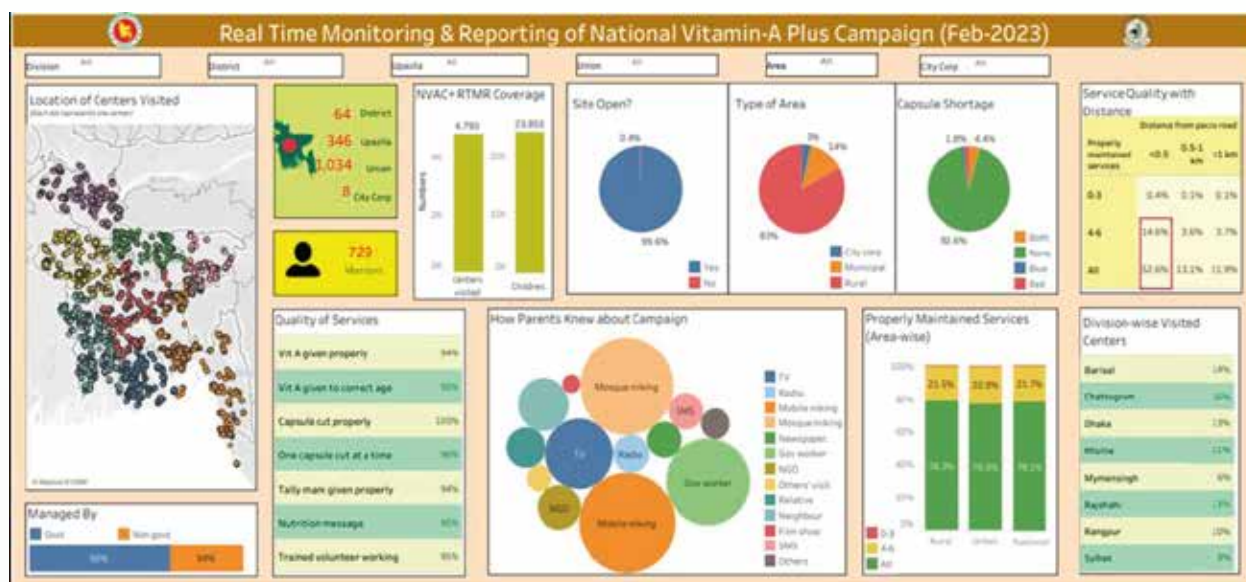
Mr. Zahid Maleque, Honourable Minister, Ministry of Health and Family Welfare inaugurated the campaign at National Institute of Preventive and Social Medicine (NIPSOM) on 20 February 2023 and he was given his valuable speech as chief guest. Newly joined Secretary, Health Services Division, **Dr. Md. Anwar Hossain Howlader** was placed as chair in the opening ceremony event. **Prof. Dr. Abul Bashar Mohammad Khurshid Alam**, Director General (Health), Directorate General of Health Services (DGHS) was given a speech as a special guest. **Dr. Md. Abdul Mannan**, Line Director, NNS, was given a welcome speech.

NVAC plus monitoring through App

National Nutrition Services (NNS), IPHN has introduced real time monitoring and reporting (RTMR) system (by the support of UNICEF) using ODK collect App on smart phone (Android) since 2018. A real time monitoring and response program was first time piloted in a small scale during the 1st phase of NVAC+ in the year 2018. The 1st phase of semi-annual vitamin A plus campaign held on 14 July 2018 and an institutionalized real-time, smart phone-based system was introduced to streamline the process of monitoring and improve the quality of data. ODK collect is the online monitoring system that translates the monitoring checklist to online tools after each monitor use it. After feedback and several inputs from last phase, it is updated in latest version (in Bangla). The ODK-Collect Apps has also been used to perform Real-Time Monitoring and Reporting (RTMR) in the latest NVAC+ which was held on 20 February 2023 across the country.

About 729 monitors visited centers covering 346 sub-districts of all 64 districts and 8 city corporations. Overall, key findings are as follows:

<https://public.tableau.com/app/profile/shammi.shawal/viz/NVACFeb-2023/Dashboard1?publish=yes>



Real-Time External Monitoring Findings (By 10:00 PM on 22 Feb 2023):

8 Divisions, 64 Districts, and 8 City Corporations have been covered with monitoring.

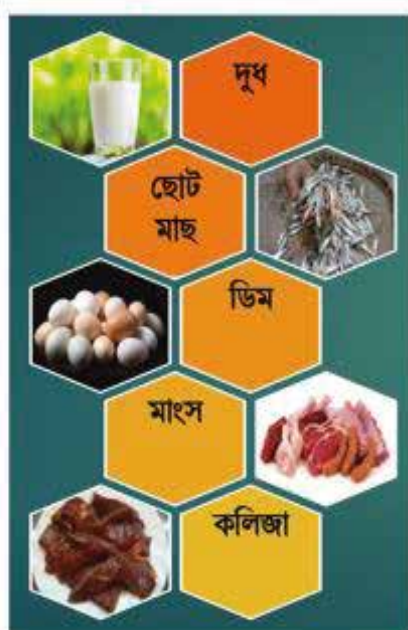
70 % or 346 out of 492 Upazilas/ Sub-districts and 23% or 1034 out of 4,553 Unions were visited by monitors (GoB officials, NGO monitors).

23,850 children receiving Vitamin-A capsules were observed in 4,790 distribution centers.

99.6% of the centers found open where around 34% of centers are managed by partners.

Main sources of the information regarding the campaign were Mosque miking, Mobile miking, Gov. Workers' visits, Television, NGO and radio

ভিটামিন এ সমৃদ্ধ প্রাণীক খাবারের উৎস



ভিটামিন এ সমৃদ্ধ উদ্ভিদ খাবারের উৎস



Report on TOT on Management of moderate and severe acute malnutrition

Background:

In Bangladesh there are case burden of 1 Million Severe Acute Malnourished children (SAM) in a calendar year. Out of this around 10% of the children need in patient care services. In the country there are 436 SAM units exist in both at District and Upazila level. During the current COVID-19 and Ukrain war the case load may increase and need to give special focus to these most vulnerable children. To provide the services, capacity building of service provider and readiness of the health system for SAM management is important in coping with the growing number of SAM cases and supporting DGHS and NNS/IPHN in planning appropriate sustainable responses. National Nutrition Services already developed a training plan on hospital based Management of Severe Acute Malnutrition (SAM) based on biannual SAM facility assessment which was conducted in February 2023.



TOT on Management of Severe Acute Malnutrition:

In the period of January to March 2023 NNS organized the following training:

SL	Type of Participants	Designation	Number	Remarks
1	Doctor	Asst. Director	1	
2	Doctor	Asst. Surgeon	6	
3	Doctor	Consultant, Pediatrics	8	
4	Doctor	Emergency Medical Officer	2	
5	Doctor	Medical Officer	27	
6	Doctor	Residential Medical Officer	4	
7	Doctor	MODC	1	
	Total	50		



Professor Dr. Ahmedul Kabir, Additional Director General (Planning and Development), DGHS provide special speech

Reporter: Md. Enamul Huque, Capacity Building Manager, NIPU, National Nutrition Services (NNS), Mohakhali, Dhaka-1212



Certificate giving ceremony after completing the training on SAM with PM and DPM, National Nutrition Services, DGHS, Mohakhali-1212

Bangladesh inaugurated permanent office for Scaling Up Nutrition (SUN) Secretariat



The Scaling Up Nutrition, or SUN, Movement was launched in 2010 in response to the continuing high rates of global malnutrition. Bangladesh joined SUN Movement initiative in 2012 and then the country made tremendous progress in nutrition sector especially in policy, plan of action formulation and multi-sectoral collaboration.

