



SUSTAINABLE AGRICULTURE AND PRODUCTION LINKED TO IMPROVED NUTRITION STATUS, RESILIENCE, AND GENDER EQUITY

MATERNAL AND CHILD HEALTH AND NUTRITION (MCHN)

The Sustainable Agriculture and Production Linked to Improved Nutrition Status, Resilience, and Gender Equity (SAPLING) program is a six-year USAID-funded Resilience Food Security Activity. It is implemented in partnership with the Ministry of Chittagong Hill Tracts Affairs (MOCHTA). SAPLING has worked with over 57,000 households across five subdistricts (upazilas) in Bandarban District of the remote Chittagong Hill Tracts (CHT) region of Bangladesh.

Since 2015, SAPLING has implemented a multi-sectoral integrated maternal and child health and nutrition (MCHN) strategy:

- 01 To address both supply and demand side issues applying a health systems strengthening approach to
- 02 Increase user knowledge, health-seeking behavior, improve provider knowledge and skills
- 03 To improve service facilities

SAPLING designed interventions at the household, community, and structural level, and worked with individuals and families. It supported and strengthened community resources, and engaged at the structural level by providing assessment and capacity building for facilities and health service providers.

MCHN interventions are delivered by trained, local, frontline Community Health Service Workers (CHSW). CHSWs are from the villages (paras) where they work, speak the local language, and have firsthand knowledge of individual health system users' culture and practices. This is crucial in a region with 11 different minority ethnic groups, and Bengalis

Interventions at household level

Peer groups created to provide knowledge and promote healthy behavior. These groups reinforced messaging on optimal health and nutrition behaviors, using the essential nutrition actions and essential hygiene actions (ENA-EHA) framework. SAPLING peer groups included:

14,908	Pregnant and lactating women
12,251	Adolescent girls
9,304	Senior women
14,309	Men

Peer group messaging

- 01 Importance of breastfeeding and nutritious weaning food
- 02 Extra food for pregnant and lactating women
- 03 Importance of attendance at antenatal care and postnatal care
- 04 Importance of handwashing
- 05 Smart cooking for nutrition retention
- 06 Importance of eating a diverse diet
- 07 Gender and social inclusion messaging were integrated into all sessions and the groups discussed gender norms and disparities in roles and responsibilities, addressing equity and involvement in decision making

At the community level, SAPLING provided assessment and capacity development for those health providers who are the first to be sought out for treatment.

ENA-EHA training	3,066
ENA-EHA training for Ministry of Health and Welfare personnel	141
ENA-EHA training for GoB	281
ENA-EHA training for medicine providers	94
ENA-EHA training for traditional birth attendants (TBA) and Community Skilled Birth Attendants	266
ENA-EHA training for local leaders and religious leaders	734
ENA-EHA training for clinic providers	70

SAPLING provided support for health service events. It mobilized children and their caregivers for growth monitoring and promotion at EPI clinics, vitamin A supplementation, and deworming campaigns.

The program co-sponsored 20 satellite antenatal care/postnatal care clinics with the GOB in remote locations to increase access and uptake of services. This reached 2,767 pregnant and lactating women with essential services.

SAPLING has advocated for both the clinics and the CHSWs to be adopted into regular Ministry of Health and Family Welfare budgets as a means of extending access to crucial services and encouraging health-seeking behavior. By training public and private service providers and educating multiple family members, information was triangulated at the household and community level and reinforced amongst family members increasing demand for services. These service providers included professional and traditional health service providers.

By collaborating with government and community leaders to strengthen an enabling environment and increase availability of quality services, demand is increasingly being met by improved supply of services.



SAPLING's efforts positively impacted demand, with use of critical health services increasing over time.

Improved demand and services as a result of SAPLING interventions

15% of women attended all four antenatal care visits in FY 2017. This increased to 23% in FY 2020

Growth monitoring and promotion attendance increased from 42% in FY 2017 to 86% in FY 2020

Exclusive breastfeeding rates increased from 70% in FY 2017 to 86% in FY 2020

Early initiation of breastfeeding from 37% in FY 2017 to 83% in FY 2020

Women's minimum dietary diversity of 5 or more of 10 food groups increased from 60% in FY 2017 to 95% in FY 2020

Children of 6-23 months received a minimum acceptable diet from 24% in FY 2017 to 77% in FY 2020

Consumption of animal-source foods increased from 73% in FY 2017 to 96% in FY 2020

This document is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The contents are the responsibility of Hellen Keller Intl and do not necessarily reflect the view of USAID or the United States Government.