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

SAPLING QUALITATIVE RESEARCH STUDY

The USAID-funded Resilience Food Security Activity, Sustainable Agriculture and Production Linked to Improved Nutrition Status, Resilience, and Gender Equity (SAPLING) has engaged over 57,000 households across five sub-districts (upazilas) in Bandarban District of the remote Chittagong Hill Tracts (CHT) region of Bangladesh since October 2015. SAPLING's goal of improved gender-equitable food security, nutrition, and resilience of vulnerable households is achieved by engaging poor and extreme poor families and households with pregnant and lactating women and adolescent girls in interventions designed to increase production, income, savings and access to credit, disaster risk management (DRM), and maternal and child health and nutrition (MCHN) outcomes.

At the start of SAPLING both quantitative and qualitative baseline data was collected to tailor program design, develop social and behavior change communication materials, and measure impacts.

[1]2017. Baseline Study of Food for Peace Development Food Assistance Projects in Bangladesh. Final Report..

[2]2017. Baseline Study of Food for Peace Development Food Assistance Projects in Bangladesh. Final Report.

[3]2017. SAPLING Base Values Estimates Report.

[4]2017. SAPLING Base Values Estimates Report.

[5]2017. SAPLING Base Values Estimates Report.

A robust qualitative study was conducted from December 2016-April 2017 to inform SAPLING's intervention and message design.

Area-wide representative results of the quantitative data collected in 2016 included:

FOR CHILDREN UNDER THE AGE OF 5

- 32% — Suffered from stunting
- 28% — Were underweight
- 28% — Suffered from wasting

DIETARY REQUIREMENTS

- 61% — Mothers met minimum dietary diversity
- 34% — Children of 6-23 months had a minimum adequate diet

HYGIENE AND SANITATION

- 17% — Households had access to a sanitary latrine
- 4% — Surveyed respondents washed hands with soap at five critical times

- 12% — Women
- 16% — Men

Agreed that women should participate equally in decision-making over own and child health care; food purchases, cooking, and distribution; and child feeding

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STUDY OBJECTIVE

To understand how gender roles and social inequalities influence access to resources and services and to identify issues related to water, sanitation and hygiene (WASH), maternal and child health and nutrition (MCHN), and disaster risk management (DRM) that could be potential barriers to improving resilient livelihoods, food security, and nutrition.

SPECIFICALLY, DATA WERE COLLECTED ON THE FOLLOWING TOPICS:

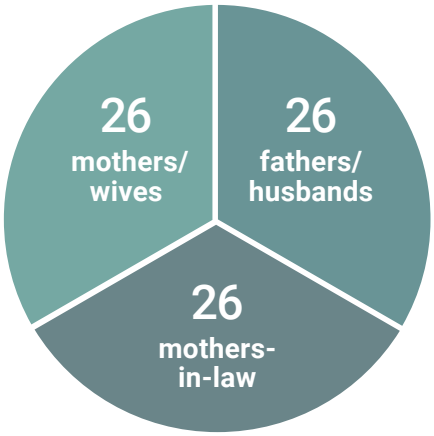
- Gendered relationships between men and women
- Women's empowerment
- Adolescent aspirations
- Social inclusion of marginalized communities
- Food security and livelihoods
- Maternal and child health and nutrition (MCHN)
- Water, sanitation, and hygiene (WASH)
- Disaster risk management (DRM)

METHODOLOGY

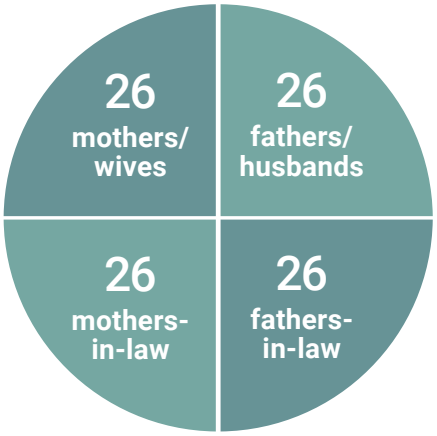
Data were collected in 26 villages across SAPLING's five sub-districts from nine ethnic groups (Bengali, Marma, Mro, Tripura, Tanchangya, Chakma, Bawm, Kheyang, and Khumi). Methods included:

IN-DEPTH INTERVIEW GROUPS (n=93)