With support from WHO Bangladesh and GAIN Bangladesh, on 13 February, 2023; Kazi Zebunnessa Begum, Additional Secretary (WH Wing), Health Services Division and Scaling Up Nutrition (SUN) focal person along with Dr. Shah Golam Nabi, Director-Institute of Public Health Nutrition (PHN) and Dr. Hasan Shahriar Kabir-DG, Bangladesh National Nutrition Council (BNNC), Officials from National Nutrition Services (NNS) inaugurated SUN secretariat at IPHN Bhaban, Mohakhali. UN, SUN Business Network, CSA-SUN and GoB network remained present during the inauguration. It also creates an excellent opportunity for the MSP members to make better

communication and engagement for any national interest to improve nutrition.

SUN Bangladesh secretariat will implement the SUN Strategy 2021–2025 (SUN 3.0) prioritizes country leadership and focus on supporting systemic change at the country level. It seeks to capture the



ambition of SUN movement and guide the work of all actors at all levels – national and subnational, regional and global – aligning concerted action behind and responding to commonly agreed national priorities set out by governments. As part of these efforts SUN Bangladesh secretariat will support to achieve SUN 3.0 aims to contribute towards achieving the goals of the 2030 Agenda for Sustainable Development.

Faria Shabnam
National Professional Officer-Nutrition
World Health Organization, Country office of Bangladesh

Report on District Review Meeting on “Scaling up Maternal Nutrition package with a focus on improved ANC and IFA supplementation in selected districts in Bangladesh”



Photo: Review Meeting on “Scaling up Maternal Nutrition package with a focus on improved ANC and IFA supplementation in selected districts in Bangladesh”, Venue: Conference room, Civil Surgeon Office, Feni

Bangladesh has made significant progress in reducing maternal mortality but still it remains high. The Government of Bangladesh (GoB) has developed plans to accelerate the reduction of maternal and child undernutrition by rolling out universal community-based healthcare in July 2016 through scaling up the provision of community-based nutrition services; updating and operationalizing the National Plan of Action for Nutrition (NPAN); and mainstreaming nutrition within the Directorate General of Health Services (DGHS) and the Directorate General of Family Planning (DGFP). Iron and Folic Acid (IFA) supplementation will be a part of universal healthcare.

Nutrition International¹ (NI) is currently working with the Institute of Public Health Nutrition/National Nutrition Service (IPHN/NNS) to demonstrate a model for strengthening the existing IFA supplementation program which is now functioning in eighteen districts – Gaibandha, Jashore, Kishoreganj, Kustia, Meherpur, Chuadanga, Madaripur, Feni, Joypurhat, Natore, Jhalokathi, Borguna, and Narail, Chandpur, Rangamati, Pirojpur, Jamalpur and Sherpur.

¹ Formerly Micronutrient Initiative (MI)



NI is providing technical and financial support to the Institute of Public Health and Nutrition, Government of Bangladesh in improving the effectiveness of the IFA supplementation for pregnant mothers [demonstrated by NI] and improving provision of ANC services with an added component of nutrition counseling through a new initiative ‘Scaling up maternal nutrition package with focus on improved ANC and IFA supplementation in selected districts in Bangladesh’.

As a part of the process NNS, IPHN during this quarter has organized 04 District Review Meetings at Rangamati (16th and 17th January), Kishoreganj (22nd and 23rd January), Feni (15th and 16th February), and Chandpur (01st March).

Lead by the Civil Surgeon and deputy director of the respective districts the objective of these meeting is to review progress of the maternal nutrition program by analysing the DHIS-2 & FP-MIS data to track the coverage of ANC services, analyze the supply, distribution & status of IFA availability, review the usage of BCI materials for ANC service and counselling. Engaging the sub-district level managers of both health and the family planning department the meeting also aims to improve the inter departmental coordination so that the bottle necks can be identified, and necessary corrective actions can be taken.

The Civil Surgeons (CS), Deputy Directors of Family Planning (DD-FP), Upazila Health & Family Planning Officers (UH&FPO), Upazila Family Planning Officers (UFPO), Consultants & Residential Medical Officers (RMO) from District General Hospital, MO-CS, MO-DC-CS Office, Medical Officer Disease Control (MO-DC), Medical Officer Maternal & Child Health (MO-MCH), District Junior Health Education Officer, Assistant District Public Health Nurse, District EPI Superintendent, District Statistician, District Storekeeper & NI representatives were the main participants of the meeting. Representatives from NNS-IPHN also attended the meeting so that the national level managers and policy makers are aware about the challenges and progress of the program and necessary support can be ensured.

Duplication of the pregnant women in health and family planning list, decreasing number of ANC 3 & 4, generating timely and error-free reports at DIHS2 from CC, regular data entry at the maternal register, updating the stock register at the facility level, ensuring regular monitoring visits by the supervisors, proper use of BCC Materials during nutrition counseling by the service providers are the common challenges identified during the meeting. The managers of both health and the family planning department affirm their commitment to monitor it for continuous improvement in the upcoming days.

Reporter: Dr. Md. Mofijul Islam Shuvro, Technical Manager, Child Survival & Women's Health, Nutrition International (NI)

National Technical and Advisory Committee
on
“Scaling up Maternal Nutrition package with a focus on improved ANC
and IFA supplementation in selected districts in Bangladesh
and
Scaling up the use of zinc and ORS in the treatment of diarrhea among 6-
59 months children to reduce child morbidity and mortality in Bangladesh”



Photo: National Technical and Advisory Committee Meeting

Under the leadership of Line Director of National Nutrition services (NNS), the National Technical Advisory Committee (NTAC) Meeting for ANC & IFA and also for Zinc & ORS program was organized at the Conference Room of NNS-IPHN on 27th March 2023. The committee having the representation of GoB including DGHS, DGFP, MIS, CBHC, and other stakeholders (e.g., UNICEF, CARE, GAIN, Save The Children. Etc.) meets once in a year to review progress of the program activities implemented by NI in partnership with NNS-IPHN.

The main objective of the meeting is review the modalities of the programs for further improvement of the coverage and

adherence, creating awareness on the benefits of ANC 4+ visits and consumption of IFA tablets, identify gaps and discuss modalities for improved coverage of zinc and LO-ORS for the treatment of diarrhea in children under five years, streamlining the HMIS, increase effectivity of monitoring and supervision, share the challenges faced at the district and sub-district level during implementation, engage the policy makers for necessary recommendations and corrective actions to improve the coverage and proper execution of the plan.

Following a brief presentation regarding the activities by the Technical Manager of Nutrition International on their ANC & IFA and Zinc and ORS in 16 and 18

districts respectively and open discussion took place where the participants appreciated the program approach as a large number of pregnant women and under five children will be benefited by this program. A total of 39 government officers and development partners attended the meeting of which 27 were male and 12 were female. Exploring the use of Multiple Micronutrient Supplements instead of Iron Folic Acid (IFA) tablet and incorporating

the zinc indicators in DHIS-2 with improving the supervision and monitoring at the ground level were the key recommendations of the meeting.

