



NUTRITION

BANGLADESH REFUGEE CRISIS RESPONSE

INTERVENTIONS

World Vision, in partnership with the World Food Programme, operates Blanket and Targeted Supplementary Feeding Centres in three Rohingya refugee camps. From May to December 2018, the majority of children under age 5, as well as pregnant and lactating women (PLW), received blanket supplementary feeding. Children and PLW assessed as having moderate acute malnutrition (MAM) received additional supplementary food and monitoring. This successful project has been extended until December 2019.

DONOR



BUDGET & DURATION 5 \$ 1.1 MILLION 20 MONTHS



15,465

Children under age 5 in Camps 4, 8W, 10 enrolled in the blanket supplementary programme (BSFP).



3,455

Children aged 6-59 months received treatment for MAM through targeted supplementary feeding.

39,930 mothers attended 1,364 health education sessions.



2,374 Pregnant and lactating women enrolled in BSFP.

125 Pregnant and lactating women received treatment for MAM through targeted supplementary feeding.

12,009 Mothers and children visited at home by outreach workers.

IMPACT



SUPPORT COUNTRIES





PREVENTING AND TREATING MALNUTRITION IN THE WORLD'S LARGEST REFUGEE CAMP

Minara was born in November 2017 as her family and morethan 700,000 other Rohingya refugees fled from violence in Myanmar to neighboring Bangladesh. As they escaped, her young mother, Jaheda stopped at a stranger's house to give birth to Minara.

"Day by day she was getting tinier," says the 30-year-old mother. "When I arrived in Bangladesh, she was about to die. People were telling me, 'Your daughter will not live." It was a dark time for Jaheda. "I thought, "Oh my God. Am I going to lose my baby?" Minara survived, but remained significantly underweight for her age.

Minara is not alone. A recent SMART survey revealed that 11 percent of children in the camps have moderate acute malnutrition. More than 208,000 children age 0-59 months need life-saving nutrition interventions. Child malnutrition is the single biggest contributor to deaths in children under age 5, making them more susceptible to disease and delayed recovery from common illnesses.

To address this critical problem, in partnership with World Food Programme World Vision opened malnutrition prevention and treatment centres last year to reach more than 13,000 at-risk children like Minara.

As regular daily routine, World Vision sends trained community workers door-to-door in the camps to find vulnerable children. "A facilitator came to our home and registered her here," says Jaheda. "That's why I brought her to the centre. She was so tiny. She suffered disease a lot. She didn't like to eat." Just 14 months old by then, Minara often had fever, and rashes covered her head.

At the World Vision centre, Minara was assessed as having moderate acute malnutrition. Today, five months and 10 visits later, she is a different child—happy, healthy, and playful. To help prevent malnutrition, World Vision supplies all children under age 5 in the three camps with monthly rations of Super Cereal. This blend of corn, soy beans, milk powder, sugar, soy bean oil is packed with vitamins and complements breastfeeding. Through the Super Cereal, children receive the nutrients they need to stay healthy.

Children like Minara, who are suffering from moderate acute malnutrition, receive Plumpy-Sup—a ready-to-use, high-energy food supplement. It comes in packets, is easy for a child to eat and can be stored without refrigeration. World Vision monitors the malnourished children taking Plumpy'Sup every 14 days until they reach their normal weight-for-height.

World Vision staff teach mothers like Jaheda how to properly prepare the Super Cereal and to use the Plumpy'Sup. Although World Vision staff see 350 children every day at this camp's clinic, they keenly recall Minara. "I remember her," says Neger Sultana, a growth monitor at the centre. "She was tiny. If she hadn't come here, she would have died."