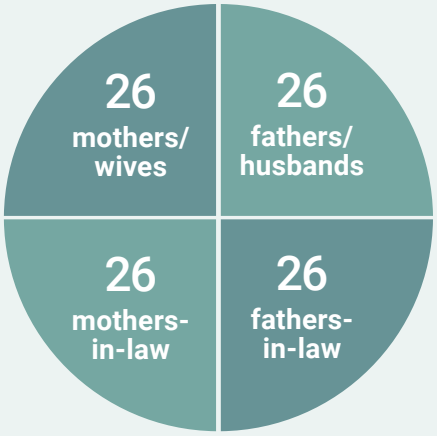
DAILY TIME-USE CLOCK GROUP DISCUSSIONS (n=78)



INFANT AND YOUNG CHILD FEEDING MIND MAPPING GROUP DISCUSSIONS (n=104)

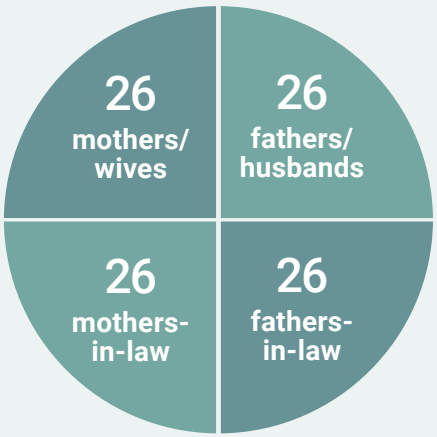


HOUSEHOLD AND COMMUNITY RESOURCE MAPPING GROUP DISCUSSIONS
(n=104)

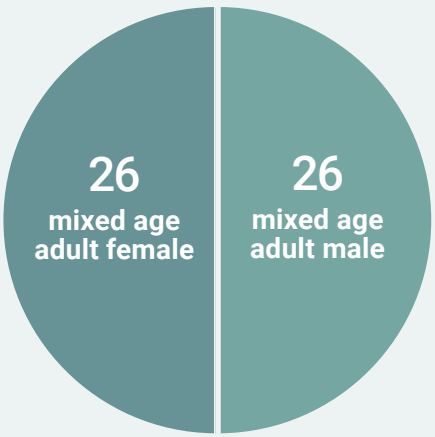


ADOLESCENT ASPIRATIONS GROUP DISCUSSIONS
(n=52)

WASH GROUP DISCUSSIONS
(n=104)



DRM GROUP DISCUSSIONS
(n=52)



SELECTED FINDINGS AND HOW SAPLING APPLIED LEARNINGS

1. Senior women play a significant role in determining dietary intake for pregnant and lactating women and children 6-23 months. Foods prohibited by senior women may contribute to low intake of protein and micronutrients by pregnant and lactating women and children of 6-23 months. SAPLING:

1.1 Included messaging on the importance of protein from animal and plant sources and a diverse range of vegetables and fruits for women who have recently delivered, lactating women, and children of 6-23 months

1.2 Designed senior women's groups to discuss their own nutrition and health issues and optimal nutrition for pregnant or lactating women and children under two

2. For some, a preference for open defecation instead of using a latrine contradicted assumptions that access to latrines was a barrier. Instead, lack of access to water largely contributed to a dislike of using latrines (visible feces, odor, insects). SAPLING:

2.1 Identified four types of latrines suitable to different contexts and preferences, with a key attribute being low or no water needed for the latrine

2.1 Identified latrine types that can handle the traditional bamboo stick commonly used for anal cleaning

3. Perceptions of lack of control to improve livelihoods, such as to mitigate disaster loss,influence access to basic needs (e.g. health services), and protect children's health, were a cross-cutting finding. SAPLING:

3.1 Designed interventions to increase self-efficacy, internal locus of control, and aspirational capacity

3.2 Ensured people had the opportunity to experience success in improving their livelihoods and communities. Examples include:

- Community-managed water assets through local water user committees linked to government resources
- Local health service outreach providers linking marginalized communities to tailored nutrition and health services
- Household dialogue with husbands and wives to raise awareness that equitable decision-making and sharing of productive and reproductive activities can improve a household's financial and other well-being
- Successful policy advocacy to include ethnic minority representatives on government Disaster Management Committees for better preparation and response
- Self-governed savings and lending management groups for inclusive and relevant financial services
- Household disaster preparedness and household production plans to build confidence in setting and monitoring goals
- Skills in leadership, negotiation, and business acumen and linkages with product-to-market systems to increase participation in local economies
- Household production of nutritious foods and increased skills in health and nutrition that improved maternal and child health outcomes

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