Reporter: Dr. Md.Mofijul Islam Shuvro, Technical Manager, Child Survival & Women's Health, Nutrition International (NI)

Training under the Zinc & program



Photo: Small Drug Vendors (SDV) Training, Chandpur district
Capacity development training of frontline workers

Nutrition international is currently working with the National Nutrition Services (NNS) to implement a project titled as Scaling up the use of zinc and ORS in the treatment of diarrhoea among 6-59 months children to reduce child morbidity and mortality in 14 districts of Bangladesh. During the 2022-23 fiscal

year NI decided to scale up the program in four more districts and as a part of the process the capacity development training took place in all upazilas of Munshiganj, Brahmanbaria, Kurigram and Panchagarh. This training was jointly organized by the respective UH&FPOs and UFPOs and medical officers, nurses, and field

functionaries and their supervisors of both health and family planning departments e.g. SACMO, HI, FPI, AHI, HA, FWV, FWA, CHCP, MT-EPI, Statistician, Storekeeper, etc. attended the training as participants. The training focused on the estimation of supplies using expected diarrhea cases, provision of Zinc and ORS to caregivers, stock status, information on dose, duration, benefits and need for counseling to ensure adherence, program monitoring, and reporting, etc. Managers from NNS-IPHN and Civil Surgeon and DD-FP performed supervision and monitoring visits at the sub-district level to ensure the quality of the training. A total of 3,925 field functionaries attended the capacity development training. Among them 1,781 participants (55%) were female, and 2,144 (45%) participants were male.

Capacity development of small drug vendors (SDVs) on the use of Zinc & ORS

SDVs (Small Drug Vendors) play a significant role in the community as the first line drug dispensers. People have more access to the nearby drug stores before they reach a doctor or a hospital. The majority of the SDVs lack institutional training on drug dispensing or basic management of common diseases. Some of them are trained as village doctors. So, they have the best scope to dispense ORS and zinc tablets as the primary management of diarrheal diseases. Moreover, the baseline survey conducted in 2019-20 also revealed that the more than fifty percent of the caregivers of under-five diarrhea affected children has a

tendency of visiting small drug vendors to seek treatment. So, a one-day long capacity development training took place at all upazillas in Dhaka, Rangpur, Gaibandha, Barishal, Nilphamari, Jhenaidah, Gopalganj, Narshingdi, Lalmonirhat, Faridpur, Chandpur, Pirojpur, Magura and Thakurgaon for Small Drug Vendors (SDV) to orient the primary management of diarrheal diseases with Zinc tablets and ORS to increase the coverage of this program.



Photo: Small Drug Vendors (SDV) Training, Chandpur district

The respective UH&FPO organized the event as a local resource person and RMO/MODC/MOMCH of the respective UHCs who were sensitized in the district review meetings acted as a resource person by rotation to conduct the

trainings. The training mainly focuses on information on dose, duration, benefits and need for counseling on zinc and ORS to ensure proper adherence of the program. A total of 2760 small drug vendors (30 from each upazila) of 92 upazila were trained across 14 districts through this capacity development training and among them 2709 were male and 51 were female participants.

Reporter: Dr. Md.Mofijul Islam Shuvro, Technical Manager, Child Survival & Women's Health, Nutrition International (NI)

Joint action for nutrition outcome (JANO)

Community Support Groups (CSGS) are now more functional



JANO took the initiative to mobilise 268 women volunteers, promoting mass awareness on nutrition issues and women's leadership within the community. This move has been additionally supported by 624 CSG members playing a more active role than the previous year. This dual action saw an increase in the awareness level of communities as

they are able to more effectively raise their demands to relevant public and private sector actors. The proportion of women and adolescents accessing and receiving nutrition-specific and sensitive services from relevant service providers increased significantly in comparison with the baseline and midterm evaluation. Access to health services from the community clinic (CC) progressed from 35.5% at baseline to 86.6%, and access to extension services progressed from 3.98% to 14.0%.

JANO organized media workshop

Recently the District Nutrition Coordination Committee, Rangpur and Nilphamari, held a day-long workshop titled 'Role of Media Workers in Nutrition Development', with journalist members of District and Upazila Nutrition Coordination Committees. The former Minister of Culture and Honorable Member of Parliament for Nilphamari-2



Constituency, Mr. Asaduzzaman Noor, attended as the chief guest. He said that, "Media workers should come forward to contribute to the development of nutrition, write as a pen soldier and speak boldly about nutrition. Above all, when you think of food, you must think of nutrition". Hasina Rahman, Deputy Country Director of CARE Bangladesh said, "JANO project is working together with the Nutrition Coordinating Committee to achieve the nutrition targets. As partners in achieving this goal, journalists have the opportunity to work in various fields as members of the Nutrition Coordinating Committee." Other officials from CARE Bangladesh, Plan International Bangladesh and ESDO were also present, along with various government and private officials.

Active engagement of school management committees (SMC) for nutrition improvement



All the 331 schools under JANO project set an agenda on nutrition-specific and sensitive services for adolescents in the SMC meeting. 23 out of 30 SMCs sampled during the year 4 annual assessments, are governed by an adhoc committee and reported that they set an agenda for nutrition-specific and sensitive issues for students. They discussed healthy diet and nutrition issues and consequently, teachers encouraged students to try vegetable gardening and poultry rearing at home. Furthermore, 25 out of 30 sampled SMCs prepared the Annual Action Plan Properly. In bi-monthly meetings, SMCs updated the progress of their plan.

Talking book as an effective tool for ICT 4 nutrition

“The Talking Book has helped me get very useful information during and after my pregnancy. The songs are enjoyable, and it is interesting to listen to,” says Asma Akhter, a lactating mother from Nilphamari Sadar Upazila. Asma is one of nearly 62,000 people who have learnt something to the Talking Book. This uniquely prepared audio device contains a library of informative content in the form of songs and general messages that are useful to the community. The project deployed 208 Talking Books through 208 volunteers. The Talking Book was highly efficient as a means to share information in a fun way while reducing the talking time of volunteers, thus earning both admirers amongst its audience and the volunteers. There are a total of 38 messages in each talking book on various issues and overall, people have listened to 112,946 messages. The most popular message was ‘How to take care of pregnant mothers (song)’ which has been played 11,844 times, followed by ‘How to take care of lactating mothers and children under five (song)’ played 7673 times and ‘Health check-up schedule for pregnant mothers (speech)’ played 7,480 times.



