Sustainable Agriculture and Production Linked to Improved Nutrition Status, Resilience, and Gender Equity

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 54,000 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.

Maternal and Child Health and Nutrition (MCHN) intervention

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.

<table>
<thead>
<tr>
<th>ENA-EHA training</th>
<th>3,066</th>
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<tbody>
<tr>
<td>ENA-EHA training for Ministry of Health and Welfare personnel</td>
<td>141</td>
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<td>ENA-EHA training for GoB</td>
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<td>ENA-EHA training for medicine providers</td>
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<tr>
<td>ENA-EHA training for traditional birth attendants (TBA) and Community Skilled Birth Attendants</td>
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<td>ENA-EHA training for local leaders and religious leaders</td>
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<td>ENA-EHA training for clinic providers</td>
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</tbody>
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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% to 86%
- Exclusive breastfeeding rates increased from 70% in 2017 to 86% in 2020
- Early initiation of breastfeeding from 37% in 2017 to 83% in 2020
- Women’s minimum dietary diversity of 5 or more of 10 food groups increased from 60% in 2017 to 95% in 2020
- Children of 6-23 months received a minimum acceptable diet from 24% in 2017 to 77% in 2020
- Consumption of animal-source foods increased from 73% in 2017 to 96% in 2020