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THE IMPACT OF MAINSTREAMING NUTRITION AND EARLY CHILDHOOD DEVELOPMENT: A CASE STUDY FROM BANGLADESH

The Challenge

More than 200 million children are not reaching full cognitive development because of the high prevalence of stunting and people living in poverty.¹ Countries like Bangladesh struggle to reduce the occurrence of malnutrition where 33% of children under five are underweight and 36% are stunted.² One barrier to improving nutrition in Bangladesh is inadequate caregiver knowledge on nutrition and child stimulation. However, studies demonstrate that integrating nutrition and early child development (ECD), including those aiming to increase caregiver knowledge, has a positive impact on overall child health.

The Intervention

BRAC Bangladesh mainstreamed nutrition and ECD under its Maternal, Newborn and Child Health (MNCH) programme to improve nutritional status and ECD. The target beneficiaries were households with children under age two. Trained health volunteers (Shasthya Shbhikas) and community health workers (Shasthya Kormis) conducted household visits and community gatherings to share nutrition and ECD knowledge. This included information on breastfeeding, infant and young child feeding (IYCF), mother-child interaction, father engagement and developmental milestones. Trained ECD delivered promoters messages on parenting practices and child stimulation and provided parent counselling. During community gatherings, play centres provided age-appropriate child stimulation.

The Evaluation

With support from the American Institutes for Research, this evaluation was conducted in Mymensingh, Bangladesh over 18 months. It included a cluster randomised control trial to evaluate the



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impact of the ECD component, and a nonexperimental evaluation to assess the mainstreaming of MNCH's nutrition component. For the trial, mouzas (districts) were randomly selected into the treatment or control arm. The non-experimental study utilised propensity score matchingusing population data as the comparison group. The study aim was to assess the impact of mainstreaming nutrition and ECD on pregnant and lactating women and children under two. The outcomes of interest were IYCF and breastfeeding practices, health care seeking behaviours, parenting practices, nutrition outcomes and child cognitive development.

The Results

The non-experimental study demonstrated positive impacts of the nutrition component on dietary diversity and food security, but not on breastfeeding, IYCF or ECD knowledge or practices. The evaluation showed that mainstreaming nutrition contributed to a 7% reduction in stunting, but no reductions in wasting. It was hypothesised that the increase in food security and dietary diversity, and

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subsequently the reduction in stunting, was caused by an increase in mothers' bargaining power within households. The ECD trial did not show significant reductions in stunting or wasting, ECD or nutrition knowledge, parenting practices or child cognitive development. However, it did demonstrate positive impacts again on dietary diversity (4% increase) as well as on the intake of nutrition supplements and child vaccination. Despite few significant results, the intervention did have some positive impacts on nutrition outcomes.

The Lessons Learnt

Due to issues with recruitment and institutional review board approval, programme implementation was delayed. As a result, only 10% of respondents at midterm data collection stated they had participated in the programme. This may have been due to the inability of beneficiaries to distinguish between the activities that fell under nutrition and ECD. This challenge may explain why the evaluation results did not demonstrate as much impact. BRAC plans to conduct additional data collection to estimate the long-term effects of the programme.

Looking Ahead

Despite the mixed study results, this evaluation demonstrated that including nutrition and ECD within an existing MNCH programme can have positive intermediate effects on child nutrition. Future programmes integrating nutrition and ECD should ensure adequate time to see longterm impact on nutrition and cognitive development, ensure community health workers are properly incentivised to carry out all programme activities and put more emphasis on women's empowerment to see more nutrition and ECD impact at the household level.

The Nutrition Embedding Evaluation Programme (NEEP) is a four-year project (Oct 2013–Oct 2017) led by PATH and funded by the UK Department for International Development. NEEP aims to build the evidence base for what works in improving nutrition by conducting credible, robust evaluations of innovative interventions implemented by civil society organisations (CSOs). The programme provides grants to 18 CSOs to evaluate their programmes in 13 different countries. For more information, see http://sites.path.org/mchn/our-projects/nutrition/neep/.

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For more information, contact: Farzana Sehrin, farzana.s@brac.net.