Experiences & recommendations: JANO's roundtable on adolescent nutrition, health and gender awareness



A roundtable, titled "Adolescent Nutrition, Health and Gender Awareness: JANO's Experiences & Recommendations", was held at Begum Rokeya Auditorium of RDRS Bangladesh in Rangpur. The many experiences and recommendations from the project were the major aspects of the event. Prof SM Abdul Matin Laskar, director of Rangpur Region Secondary and Higher Secondary Education, chaired the event. Md Ashik Billah, head of the central and northern region programme of Plan

Bangladesh, gave the inaugural speech and Mohammad Faiz Kawser, project manager of the JANO project presented the keynote. Amongst the participants, some shared insightful information based on their experiences. Antora Roy, an adolescent shared about how unaware she had earlier been of the importance of nutrition, reproductive health and safety. Segufta Nasrin, a teacher, pointed at social stigmas among parents being the biggest barriers to implementing such campaigns. Afroz Mahal, director of programme management and implementation at Plan Bangladesh, Dr Md Shahid Uz Zaman, founder and executive director of ESDO; Shamimur Rahman, deputy director of the Department of Agricultural Extension (DAE) in Rangpur; Dr Shamim Ahmed, civil surgeon of Rangpur; Md Shafiqul Islam, education officer of Nilphamari; Md Mosaraf Hossain, assistant inspector of Bangladesh Madrasa Education Board; also spoke at the roundtable among others.

Nutrition Awareness Campaign on National Food Safety Day



GAIN, in partnership with the National Nutrition Service (NNS), organized a Nutrition Awareness Campaign on National Food Safety Day in Dhamrai Community, Jatrabari Maath, Lakuriyapara on 02 February 2023. The event aimed to raise awareness among the community people about basic nutrition and safe food practices.

The event witnessed 1,079 participants, with 589 females and 490 males actively engaging in the campaign. The campaign was structured into various segments to disseminate information and engage the community effectively.

The campaign commenced with a registration booth where visitors and guests were warmly welcomed and encouraged to register. The nutrition campaign was inaugurated by respected guests, including Dr. Md. Moniruzzaman, Program Manager, National Nutrition Service (NNS), and Farzana Akter, AC (Land) & Executive Magistrate of Dhamrai.

The campaign featured several interactive and informative stalls, such as the SWAPNO Corner, which showcased the project's achievements, including the training of peer educators or Pusti Bondhus. Health and nutrition counselling was provided at the Health & Nutrition Corner, while the Food Safety Corner focused on promoting safe and healthy food choices. The Upazila Agriculture Service Corner highlighted agricultural extension services, and a primary medical camp offered health checkups and counselling.



Demonstrations and discussions were held on proper handwashing techniques, nutrition, and food safety. Participants engaged in competitions, quizzes, and a mass signature program, demonstrating their commitment to practicing proper handwashing and eating nutritious and safe food.

Dr. Md. Moniruzzaman, in his speech, expressed his appreciation for the nutrition campaign and the achievements of the SWAPNO project. He emphasized the importance of monitoring food safety for the community people. Dr. Moniruzzaman commended GAIN and the SWAPNO project for their initiatives in increasing awareness of food safety and nutrition. He expressed interest in supporting the project and its continuous implementation.

Furthermore, Dr. Moniruzzaman praised the distribution of IFA tablets to female workers and the SWAPNO team's efforts in facilitating COVID-19 vaccine registration. He acknowledged the significant support provided by GAIN in vaccine registration, which greatly benefitted the factory workers and the community.

The event concluded with a prize-giving ceremony, where winners of various activities were acknowledged for their participation and enthusiasm.

The event showcased the significant contributions of the NNS in promoting health and nutrition. Their support and collaboration with GAIN have strengthened efforts to raise awareness and improve nutrition practices. The event highlights the fruitful partnership between GAIN and NNS, emphasizing the shared goal of promoting health and nutrition awareness.

Through this Nutrition Awareness Campaign, the community gained valuable nutrition, diet, and food safety knowledge.

Overall, the campaign successfully achieved its objectives, with NNS playing a pivotal role in promoting health and nutrition. The collaboration between GAIN and NNS demonstrates their dedication to creating a healthier and more aware society. This kind of activity leverages existing government networks of community change agents to disseminate nutrition messages.

Reporter: Sharmin Kawser, Information and Planning Officer, NIPU, National Nutrition Services (NNS), Mohakhali, Dhaka-1212

District Orientation & Planning and Review meeting of Zinc & ORG program

District orientation & planning meetings of four districts

In 2022 Nutrition International in partnership with NNS-IPHN decided to scale up its existing Zinc and ORS program to 04 more districts. As a part of the process the district level orientation and planning meeting of the new four districts (Munshiganj, Brahmanbaria, Panchagarh and Kurigram) were organized by the respective district managers in January-February 2023. Hosted by the Civil surgeon office in presence of NNS-IPHN representatives the participants of the meetings included CS, DD-FP, MO-CS, UH&FPO, UFPO/MO-MC-FP, Hospital Superintendent, Pediatric Consultant, RMO (District hospital), Health Education Officer, District Statistician, Public Health Nurse and District Storekeeper etc. The meetings focused on modalities to improve coverage and adherence of zinc supplementation, create awareness



Photo: Line director, National Nutrition Services (NNS) attending in District Review Meeting of Zinc & ORS program, Conference room, Civil Surgeon Office, Dhakat

of benefits of ORS and zinc, streamlining HMIS and effective monitoring and supervision. NI district coordinators along with other NI staff supported in planning and organizing these meetings at the districts. A total of 172 participants attended the meeting among them 39 participants (23%) were female, and 133 (77%) participants were male.

District review meetings of 14 districts

A total of 14 district level review meetings were organized by the district level managers (Civil Surgeon) of Pirojpur, Magura, Thakurgaon, Dhaka, Gopalganj, Rangpur, Gaibandha, Jhenaidah, Nilphamari, Barishal, Faridpur, Narshingdi, Lalmonirhat and Chandpur during the first quarter of 2023. With the participation from the national level through representatives of NNS-IPHN these meetings were chaired by the Civil Surgeon of the respective districts. The main objectives of these



meetings were to review the progress of the program activities, identification of gaps and discussion on modalities to improve the coverage. Respective district coordinators from NI provided necessary technical assistance and initiated the discussion by presenting the baseline survey report of the zinc program conducted in 2019 to highlight the overall situation of the program by comparing it with the existing DHIS-2 and HMIS data. The participants of these meetings included DD-FP, MO-CS, UH&FPO, UFPO/MOMCH, Hospital Superintendent, Pediatric Consultant, RMO (District hospital), Health education officer, District statistician, Public Health Nurse, District store keeper where the CS, DD-FP acted as a resource persons. A total of 546 participants were present in the 14 district review meetings among them 428 were male and 118 were female participants.

