



A CASE STUDY IN SMART FOREIGN ASSISTANCE

Fighting Child Malnutrition: The Investment of a Lifetime

U.S. taxpayers have invested in CARE’s work in Bangladesh in the form of a U.S. Agency for International Development (USAID) grant of \$126 million – roughly \$60 for each of the more than 2 million Bangladeshis benefiting from improved health, sanitation, home food production, income-earning potential, access to financial services and capacity to cope with climate change.

The investment has paid off handsomely. A remarkable program was designed to reduce child malnutrition and food insecurity, in part by empowering the poor and women, enabling them to secure their livelihoods.

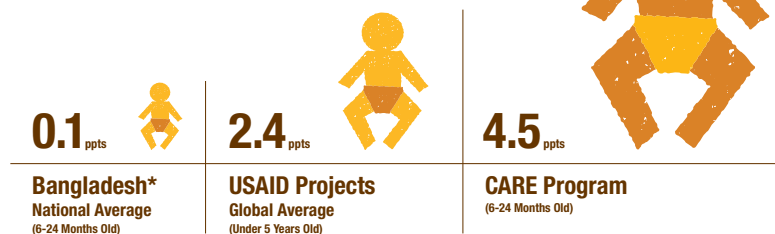
Among women participating in the program, average incomes more than doubled, as many of them began pooling their money through village savings and loan associations, gaining access to loans and expertise to start small businesses. Their incomes have brought them an increased say in family financial decisions – and they consistently choose to devote more resources to their children’s nutrition and education.

Many other indicators show the effectiveness of a women’s empowerment strategy in addressing challenges like child malnutrition and stunting. For example, the percentage of respondents saying they had three square meals a day rose from a baseline of 34 percent to 74 percent among program participants.

Ensuring a stable future for Bangladesh is of vital importance to global security. With 150 million people, Bangladesh, bordering India, is the world’s most densely populated country on the globe. Bangladesh consists almost entirely of low-lying shoreline and river delta and is extremely vulnerable to flooding, drought and climate change.

Among the most persistent challenges facing Bangladesh is child malnutrition – a chronic condition that is passed on from generation to generation, as malnourished mothers tend to have malnourished children. Poor nutrition early in a child’s life can result in “stunting,” a measure of reduced growth that predicts long-term poor

ANNUAL DECREASE IN THE PREVALENCE OF STUNTING AMONG CHILDREN



*2001-2010

The Bangladesh program resulted in unusually large reductions in “stunting,” a measure of malnutrition in children, between February 2006 and November 2009. Annual stunting reduction of 4.5 percentage points dwarfed the national average during that period (0.1 percentage points) and was nearly double the average USAID project of its kind (2.4 percentage points).

health outcomes, impaired cognitive development and low immunity to diseases. Malnutrition takes a monumental toll on a nation's productivity and human potential.

What works?

Traditional attempts to address child malnutrition with direct interventions such as feeding and nutritional support have had mixed results. CARE sees malnutrition through the larger lens of community development, addressing multiple issues that hold back a society economically and socially.

A crucial factor in the equation is the status of women. Research demonstrates that as women gain in economic potential and influence in family decision-making, stunting rates among their children drop dramatically.

CARE tested this hypothesis in Bangladesh, in the course of the program. The program combined direct nutrition-focused interventions, such as child feeding, with indirect interventions that empower women, like involving women in income generating activities, to produce great impact. In less than 4 years, the stunting rate among children 6 to 24 months old in the target population had fallen from 56.1 percent to 40.4 percent. That's an annual stunting reduction of 4.5 percentage points, dwarfing the 0.1 percentage point decline in Bangladesh as a whole and easily besting the 2.4 percentage point annual decline seen in the average USAID food security program.



Will we keep up the momentum?

Because USAID invested in measurement and evaluation, CARE was able to determine what made this program effective and where interventions could be improved. Now those lessons learned will be applied to a second, similar programs, which also is being funded by USAID and is designed to reach nearly 2 million more poor people in Bangladesh. Changes for the better — greater gender equality, less malnutrition — are more likely to endure with this kind of long-term commitment and scale up of proven solutions.

Yet, to put the need in perspective, consider that both programs will reach 4 million people, but less than 3 percent of the country's population. There is so much more to do in Bangladesh and beyond.

At a time of deep concern about budgets, Americans understandably want to know that tax dollars devoted to foreign assistance are being spent wisely. CARE's experience in Bangladesh provides more evidence that, when invested in a healthier, more productive future, development aid is money well spent.



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