IMPROVING SOCIAL PROTECTION PROGRAMMES TO SUPPORT MOTHERS AND YOUNG CHILDREN'S DIETS IN BANGLADESH

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BACKGROUND:

Despite progress in reducing poverty and malnutrition, the triple burden of malnutrition continues to be a critical concern in Bangladesh with national stunting at 24%, wasting at 11% and continuous moderate to high prevalence of micronutrient deficiencies among pre-school children, adolescent, and women of reproductive age. Poverty, low dietary diversity and knowledge gaps have been cited as key drivers of malnutrition.

Ending such wealth inequities is behind the growing focus on social protection programmes as part of a multi-system approach to improving young children's diets and feeding practices amongst the most vulnerable.

The Bangladesh Government has undertaken a social protection initiative as a pilot in 2018-19 dubbed the 'Mother and child benefit Program' (MCBP) to support 3000 poor women and children 0-4 years in 8 locations to improve nutrition and cognitive development.



PROGRAMME COMPONENTS:

The intervention targets pregnant women who get support until the child become 4 years old based on a set of criteria e.g. poverty, profession, availability of electricity, latrine. land size etc. The women receive a monthly cash allowance of about BDT 800 (USD 8) through government to public financial system using mobile money transfer which they are encouraged to spend on nutritious diets for themselves to contribute to positive health, nutrition and birth outcomes.

A social and behaviour change (SBC) component has been implemented through coordination and cooperation with Ministries of Health and family Welfare. WFP provides technical support to the government on programme design, effective implementation, SBC strategy development and capacity strengthening which includes, establishment of management information systems to ensure appropriate enrolment of vulnerable women.



KEY FINDINGS:

Research indicates that, by receiving regular small monetary transfers through such digital self-enrolment and direct payment system, a household is more likely to invest in better diet, rather than in a large purchase of assets or investments. Through Social Behaviour Change interventions positive changes have been experienced on child feeding and care practices, early stimulation, knowledge on healthy diet, access to health services over the course of programme implementation. The programme has also addressed equity and inclusion ensuring the participation of socio-economically disadvantaged women; income disparities, and decision making power at household level.



SIGNIFICANCE & APPLICATION:

Based on the successful implementation in 8 locations, the Ministry of Women and Children Affairs has replicated this model to 64 locations across the country reaching close to 1 million vulnerable women. Therefore, MCBP has been recognized as a nutrition sensitive social security programme aligning with the National Social Security Strategy 2015.