Reporter: Dr. Md.Mofijul Islam Shuvro, Technical Manager, Child Survival & Women's Health, Nutrition International (NI)



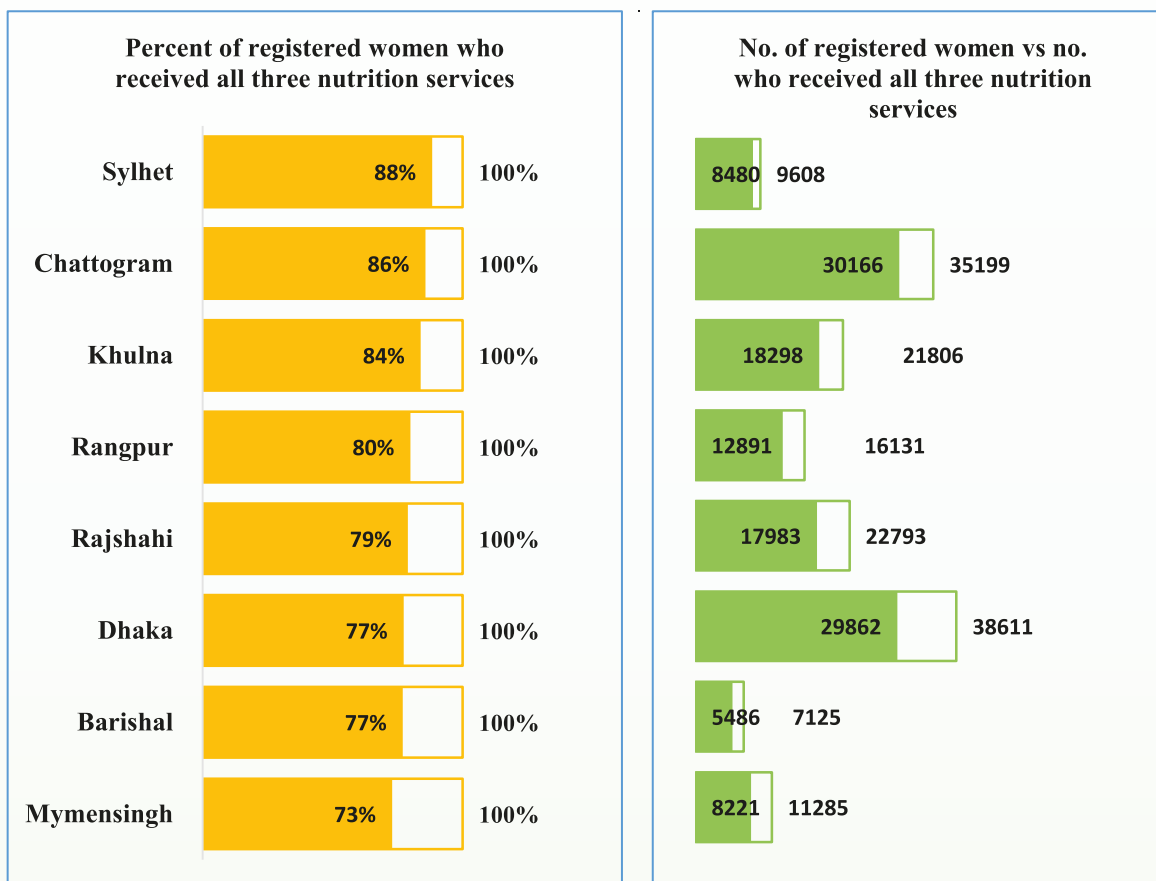
District Review Meeting, Jhenaidah District



District Review Meeting, Thakurgaon District

Maternal Nutrition Services (DLR 13.4)

Proportion and number of registered pregnant women who received all three services (weight measurement, at least 30 IFA tablets and nutrition counselling)



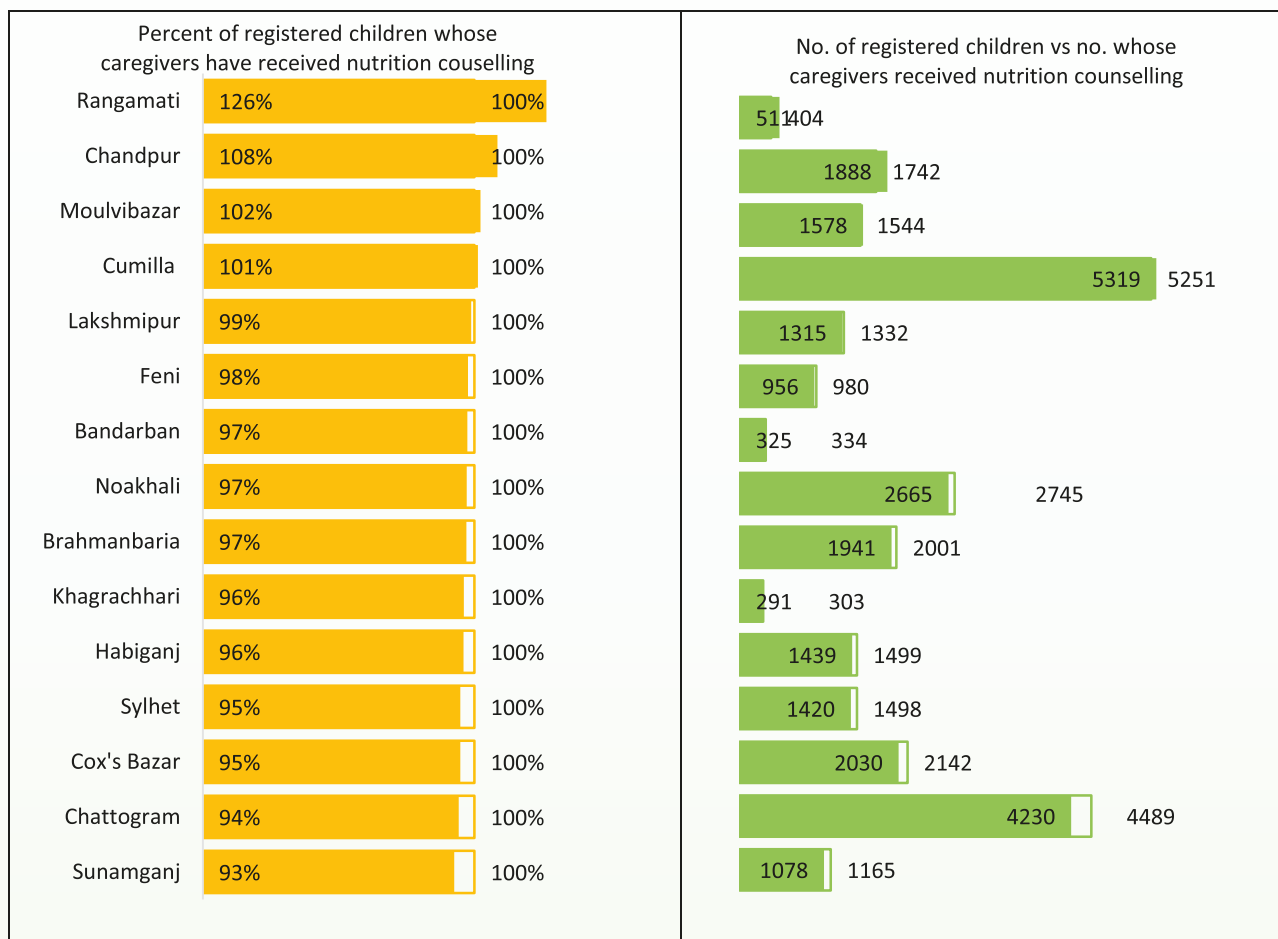
Key Findings

- On average, 6.71 women were registered in March per CC across the 15 districts.
- Moulvibazar, Feni, and Habiganj achieved the **highest ranking for DLR 13.4** (proportion and number of registered pregnant women who received all three services).
- The least performing districts were Khagrachhari, Bandarban, and Sylhet.
- The district with the least zero-reporting CCs were Moulvibazar, Chandpur, and Habiganj.



Child Nutrition Services (DLR 14.4)

Number of registered children (0-23 months) eligible to receive age-appropriate nutrition counselling



Key Findings

- On average, 7.79 children were registered in March per CC across the 15 districts.
- Rangamati, Chandpur, and Moulvibazar achieved the highest ranking for DLR 14.4 (number of registered children (0-23 months) eligible to receive age-appropriate nutrition counselling).
- The least performing districts were Sunamgonj, Chattogram, and Cox's Bazar.
- The district with the least zero-reporting CCs were Moulvibazar, Chandpur, and Habigonj.



Status of Essential Nutrition Services in Health Sector Support Program (HSSP) & non- Health Sector Support Program (HSSP) Divisions, March 2023

Key Field Findings during Field Visit

Non-HSSP Divisions

a) Better-performing districts: Rangpur and Bagerhat Districts

- District-level managers have established effective monitoring and supervisory mechanisms which help to improve and track the progress of essential nutrition services at the community clinics (CC). Actions include:
 - During the monthly district coordination meeting, both districts emphasized the importance of DHIS-2 reporting status, discussed operational bottlenecks, identified potential solutions, and developed plans to address emerging issues in a timely manner.
 - Expert CHCPs provide technical support to other CHCPs in online reporting if required at the upazila level on an ongoing basis. This helps reduce the number of zero-reporting CCs.
 - Community clinic activities are monitored regularly by the assigned medical officers with the support of statisticians, HI, AHI, etc.
 - District and upazila level managers are motivated and engage in regular field monitoring of essential nutrition services.
- Community Groups (CG), Community Support Groups (CSG), and Multipurpose Health Volunteers (MHV) have been playing active roles in community mobilization.
- In Rangpur, INGO and NGO project officials also monitor the proper implementation of essential nutrition services at community clinics alongside their own programs and report to upazila managers.

b) Poor-performing districts: Lalmonirhat and Narail Districts

- Shortage of necessary IT equipment such as functional laptops was reported during field visits (only a third of the CHCPs received new laptops).
- Register books are not being filled accurately.
- Poor coordination among HI, AHI, FWA, FWV and CHCP.
- Less strengthened monitoring system and non-functional CG, and CSG.
- There are no MHV groups to support the CHCPs in the community.
- Remote facilities are not being visited by frontline supervisors on a regular basis.
- Limited knowledge and training are noted among CHCPs and frontline supervisors when delivering essential nutrition services, leading to a poor reporting status.

Overall findings

- Both new and old registers are being used at the community clinics.
- There is an absence of functional anthropometric tools in some facilities (salter scale, height board) in both types of districts.
- In the absence of functional laptops, CHCPs are mostly using their android mobile phones to report monthly figures in DHIS-2.
- Nutrition counseling is not being done adequately and IEC materials are not used while counseling.

HSSP Divisions

Specific findings in hilly area: Bandarban District

- Insufficient coverage of the mobile network and internet connectivity is the key challenge to reporting in the DHIS-2 in the district.
- Due to the geographical location and distance (community clinics are situated nearly three to four kilometers away from the local community) pregnant women and parents of under 5 children are often reluctant to visit the community clinics and seek health care services.
- Indigenous people are less keen to receive health care services because of religious beliefs and other cultural superstitions.
- CG, CSG and MHV working towards community mobilization.
- Both types of registers (old and new registers) are being used.
- In Thanchi upazila, there is no electricity supply or a functional internet network, so all CHCPs enter data in DHIS-2 only once a month during monthly coordination meetings in the upazila health complex.
- Thanchi upazila is less populated and community clinics are situated in remote locations, as a result, CHCPs often do not get pregnant women and under 5 children to provide essential nutrition services.
- In Jama Chandra para–Community Clinic, Rowngchari upazila the information of maternal and child nutrition services is not being recorded in maternal and child registers.
- Despite availability of functional anthropometric tools anthropometric measurements are not being taken for the majority under 5 children as caregivers are not bringing their children while receiving services.
- Limited supervision is provided by frontline supervisors (e.g., HI, AHI) due to remote locations, long distances, unavailability of transport, and comparatively higher travel cost.

Key Field Findings through Telephonic Follow-up

- Overall essential nutrition services are available at the community clinics:
 - Maternal and age-appropriate child nutrition counselling is being provided to eligible registered beneficiaries.
 - IFA and calcium supplements are being provided to pregnant women and lactating mothers and no shortages have been reported.
 - Basic medicines are being provided as part of basic health services.
 - Around 10% facility has a shortage of GMP cards and functional anthropometric tools (e.g., height board, and salter scale).

Overall Recommendations

- Strengthen focus on increasing the enrolment of targeted beneficiaries and coverage of essential nutrition services through discussions during monthly coordination meetings in both HSSP and non-HSSP divisions.
- Keep upazila managers updated on the poor performing and zero reporting community clinics for planning corrective actions in both HSSP and non-HSSP divisions.
- NNS to provide an orientation on essential nutrition services and monitoring mechanisms for upazila and district-level managers in poor-performing districts of the non-HSSP divisions.
- NNS to distribute an adequate quantity of GMP cards for regular nutrition assessment.

- Upazila managers in the hill track need to follow up on the progress of DHIS2 and take necessary action to improve the coverage and quality of services.

Annexure 1

Divisions, Districts, and Upazilas Covered

Divisions, Districts, and Upazilas covered through field visit

Division	District	Upazila
Khulna Division	Bagerhat	Sadar, Mongla
	Narail	Sadar, Lohagara
Rangpur Division	Rangpur	Mithapukur, Taraganj
	Lalmonirhat	Hatibandha, Patgram
Chattogram Division	Bandarban	Lama, Thanchi, Rowgchari

Districts and Upazilas covered through phone follow-up (HSSP divisions)

District	Upazilas
B.Barua	Nabiganar, Sadar, Akhaura
Chattogram	Shwandip, Boakhali, Patiya
Cumilla	MURadnagar, South Sadar, Homna
Chadpur	Haziganj, Haimchar, Kochua
Khagrachari	Sadar, Dighinala, Matiranga
Sunamgonj	Sunamgong Sadar, Jamalgonj, Taherpur
Coxsbazar	Sadar, Teknaf, Kutubdia
Bandarban	Ruma, Alikadom, Sadar
Habiganj	Chunarughat, Madobpur, Lakahi
Moulvibazar	Sadar, Rajnagar, Kulaura, Sreemongal
Rangamati	Langadu, Baghaichhari, Rajasthali
Noakhali	Sadar, Senbagi, Begumganj
Sylhet	Jointapur, Sadar, Zokigang
Feni	Feni Sadar, Fulgazi
Lakhipur	Lakhipur Sadar, Komolnagar

- Number of Divisional Directors covered: 3
- Number of Civil Surgeons covered: 20
- Number of UH&FPOs covered: 55
- Number of CHCPs covered: 160

Update on Priority Results & Indicators: March 2023

Under the dynamic leadership and guidance of Mr. Zahid Malek, MP, the Honorable Minister, MOHFW, respectable Secretary Dr. Md. Anwar Hossain Howlader, HSD, MOHFW and respectable Director General of DGHS, Prof. Dr. Abul Bashar Mohammad Khurshid Alam, MIS department and National Nutrition Services (NNS), IPHN are releasing NNS PNRI report card. This score is derived from four Priority Nutrition Results Indicators (PNRIs) which are reported through DHIS2 monthly basis. A Composite Index (CI) is

generated to assess overall implementation status of NNS and based on the average of achievement of mentioned four indicators, the divisions, districts and upazilas are categorized. Please find the attached PNRI National Report Card and link to the NNS-OP website (<https://nnsop.gov.bd>) where more information can be accessed, including upazilla status. PNRI trends up to **March 2023** presented below

PNRI-Priority Nutrition Result Indicators Framework comprises of 4 functionality indicators and 5 service delivery data

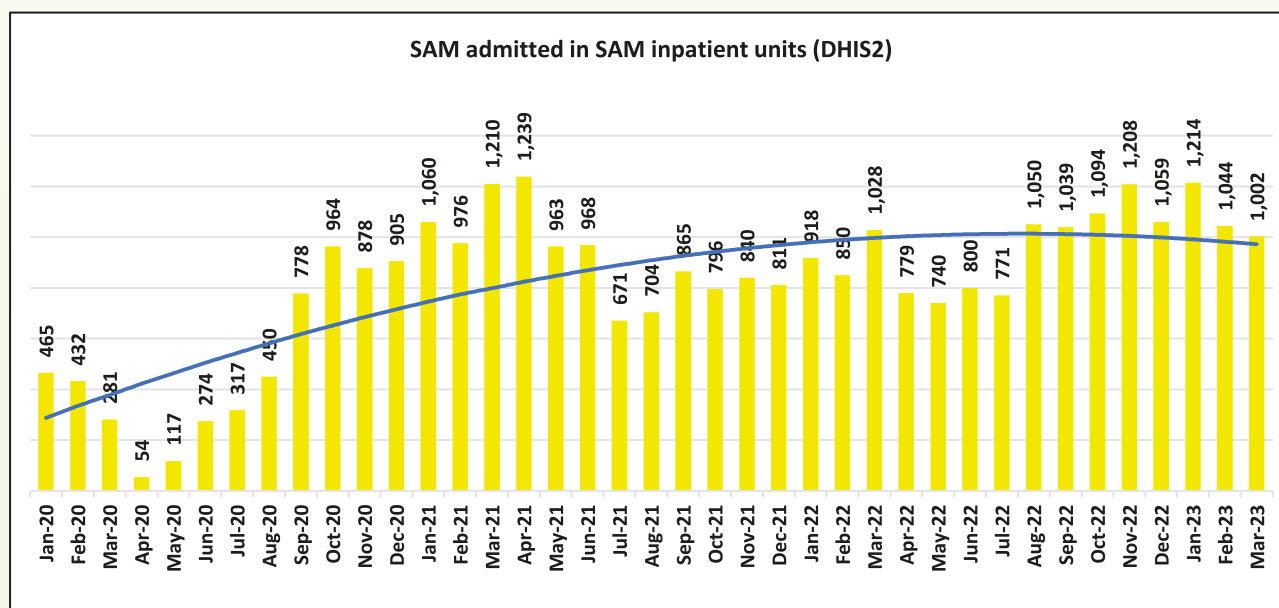
NNS score is generated by formulating Composite Index (CI) based on the 4 functionality indicators

PNRI functional data						PNRI service data								
Reporting Period	% of facilities reporting on complete nutrition indicator	% of registered infant and children aged U2 years receiving specified nutrition services	% of registered PW receiving specified nutrition services	% of children screened for SAM at facility	Composite Index	No of children screened for SAM at facility	No of Children Identified with SAM	No of SAM children admitted	SAM Status by Screening	Admission Rate	No of PLW receiving IFA	No. of 1st ANC services where weight measured	No. of Nutrition counselling at 1st ANC	No. of children aged U2 years receiving specified counseling
Jun-22	68%	81%	85%	81%	0.79	318,461	2,366	800	0.7%	34%	264,747	14,872	30,783	45,655
Jul-22	70%	82%	84%	85%	0.80	329,489	1,906	771	0.6%	40%	262,340	78,511	78,665	48,868
Aug-22	72%	84%	85%	81%	0.81	325,162	1,696	1,050	0.5%	62%	300,298	93,374	91,843	60,691
Sep-22	72%	84%	85%	76%	0.79	340,727	2,717	1,039	0.8%	38%	298,975	95,280	95,210	65,216
Oct-22	73%	85%	86%	74%	0.79	345,114	2,920	1,094	0.8%	37%	294,899	95,376	95,312	66,065
Nov-22	74%	88%	87%	68%	0.79	422,877	2,320	1,208	0.5%	52%	311,106	103,410	103,323	80,408
Dec-22	74%	88%	87%	81%	0.82	374,895	2,043	1,059	0.5%	52%	286,631	98,320	98,323	75,603
Jan-23	74%	89%	88%	80%	0.83	382,026	2,184	1,214	0.6%	56%	311,877	103,400	103,354	76,565
Feb-23	73%	91%	89%	82%	0.84	390,043	1,988	1,044	0.5%	53%	281,867	94,086	93,160	72,753
Mar-23	74%	90%	88%	82%	0.84	424,601	2,086	1,002	0.5%	48%	296,772	100,712	105,827	78,223

- Since January 2020 to January 2022, National CI value has increased 0.60 to 0.85
- Both PNRI functional and service data has also improved.

Target	Average	Good	Over Estimate
50%	50-74%	>75%	>100%

- Compared to last month, no of children identified with SAM has decreased in March '23 (from **1,044 to 1,002**). The admission rate has slightly decreased in March 2023 (from **53% to 48%**). Despite the no. of children identified with SAM has increased.



Source: DHIS2 database, Data downloaded 13 March 2023.

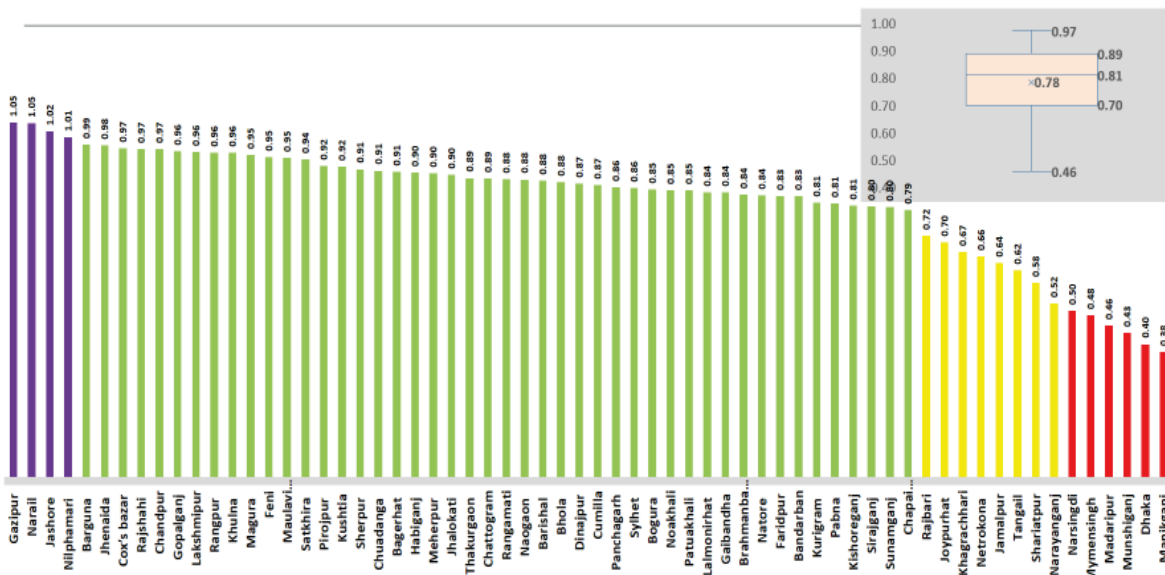
- In March '23 the number of pregnant and lactating women receive IFA has increased **(from 281,867 to 296,772)** in Figure 1 & The no. of caregiver receiving nutrition counselling has also increased **from 165,913 (Feb'23) to 184,050 (Mar'23)** in Figure 2.
- On the other hand, no. of SAM children admitted in SAM inpatient units **(from 1,214 to 1,044)** has decreased than the previous month (Figure 3).
- We had set the target for SAM admission at 14,000 children in 2023. Up to March 2023, we have already reached 3,260 which is 23.29% of set target.

Areas for improvements

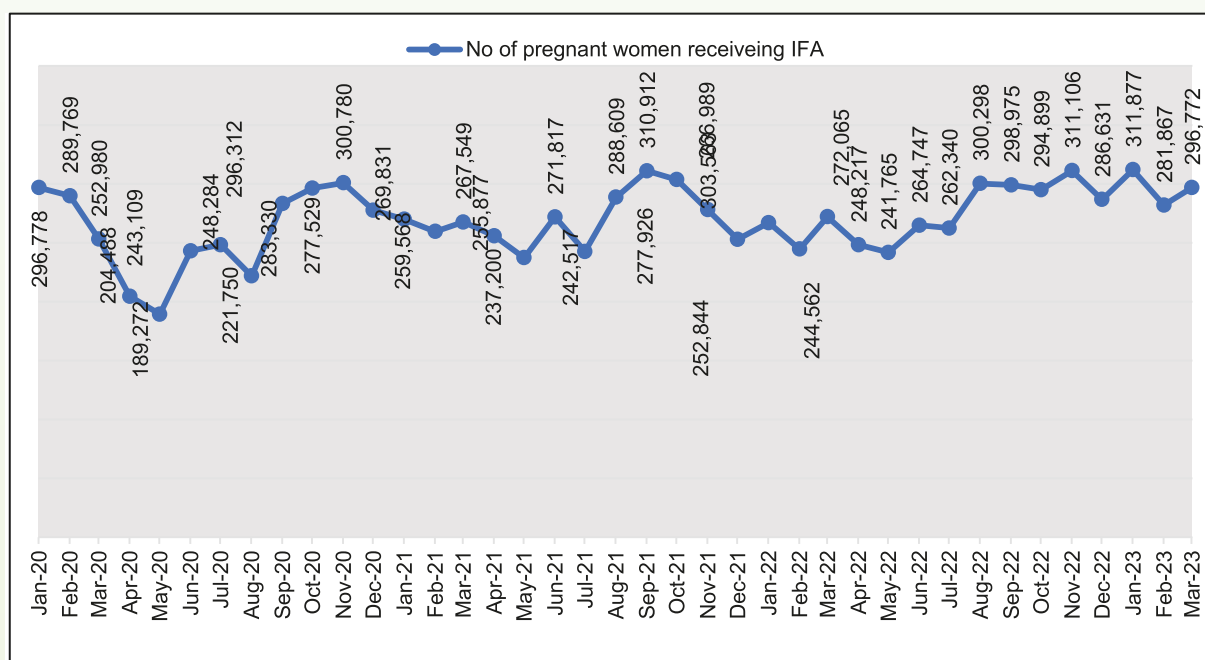
- All facilities should give report timely in DHIS2 (within the first 5 working days of the month).
- Need to be increase the attention on quality of screening of SAM & distribution of IFA among PLW.

There are need to expand the admission rate of children with SAM in inpatient Units

DISTRICT PERFORMANCE AND RANKING-PNRI DATA March 2023



- The five top performing districts are- Gazipur, Jashore, Nilphamari, Narail, Barguna and Jhenaidah.
- Based on CI value, 6 districts has performed very poor, 8 districts has performed average, 46 districts performed good and 4 districts have shown over estimated performance.



In March 2023, the number of pregnant women receive IFA has increased (from 281,867 to 296,772)

Photo Gallery



Mr. Zahid Maleque, Honourable Minister, Ministry of Health and Family Welfare inaugurated the press conference of National Vitamin A Plus Campaign (NVAC) at Conference room of Ministry of Health and Family Welfare on 19 February 2023 and he was given his valuable speech as chief guest. Newly joined Secretary, Health Services Division, Dr. Md. Anwar Hossain Howlader was placed as chair in the opening ceremony event. Prof. Dr. Abul Bashar Mohammad Khurshid Alam, Director General (Health), Directorate General of Health Services (DGHS) was given a speech as a special guest. Dr. Md. Abdul Mannan, Line Director, NNS, was given a welcome speech.



103rd Birth Anniversary of Father of the Nation and National Children's Day Observed, National Nutrition Services, Directorate General of Health Services (DGHS), Mohakhali, Dhaka-1212



Mr. Zahid Maleque, Honourable Minister, Ministry of Health and Family Welfare inaugurated the Campaign (NVAC) and Newly joined Secretary, Health Services Division, Dr. Md. Anwar Hossain Howlader was placed as chair in the opening ceremony at National Institute of Preventive and Social Medicine (NIPSOM) on 20 February 2023



NVAC+ Inauguration Ceremony: Hathazari UHC, Chattogram

NVAC+ February 2023: Syed Mojibul Huq, Add Secretary, (PH Wing) Health Services Division



Photo: 103rd Birth Anniversary of Father of the Nation and National Children’s Day Observed, National Nutrition Services, Directorate General of Health Services (DGHS), Mohakhali, Dhaka-1212



Photo: Observed International Mother Language Day 2023, National Nutrition Services, Directorate General of Health Services (DGHS), Mohakhali, Dhaka-1212

Dissemination of 4th SAM facility assessment



Dissemination of 4th SAM Facility assessment findings, Venue: Pan Pacific Sonargaon, Dhaka

TOT on Disbursement Linked Indicators (DLIs) & Disbursement Linked Results (DLRs)



Photo: Director, Institute of Public Health Nutrition (IPHN) provide speech on TOT on DLIs & DLRs, IPHN Conference room-403, Organized by National Nutrition Services(NNS), Directorate General of Health Services (DGHS), Mohakhali, Dhaka-1212



Photo: Line Director, National Nutrition Services(NNS) provide speech on TOT on DLIs & DLRs, IPHN Conference room-403, Organized by National Nutrition Services(NNS), Directorate General of Health Services (DGHS), Mohakhali, Dhaka-1212

22nd Infant and Young Child Feeding (IYCF) Alliance Meeting



Photo: 22nd Infant and Young Child Feeding (IYCF) Alliance meeting, IPHN Conference room-403, Organized by National Nutrition Services(NNS), Directorate General of Health Services (DGHS), Mohakhali, Dhaka-1212

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জাতীয় পুষ্টিসেবা, জনস্বাস্থ্য পুষ্টি প্রতিষ্ঠান স্বাস্থ্য অধিদপ্তর, স্বাস্থ্য ও পরিবার কল্যাণ মন্ত্রণালয়

